

Interactive Family Dance Evaluation Report

The focus of this report is to explore the outcomes relating to a dance project aimed at babies up to the age of twelve months old and their families. Numerous research projects in dance and health have sought to explain the physical health benefits of dance for children and young people over the last decade, and it is now widely accepted that creative dance can offer health outcomes which can tackle childhood obesity and support the positive development of psychological outcomes such as self esteem and body confidence. Our participation in physical activity is also closely associated to the social connections we build with others.

The focus of this project has been to examine the social impacts of creative dance sessions for children with their close and extended families and build evidence for the continued provision of this activity not only for the positive health outcomes that we know dance delivers, but for the social inclusion benefits which are vital for healthy, sustainable lives particularly in the early years.











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The Context of Social Isolation and Loneliness and How Dance Can Help

Social isolation is defined as the 'inadequate quality and quantity of social relations with other people at the different levels where human interaction takes place' (Public Health England, 2015, p. 8). It is a determinant of health that the Government is seeking to address between 2016 and 2019 within the Public Health Outcomes Framework (Domain 1.18; DH, 2016). Evidence suggests that social isolation is present throughout the life course and affects not just daily relationships with close family, but can cascade to our interactions with our wider communities and larger social environment (The Marmot Review, 2010). The literature also connects social isolation with loneliness (Griffiths, 2016) – a distressing, subjective emotional state, which can occur regardless of the social structures a person experiences.

The opportunity to relate and socialize with others is important throughout our lives. Healthy relationships with others improve physiological health and psychological wellbeing (Yang et al, 2016), positively affect healthful behaviours such as healthy eating and physical activity (Bailey, 2005) and reduce the risk of morbidity (Holt-Lunstad, Smith and Layton, 2010) and mortality (The Marmot Review, 2010). Much recent research has focused on our aging population in the UK and the increasing social isolation and loneliness they experience. In turn, this places our services under increasing pressure to treat the effects of isolation. The Marmot Review reports that those who are socially isolated and feel lonely are 1.8 times more likely to visit their GP, 1.6 times more likely to visit A+E and 3.5 times more likely to enter local authority funded residential care (2010).

Yet social isolation and feelings of loneliness are also prevalent in young families, especially where expectant and new mothers lack a socially supportive environment (Barlow and Coe, 2012). Without meaningful social interactions beyond the immediate family group, mothers are more likely to experience poor mental health. Research examples suggest that chronic maternal depression can impact early childhood development and has the potential to affect the child's mental health as they mature (Apter et al, 2013). Individual factors such as age, gender, income and ethnicity all have a part to play in one's sense of social inclusion; these are augmented, or compounded by community factors (access to and availability of services) and societal factors (economic and political climate) too. Social isolation is exacerbated by lower economic status and poor education opportunities (Fokkema, De Jong Gierveld, and Dykstra, 2012), thus geographical

location, access, economic status and education are part of a wider picture around social isolation as well. This provision is therefore particularly vital amongst communities where inequalities exist – targeting early years work towards communities located in areas of economic, health and access deprivation is pertinent. The aim of this project has been to tackle social isolation through prevention, rather than treatment, by offering a service that allows children and their families to connect to one another.

Lack of social connection has been shown to slow down children's physical and cognitive development (NICHD Early Child Care Research Network, 2016) and thus, much clinical and cultural practice in the UK now points to the importance of opportunities for families to socially connect between themselves and with others. Two important strands of this work are emphasized in the early years development literature; that of play, and touch. 'Play is essential to development [and] is recognized as a right of every child' (Ginsburg, 2007, p. 182). At different stages of development, play enables the child to understand and relate to the world and to others, moving through developmental stages of dissociated play alongside other children and adults, to pretend play, collaborating with others to create imaginary worlds. Through our playful encounters we socially interact with others at different levels, with people we know well and those who are new to us. Vygotsky coined the notion of social learning, beginning with social contacts and exchanges between people as the basis for learning and on-going interactions; the child starts to learn cooperatively and will eventually practise these skills alone as they develop (1962). Sherbourne (2001) explains the importance of building different relationships through developmental play with children and young people, termed 'relationship play' (p. 5). Importantly, through such playful encounters with adults and other children, body awareness is developed and physical and emotional security can be nurtured. In turn the child gains confidence from the way they are supported; 'the child finds it safe to commit and trust' (p. 3). The process of relationship play enables a range of modes of communication including verbally, through eye contact and developing physical literacy - all are important factors in successful transition into school life at Reception age. In the case of the Interactive Families Project, we sought to draw on Sherbourne's principles of relationship play, mostly between primary carer and child, but also where appropriate between children and in relation to other adults. Thus, opportunities to interact and meet new people early in life can contribute to normal physical and cognitive learning through a social learning model.

