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The dancing force behind the new Expressive Therapies programme in Hong Kong

Amanda Levey interviews Professor Rainbow Ho

Abstract

Amanda Levey interviews Professor Rainbow Ho, director of the Expressive Therapies master's programme at the University of Hong Kong. The interview covers Rainbow's professional background in biology and microbiology research, her lifelong passion for dance, and her subsequent interest and training in dance/movement therapy. She describes her extensive research interests, and the long process to develop the new and very successful master's programme.

Keywords

Expressive therapies, dance/movement therapy, Hong Kong, trauma, cancer.

Introduction

I have met Rainbow Ho at various ANZATA conferences and events and read with great interest her impressive body of research on the application of dance/movement therapy (DMT) to many issues including cancer and trauma. I was very curious to find out more about the programme in Hong Kong and asked if I could conduct a Skype interview. Rainbow's journey to becoming a dance/movement therapist is fascinating, and her achievements in dance, dance/movement therapy, research, and training programme development are inspiring. She has provided a list of some of her recent research publications, which can be found at the end of the interview.

Amanda Levey: In this interview I would like to cover two main areas. Firstly, you: your personal background, training, and research interests; and, secondly, your role in developing and running the Hong Kong programme for the Master of Expressive Arts Therapy, which is ANZATA's most recently approved programme. We are seeing a very rapid increase in Hong Kong members now that you have your first

graduates, and we are very interested to know more about you all!

Rainbow Ho: Well it's a long story! I will start with my undergraduate study: I studied biology and biochemistry. I am very curious about all living organisms, and life. And I promised myself before I entered the university that I really wanted to do research which related to humans, and to contribute something in this world. So after I graduated, I immediately started graduate study: I have a lot of interest in cells, so I studied anatomy and micro-anatomy. I studied cancer cells in great detail, and then I went to the hospital to study molecular biology because I found that genetic material was powerful in controlling the changing life within the cells, and I graduated after two years. Then I started to do research in the medical field in molecular biology and immunology within the clinical immunology department.

I'm talking about many years ago and it was very advanced at that time. I developed some new medical research tools studying genetic materials in cells in clinical settings. But I also found that the things I studied became

smaller and smaller, from the organism, to the tissues, cells, and then genetic materials, which is about molecules; I could not see the whole person. So I started to think about what I should do next. Because I'm really interested in human life and not only the genetic materials, I decided to change my field of study.

I left the hospital, I left medical research, and I worked in a secondary school, as there was funding that supported my employment as a researcher. I changed to educational research and worked on a very successful project related to information technology in education. I helped develop an IT pilot school that was very up-to-date at that time; it was 15 years ago. After that the contract ended but, at the same time, I was invited by the head of the ballet department in the Hong Kong Academy of Performing Arts to join their programme in the academy.

AL: So did you dance already?

RH: Yes of course! I have been dancing since I was three years old and started to perform on stage when I was in the kindergarten. I will talk about my dance history a little later. So, let me talk about why I entered the performing arts school. Because I like medical sciences and I like to dance, I really want to find out if there is something that can combine the two together; that is, to use dance to help people. I searched on the internet and I found dance therapy, but there was nothing in Hong Kong at the time. The head of the ballet department of the academy talked to me that "OK, you can come to this academy and you won't find anything about dance/movement therapy here, but we have the library, information resources, and also relationships with other dance schools in the world; so you can build up your relationships and try to find out something about dance therapy". So I entered the performing arts school. I did a one-year professional diploma in performing arts (major in dance/ballet). At the end of the study, I conducted a research project on dance therapy. I found that there was someone in Hong Kong who had invited a dance therapist from overseas to conduct workshops, so I

interviewed her and built up the connection with her supervisor who was teaching in the University of Hong Kong. I visited the professor, and she really wanted me to do a PhD, as she needed a person who had knowledge in biomedical sciences at that moment. With my background in biology and medical sciences and my interest in working with people, I started to work on a PhD project related to psycho-social intervention using biomarkers to measure the outcomes. I established the first stress hormone laboratory in Hong Kong and also Asia area, doing research related to stress and psychophysiology.

AL: Can I ask what department that was?

RH: Social work. So I started my PhD study in social work. But at the same time I found an institute in US that had an alternative route for studying dance/movement therapy, which meant that I could stay in Hong Kong while studying that. I needed to fly to the US two or three times a year to attend the courses, and completed my internship in Hong Kong. So I spent about three years to finish my DMT education and training. At the same time I was doing my PhD. So I finished the two things together and I got my registration in DMT and then I started to work with different populations using dance therapy.

AL: Which professional body did you join?

RH: The American Dance Therapy Association.

So that is the story of my training and that's how I began my career in DMT. Later on, as I also use other arts modalities during my intervention, I also registered with the International Expressive Arts Therapy Association.

AL: The piece of your research that I have read was published in Arts in Psychotherapy about DMT with trauma clients, working with the concepts of place and space – which I found really interesting. Is that typical of your research in the DMT area?

