



# **Body Talks Movement**

**A Creative Arts-Based Method for Children's Emotional Wellbeing, Confidence and Self-Expression**

**Case Study Report June 2025**



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# Executive Summary

Body Talks Movement (BTM) delivered a week-long creative movement programme in April 2025 with young carers aged 6 to 11, referred through Young Carers, Carers Hub in Lambeth. These workshops, grounded in embodied arts practice, aimed to improve emotional wellbeing, self-confidence, and self-expression. BTM's methodology offers a distinctive, child-centred approach, where movement becomes a language through which children process emotions, build resilience, and discover self-agency. The programme culminated in the co-creation of short dance films, shared with family and peers in a celebratory sharing event.

The evaluation employed a mixed-methods approach, combining pre- and post-workshop surveys with detailed observational notes collected over five sessions. Eleven participants attended, with eight completing both sets of surveys. The analysis focused on key wellbeing indicators: happiness, stress levels, confidence, emotional expression, and social interaction.



## Key Findings

### Emotional and Mental Wellbeing:

Early sessions revealed hesitancy, anxiety, and emotional reserve. By session three, however, children were able to articulate more nuanced feelings—including fear, embarrassment, and vulnerability—and embody those emotions through movement exercises like 'Curl Up & Expand' and 'Hand Dance.' Post-workshop surveys confirmed a general trend toward increased happiness and reduced stress.

## Confidence and Expression:

Participants moved from reluctance to active participation, with many eventually initiating movements, sharing dance ideas, and confidently performing on camera. Activities such as 'Mirroring' and 'Statues' helped children overcome self-consciousness and develop a sense of pride in their creative contributions.

## Peer Support and Social Interaction:

Strong peer relationships emerged over the course of the week. Children encouraged one another during challenging explorations, collaborated on choreography, and formed bonds through shared activities like 'Ceremonial Dance' circles. Participants also showed signs of leadership, with some taking initiative to support quieter peers.

## Regulation and Resilience:

Through breathing, grounding, and mindful movement techniques, children demonstrated improved emotional regulation. They learned to manage overstimulation and calmly re-engage with the group after breaks or transitions. Activities like 'Fast and Slow' and 'Body Scan' promoted awareness of physical and emotional states.

## Inclusion and Access:

Some children faced barriers including fatigue, difficulty focusing, or discomfort with certain activities. Others preferred non-verbal modes of expression (e.g. facial gestures, drawing). Facilitators responded with adaptive support, ensuring all children could participate in ways that felt comfortable for them.

The BTM workshops clearly demonstrated a positive impact on Young Carers' emotional wellbeing, confidence, and peer relationships. Participants became more expressive, engaged, and socially connected over the course of just five sessions. The positive shifts observed in such a short time underline the potential of movement-based interventions to support the mental and emotional health of children, including those in caregiving roles.

*\* The five workshop sessions were originally planned to span over five days but had to be condensed into a four-day schedule. Despite this adjustment, the observations and data collection accurately reflect the intended five sessions, as the activities and evaluations were adapted to fit the revised timeframe.*

*\*\* A young carer is anyone aged 5 to 21 who helps look after a family member or friend, who has an illness or condition. This might be a physical illness; mental illness; learning disability; or some form of addiction. There are organisations throughout the UK that provide support for Young Carers. For this Case Study Body Talks Movement partnered with Carers Hub, Brixton.*

# **Review of Literature**

## **Dance Movement Therapy (DMT) and Emotional Wellbeing**

Dance Movement Therapy (DMT) has been recognised as a beneficial intervention for enhancing emotional wellbeing. Wei and Zhang (2024) highlighted that DMT promotes emotional, social, cognitive, and physical integration, leading to improved mental health outcomes. Similarly, Yang et al (2025) demonstrated that DMT can elicit positive physiological effects, such as improved brain activation and connectivity, which are associated with enhanced emotional regulation.

## **Movement-Based Interventions in Residential Care Settings**

A study conducted during the COVID-19 pandemic explored a blended intervention combining creative and movement-oriented therapy methods with a mental health app for children in residential care. The findings indicated that such interventions are feasible and effective in addressing internalising and externalising symptoms, as well as enhancing resources among children in these settings, Birnkammer and Calvano (2023).

## **Benefit Finding and Coping Skills in Young Carers**

Research has shown that young carers who engage in benefit finding—identifying positive aspects in challenging situations—exhibit better coping skills and mental wellbeing. A study in the *Journal of Youth and Adolescence* found that the ability to notice positive outcomes or personal strengths during challenging times was linked to better coping skills and reduced feelings of helplessness among adolescent young carers (Wepf et al., 2021).

## **Community Wellbeing Programmes for Young Carers**

A narrative review in the *International Journal of Care and Caring* identified targeted community programmes that support the mental health and social wellbeing of young carers. The review emphasised the importance of interventions that are tailored to the unique needs of young carers, highlighting the positive outcomes associated with such programmes, Bibb et al (2024).

## **Dance Interventions and Social Development**

A scoping review published in *Physical Education and Sport Pedagogy* examined dance interventions in educational contexts. The review concluded that dance practices contribute to the theoretical foundations of educational approaches, providing guidance for pedagogical strategies that enhance social development among children, Hancock et al (2024).

The literature highlights the effectiveness of movement-based interventions, such as Dance Movement Therapy (DMT) and dance programmes, in promoting emotional wellbeing and social development among children and young people with specific vulnerabilities or psychosocial needs. These groups include children in residential care, those with neurodivergent profiles (e.g. autism, ADHD), those who have experienced trauma or adverse childhood experiences, and children in schools with high pastoral needs.

These interventions help participants express their emotions, improve coping skills, and build social connections, thereby enhancing their overall mental health and resilience. By tailoring programmes to the unique needs of these young people and incorporating creative movement into support services, significant positive outcomes can be achieved.

A key strength of the BTM methodology lies in its ability to foster skills that extend beyond the studio space. As Dr. Terry Sweeting (CSUN) explains, "BTM offers tremendous transferral... into their families, communities and classroom subjects." This refers to the way BTM empowers children to process and express emotions through movement, equipping them with tools that support emotional regulation, problem-solving, and collaborative thinking. These are foundational competencies not only for mental wellbeing, but also for success in educational settings, peer relationships, and home life. By encouraging reflective engagement and safe self-expression, BTM fosters adaptive behaviours that are transferable into school routines and broader social contexts like youth clubs, afterschool programmes, and community and cultural spaces.

BTM is particularly well suited to pastoral care frameworks and SEND support routines within schools. Its emphasis on non-verbal expression, emotional safety, and self-regulation provides a nurturing platform for pupils who may struggle with anxiety, behavioural regulation, or verbal communication. For instance, breathing and grounding exercises (Self-Regulation Strategies) used in BTM can be integrated into classroom-based emotional check-ins or calm-down routines. Children with sensory sensitivities, often present in neurodivergent learners, benefit from BTM's structured yet flexible activities, such as the 'Ceremony Dance' or 'Hand Dance,' which offer rhythmic, predictable formats that support emotional containment. Additionally, the BTM framework enables teachers and SENCOs to be adaptive in their support strategies, giving children agency and reducing dependency on talk-based interventions alone. These qualities make BTM a valuable and inclusive component of pastoral care, fitting effectively within nurture groups, sensory circuits, and wellbeing interventions commonly used in schools.