'Fostering the ability to interact positively with other people, to share, co-operate and work together, is perhaps one of [our] most important tasks' (Van Papendorp and Friedman, 1997, p. 107). Dance is well placed to support the development of healthy and positive relationships amongst children and young people, and indeed their families. It can foster a sense of a learning community, drawn together by a common enjoyment of dance and movement, but in which the social relationships formed through dancing together is also a key factor. In this regard, dance is often seen as a means to strengthen identity and therefore enable social cohesion across the life course. Dance opportunities for early years children and their families supports social development through its non-verbal nature which 'paves the way for experiences in socialisation that are not limited by language' (Van Papendorp and Friedman, p. 107), or indeed where language has not yet developed. Common community dance practice encourages children to engage in movement games and playful exchanges with their peers, families and other adults, as well as learning movement phrases which develop their physical literacy and motor skill development (Greenland, 2000).

A particular skill developed through dance of controlled physical contact with others is the use of touch, where body parts connect and share weight. This requires 'trust, sensitivity and physical respect' (Paine and NDTA, 2014, p. 33) and a growing awareness of oneself in relation to others. Thus, touch is an equally important process of a child's development and sense of belonging as it regulates perceptions and emotions (Kisilevsky et al, 1991). The experiences of early interpersonal touch are also associated with positive self-esteem, life satisfaction and social competence later in life (Jones and Brown, 1996). In the early years, Lamont (in Pasch, 2017) suggests that children should spend 50% of their time in the arms of their parents and 50% of their time on their tummies exploring the world with adults' careful attention and support. Not only does parent-child interpersonal touch have long-lasting impacts on children's physical and psychological development, but also developmental patterns are enabled and children's 'bodyfulness' is realized (Pasch, 2017, p. 6).* Importantly, the social bonds that children make are reinforced by physical understanding, thus, potentially contributing to the reduction of social isolation for them and, by default, their supporting adults.

There are numerous academic texts which outline the universal developmental milestones of babies and children which support normal progression through childhood. It is not the scope of this report to outline them here, although play and touch are considered as key features in dance practice with early years' participants and their families.



Facilitated movement play, socialising and touch

Aims of Dance Network Association Early Years Provision

With this theoretical background, the aims of the organisation's early years provision across the county are:

- To advise, support and educate young children aged 0-5 years of age and their families about dance and the role it can play in tackling childhood obesity, loneliness and social isolation
- To create an environment for families to come together and make friends
- To contribute to the creation of happier lives through physical activity which will help to improve health
- To aid the development of children's motor skills and cognition ready for school
- To increase confidence and reduce social isolation

Interactive Family Dance in Colchester

Project Objectives

The Interactive Family Dance project in Colchester drew on the overall aims of the early years programmes run by Dance Network Association across Essex, but lead dance artist, Lucy Blazheva, specifically developed these objectives as a focus for the project:

- To offer a safe playful environment for parents and children to feel comfortable to explore movement, play, creativity, while integrating between themselves and others.
- Promoting the relationship and support between each family and child unit, whilst
 offering them the opportunity to socialise with other people outside of the family
 group, whilst dancing and later coming together during the session's social time.
- To create new relationships with other children and their adults, professionals engaging with the project and adults/children accessing the children's centre.
- To highlight the value of children's movement through sharing, experimentation and celebration.
- To support children to feel their bodies in space and generate a sense of self in relation to others.
- To introduce exercises that contribute to learning and growing, such as tummy time, eye tracking and crawling.
- To enable parents with younger children to find their own ways of moving, exploring and developing.
- To share and workshop ideas which families can continue to explore in their own homes.
- To offer a fun, happy space to laugh and connect with others.

Furthermore, Lucy aspired to build parents' confidence in trusting their own instincts, as she explains 'easing each participant's arrival and sense of place within the new group; creating a safe space for movement exploration and interaction between parent and child; supporting collaborative movement across dimensional planes; and offering social interaction and appreciation of the role of mother and the beauty housed in each child.' The pace of the sessions was set by the child, encouraging parents to follow their child's physiological cues to support a relational interplay between them and, as confidence and awareness developed amongst group members, for interactions to emerge.

Descriptive Data of Participants

Attendance

Participants were encouraged to sign up to attend for the whole 10-week term of activity before the start of term at the end of September 2017. It was hoped that by encouraging commitment to the sessions, attendance would be relatively stable; however, in common with dance participation patterns in the autumn term, attendance dipped as the term neared the Christmas period. There was a common core of participants across the ten weeks of approximately 8 key family groups. Other participants came and went during the programme, as is often the nature of working with families and early years' groups. This is especially so with such small babies, their attendance is more unpredictable because of illness, lack of sleep, teething, weaning and so on. It is clear that booking in advance onto such programmes is helpful organisationally, and because the sessions were charged as a 'pay-what-you-think' initiative to participants, there wasn't a sense of losing out if they were unable to attend from the participants' perspective. Should Dance Network Association need to charge more formally for these sessions in the future, pre-term sign-up may encourage more regular attendance from participants which would allow for more sustained developmental progression within the class content. It may, of course, put participants off coming at all; perhaps a payment incentive would be beneficial in this context. A small number of participants attended just once or twice during the sessions, and it would be useful to find out what prevented them from attending again (with single attendances, by their very nature it is always difficult to find out the motivations of participants). Future evaluation studies of this nature should seek to make contact with those that have dropped out to explore what could encourage them to attend again.

