**Table 4: Integration-Promoting Clinical Interventions**

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| Intervention | Example |
| Lingering movement mirroring, i.e., joining the patient’s movement and lingering in their movement qualities, while emphasizing key elements, patiently waiting for a new movement to be born out of the patient’s body. This intervention appeared in all the treatment diaries at the start of treatment (n=7). | Eight-year-old Ella: “… I recognize that her main movement pattern is to end a movement phrase by collapsing her chest inward. I repeat her no movement / movement… until a new movement is born out of her.” (Diary 2, Session 3)Lingering allows the patient to experience connection in areas where a disconnect was created while the movement of her body is mirrored by that of the therapist. |
| Interpretive movement mirroring, i.e., movement mirroring that is not simultaneous. The patient moves and the therapist identifies certain elements, suggesting new possibilities based on what is present or absent. This intervention appeared in all the diaries at various stages of treatment (n=7). | Ella: “I expand her movement content by repeating the movement of collapsing and straightening up. She joins me… the chest straightening up and collapsing, repeating the movement in various paces.” (Diary 2, Session 3). By introducing different rhythms to the movement that exists in the patient’s body, the therapist offered a somatic interpretation of what may have been occurring within Ella without being expressed.  |
| Movement sequences from the edges of the body to the center. This refers to the invitation to connect the movement of the limbs to the center of the body through a process of focusing to increase awareness using movement or words. This intervention appeared in half the diaries (n=4) at the start and middle of treatment. | Yair: “Yair and I move, simultaneously mirroring each other. The transitions between the movements are sharp… slowly the hands come near the body. His listening to himself and to me changes, his hands slide over his body from top to bottom, listening deeply.” (Diary 6, Session 1) |
| Focusing to bring awareness, i.e., repeating significant movement content of the patient’s choosing or using verbal mirroring. This intervention appeared many times throughout all stages of treatment in all the diaries (n=7). Focusing on the physical experience facilitates connection and a renewed understanding of the detachment mechanism. | In early stages of treatment, the intervention is geared toward connecting the movement with the experience: “I suggest that he show this to me with his body” (Diary 4, Session 9) and observing the movement experience: “I ask her to repeat a movement that was meaningful to her” (Diary 1, Session 1) |

**Table 4.1: Integration Promoting Clinical Interventions**

**Additional Findings Combining Props or Other Art Modalities in Reference to the Timeline**

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| Intervention | Movement combined with other art modalities | Intervention with reference to the timeline |
| Interpretive movement mirroring | In a session with Gali: “Gali’s movement goes out and in with no ending. To reinforce the separation between the start and ending and the border between them, I suggest incorporating sounds into the experience… I make a sound and she walks up to where the sound ends… I suggest drawing the sound… I suggest moving in a way that expresses the picture she drew… she takes steps, her presence grows stronger…” (Diary 7, Session 13) | Movement interpretation can accompany concrete verbal or emotional interpretation: “Aviv sits and rolls a ball toward me. I send the ball back to him and add words that mirror the way the ball meets various parts of Aviv’s body… he detaches and connects intermittently… He tells me about a detached princess doll who doesn’t know who she is. I say: That’s scary. He says: It’s more sad than scary.” (Diary 5, Session 20) |
| Witnessing based on resonating mirroring. By the advanced stages of treatment, mirroring becomes established as a therapeutic language and thus deepens the patient’s connection to their body and their independent movement in the therapist’s presence. The therapist echoes the patient’s movement as accurately as possible as soon as the patient completes the movement and transitions to the role of witness. |  | “Yair shifts his weight from one leg to the other. I join him and gradually transition to observing him as he continues to move and express himself… the transitions flow and he is immersed in the movement.” (Diary 6, Session 32). The mirroring echoes the patient’s movement in a non-simultaneous way, according to the therapist’s choice of content to be echoed. Contrast this with simultaneous or interpretive mirroring, which creates a variation on the theme.  |
| Movement sequences from parts to a whole, i.e. identifying, joining, and expanding themes using movement, voice, words, or other artistic modalities. This intervention appeared in most of the diaries at the end stages of treatment (n=5). | E.g., in the case of nine-year-old Ella, the therapist invites Ella to focus her attention on the parts of her body and then on the body as a whole using drawing and movement. “I suggest drawing body parts on each of the pieces of paper… I suggest choosing some of the body parts and connecting them into a movement sequence… I repeat each of her movements… she connects the movement sequences she has created into one whole sequence and repeats it several times” (Diary 2, Session 35) | Ten-year-old Aviv: “Aviv enters the room crawling… I suggest that he continue crawling to the huge sheets of paper with a color in each hand. The color leaves traces of his movement on the paper… Aviv identifies shapes in the traces… I encourage him to keep going… Aviv continues and creates a story, as he puts it – a self-portrait.” (Dairy 5, Session 35) |
| Movement sequences between poles using imagery. This is an invitation to experience qualities of movement, images, or emotions on opposite poles, in an aim to strengthen the patient’s sense of being connected to their center. This intervention appeared in most of the diaries (n=6). | Experiencing opposing qualities of movement of holding and letting go creates a physical-emotional change, as with Ella: “I suggest switching to squeezing and releasing the ball… slowly her movement opens up, she becomes more attentive and spontaneous…” (Diary 2, Session 34) | Movement and verbal expressions of the experience of being present and masking following their appearance in transference relationship appeared in advanced stages of treatment in half of the diaries (n=4). Na’ama: “… I suggest playing with being and not being… in ‘being’ she decides to stomp her foot loudly. When she is ‘not being’ she hides.” (Diary 1, Session 24) |
| Focusing to increase awareness |  | This intervention appears in most of the diaries in advanced stages of the sessions. It involves verbally mirroring detachment in the body, focusing on physical sensations, focusing attention on unconscious movements and asking focusing questions (n=5). E.g.: “What just happened? Can you repeat the movement you just did? Is there an image or something that comes up for you? Why did you stop, How did it feel?” (Diary 7, Session 33) Or: “Where is this strangeness in the body?... pointing to the center of the body… What is it doing?... demonstrating a drumming movement near the ear… Why is it bothering you?... Because it wants me to listen to it… What do you do?... look for ways to ignore it, like eat or do something to distract me.” (Diary 7, Session 32) |