# Research Objectives

The Body Talks Movement workshops were designed to assess the emotional, social, and expressive development of a group of young carers aged 6 to 11 years through movement-based, creative activities. The research objectives underpinning this study were structured to explore both measurable and experiential outcomes, drawing from a combination of pre- and post-workshop survey data, observational records, and participant feedback.

## **1. Assess Improvements in Emotional Wellbeing, Confidence, and Self-Expression**

This objective evaluates how the workshops supported children's emotional regulation and reduced stress, while also increasing their self-confidence and willingness to express themselves—verbally, physically, and creatively. By examining pre- and post-survey results, observational data, and participant behaviour during movement activities, the research captures how children moved from hesitancy to active engagement. Indicators such as relaxed body language, participation in improvisation, and leadership in group tasks provide a holistic picture of growth in both emotional and expressive domains.

## **2. Identify Shifts in Social Interaction and Belonging**

Recognising that many young carers experience social isolation, the workshops also aimed to strengthen peer relationships and promote a sense of community. Researchers observed how children interacted with one another—such as their willingness to collaborate, support peers, or participate in group tasks—across multiple sessions. The study aimed to track whether children who were initially withdrawn became more socially engaged over time.

## **3. Explore Participant Experiences and Perceptions**

Finally, the study prioritised gathering qualitative insights into how participants experienced the workshops and what they found meaningful. Observation notes taken by the researchers captured shifts in mood, engagement levels, and emotional breakthroughs, offering a more nuanced picture of impact beyond quantitative measures. These insights are essential for refining future program design and ensuring that the workshops remain inclusive, responsive, and impactful for diverse young carers.

## **4. Assess how improved emotional regulation and confidence transfer into classroom behaviours and peer interactions.**

Emotional regulation helps children manage frustration, anxiety, or over-excitement—skills essential for navigating classroom routines and peer relationships. BTM participants who

gained confidence through movement were more willing to participate, take turns, and express ideas. These behaviours align closely with increased school engagement, reduced classroom disruption, and improved focus. As pupils internalise tools like breathing and grounding, they become more resilient and better equipped to respond calmly in challenging school scenarios. This can foster stronger connections with peers and increase participation in academic tasks.

## **5. Evaluate the suitability of BTM for inclusion within school-based Pastoral Care Strategies.**

BTM offers structured yet flexible content that aligns well with pastoral care objectives: promoting wellbeing, emotional literacy, and social development. Unlike conventional programmes focused solely on talk-based support, BTM uses non-verbal, creative exploration, making it particularly accessible for children who struggle with verbal expression. Its emphasis on safety, self-awareness, and agency fits neatly within existing pastoral systems such as nurture groups or wellbeing interventions. Moreover, the short-term, high-impact format is compatible with school timetables and budgets, offering measurable emotional gains without disrupting academic schedules.



# Design and Methodology

## Design

The Body Talks Movement (BTM) programme was designed with an intentional, scaffolded progression, carefully structured to support young carers aged 6-11 in developing emotional wellbeing, confidence, and self-expression through creative movement. Each workshop session incrementally built upon the previous, creating a cohesive experience that promoted emotional and mental wellbeing, encouraged confidence and expressive exploration, and fostered peer support and social interaction.

The sequence of sessions began by establishing emotional safety and group cohesion through rituals such as 'The Ceremonial Dance,' designed to foster initial trust and comfort. Gradually, more complex and emotionally expressive activities were introduced, integrating movement with emotional awareness and peer interactions, while also guiding children to become more grounded and fully engaged in the present moment.

Techniques such as 'Curl Up & Expand,' 'Hand Dance,' and improvisational explorations encouraged participants to explore and articulate emotions non-verbally. By later sessions, the children were confident enough to develop personal choreographies and narratives, culminating in the creation of dance films that captured their individual and collective journeys.



## Methodology

The evaluation of the BTM workshops adopted a robust mixed-methods approach, aligning closely with the programme's core objectives of assessing emotional wellbeing, self-confidence, expressive capability, and social interaction.

## **Quantitative Data Collection:**

Pre- and post-workshop surveys were employed to quantitatively measure changes in key wellbeing indicators, including emotional balance (stress-to-happiness scores), confidence in movement, self-expression, and feelings of social connectedness. Surveys utilised clear, child-friendly scales (emoji and numerical), ensuring accessibility and ease of understanding for young participants.

Developing awareness of the body can have a profound effect on the way a person manages their lives. Gaining a sense of trust in the body can strengthen a person's sense of self and restores their innate capacity for wellbeing.

## **Qualitative Data Collection:**

In addition to quantitative measures, comprehensive qualitative data was gathered through:

- **Observation and Reflection Forms:** Facilitators completed detailed observational records during each session, noting individual behaviours, engagement levels, emotional expressions, and peer interactions. Structured behavioural checklists were integrated to systematically track changes across sessions.
- **Participant Voice:** Informal check-ins and feedback sessions allowed participants to express their feelings, preferences, and reflections on activities, providing nuanced insight into their personal experiences and perceptions of the workshops.
- **Case Studies:** Individual participant journeys were documented in-depth to highlight significant behavioural and emotional transformations observed throughout the programme. These narratives offered vivid illustrations of the programme's impact.

## **Data Analysis:**

- **Quantitative Analysis:** Pre- and post-workshop survey responses were analysed statistically to identify significant shifts in emotional wellbeing, confidence, and social connectedness. Descriptive statistics such as mean score changes and percentage improvements were used to summarise overall group outcomes.
- **Qualitative Analysis:** Observation notes, behavioural checklists, and participant feedback were subjected to thematic analysis, identifying recurring patterns, emergent themes, and notable individual and group dynamics. This process illuminated the experiential aspects of participant growth, complementing the quantitative findings.

The integration of quantitative and qualitative data provided a comprehensive evaluation of the BTM workshops, clearly demonstrating the programme's effectiveness in supporting emotional wellbeing, expressive confidence, and social connections among young carers. This thorough, mixed-method approach ensured that the assessment captured both measurable outcomes and rich, qualitative insights, ultimately informing the continued development and adaptation of the BTM programme.

# Summary of Findings and Inferences

The Body Talks Movement (BTM) workshops provided a transformative experience for young carers aged 6-11 years by effectively addressing key areas of emotional and mental wellbeing, self-confidence, expressive capacity, and social connectedness.

## Emotional Wellbeing

Participants who initially exhibited signs of anxiety, hesitancy, and emotional reserve demonstrated significant improvements in emotional openness and wellbeing by the programme's end. Early reluctance transitioned to enthusiastic engagement as participants actively expressed complex emotions through structured exercises like 'Curl Up & Expand' and 'Hand Dance.' Notably, pre- and post-workshop surveys reflected increased happiness and reduced stress levels, with observational notes consistently indicating greater emotional freedom and enjoyment in the latter sessions.

## Self-Confidence and Expressive Agency

Participants evolved from passive observers to confident, proactive contributors. Facilitated activities, particularly 'Mirroring' and improvisational dance, empowered children to take creative risks, significantly enhancing their confidence and self-expression. By the final sessions, most participants were independently initiating movements, showcasing personal narratives confidently, and demonstrating pride in their contributions.