Descriptive Statistics

A range of families and children aged less than 12 months of age were reached through this project, although one participant was aged two and attended for one session.



Different stages of locomotion amongst baby participants

Description	Data
Total Children Reached	19 children (19 family groups)
Age Range	7 months to 24 months
	Mode age: 9 months*
Gender: Children	13 female; 6 male
Gender: Parents and Caregivers	19 female
Disability: Children	0
Disability: Parents and Caregivers	2
Ethnicity: Children	White British: 14
	Other Ethnic Group: 1!
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^{* 14} sets of data were collected for the participants, meaning we have not been able to reflect the breadth of age and variance in this summary.

¹ 15 sets of data were collected for the participants, meaning we have not been able to reflect the breadth of ethnic groups in this summary.

Other Family-based Exercise Patterns

Fifteen family groups provided information about their exercise patterns, and so the data presented here does not truly reflect the diversity of all those that attended sessions. Nevertheless, for those that did respond, 11 children (out of the 15 that responded) participated in no other physical activity apart from the dance sessions as part of the Interactive Family Dance project. Four families did other activities such as swimming, walking and Pilates, although it is not clear from the data whether this included their child's participation. Specifically, one child and his parent participated in Swing Sling. In informal discussions with families about their engagement with activities outside those provided by this project, parents explained that services that are flexible, like the service provided by Dance Network Association, are most valuable. It is perhaps not surprising that some families do not yet participate in regular physical activity given their children's age and establishing patterns and routines. Physical activity has not necessarily become a regular part of their lifestyle yet; by attending the Interactive Family Dance sessions, it could be suggested that over three-quarters of these families are keen to engage in activities which have a physical nature to them but that also allow them to spend quality time with their child, despite not normally participating in physical activity. Access, awareness and availability are critical in ensuring that family groups can reach these opportunities.

The theoretical constructs which dominate the literature with regard to enabling social inclusion and reducing perceptions of isolation and loneliness are informed by understanding participants' access to services, both in terms of financial and location implications, but also in terms of what they know about the service they are accessing and how it might add to their skills, knowledge and understanding. These principles guide the evaluation of the project in terms of its set up, as well as content and modes of delivery.

Access

The Interactive Family Dance project was located in the Essex Family Hub Delivery Site (Essex Child and Family Wellbeing Service provided by Barnardo's for Essex County Council in partnership with Virgin Care) in the ward of Greenstead, east Colchester. The Family Hub provided the space for the sessions in-kind and the Centre is located in the heart of the Greenstead estate. Greenstead and St. Andrew's wards are amongst 10% of the most deprived LSOAs (Lower Layer Super Output Area) in the country, with St Andrew's representing the second most ethnically

diverse population in the 27 wards of Colchester. The location of the Centre is in an area of multiple deprivation, which may house families unable to access participatory dance provision such as the Interactive Families Project in other locations due to transport, education or economic circumstances. Therefore, they may be at greater risk of social isolation. This centre follows a similar framework to Sure Start Children's Centres, including access to information for parents who want to further understand choices relating to early years education, health visitors clinics and social services, community groups and access to the workplace. Therefore, a wider parental group with children aged 0-10 years usually accesses the centre's services. With insight from the centre's manager obtained during site visits by the dance artists, parents seem 'grateful for all new opportunities to learn how to be with their babies', and with that, have a strong relationship and trust in programmes offered in the centre. Parents were described as potentially 'socially and emotionally deprived/withdrawn' and with that, sometimes present with 'high dependency' and 'reliance on all professional advice given'. Whilst participation patterns suggest that those not engaged in physical activity are more likely to attend in their locality than somewhere unfamiliar to them, all participants that we have postcode data for (n = 14) across the 10-week term came from wards outside Greenstead and St. Andrews. Whilst delivered in a locality where those living there were at risk of social isolation because of factors such as high unemployment, health inequalities and low levels of education, the provision did not reach those people in the Greenstead community. Leaflets about the activity went out across Greenstead via Colchester Children Centres. Posters were displayed in the local supermarkets, close to where sessions were to be held, as well as coffee shops in the locality. In establishing how participants knew one another, they explained the network of friends and acquaintances that had brought them to the sessions and it is clear that this verbal network was crucial in setting up and maintaining attendance for the project. This demonstrates the value and viability of networks of people taking part in provision such as this. Word-of-mouth works because of the trust that is built up within a friendship and acquaintance group. However, it brings with it potential risks for the longevity of the project; as children age there is no new group of children and their families coming through; for the outsider, friends of friends of friends may be perceived as a difficult group to penetrate, meet, socialise and make new friends with and this may put them off from re-attending.

