To be or not to be – Able to dance:

Integrated dance and children's perceptions of dance ability and disability

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Positioning myself

I was seven years old when my mother brought me to my first ballet class. At the time my parents' intention was to put me in ballet because I had hyper flexible joints, and enjoyed dancing. They figured ballet training will strengthen my muscles, and prevent me from dislocating my joints later on in life. Little did they know, that dance was going to become my passion, leading me to pursue an undergraduate degree in dance education, and graduate studies in adapted physical activity, focusing on dance.

I have always enjoyed being around children, and in the process of completing my undergraduate degree, started working one-on one with children who had cerebral palsy. The first child, with whom I worked, told me one day that she gets sad when she goes to parties, and cannot dance, because she cannot walk. As someone who grew up in dance, and could never imagine not dancing, I found her comment upsetting, and it made me question who we are as a society to decide who can or cannot dance. In the last year of my undergraduate studies, I had the opportunity along with two other students from my program to go into Ilanot school in Jerusalem (a school that serves the population of children with cerebral palsy), and teach dance. This child ended up being one of my students. My dance teaching experience in Ilanot had a tremendous impact on my perception of dance ability, as I saw the joy that we were able to bring the children as they were discovering their ability to dance.

A couple of years ago, I was taking dance classes at a local community center. There was a man with autism who was taking the class for about a year at the time. The teacher was treating him like a charity case. She was the saint doing him the favour of allowing him to take her class. She kept reminding everyone in the class that he was autistic, and when we were doing any

group combinations she would not allow him to be in a group with us. He had to go separately

with her. One day, he lost his balance in the middle of one of these combinations, and had the

misfortune of falling on the teacher. Nobody was seriously hurt, but the teacher decided he posed

a danger for other participants, and therefore could not return. Everyone agreed with the teacher

that he did not belong in the class. He begged for a second chance but was turned away. I tried to

advocate for him to stay in the class, but the teacher's response was that he needed a class with

other autistic people. This to me is a pure example of ableism where this man was set apart and

identified by his label. This experience also pushed me to explore contact theory as a way to

address ableism in dance. This situation demonstrated how at least two of contact theory's four

conditions (equal status, common goals, cooperative work, and authority support) are essential

for reduced prejudice to occur. Even in an adult setting, the teacher had the power to either

include or exclude this man from her class. She never gave him the chance to be an equal

member or to directly interact with any of the other group members.

One of the reasons for my choice to work with young children in this study was the

thought that if children are exposed from a young age to inclusion and diversity in dance,

situations such as the one I witnessed may potentially be prevented in the future. Applying

principles of contact theory to an integrated dance context may allow children to view diversity

as part of the norm in dance as well as any other context.

I strongly believe that anyone who wishes to dance should have the opportunity to do so,

regardless of their shape, size, physical, or cognitive capacities. In line with my belief in

everyone's right to dance, I aspire to construct a program that will foster equal participation and

appreciation of everyone's unique abilities to contribute to the general learning experience.

Abstract

This study investigated children's perceptions of dance ability and disability and changes to perceptions following participation in an integrated dance program. Focus group interviews, field notes, and observations were used with children with physical disabilities (n =5) and without disabilities (n=9) between the ages 6-9 before and after their participation in an integrated dance program. Ableism, contact theory, and aspects of the situative approach to knowledge construction served as theoretical frameworks. An interpretative phenomenological analysis (IPA) was used to analyze the data. Pre-program interviews revealed three common themes: all kinds of moves, like ballet, and dance ability = turning/jumping. In addition, three themes emerged from interviews with able-bodied participants: can't walk/can't dance, passivity, and different because... Post-program interviews revealed two common themes: emotional/physical and body parts/levels. In addition two themes emerged describing able-bodied children's perceptions: can't walk/CAN dance and different because-equipment. One theme emerged post-program describing perceptions of participants with disabilities: competence. Participation in an integrated dance program can have a positive impact on children's perceptions of dance ability and a more subtle impact on able-bodied children's perceptions of disability.

Résumé

Cette étude explore la perception des enfants de leurs habiletés et maladresse en danse en plus du potentiel quant à participer à un programme de danse intégrée afin de changer leurs perceptions. Des entrevues en groupe, notes prises sur le terrain, et des observations servirent à capturer les perceptions des enfants avec handicap (n = 5) et sans handicap (n = 9) entre l'âge de 6 à 9 ans avant et après leur participation à un programme de danse intégré. Les théories utilisées incluent l'ableisme, la théorie du contact et certains aspects de l'apprentissage situé. L'analyse phénoménologique interprétative est utilisé afin d'analyzer les données. Les entrevues suggèrent la présence de trois thèmes communs : tous les types de mouvements, la préférence du ballet, et l'habilité en danse = tourner/sauter. De plus, trois thèmes émèrgent quant aux entrevues avec les participants sans handicap : ne peux pas marcher/danser, passivité, et différent parce que… Les entrevues après le programme de danse révèlent deux thèmes en communs : émotionel/physique et parties du corps /niveaux. De plus, deux thèmes émèrgent afin de décrire les perceptions des enfants sans handicap : ne peux pas marcher/ peux danser, et différent dû à l'équipement. Un thème émerge après le programme de danse décrivant la perception des participants avec handicap : compétence. La participation dans un programme de danse intégré guidé par les principes de la théorie du contact peut avoir un impact positif sur la perception des enfants de leurs habiletés en danse et un impact plus subtile sur la perception des enfants sans handicap.