## Social Connection and Peer Interaction

The workshops successfully fostered a supportive and cohesive group dynamic. Initially tentative interactions blossomed into vibrant peer connections, marked by mutual encouragement, collaboration, and empathy. The creation of shared choreography and group performances provided a collective sense of achievement and reinforced peer bonds, dramatically reducing feelings of social isolation.

## Emotional Regulation and Resilience

Self-regulation strategies and mindful movement techniques, such as breathing exercises and grounding practices, enabled participants to better manage stress and maintain engagement even when faced with emotional or sensory overload. These tools proved effective in promoting resilience, as evidenced by improved behavioural responses during transitions and sustained engagement throughout each session.

## Barriers and Inclusivity Considerations

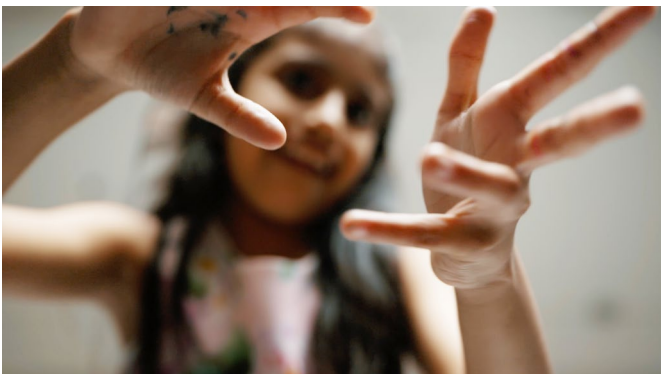
While largely positive, the evaluation identified attendance variability and individual engagement challenges as key considerations. The unpredictable nature of caregiving roles contributed to inconsistent attendance, highlighting the need for flexible scheduling, supplementary supports, and tailored interventions for children demonstrating lower initial engagement. Facilitators responded effectively to diverse participant needs, ensuring inclusive participation through differentiated and adaptive approaches.

## Individual Transformations

Distinctive participant stories underscored the profound personal impacts of the programme. Examples include a reserved child becoming an expressive leader, a hesitant participant developing confidence through collaborative tasks, and a distracted child emerging as a peer mentor. These case studies vividly illustrate the programme's capacity to unlock personal potential and foster individual empowerment.

## Overall Inference

The BTM workshops successfully met and exceeded their objectives by positively transforming emotional, social, and expressive outcomes for the young carers. By integrating creative movement with emotional exploration and social connectivity, the programme provided participants a valuable, supportive environment to thrive. Future iterations should continue to address practical considerations identified here, ensuring ongoing accessibility, inclusion, and sustained participant engagement.



# Data Analysis

## Pre and Post Workshop Surveys

### 1. Emotional and Mental Wellbeing of Young Carers

#### Finding: Improved Emotional Balance

- A 'stress-to-happiness' score was calculated to assess changes in emotional balance. Most participants showed improved scores, indicating increased happiness and reduced stress.
- Notably, some participants with initially low emotional scores exhibited significant improvements.

#### Inference

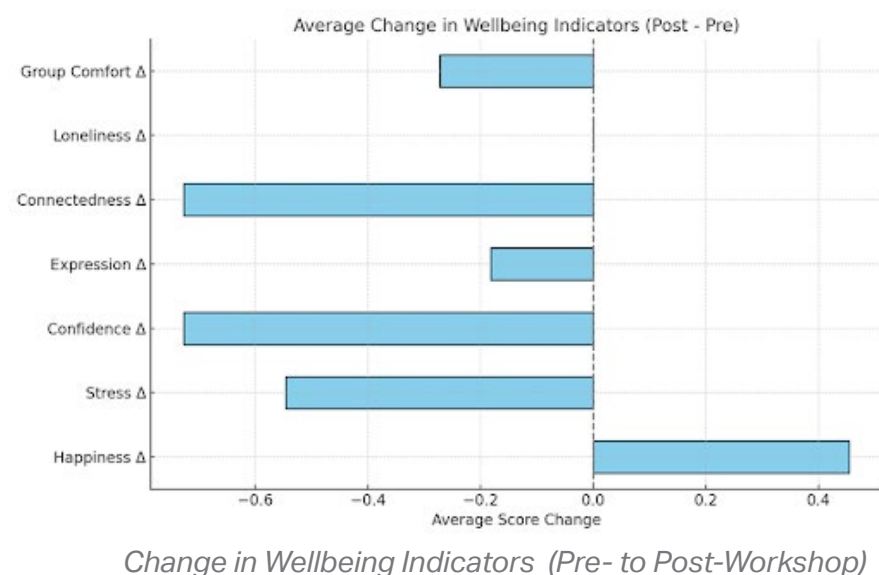
The workshops appear to have created a positive and safe space, reduced emotional stress and fostered a sense of joy among the young carers.

#### Finding: Enhanced Self-Expression

- Observation data and post-workshop survey responses indicated that participants felt increasingly comfortable expressing themselves.
- Increases were recorded in metrics such as 'Emotional Expression' and 'Comfort in Group Work.'

#### Inference

Movement-based activities can serve as an effective tool for non-verbal self-expression, especially for children who may struggle to articulate emotions in traditional ways (and improves emotional eloquence in all children.



The chart shows how children's responses changed from before to after the BTM workshops.

- Positive bars (like "Happiness") indicate an increase in positive feelings.
- The Negative bars (such as for "Stress" or "Anxiety") also reflect positive outcomes — for example, a drop in anxiety means the child is feeling less stressed, which is a good result.
- This is because of the way some of the questions where a lower score is preferred. For example:
  - "How often do you feel stressed or worried?"
  - If a child answered "Always" before (high score = bad) and "Rarely" after (low score = better), their score went down — which is good!

In summary, even though most bars in the graph are negative, they actually show that the children were less anxious, less withdrawn, and more comfortable after participating in the programme.

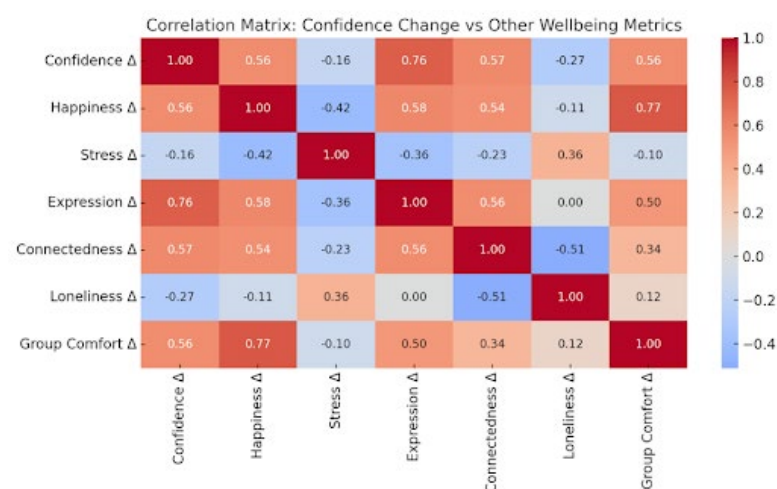
## 2. Impact on Confidence and Social Interaction

### Finding: Rising Confidence

- Most participants recorded increases in their "Confidence in Movement" and general willingness to try new things.
- Correlation analysis showed strong links between increases in confidence and improvements in emotional expression and group comfort.

### Inference

Confidence-building through movement correlates positively with broader emotional and social development, suggesting that even a short intervention can yield notable benefits.