Participants came from mixed locations across Essex, one coming from Witham to attend, as well as more affluent areas such as Mile End and Lawford (both 80-90% least deprived LSOAs in

England). Participants were also drawn from more deprived locations such as Castle (40% most deprived LSOA), St Anne's (30% most deprived LSOA) and Shrub End (20% most deprived LSOA). One family who attended only once in the term identified as 'other ethnic group'. Given that the location of the project was in an ethnically diverse area, it is important that this demographic is also reached and represented within the scope of the project going forwards.

Thus, the objectives of the project concerned with supporting families and children in making and securing friendships was achieved; because many of the families were already known to one another, they were able to travel and cement their friendships as a result of this project. In the case of the Colchester project, the aim was to bring together participants from different social and economic groups in order to explore whether participants who could pay, would pay, and aid the sustainability of the project more long-term. This was successfully achieved, with some participants choosing to contribute financially as they saw fit. From a social inclusion perspective, these participants' networks flourished as they set up play-dates and coffee meet-ups during the social sections of the dance workshops. Social isolation is governed not just by economic, health and education factors and particularly amongst new mothers, the complete change to becoming a parent can bring isolation from one's identity and previous non-parent networks and the adjustments to new parenthood can isolate any one of us, regardless of background or where we live. In working in this context, what is most clear, is that the artists have exceptional skill in shifting focus, adapting and making ideas work in new contexts and that should be considered a highly successful outcome – the artists' adaptability and fluency in navigating shifting expectations and outcomes. The Family Hub team was delighted to have new people visit their centre and as the work goes forward it would be good to bring together these new clients with existing centre users from the Greenstead locality. To sustain work in Greenstead and reach the community in which it is based still more, it is vital that strong partnerships with local service providers such as Barnardo's, schools and different ethnic groups are consolidated and developed to meet and invite the local community to access this kind of work. The use of leaflets and posters goes some way to doing this of course, but the word-of-mouth approach and the community's implicit trust in the work of the centre needs to be drawn on, engaging with key individuals within partner organisations who trust in Dance Network Association's service and can coax and persuade new local families in joining the work.



Essex Family Hub Delivery Site

Developing Social Relationships

A clear focus of the dance sessions was to create a play-based learning environment in which children and their families could foster new social relationships, amongst themselves but also with other children and adults. The sense of 'me and you' from the child's perspective was at the heart of the session, thus matching the developmental stage of most of the child participants, discovering the boundaries of the body, interactivity between child and parent and developing awareness and proximity between oneself and others through trial and error, creative play and The artist enabled cohesion amongst group participants by employing an improvisation. encouraging, positive and welcoming environment for them to explore. This was achieved by greeting, smiling and chatting with participants at the start of the sessions and especially checking in on participants who had been absent in previous weeks. Lucy and Hannah ensured their active involvement with all the tasks they facilitated, whilst noticing the progression of the children and families in their assimilation of new skills and finding opportunities to celebrate those milestones, no matter how small. Lucy introduced rhythms in circle formations, encouraging the group's awareness of the shared space and time between them. Whilst implicitly understood amongst the participants, the sense that this was a time for them to share, was clear. Language was an important factor in fostering social cohesion, for example, referring to participants as 'neighbours', ensuring greetings were made through playfully hiding beneath parents' hands, and waving to say hello to neighbours across the circle. Later in the sessions stretching and reaching towards friends

next door and opposite ensured everyone in the group was acknowledged. This enabled space for the group to greet members who were absent and welcome those who were new. Whilst group members appeared to know one another, confidence in being 'seen' in this dancing context varied. Important aspects of the classes which promoted acceptance and equality were established early on and included supporting the witnessing and non-judgement of others moving, and valuing large, small, passive and active interactions with one's child.

Social cohesion was enabled by Lucy facilitating a range of activities:

• Rhythm and song were a key component throughout the duration of the session, including rhymes which introduced sound and touch to the child, stimulating the child's skin and hearing, and developing connectivity between sensory experiences. Lucy explains that 'the opening song usually introduced movement for the session between parent and child and as the child was physically supported, the group held the rhythm of the song through voice and actions'. Staying together as a group rhythmically was seen by the lead dance artist as the 'glue', which helped them remain connected to one another. As the work developed, the children were very often drawn to the mats on which the activity took place, listening and exploring the sounds of the mats when brushed, tapped or banged, and parents would often follow the lead of the child in this kind of activity, as interactions and shared moments were uncovered spontaneously either between mother and child or across family and friendship groups.



Rhythm and Song

• Pass the prop games introduced important, playful interactions between parents. Lucy explains that the 'focus was on parents moving props with children perhaps following with their eyes'. This task introduced creative play amongst the adults and at times, felt risky, as mothers began to explore creative and novel ways in receiving and passing the ball to and from their neighbour. As the group's confidence progressed, a second and later third object was introduced. This brought humour into the sessions, as mothers would drop an object, or their baby would pick it up, a back-log of props would sometimes occur, resulting in group members passing objects across the circle and implicitly introducing greater interaction through movement and transitions.