RH: I have been doing a lot of research in dance therapy, and about movement and physical activity. I work with different populations; sexual abuse survivor is one of

them and that is the paper you read. I have been working with cancer patients since my internship, that's almost 15 years now, and I have been doing a lot of research on dance therapy with cancer patients. Besides, I also use tai chi and qigong with schizophrenic patients and with other populations as well. In my research I use what I call a psychophysiology framework, because I really want to see the outcomes not only from the perspective of psychology and behaviour, but also the physiological outcomes. I can thus communicate with my medical colleagues using the language they know and they are able to recognise the physiological data and our work. I can address what they think is important, which is the evidence-based practice, so that is why I need to do research. I think only with research evidence, I can convince the people in the mainstream (medical sciences) and help to build up our own area (creative arts therapy).

AL: What sort of outcomes do you think the medical world is interested in?

RH: They are happy to know the effects of dance therapy on symptom reduction and symptom management, etc. Some of them are more interested in quality of life, and some of them want to know about how dance therapy can affect physiology outcomes, immunity or stress hormones.

AL: I think it is a very interesting integration of your background and how you are working currently, to bring those things together, following your passions that bring about something very important for yourself and also for other people.

RH: I think it is because I am a very curious person, I'm curious about almost everything! I don't have enough time because I really want to know everything! I am lucky too to be able to do that.

AL: For a researcher that is a very useful attribute to have!

RH: I also love to interact with people. But this is very strange because I wasn't like that when I was small. I did not talk a lot. If I were put to a psychiatric doctor for diagnosis

like today, maybe I would be diagnosed with selective mutism. I did not talk at all in school for several years; even though my teacher asked me questions, I never answered. But most of the time, I knew the answer.

AL: And do you know now in hindsight what was going on for you?

RH: I find it very interesting, that when I talk I really need to create a whole sentence first, and then to see it clearly in my mind and then I can read it and then I can talk. I think I am very slow in constructing the sentence.

AL: And is that in any language?

RH: Yes – in my mother language as well. I think I can see some reasons for it. One of them is because, when I was small, my family was poor and my mother needed to work at home. When she worked she needed to count numbers. So I couldn't disturb her. Whenever I wanted to talk to my mother I needed to talk to her in the shortest time and express what I wanted to communicate with her in a very concise sentence so that she didn't have to listen to me for long. So I tried to figure out the shortest sentence that I could speak to my mother with clear message, and I used a lot of time to make it better, better, and better.

AL: Do you think that your interest in dance from such a young age was an alternative way of communicating your feelings to talking?

RH: Exactly! Because I danced I could express without language. I had difficulty in using my verbal language to communicate, even until I was a university student. I didn't talk, and even now I seldom talk. I'm very quiet.

AL: I find it very moving to hear you talk about this, it makes a lot of sense to me. And I imagine that you are a very kinaesthetic person, that you feel things very strongly in your body?

RH: And I am very sensitive as well. Once I saw a fish in a pool, and the air pressure was very low, the fish could not breathe, and the fish got very close to the surface of the water and looked like it was suffocating. I felt the same and I passed out! So I have a really strong and sensitive body and I think it is

very good in DMT, as we always need to have kinaesthetic empathy (using our body to sense and empathise with our clients).

AL: Have you had to learn as a therapist not to be overly affected by clients?

RH: Yes, of course I needed to learn that, otherwise I got overwhelmed.

AL: Can you explain it in words, how you do that?

RH: Yes, I am a meditator. I have been meditating for more than 25 years. I meditate every day, so I can use that to calm my body, to connect my body and mind. That helps; I am always mindful. Also, because I seldom talk, I really understand those who cannot use language to communicate or express. I understand them very well, like autistic kids, mental illness patients, depressed patients, sexual abuse patients, traumatised patients. I won't be too overwhelmed. I can really understand them from a personal perspective, I think that helps too!

AL: So how have long you been involved in the new Hong Kong arts therapy training course?

RH: I started to create the programme ten years ago, after I got my training as a dance therapist. I had been doing a lot of workshops and I knew that people really needed it and some professionals really wanted to be trained to use it too. I really wanted to have the programme within the university, not only workshops for a few days, but a very systematic training. So I started to write a proposal ten years ago, but at that time I could not find many teachers that could help me to teach this programme, particularly in the tertiary education system. So I had the proposal prepared, but put it aside until Jordan Potash graduated. Jordan studied with me for his PhD in Hong Kong. I was his supervisor and he was originally from the US with a visual art therapy background. So I waited for him to get his PhD and then he was appointed as lecturer in my university. And then we started to work on the programme proposal together.

AL: That would be about the time when I visited with him in Hong Kong to discuss aligning your programme with the ANZATA course requirements.