Correlation Matrix: Confidence Change vs Other Wellbeing Metrics

The diagram above is a correlation matrix, a "relationship map" showing patterns of change among aspects measured in children during workshops.

- Each row and column represents an aspect measured (e.g., confidence, emotional expression, group comfort), with intersections showing their connections.

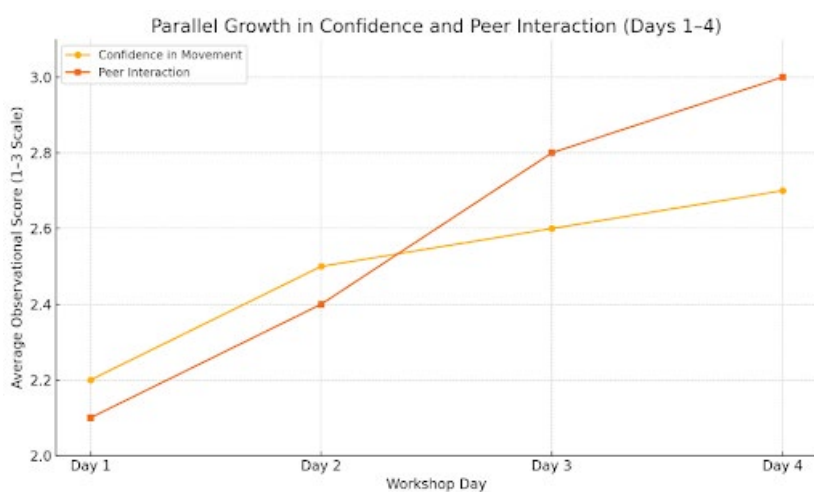
- The numbers, called correlation coefficients, range from -1 to +1:
- +1: Perfect positive link (e.g., as confidence increases, so does emotional expression or group comfort).
- 0: No link.
- -1: Perfect negative link (one increases as the other decreases—undesirable here).
- Many coefficients ranged between +0.60 and +0.90, indicating strong positive relationships (e.g. increased confidence correlated with better emotional expression and peer comfort).
- Colours visually represent the strength of links: darker/brighter colours mean stronger relationships (closer to +1), while lighter shades indicate weaker links (closer to 0). Simply put, more colour equals a stronger connection.

## Finding: Improved Group Interaction

Participants who reported improved confidence also showed higher gains in group collaboration and peer interaction. Parallel Growth in Confidence and Peer Interaction.

## Inference

As confidence grew, children felt safer and more empowered to participate socially, reducing isolation often experienced by the young carers.



Growth in Confidence and Peer Interaction Over Time

This graph shows the steady improvement in children's confidence in movement and peer relationships over four workshop Sessions. As confidence (yellow line) increased, so did positive interaction with others (orange line) — demonstrating how emotional and social development progressed in parallel during the programme.

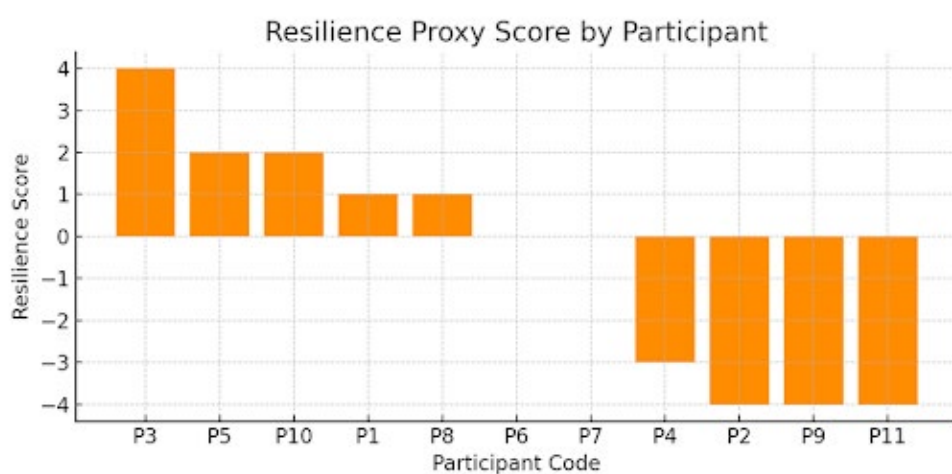
### 3. Resilience and Responders

#### Finding: Proxy for Resilience

A resilience score combining Confidence Increase, Stress Reduction, and Group Comfort was created. Some participants stood out with high scores, suggesting they gained significantly from the programme.

#### Inference

While all participants showed benefits, those with initially lower scores tended to experience the most transformation, indicating that such programs may be particularly impactful for the most vulnerable.



*Resilience Proxy Score by Participant*

To better understand how different children responded to the workshops, participants were grouped into two categories: *Responders* – children who showed a clear increase in confidence over the course of the programme, *Non-Responders* – children who did not show a noticeable increase in confidence.

Each bar represents one child. A higher bar means that child showed strong progress across all three areas – a good sign that the programme helped boost their emotional resilience. A bar below zero doesn't necessarily mean that the child did not benefit at all – but that their measured wellbeing did not improve across all indicators used in this score. These children may need extra support or different approaches.

#### Inference

**Confidence may be a key factor driving broader positive change.** Future programmes might focus more on strategies that promote confidence-building early on.

## 4. Barriers to Participation and Inclusivity

### Finding: Attendance and Engagement Gaps

Fluctuations in attendance and some negative scores in metrics like 'Group Comfort' and 'Connectedness' suggest potential barriers such as emotional fatigue, social anxiety, or logistical constraints.

### Inference

Some young carers may have struggled with consistency due to caregiving responsibilities or personal challenges. Flexible formats, transport support, or check-ins may be necessary to ensure inclusion. These challenges should be addressed by organisations such as Young Carers and Carers Hub.

## Observations

### Case Story 1: Participant (12) – From Withdrawal to Expression

**Starting point:** At the beginning of the programme, Participant (12) was markedly reserved. She spoke softly, avoided eye contact, and positioned herself at the edges of the group. During the first session, she barely moved during creative tasks and appeared uncertain when asked to engage in group activities. Initial observation notes described her as "hesitant and quietly withdrawn."

**Development:** Through repeated exposure to the 'Ceremony Dance' and other grounding rituals, she began to mimic small movements and look towards others for cues. By Session 2, she smiled during mirroring activities, and although her movements remained contained, they began to show intentionality and rhythm. The turning point came during a partner improvisation task in Session 3, where she briefly took the lead in a hand dance. Facilitators noted a clear shift in her posture—from closed and hunched to more open and aligned.

**Outcome:** By Session 5, she confidently shared her solo movement piece on camera, incorporating a slow spiral and expressive arm gestures that were unique and purposeful. Her post-session reflections included the statement: "I didn't think I'd show anything, but I liked how it felt when I did it." Her transformation highlighted the importance of sustained safety and encouragement in unlocking expressive potential.

### Case Story 2: Participant (15) – Confidence Through Collaboration

**Starting point:** Participant (15) began the week anxious and visibly overwhelmed by the group setting. She required ongoing adult reassurance and was observed clinging to familiar

adults or peers. During initial warm-up activities, she followed along but avoided initiating or speaking out. Her engagement was minimal, and she rarely contributed to group reflection.