Passing props

• *Circle formations* were returned to often throughout the session and all sessions started and ended in a seated circle. This is a well-used tool within community dance practice as everyone is equal and can relate to each other visually or aurally or through touch.

For Dance Network Association, the overarching aim of socialisation was to be achieved through dance and social time equally, and this was successfully executed through the design, content and delivery of the sessions. The ways in which groups are formed and their participants included are multifarious within community dance practice, and the artists drew on the full range of their skills and knowledge to foster a positive, inclusive environment. The children's exploration of movement material and social interaction was facilitated by the engagement of the parent, and often the engagement of the parent predicted the inclusion and involvement of the child as well. The nature of the participant group was that they largely knew one another, either through cemented friendships or as acquaintances. Some participants knew one another less well and as a result the artists sometimes observed a sense of 'otherness' amongst participants. Cohesion through dance practice itself took time to develop, and the verbal, social interaction amongst participants was, for them, as important as moving and interacting with their child.

Visitors to the group possibly weakened social cohesion during some sessions, suggesting there was the potential for risk of perceived judgement from these observers and external participants. In the future, it would be prudent to ensure that guests come for a number of weeks to sessions to build rapport and are known to the child and parent participants if funding can allow. It is always difficult for participant members and artists when visitors postpone or cancel their attendance and in ideal circumstances this should be avoided. The impact of this can amplify feelings of social isolation, loneliness and rejection of changes to the body because it can create impressions amongst the group that the work is not valued - participants may feel let down, forgotten and unimportant, which in a project focussing on combatting social isolation is important to consider. Nevertheless, life is not always so 'tidy' and change is an inherent part of human nature, and so it is important for the delivery artists to develop strategies, which help participants cope with such shifts in expectation. The visit of the health visitor to discuss paediatric nutrition was also challenging. Many of the parents were already weaning their children following baby-led methodologies and expressed anxiety about the currency of the information they received, fuelling pre-existing emotions about eating and diet. There is undoubtedly scope for nutritional information to become a component of this project design. However, as in previous recommendations for projects in Harlow and, Barking and Dagenham, this strand of the work needs more close development with the artist delivery team and paediatric dietetic services that clearly understand and can support the aims of the project. Again, building rapport amongst all members of the delivery team with the participants is vital for the cohesion that a project such as the Interactive Family dance project can foster.

A further concern emerged in Week 9 of the project when a new member joined the group, the only referral to the project by the Essex Child and Family Wellbeing Service. This mother and child, aged 2 years, introduced a new dynamic to the group with a much older and naturally more inquisitive child. Both artists observed the mother wanting to socialise with the other adults but realised how hard it might be to interact with the existing participants. The regular participants appeared to foster reactions to the child as 'acting up' and 'behaving badly' and movement activities which they had previously begun to explore in other sessions were not carried out; parents remained seated and prevented clear pathways for the older child to explore. Danger was present because the younger children were not able to respond to the more mobile, older child, and as a result fear and uncertainty amongst existing group members was probably unfolding. Lucy observed that,

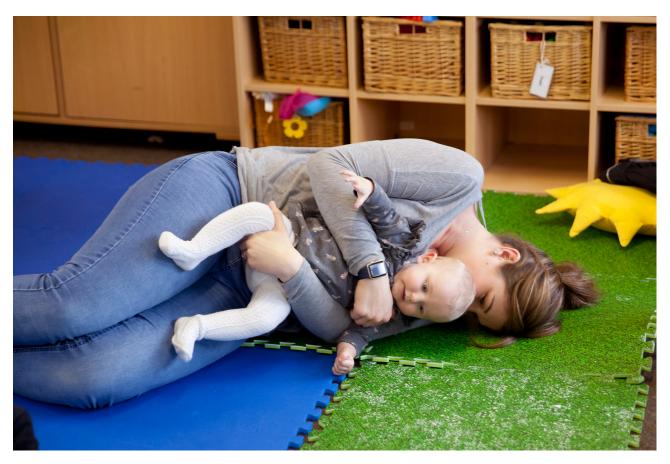
'Although verbal intervention, in the shape of tasks and activities were fed into the group to re-establish group cohesion, the 'established group', chose to stay together. This became increasingly visible in the social period, where the new mother and her child were not welcomed into the discussion, leading Hannah and I to engage in conversation, actively encouraging the mother to attend the final session and based on feedback by the mother who experienced 'guilt' that her child, who is very tall for her age and is often thought to be much older, caused the mothers 'heart to race with anxiety' throughout the session because she was worried her daughter would hurt the babies who were unable to move.'

