The Closing Colloquium for the International Conference in Berlin consisted of a panel discussion with dance/movement therapists representing fourteen countries around the world. The panelists commented on the development of the profession in their respective countries and described the training required of practitioners, the educational opportunities offered and the populations served. The Colloquium concluded with reports about the current state of the field and the panelists’ predictions for the future growth and recognition of dance/movement therapy.

What follows is a brief summary of the written responses from the panelists, which were gathered by Helga Dietrich, ADTR. In reviewing these comments, we found that regardless of their country of origin, the number of therapists in residence or the length of time dance/movement therapy has existed as a recognized profession, the panelists’ responses regarding their experiences were very similar, which reflecting a fascinating range of specific applications.
In general, the accounts of the development of dance/movement therapy in each of the various countries focused on an inspirational figure who paved the way for others to learn and study, including such examples as Bep Ter Braak in the Netherlands, Rose Gaetner in France and Marian Chace in the United States. The settings in which dance/movement therapy is used vary, and include hospitals, community programs, schools and private practice. For instance, in Russia, children’s schools, psychiatric institutes and creative arts centers are the primary providers of dance/movement therapy. Panelist Irina Buryukova shared an example of a wholistic approach used there, which is called “musical movement” and is based on Isadora Duncan’s principles. It is taught to both children and adults, and combines a focus on personal growth with the use of artistic tasks and exercises. In Austria, as in a number of other countries, psychosomatic institutes, psychiatric hospitals, schools and geriatric clinics employ dance/movement therapists. As a last example, Francine Lee Mirro and Anna Helgesson talked about ENKOSTE, the first Creative Arts Therapy center in Sweden, which is a government sponsored research project in which dance, music and art therapies are being explored with borderline personality structures.

Educational opportunities also vary around the world, from the more established programs in Germany, such as private institutions where students with a degree in a related field may study, to the emerging courses of study in Japan, Norway and Finland, where students participate in workshops offered by dance/movement therapists. In some countries organizations are forming to provide for networking and training. For instance, the European Association of Dance Therapy (EADT) combines the associations of the French, Italian, Greek and Belgian dance/movement therapy communities, as well as having contact with dance/movement therapists in Germany, Luxembourg, Portugal, Switzerland, and Romania.

Perhaps the most challenging of the questions asked of the panelists were those which addressed the position of dance/movement therapy in our global climate and the future of our profession around the world. Tina Stromsted clearly identified the economic pressures on dance/movement therapists, in the United States as well as in other countries.

“This is a difficult and changing time for many mental health care professionals with the current funding and health care crisis in the United States. The emphasis in treatment here is shifting from individual hospitals and/or private practitioners to organized groups of “managed care” provider panels, which favor short-term treatment and require increased administrative paperwork and telephone consultation time.”

Some panelists identified problems specific to their own countries, such as Henny Slegh. "In the present situation many institutions for men-