**Development:** Gradual peer support during small-group activities encouraged her to experiment. By Lesson 2, she began actively listening and offering movement ideas during improvisation. Her confidence grew through the 'Mirroring' task in Lesson 3, where she partnered with a peer and initiated a flowing sequence. A breakthrough occurred when she took charge of a choreographic task in Lesson 4, directing two others in a short movement phrase based on emotions.

**Outcome:** In the final session, Participant (15) co-led a choreographed dance, appearing composed and energised. In her filmed sequence, she used broad sweeping gestures and included others in a synchronised rhythm, reflecting leadership and comfort with visibility. In her words: "I didn't think I'd be good at this, but I liked showing something we made together." Her development illustrates the impact of peer trust and collective ownership in cultivating expressive confidence.

### **Case Story 3: Participant (7) – Emerging as a Peer Leader**

**Starting point:** Participant (7) displayed moderate engagement early on but often became distracted and needed reminders to stay focused. She participated in activities but rarely initiated or sustained attention for long. During the Ceremony Dance, she mimicked others but lacked consistency or timing.

**Development:** As the programme progressed, (7) became increasingly focused during structured improvisation. In Lesson 2, she asked thoughtful questions and responded well to roles that offered responsibility. By Lesson 3, she showed clear support for peers—offering help when a classmate forgot a movement and encouraging others with verbal praise. In the group choreography session, she suggested movement transitions and led a small team through timing sequences.

**Outcome:** By Lesson 5, (7) confidently introduced and narrated her dance story on camera, showing humour, composure, and creative flair. Her movements had precision and expression, and she encouraged shy peers to participate in group tasks. Observers noted a transformation from a passive participant to a peer role model. Her progress affirmed the potential of BTM to unlock leadership and empathy in children with initially variable focus.

### **Case Story 4: Participant (9) – Navigating Sensory Sensitivity and Finding Emotional Voice**

**Starting point:** Participant (9) presented with clear indicators of sensory sensitivity. She often covered her ears during loud music and appeared hesitant to join group activities. Her movements were minimal, and she gravitated toward the edges of the room, avoiding direct engagement with others.

**Development:** Facilitators observed that (9) responded positively to grounding activities such as deep breathing and floor-based improvisations. When introduced to mirroring explorations, she began initiating slow, deliberate gestures and displayed comfort when

partnered with a peer who allowed for quiet interaction. By Lesson 3, (9) was able to sustain a movement dialogue through the Hand Dance, maintaining eye contact and synchronisation for the first time.

**Outcome:** By the end of the programme, (9) performed a solo sequence in the filmed session, incorporating smooth, wave-like motions that she had independently developed. Her post-session reflections, transcribed with support, revealed that she felt “less scared” and “enjoyed doing it my way.” This transformation illustrates how BTM’s non-verbal, trauma-informed approach allowed a neurodivergent child to participate meaningfully and safely, expressing her emotions through movement on her own terms.

## Recommendations

Overall, the trend across all five sessions is very positive. Participants as a group moved from moderate levels of wellbeing and participation on Session 1 to high levels on nearly all metrics by Session 5. This suggests that the Body Talks Movement workshops had a tangible beneficial impact on the young carers’ emotional state, confidence, and social skills within the short span of the program.

## Practical Barriers and Inclusion Considerations

While the outcomes were largely positive, the observations and data also shed light on some **practical barriers to participation** and areas to consider for making the programme as accessible and inclusive as possible:

- **Attendance and External Responsibilities:** There were fluctuations in attendance over the 5 Sessions. Notably, Session 2 had fewer participants (several of the Participant Codes show no data on that Session). This could indicate that some young carers faced difficulties in attending all sessions – possibly due to their caregiving duties at home, scheduling conflicts, or fatigue. Young carers often have unpredictable responsibilities that might prevent consistent attendance. This suggests the need for flexible scheduling or catch-up sessions. To improve inclusivity, future programmes might coordinate with families to find optimal times, provide reminders or transportation, or even offer hybrid participation options if a child must stay home (e.g. joining via video for a low-activity portion).
- **Initial Anxiety or Shyness:** At the start (Session 1), a few participants were very reserved (low initial mood, low engagement) which could be due to anxiety, unfamiliarity with the group, or general stress carried from their caregiving role. This is a barrier to getting the full benefit of the session. The programme addressed this by fostering a supportive, non-judgmental environment – as seen by those same children becoming engaged by later Sessions. In future implementations, facilitators might incorporate ice-breakers and trust-building exercises early on to help shy participants open up faster. Ensuring that each child feels safe and not singled-out is key. The use of gentle encouragement (which was largely successful, given all responded by Session 5) should continue. Additionally, some children might benefit from one-on-one check-ins before or after sessions to help them feel seen and supported, especially if they arrive in a low mood.

- **Physical & Emotional Exhaustion:** Young carers might come to sessions tired or stressed. One participant, for example, started Session 1 with a very low energy/mood. These workshops are movement-based, so while they can energise, they can also be tiring. It is important to allow breaks and provide snacks or water to keep energy up. An inclusive program would be attentive to signs of fatigue – the observer notes (though not extensively recorded in the data) likely would capture if a child was struggling physically. Going forward, integrating short rest periods or mindfulness cool-downs can help ensure the experience is positive for all energy levels. This also ties into emotional regulation; giving participants a moment of calm, if they feel overwhelmed, can prevent dropout or disengagement.
- **Accessibility for Different Abilities:** Although not explicitly noted in the data, any group of children will have varying physical abilities or learning needs. An inclusive movement programme should adapt activities so that everyone can participate comfortably. For instance, offering alternative movements for those who might have physical limitations, or using visual and verbal cues to accommodate different learning styles. The consistent high engagement suggests that the activities were broadly accessible, but continued attention to adaptive techniques will ensure no one feels left out. Also, being mindful of cultural differences in comfort with dance or touch is important (especially as some young carers might come from diverse backgrounds). The strong peer collaboration by the end implies that these factors were navigated well in this case.
- **Support Network and Follow-Up:** To truly support the young carers, the workshops should be part of a larger support system. One barrier to lasting impact is if the child leaves the session back into a stressful environment without outlets. While outside the scope of the observation form, it's worth noting that connecting participants to ongoing clubs or resources can help maintain their wellbeing gains. The high confidence and social connection achieved in 5 sessions are wonderful and linking this to further opportunities (like regular meet-ups or creative activities) would reinforce resilience. In essence, accessibility isn't just about attending the workshop, but also about ensuring the programme's benefits are sustained – for example, providing take-home materials or techniques (breathing exercises, simple dances) the young carers can use when under stress at home.

**The Body Talks Movement workshops had a positive impact on this group of 6–11-year-old young carers,** improving their emotional wellbeing, confidence, and social connectedness within a short time. The data shows reductions in stress behaviours and increases in happiness, as well as enhanced self-expression and peer support. Addressing practical barriers – mainly around attendance, initial engagement, and individualised needs – can further improve the programme. With these considerations in mind, such movement-based workshops can be an accessible and inclusive outlet for young carers to relieve stress, build resilience, and express themselves freely, ultimately supporting their mental and emotional health. The trends observed here support the value of integrating creative movement interventions for vulnerable youth, echoing research that dance/movement therapy can decrease anxiety and boost social-emotional skills. Continued refinement of the programme (flexibility, support mechanisms) will ensure that no child is left behind and every participant can benefit fully from this empowering experience.