This scenario was probably exacerbated by the difficulties presented by the dancing space — which was workable for babes-in-arms dance sessions, but less viable for mobile, small children. The space was 'busy' with lots of play equipment, which the artists tucked away each week. The environment for a two-year old was distracting from dance activity and of course, a two-year old child does not want to sit down when so much play equipment is presented to them! Unfortunately, this parent and her child did not return to the sessions, and whilst we do not know why the parent made this choice, it allows for recommendations that in referring groups to activities, it is vital that partners know about any changes to the group, in particular who it is

aimed at and who is accessing it. The physical and cognitive differences between a locomoting two year old and a babe-in-arms is tangible, and it is perhaps not appropriate for children across these two stages of development to have sessions together in this type and size of space. Of course, it is not unusual for age ranges to be mixed in dance sessions for early years participants; if this is the case, then all participants, artists, organisers and partners need to set this up clearly from the outset so that expectations can be clearly and transparently met. Whilst the space provided a welcoming, community space, which was safe for small, nearly mobile children, a more appropriate, open space which allows for different zones of activity is probably needed if older children also attend.

Physical and Cognitive Development

Whilst social cohesion has been the main focus of this enquiry, activities that supported physical and cognitive development were the primary focus of the content of the sessions. Research suggests that dance and movement can support the health and wellbeing of those participating, and enable feelings of relatedness and belonging when part of a group of this nature. It is not only the nature of how these activities are facilitated that is important, but indeed the growing physical and social confidence that children and adults assimilate from their participation that can contribute to social integration as well. The sessions in Colchester were informed by developmental motor learning theories such as navel radiation; movement which supported the integration of body halves (right and left side of the body); and head to tail movement patterning. In later stages of the child's development, focus was placed on cross-lateral movement connectivity seen in crawling. Movement was enabled creatively with open-ended tasks to support mothers to explore, play and witness the dancing of others, and foster an open-minded trial and error approach to exploring movement.



Mother and child movement play

Motor skills were fostered by the activity being undertaken and gentle encouragement by the artists for the parents to become involved in their children's movement and decision-making. Motor developments were noticed week on week including crawling, turning, rolling, standing, shuffling, climbing and eventually walking a few steps, in line with normal motor development for this age group. Tasks were play-based to encourage exploration and the artists would identify moments of possible interaction with children to help parents stay focussed on the task and commit to movement activity.

The following table outlines the content of a typical session devised and led by Lucy and some of the motor, developmental and social outcomes from the sessions:

Content	Sample Motor, Developmental and Social Outcomes
Rhymes and actions	Awareness of touch on various body parts, supporting fine motor skills;
	noticing other children's resistance/enjoyment of massage; noticing
	the characters in each child; hand-eye coordination; visual tracking for

	auditory cues.
Stretching, reaching and	While yielding against mother's centre for vertical support, the child
waving toward our	can begin to explore horizontal, sagittal and vertical planes; recognising
neighbours, side-to side	new faces; striving toward group cohesion.
and across the circle	
Rhythmically tapping	Stimulates auditory senses, observing individuals management/coping
and slapping the floor	of quiet and loud sounds; supporting fine motor skills; encouraging
	group cohesion through attunement, via rhythm.
Rhyme and song	Extension of above rhymes; encouraging breath, audible engagement,
	whilst requiring upper/lower, body half and cross-lateral movement
	pathways; explored with adult and child; attunement between parent
	and child/baby; group cohesion through shared melody and rhythmic
	achievement.
Rocking and	Trust exercise for child with their adult; shifting through the sagittal
Rolling	plane to change parent and child perception to horizontal; eye
	to eye contact through lifting, reaching away and drawing towards;
	rolling together; test of child's trust in parents physical holding,
	enabling kinespheres to overlap; allowing parents to observe others'
	interpretation of a task; to allow for time to settle and be with
	child.
Feathers	Hand-eye coordination; fine motor skills such as holding, brushing,
	throwing and blowing; gross motor skills such as crawling towards,
	reaching and standing; observation of colours; creating opportunity for
	varied movement; exploration based on acceleration/deceleration,
	twist etc. of object; sharing; shifting through space, negotiating others'
	movement pathways; introducing play through improvisation.
Scarves	Tug-of war (strength/resistance); spiral; settle; creates a broader
	dynamic range of movement possibility; pulling/dragging seated child
	across the space, creating a hammock, requiring involvement of
	another adult; hide and seek; gross motor skills; social interaction is
	broader with the inclusion of the parent's child; opportunities to
	observe other interactions within the space, building the group's
	explorations and repertoire.
Circle Dance	Includes horizontal, vertical and sagittal plane with jumps, hop, turn
(A.C. 1.1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and travel; group cohesion required through held rhythms
'Wind the bobbin up'	The scrunchie offers a visual outcome of movement, resistance in
nursery rhyme	winding, stretch and contraction; the song upholds group cohesion; the
	settling down, allows adults to sustain the 'stretch' within the prop,
	physically holding of the circle, while the children can continue to
	actively explore the scrunchie by clapping, pointing, grasping and
Dorochuto and bullets	moving fabric to move the torso.
Parachute and bubbles	Opening the parachute and letting it rise and fall; some children will
	want to 'help', challenging their working within a group rhythm; others
	will be underneath, sit beside their parent/carer as their confidence is
	challenged by the activity; others will lie down, some parents will
	instinctively lie with their child; bubbles allow the parents to rest while
	the children enjoy pointing at, reaching, popping and catching the
	bubbles and crawling towards them, standing or in some cases