RH: Yes, and it took around three years! We refined it again and again, because in my university they look at all the details, so as to ensure the quality of the programme is up to the standard of all other postgraduate programs in the university. So the proposal went through examination on every level of the university, and finally it was approved! We started to take students in 2013: we decided to have 23-25 students per cohort, so that we could manage the internships, manage the students, provide good supervision – based on our limited human resources. One year later, Jordan decided to move back to America, but I had another PhD student who is also an art therapist to join me, and I also hired some other arts therapists.

AL: And I understand that yours is an expressive therapies programme, with lots of modalities?

RH: Yes, visual art, drama, dance/movement, and music; we have a whole team of professionals.

AL: So how many people in the first cohort?

RH: We had 23. And the same for the second cohort, for the third I think 24, and then next cohort we have 25. We have already finished the admission exercise.

AL: Yes, because you have the northern hemisphere academic calendar, the September start?

RH: Yes, we start the semester in September. We usually have a lot of applications. The applicants need to submit an arts portfolio which documents their arts experience. We look at every application in detail to choose the best students.

AL: And what is the proportion of applicants to places?

RH: We have around 100 applications, and we take about one in four.

AL: And we already have the first of your graduates becoming ANZATA professional members, which is very exciting.

RH: We have both full-time and part-time options, two years for full-time and three years for part-time. We have six students who did full-time and graduated last year, and this year we have the part-timers from the first cohort and the full-timers from the second, so 28 will be graduating this year. Also now we are in the fourth year, we have more experiences and feedback from the students, so we keep improving our courses and curriculum.

AL: And what kind of internships do they get? Is there interest in your students?

RH: Our students go almost everywhere! Many of them work with children with special needs in different settings, education settings and community settings, or some of them work with severe intellectual disabilities in residential settings. Some of them work in the mental health field and in the medical field and also with the elderly. So they are everywhere! And the organisations love our students' work.

AL: Are they mostly mature students?

RH: Not really, some of them are very young, but they are very motivated, with a lot of initiatives. They are eager to learn and to keep improving their practices. So all the organisations like them very much.

AL: One of the things ANZATA encourages is a regional group. Is there one being developed in Hong Kong for your graduates?

RH: Yes, I am waiting for the graduates of this year to do that. And at the moment they are concentrating on their dissertations, and after that they will be ready for that.

AL: I am wondering if maybe one day we will have a symposium or conference up there?

RH: Yes, I am thinking about that too, like in Singapore, maybe a conference to be held in Hong Kong in future.

AL: That would be very exciting!

RH: So now for my dance story, I have done all kinds of dance, including Chinese classical dance, folk dance, and ballet. I have been a

professional ballet teacher for many years, and I am also a ballroom dancer and competitor. I am the champion ballroom dancer in Hong Kong and I represent Hong Kong at the Asian Indoor Games and East Asian Games, and also many international competitions.

AL: Do you have a specific partner?

RH: My husband!

AL: Did you meet him through dance?

RH: Yes, I met him in a ballet rehearsal, and after we met we decided to dance ballroom together. Ten years ago we decided to retire from competition; we still do some performances, and we also started to help the government to promote ballroom dancing. In Hong Kong, ballroom dancing has been seen as only for old people before, not for young people. So we decided to help the government to promote ballroom and Latin-American dancing in kindergartens, primary schools and secondary schools, and the community. And we renamed it as DanceSport. It is also in Australia and New Zealand I think? So I am doing that now, I have become an international adjudicator. I also do other kinds of dance, like tap dance, jazz, contemporary, flamenco, modern, and even hip hop. I love all kinds of dance. In fact, having an interest in all different kinds of dance helps me as a DMT. Because I have met clients who really want to dance rumba; I have met clients who want to do ballet or hip hop. I can use some of my dance skills to dance with and engage them. I also do ballroom with the elderly. This morning I just finished the elderly group with dementia, they like dancing with partners! I love it too!

AL: I was really interested in that idea of place and space for trauma clients... having a sense of place in one's own body and in relation to space...

RH: Actually 'place' refers to the connection to the ground, that the person can find a place to stand on this earth to get a sense of security and will become calm. They cannot find any home for themselves until they find a way of anchoring, and the easiest way is connecting to the ground. And that builds a sense of stability and security.

AL: Yes, that has such relevance because I believe that very much from my own work with DMT, but when I went to Christchurch after the earthquakes I wondered, "well, what happens if the ground itself isn't stable?" That adds a whole other layer of complexity. Particularly for people who already had trauma prior to the earthquakes, the arts therapists in Christchurch are finding that those people are having the hardest time to recover. So I think it might be really interesting to think what you might present of that work at our symposium there this year.

RH: Yes, that is true. I also worked with earthquake survivors in China when there was a big earthquake in 2008. I went there and worked with the teachers and students. And I also used the concept of grounding... and they had a very interesting reaction. It seems that because they felt that the ground has been shaking, they needed more strength to anchor. They needed to put more of their own weight; they needed more connection to that ground... it's very interesting.

AL: Thank you so much Rainbow, I look forward to seeing you in Christchurch.

Rainbow Ho's publications relating to dance therapy and expressive arts therapy

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