# Conclusion

The Body Talks Movement (BTM) workshops had a measurable and meaningful impact on the young carers who participated, with clear improvements in Emotional Wellbeing, Confidence, and Social Engagement over just five sessions. This intervention model, however, is not limited to the context of young carers. Its design, structure, and outcomes suggest significant potential for wider application in both mainstream and special educational settings.

BTM is particularly well suited to schools where the emphasis on emotional literacy, self-regulation, and peer collaboration aligns with both academic and pastoral goals. Its use of movement and non-verbal expression offers an inclusive pathway for children with a wide range of communication styles and neurodiverse profiles.

Body Talks Movement (BTM) offers a creative, evidence-informed approach that supports children's emotional wellbeing, confidence, and social connection through movement-based activities. Although formal costings for BTM workshop packages are still being developed, early evaluations indicate that the programme delivers measurable benefits within a short timeframe (typically 4–5 sessions). This positions BTM as a promising, cost-conscious complement to existing pastoral and wellbeing initiatives. Its adaptable model aligns well with funders' priorities—providing inclusive, high-impact support for children with additional emotional or social needs, while offering potential for scalable integration into school enrichment weeks, recovery programmes, or targeted community interventions.

Importantly, BTM demonstrates effectiveness within a short timeframe—typically just 4 to 5 sessions—making it well suited for integration into enrichment weeks, arts residencies, and targeted pastoral care initiatives. Its adaptable delivery model and evidence-backed outcomes offer school leaders, local authorities, and funders a scalable, creative solution to support children's emotional development, social connection, and self-confidence. BTM is particularly relevant for schools looking to enhance SEND strategies or maximise the impact of pupil premium funding, as it provides inclusive, high-impact support for children with additional emotional, social, or learning needs.

In conclusion, the BTM model blends artistry with psychosocial outcomes in a format that is inclusive, flexible, and ready for expansion into wider educational and community contexts.

Suitability for primary schools and special SENDS schools.

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# Appendices

## 1. Academic and Theoretical Foundation for the BTM Method

BTM is underpinned by a belief in the power of the body as a site of emotional, cognitive, and social development. According to Dr. Sweeting, “children are invited to feel what they feel but also to expand and be unique about ways to come up with solutions,” underscoring the method’s alignment with both critical thinking and self-regulation through movement. This reflects a departure from traditional models of dance education that emphasise form over function—instead, BTM situates movement as a language for emotional articulation and psychological inquiry.

Traditional Dance Education	Body Talks Movement (BTM)
Focuses on correct technique, steps, and form	Focuses on movement as a language for emotional expression
Emphasis on performance and external appearance	Emphasis on internal experience, emotional articulation, and self-inquiry
Often involves set choreography and replication of movements	Encourages improvisation, self-directed movement, and creative exploration

Success measured by accuracy, precision, and conformity	Success measured by emotional engagement, self-confidence, and personal growth
Teacher-led, with students expected to follow instructions	Facilitator-supported, with children given agency to co-create and lead movement
Aimed at achieving aesthetic standards or competitive outcomes	Aimed at supporting emotional wellbeing, resilience, and social connection
Minimal focus on emotional or psychological processes	Central focus on emotional regulation, self-awareness, and peer empathy

A foundational principle in BTM is the creation of emotionally safe environments. Children enter a space where their internal states are respected and expressed physically without fear of judgement. Dr. Sweeting notes that “the safe environment created by BTM aligns with trauma-informed practices,” This ethos is vital for children from vulnerable contexts—including those with caregiving responsibilities or neurodivergent traits.

Improvisation is another key aspect of BTM, functioning not just as a creative device, but as a developmental tool. When children respond in real-time to stimuli—be it music, a partner’s movement, or an emotional cue—they are engaging in what Sweeting describes as “a conversation with the body.” This promotes emotional literacy and encourages spontaneous collaboration, fostering empathy, perspective-taking, and body confidence, with benefits lasting beyond the workshop into lifelong emotional literacy.

Repetition and scaffolded structure in the programme also serve pedagogic and psychological goals. As participants return to familiar sequences like the Ceremony Dance, they gain mastery and emotional grounding, which enhances both engagement and a sense of agency. This is especially meaningful for children who may experience unpredictability or dysregulation in other areas of life.

BTM’s impact goes beyond school enrichment; it contributes significantly to holistic child development. By encouraging creative expression, social connections, self-regulation, and emotional resilience, the programme combines insights from dance education, developmental psychology, trauma-informed care, and social-emotional learning. Additionally, activities such as making dance films help children develop skills in self-representation.”

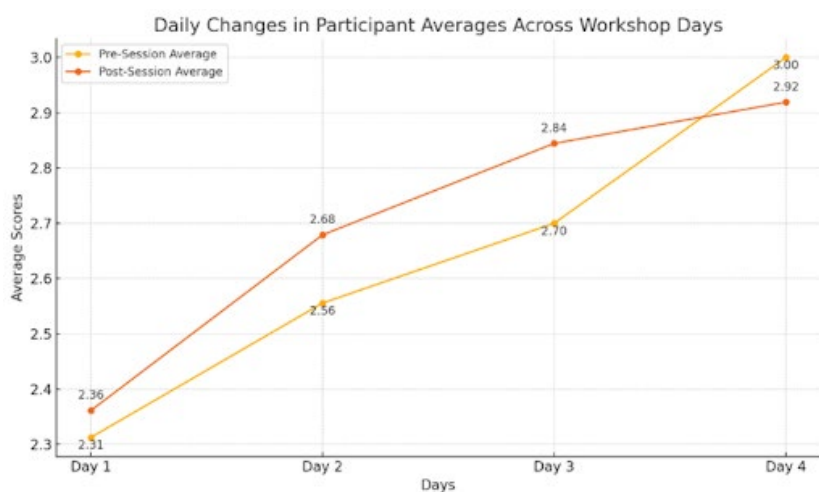
In summary, the BTM method exemplifies how movement-based practices, when delivered with therapeutic and educational intentionality, can produce measurable psychosocial benefits for children. Dr. Sweeting’s observations and the research findings from this study reinforce the programme’s status as a scalable and evidence-informed approach to wellbeing support in both educational and community settings.

### **Key Thematic Pillars of the BTM Method:**

- Safe Space & Emotional Safety
- Exploratory Improvisation & Self-Regulation
- Creative Dialogue Through Movement
- Scaffolded Confidence Building
- Transferability to Other Domains (Literacy and Numeracy, Home, Community)

## 2. Quantitative Trends from Session Observations

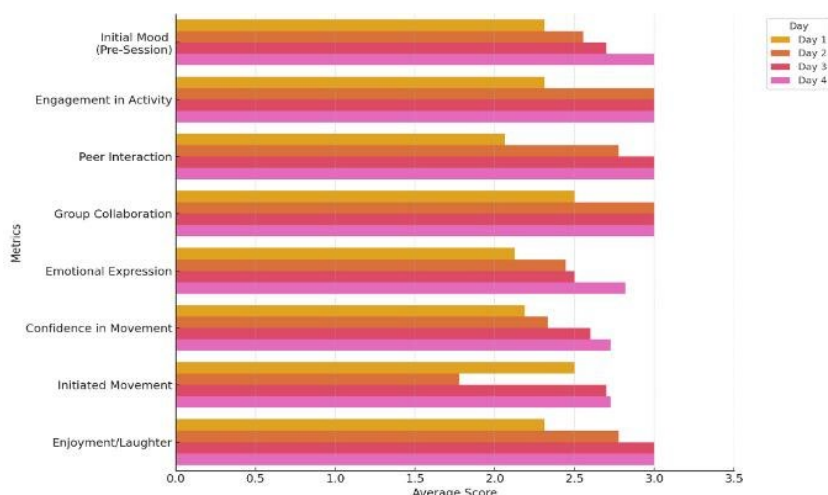
### Outcomes between Session 1 and Session 5



Daily Changes in Participant Averages Across Workshop Sessions

The chart illustrates an **upward trend in participant wellbeing, emotional regulation, and social engagement across consecutive sessions**. Initial sessions primarily establish basic emotional safety and participant comfort, while significant growth in confidence, expressive capacity, and peer interactions are most visible from mid-point onwards. This **cumulative impact indicates that sustained engagement over multiple sessions is essential for deeper, lasting behavioural and emotional outcomes**, justifying investment in longer-duration workshop models.