	climbing to reach; this creates an ending for each participant; some children will independently lie-down, cuddle up with their parent or a child whom they have formed a friendship with; others will try to reach for the parachute as it falls, and kick or hold on to it; the bubbles are a 'wonder' for the children, eager to show their parents the bubbles, a desire to catch them or pop them; the parents are tested here, as they feel concerned or at ease, in their child's ability to play and share; during the parachute, the group need to maintain cohesion, as they rhythmically allow the fabric to rise and fall; often parents notice the breeze created in the fabric, inviting the group to notice and share that they are hot, the heart rate increased.
Thank you and cuddles	Returning to parent, having contact and praise; thanking parent; brings the focus back to parent and child, nurturing the spontaneity and play established during the lesson. Fine motor skills such as massage, pointing and playing with feathers are supported as well as gross motor movement such as extending legs, lifting pelvis, touching toes, rolling and cross-lateral movement.

Developments in Physical and Social Confidence

Families were observed for the duration of the project to evaluate the progression of physical and cognitive development in relation to the activities that were part of the sessions. The following milestones were facilitated and achieved by many of the children during the sessions:

From 0 to 3 months:

- Looks toward direction of sound through rhythm and song activities
- Eyes track slow moving target for brief period through feathers and bubbles
- Turns head towards bright colours and lights through feathers, scrunchie and scarf
- Turns head towards sound through rhythms and song activities
- Looks at edges, patterns with light/dark contrast and faces through peek-a-boo
- Imitates adult tongue movements when being held/talked to
- Learns through sensory experiences through massage and touch.
- Repeats actions but unaware of ability to cause actions through scarves
- Begins to reach for objects that please them through feathers, scarves and balls

From 3 to 6 months:

- Understands cause and effect through sharing games with props
- Places objects in mouth for further exploration through props
- Begins to reach for objects through props
- Swipes at dangling objects through props and parent inviting contact/interaction

 Shakes and stares at toy placed in hand through props and parent inviting contact/interaction



Staring at toys

From 6 to 12 months:

- Enjoys simple action songs through wind the bobbin up and warm-up song
- Searches for partly hidden object through peekaboo
- Able to coordinate looking, hearing and touching through exploration with props
- Moves obstacle to get at desired toy through introducing over/under/ around games
- Bangs two hand held objects together through props
- Responds to music with body motion through swaying, rocking, rolling, travelling
- Responds to own name visible in warm-up 'hello' game, and when giving praise
- Shows surprise often in the 'hello' and peek-a-boo games
- Explores objects in many different ways by shaking, banging, throwing, dropping props
- Imitates gestures promoted through repetition in action songs

In particular, one family group was observed for the duration of the project with particular regard to the child and parent's wellbeing and involvement in the activity week-to-week. Jennifer and Jay attended seven of the ten sessions during the term, having been absent due to an outbreak of foot-and-mouth disease for a few weeks*. Jay was nine months old at the end of the project and attended seven sessions with her mother. Both mother and child were observed to be existing members of the friendship group when they arrived, although sometimes the mother would closely engage with other group members and at other times visibly hang back. Jay is a quiet baby, although relatively alert, and in sessions observed the activity as it unfolded around her. Generally, Jay tended to sit and watch with a wide gaze and mouth slightly open, although her movement range and interaction with the activity or others would be minimal. She was a little reluctant in lying prone, moving volitionally only when an object was of interest to her. Lying with Jay, cooing to her had some success in her persevering with lying down, especially so when Lucy and Hannah laid with the child and her mother and Jennifer could take cues from the artists themselves. Jennifer was usually keen to explore and interact, gently building confidence with Jay as well as other children, as her experience of movement and trust in her own abilities grew. And Jay would happily be picked up, and moved through space with her mother, building her interaction with others in the space.

Yet Jay did not keenly move from her place once settled. Jennifer reported sleep deprivation often, and was visibly tired during some sessions. Her attention would lift with certain props such as the feathers or bubbles, but at times it became hard for the mother to maintain her energy during the session. It is not possible or appropriate here to explore the impact of the parent's behaviour on the child's engagement, but in scaling Jay's involvement in activities using the Leuven Scales of Wellbeing and Involvement (1994), the artist progressively marked her involvement starting at 2 on a 5 point scale in week 1, and increasing to 3 in the last week of their participation. Whilst slow progress was made, it would appear that Jay's involvement did develop over the course of the ten weeks. In intervening weeks of the project, involvement scores dipped as low as 1 and Jay's involvement seemed related to her mother's fatigue, and resulting engagement socially with the other participants and the activities themselves. Thus, the mother's relationship