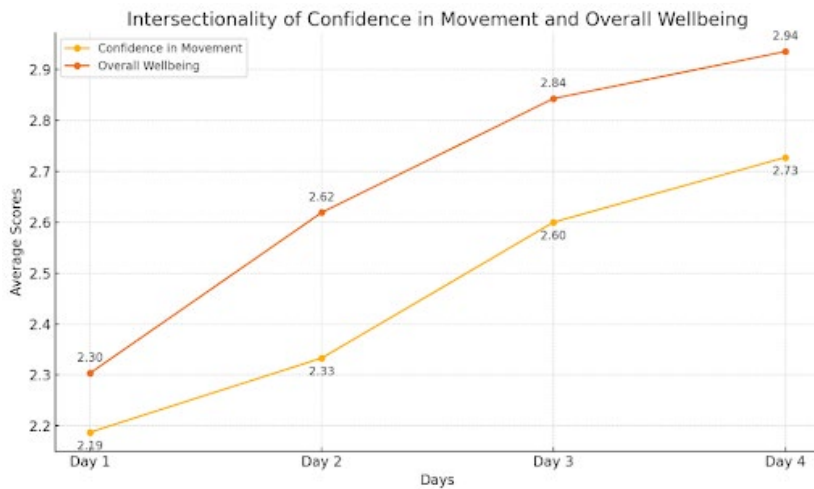
## Key Outcomes Across All Five Sessions



Comparisons of Key Outcomes in Five Sessions Across All Four Sessions

The chart above compares **Key Outcomes** across all five sessions of the workshops. Each metric clearly shows progression from Session 1 through to Session 5, highlighting the **steady improvements in participant mood, engagement, emotional expression, and confidence**.

## Confidence in Movement and Overall Wellbeing



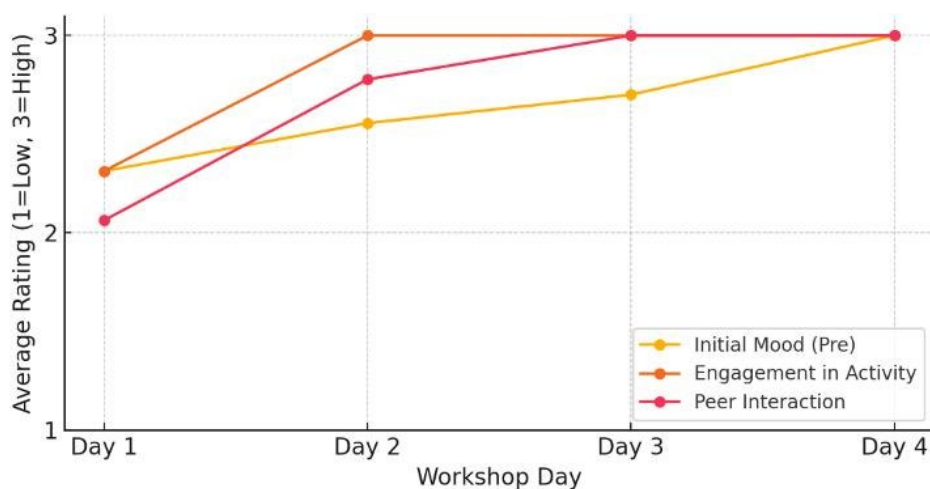
*Intersectionality of Confidence in Movement and Overall Wellbeing*

The graph above shows the intersectionality between **Confidence in Movement and Overall Wellbeing** across the five sessions. The graph demonstrates how improvements in movement confidence closely align with overall improvements in wellbeing, suggesting a strong relationship between these two aspects.

## 3. Categories

### Emotional Wellbeing & Stress Reduction

By the final Session, participants showed a clear reduction in stress-related behaviours, such as hesitation and withdrawal, and displayed increased comfort and interaction with their peers. During Session 1, only 40% of the group were fully engaged in activities, while 60% appeared shy or hesitant. As the sessions progressed, engagement steadily improved, and by Session 5, all participants were highly engaged and actively interacting with their peers. Every participant reached the highest score of 3 for engagement and peer interaction, marking significant progress from the first session.



*Trend in Wellbeing and Engagement Metrics*

*Average scores for initial mood (pre-session), engagement in activities, and peer interaction across the 5 sessions. Higher scores (closer to 3) reflect positive mood, active participation, and social interaction. Notice the strong upward trend – by Session 5, engagement and peer interaction reached the maximum level for all participants, reflecting reduced stress and withdrawal.*

Alongside behavioural engagement, **initial mood** scores (self-reported or observed before each session) also improved over the program. On Session 1, most young carers arrived with only moderate mood (many rated 2 on a 1–3 scale) and one participant showed a low mood (score 1, indicating possible stress or fatigue). By Session 5, **every participant reported a high pre-session mood** (score 3). This suggests that as the workshops progressed, the children came in feeling **happier and more relaxed**, potentially because they anticipated the positive experience or had improved overall Wellbeing. In other words, their baseline stress or tension before the sessions decreased over time. This progression in participants' initial mood and their eagerness to engage highlights improved emotional regulation and resilience. Those who were initially anxious or hesitant grew noticeably more positive and willing to participate as the sessions advanced.

### Post-Workshop Happiness and Relaxation

The workshops appeared to have a positive effect on **happiness and relaxation**, as evidenced by observed enjoyment and laughter during sessions. In Session 1, most participants showed only some enjoyment (Score 2), and only a few were frequently laughing or visibly having fun (Score 3). By Session 5, all participants were observed to be thoroughly enjoying themselves, with expressions of laughter and enjoyment consistently rated at the highest level. Researchers noted a significant increase in smiles, laughter, and an overall relaxed attitude among the group by the end of the programme.

Children who had been quiet or tense initially were seen **laughing, joking, and moving freely** with others by the end of the programme. This general uplift in mood aligns with stress reduction: as they became more comfortable, the participants' happiness after each workshop increased steadily. Even the informal post-session check-ins showed that participants felt **calmer and more relaxed** after the movement activities. This outcome is consistent with broader findings that movement and dance-based interventions can reduce anxiety and improve mood.

### To summarise the Wellbeing impact:

- Stress-related behaviours decreased significantly (fewer signs of nervousness or withdrawal).
- Positive mood indicators increased (higher pre-session mood and more laughter/enjoyment post-session).

The young carers as a group became more relaxed and emotionally open by the final Session, suggesting the workshops provided an effective outlet for stress relief and emotional regulation.

## Confidence & Self-Expression

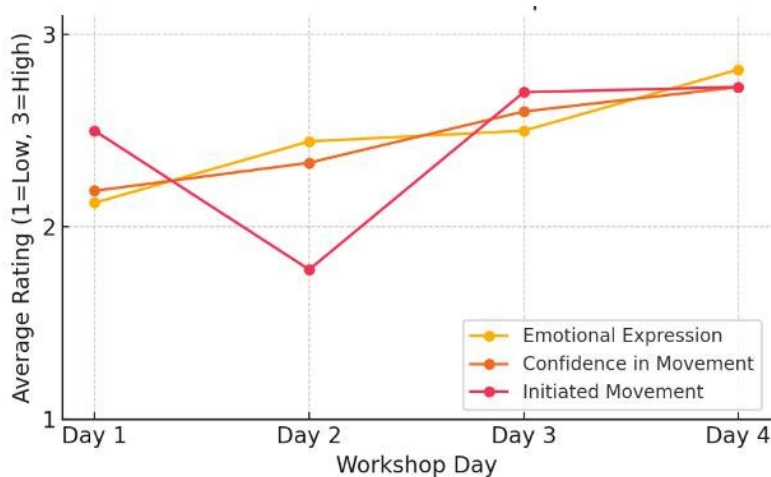
The workshops fostered active participation, with notable improvements over the five sessions. At session 1, about half the children hesitated to engage fully, requiring encouragement. By Session 2, all attendees were actively participating, with engagement scores reaching 3.0. Confidence in initiating movements also grew steadily; initially, only half the group took the lead in creating dance moves, but by Session 5, 73% of participants confidently initiated their own movements. This reflects significant **growth in self-expression and agency through the programme**.

In terms of raw numbers, no participants had a low engagement by the final session. All were eager to join each activity, demonstrating **increased involvement and motivation**. Children who were once on the side-lines became active contributors. They also grew more comfortable responding to the facilitator's prompts – the Responded to Encouragement metric was high (3) for all by the end, indicating that if any encouragement or cue was given, they readily took it and ran with it. In short, the workshops fostered an environment where the young carers felt safe and confident to participate fully.

## Emotional Expression and Confidence Growth

The programme's effect on **self-expression and confidence** is evident in the gradual rise of scores related to expressing emotions and moving confidently. On Session 1, observers rated some children low in Emotional Expression – about four participants showed very little emotional expression through movement (perhaps moving stiffly or with guarded body language). By Session 5, none were rated low; in fact, the vast majority (82% of the group) reached a high level of emotional expression, freely using body movement to convey feelings or creativity. This indicates that the workshops helped unlock their **willingness to express emotions** non-verbally. Many participants grew visibly more expressive, with finer nuanced emotional communication, using broader movements, facial expressions, and creative gestures in the dance exercises as the Sessions progressed.

Similarly, **confidence in movement** improved for nearly everyone. Initially, a few children lacked confidence (three had a low confidence score on Session 1, perhaps unsure or self-conscious in movement). The group's average Confidence in Movement score rose from about 2.2 on Session 1 to 2.7 by Session 5. By the final session, no one was rated low; roughly 8 out of 11 participants demonstrated high confidence in their movements, with the remaining showing moderate confidence. This means that most of the young carers were moving boldly and assuredly by Session 5 – for example, volunteering to perform their dance moves or not hesitating to try new exercises. Notably, one metric called Increased Confidence (which gauges whether the child's confidence grew during the session) was marked at the highest level for all participants by Session 5, whereas on Session 1 some children showed only slight increases. In essence, **each session built on the last** – as the children experienced success and positive feedback in the workshops, their self-confidence accumulated. By the end of the programme, observer records and participant feedback clearly demonstrated increased confidence among the young carers. Specifically, observational checklists showed substantial improvement in participants' willingness to initiate movement and perform in front of peers, and post-workshop survey results confirmed higher self-reported confidence scores compared to initial assessments.



*Trend in Confidence and Self-Expression Metrics*

*Trends in average scores for self-expression and confidence metrics over the 5 sessions. Emotional Expression and Confidence in Movement steadily increased, indicating growing ease in expressive movement. Initiated Movement dipped on Session 2 (smaller group) but climbed by Session 5 as more participants began creating their own movements. Higher values signify greater confidence and willingness to express oneself. The overall upward trajectories highlight the workshops' positive impact on participants' self-confidence in movement.*



These quantitative trends are reinforced by qualitative observation. By the final dance-sharing session, participants not only followed the routines but often, which reflects a significant leap in individual agency. The atmosphere by Session 5 was one of celebration of each individual's movement "voice," a core goal of the Body Talks Movement program. In sum, the **workshops effectively boosted the young carers' confidence and self-expression**, turning cautious beginners into enthusiastic dancers. This outcome echoes research that Dance Movement Therapy can improve interaction with their peers, underlining the value of such interventions for this group.

### Social Interaction & Group Dynamics

Beyond individual improvements, the programme had a strong impact on **peer connection and social skills**. Many young carers initially did not know each other well, and/or felt shy in a group setting. On Session 1, observed Peer Interaction was mixed: several participants interacted minimally (stuck close to siblings or stayed quiet), resulting in an average peer

interaction score just above 2 (on a 1–3 scale). Likewise, Group Collaboration – which covers working together in group activities – started at an average of 2.5 at session 1, with some children hesitant to engage in group tasks.

As the workshops progressed, the participants grew closer through movement. By Session 3, their peer interaction scores reached a perfect 3.0, showing that everyone was socially engaged—talking, laughing, or dancing together.

They created a supportive environment; for instance, by Session 3, all participants felt comfortable pairing up or holding hands during group activities, something some had been hesitant about at first.

Group Collaboration also peaked at 3.0 by Session 2 and stayed high as they worked well together—creating dance routines, cheering each other on, and solving problems as a group. By the final Session, the group felt like a close-knit team: inclusive, supportive, and cooperative.

Observations show participants started to support each other more over the duration of the workshop programme – for example, if one child was hesitant, another would gently encourage them, demonstrating an increase in **peer support and empathy**. The high scores in peer interaction by Session 5 reflect not just willingness to chat, but a comfort and trust within the group. Many were observed sharing smiles and jokes by the end.

## 4. Summary of Key Outcomes (Sessions 1 vs. 5)

For a concise view of the changes, the table below highlights the average scores (on a 1–3 scale) of select metrics on Session 1 compared to Session 5 of the workshop programme. All metrics show an upward trend, underscoring improvements in Wellbeing, Engagement, Confidence, and Social Connection:

Metric	Session 1 Avg.	Session 5 Avg.
Initial Mood (Pre-Session)	2.3	3.0
Engagement in Activity	2.3	3.0
Peer Interaction	2.1	3.0
Group Collaboration	2.5	3.0
Emotional Expression	2.1	2.8
Confidence in Movement	2.2	2.7
Initiated Movement	2.5	2.7
Enjoyment/Laughter	2.3	3.0

*Table: Average participant scores by Session (1 = low/negative, 3 = high/positive). The data illustrates clear improvements by Session 5 in mood, engagement, social interaction, and expressive confidence.*