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^{*} Names have been changed to protect anonymity

with her child appears key here in how Jay was able to interact and develop within these sessions. Yet in discussion with the participants, they all emphatically explained the importance of coming to these sessions as part of their weekly routine and that despite tiredness would make every effort to attend if they could. Whilst monitoring developmental involvement as an indicator of confidence is important here, it is also vital to consider the social context of being a new, young family and juggling the demands and newness that this brings to these people's lives. The need for the parent to attend for social connectedness is perhaps greater than the need to attend with full vitality for a dance and movement session for the child themselves, and so movement sessions of this nature need to be devised and delivered with this approach at its forefront. Opportunities to physically move placed equally alongside social activity and interaction fulfil the needs of both parent and child. Flexibility is the key ingredient for successful participation and delivery as the participants explain, 'the flexibility this activity offers us is really important, it's not too structured and we can move in and out of the activity.' The parents also explained that the artist's role was important in aiding that flexibility and feeling of non-judgement. Lucy and Hannah ensured that they focussed on one-to-one time with participants, in particular checking in with mothers if they had been absent, remembering their injuries and any pain they might have, offering differentiation tasks for them and modelling behaviour to adopt with their children to encourage their involvement. Simply by remembering conversations and picking up on previous discussions, the artists foster a sense of belonging and worth to the group dynamic, with a sense that they are being invested in.

Key developments were observed by the parents about their children. These included their child's ability to notice other babies and adults and in particular the babies' burgeoning responses to the interactions they were having. For many this was an unexpected outcome and they could see how the project focus of playing, moving, chatting and socialising had contributed to their child's social, physical and cognitive developments. Other more specific milestones such as attempting to walk, more happily spending time on the tummy, growing independence, imitating actions, words and sounds and orally exploring food and objects were other tangible outcomes which the participants reported.



Growing independence and gustatory exploration of a scarf!

Conclusions

The aims of the Dance Network Association's early years provision have largely been met through the Interactive Families Dance project in Colchester, although not without some particular difficulties observed by the artists and no doubt experienced by the participants themselves. It proved impossible to talk with participants about the specific issues covered within this report due to the nature of our evaluative conversations as a large focus group, and the difficulty of the evaluator not being present at all sessions. One to one discussions are much more fruitful in ascertaining participants' true reflections on a project of this nature, and would be recommended for future evaluative methodologies. A total of 19 families were encountered, widening awareness of dance and its role in healthful behaviours. There are of course developments to the organisation's provision that would

be beneficial, such as targeting the work in its localities to young families that live there as well as those that come from further afield and might be at risk of social isolation and loneliness due to their financial or geographical circumstances. Working with other partners to ensure a joined up provision, which can tackle increasing physical activity and offering expert nutritional advice appropriate for current, paediatric methodologies would create a project, which may well appeal to a wider constituency. It could better tackle both the physical activity and nutrition aspects of reducing child excess weight in future projects.

There is evidence to suggest that these sessions provided an environment for families to **come together and consolidate friendships**; indeed the project enabled existing friendships to be cemented further as friends brought friends to the classes. The shifting experience of parenting in which one day varies very much from the previous one, or indeed the next one, means that projects such as this require flexibility in terms of design, content and modes of delivery, responding to given situations and meeting people 'where they are at' and which may well be different from previous encounters. This requires experienced and empathetic facilitators. By drawing on established dance practice models from Pasch, Sherbourne and others, we have been able to carefully demonstrate that this work positively impacts the physical and cognitive developmental benefits of our activity for early years participants as well as aiding the socialisation of young families and babies from an early age, and continue to reflect on that practice to ensure its currency and relevance for family populations across Essex especially for those with babies under 12 months old. In particular it is important to consider how this work can integrate with groups of early years children aged over 1 year, or indeed whether bespoke sessions for babies are better delivered as discrete sessions. In any case, progression for babies to toddler dance provision is a strategic development worthy of consideration as the organisation develops.

The evidence of this project suggests that dance can bring together groups of people to connect and interact with others through movement, in a new context away from the traditional baby-parent activities they may already frequent together. Some participants may be quite isolated from services, there may be a paucity of dance provision in their area,

or indeed they may be isolated because of the health conditions that they face. Some outputs from this project suggest that dance has the ability to transcend such challenges and bring people together to feel emotionally, physically and mentally connected. It is clear that socially connected groups will travel to provision if it is of worth to them or their child. As a model of practice, this approach and activity works, and we now need to work towards developing this provision for communities that are not known to us through key partner organisations in localities of real need. The artist has a significant role to play in this as they have the potential to consolidate, interact and strongly influence the notions of social connectedness; in engaging with dance, participants' confidence in moving and interacting can grow, one's sense of connectedness may feel more rooted and so overall health and wellbeing can flourish too. Community dance practice lends itself strongly to the principles of social connectedness as suggested by People Dancing (2013):

Community dance is not confined to any specific type of dance and is concerned with engaging people creatively and safely in a dance style, or exploring dance ideas and forms of their own. It can involve creating dance for performance, and is centrally concerned with the experience of dancing and the process of making dance, and includes many ways of 'participating' - learning, making, performing, watching and talking about dance.

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