Review of the literature

The purpose of this study was to investigate children's perceptions of dance ability and disability relating to their personal experiences of participation in an integrated dance program. More specifically, two questions were posed. What are children's perceptions of dance ability and disability? Would participation in an integrated dance program change such perceptions? In order to provide a background for answering these questions a review was conducted of previous knowledge relating to dance and disabilities (as it pertains to participants with a disability engaging in dance for non therapeutic purposes), ableism and its presence in dance, inclusive education, and integrated dance. Due to the limited number of empirical studies of integrated dance, a review of inclusive physical education was conducted since it resembles dance in terms of some physical requirements. Contact theory and ableism are the main frameworks guiding this study. Aspects of the situative approach to knowledge construction are implemented in the design in order to enrich contact theory in the process of evaluating the potential change in children's perceptions of dance ability and disability. Finally a brief description of methodological aspects of this study is presented.

Dance therapy vs. adapted physical activity focusing on dance

The combination of dance and disability, or adapted physical activity focusing on dance, is interpreted frequently as dance therapy (Benjamin, 2002; Freire, 2001; Whatley, 2007). Therefore, most of the existing literature on dance and disabilities consists of dance therapy related research as well as books and articles on such topics as 'working with handicapped people' 'special communities' or 'special populations'. Individuals with a disability are rarely

described as participants taking part in dance alongside able-bodied participants (or in exclusive

settings) for the sole purpose of engagement in dance (Benjamin, 2002).

Until the establishment of the American Dance Therapy Association in 1966, distinction

between dance therapy and adapted physical activity focusing on dance (adapted dance) barely

existed. Dance conducted with individuals with a disability was called dance therapy (Sherrill &

Delaney, 2004). Dance/Movement therapy is defined as the psychotherapeutic use of dance for

the purpose of healing of the mind, body, and spirit. Dance/movement therapy uses dance to

further one's emotional, social, cognitive, and physical well being (Hanna, 1995; Karkou &

Sanderson, 2000; Levy, 1988; Rebollo Pratt, 2004; Sack, 1999; Ward, 2008). People who have

physical or intellectual disabilities are not prescribed dance therapy unless their disability is

accompanied with emotional or behavioural issues requiring the use of non verbal psychotherapy

(Sherrill & Delaney, 2004). On the other hand, adapted dance would be the appropriate setting

for participants with a disability to engage in dance for the sole purpose of dancing. Adapted

dance relates to adapting dance activities, as well as attitudes and behaviours surrounding dance

and disabilities, in order to promote equal participation opportunities for individuals with a

disability (Hutzler & Sherrill, 2007; Sherrill & Delaney, 2004; Reid, 2003). Adapted dance is an

attitude that seeks to celebrate individual differences rather than categorise them (Sherrill &

Delaney, 2004).

Participation in dance commences for many individuals in dance education programming

offered in recreation centers, schools, private dance studios etc. Dance education is the art of

teaching dance (Hanna, 1999; Lutz & Kuhlman, 2000; Peter, 1997) and facilitating learning

through dance (Hanna, 1999; Stolberg, 2006). Much of the work in adapted dance is rooted in

the adapted physical education movement (Risner, 2007). Therefore, adapted dance bares the

same relationship to dance education as adapted physical education does to physical education. Adapted dance can be conceived as education, art, or recreation (Sherrill & Delaney, 2004).

Dance may be a beneficial tool for therapeutic purposes (Hanna, 1995; Horton-Fraleigh & Hanstein, 1999; Schwartz, 1989), examples include stress reduction for improved mental health (Ward, 2008), coping with illness and hospitalisation (Mendelsohn, 1999), and behaviour modification for individuals with autism (Torrance, 2003). However, teachers who include individuals with a disability in their dance groups do not consider themselves as 'therapists' and participants dancing in such groups do not consider themselves 'in therapy' (Benjamin, 2002). When typically developing children attend ballet, or creative dance classes, no one asks if the program they are attending is dance therapy. Why should it be any different for children who have a disability? Though limited in extent, a number of studies investigated dance for individuals with a disability from an adapted dance perspective.

Boswell (1982) used an experimental design to compare the effects of an adapted dance program and a movement exploration program on improvement of dynamic balance and rhythmic skills of 26 students with mild to moderate mental retardation between the ages 8-13. Participants were assigned to either of the programs for the duration of eight weeks. Dynamic balance was measured using balance beam tasks and stabilometer performance. Rhythmic skills were measured with an auditory rhythmic perception test and an observational technique. A MANCOVA found no significant difference between groups. A univariate analysis identified a significant difference in favour of the adapted dance group only on the most difficult balance beam task. Factors that potentially influenced the significant change were attributed to the sensitivity of the measure to initial change and the opportunity provided by the dance program to develop spatial orientation skills.

Roswal, Sherrill, and Roswal (1988) compared the effectiveness of data-based and creative dance pedagogies on motor skill performance and self-concept of 35 students with mental retardation between the ages 11-16. The study ran for eight weeks in which participants received 40 lessons of 30 minutes each. Pre-test and post-test data were collected by administrating the Data Based Dance Skills Placement Test, specific subtests of the Cratty Six-Category Gross Motor Test, and the Martinek-Zaichkowsky Test of Self-Concept Scale. A MANCOVA identified no significant differences between the two pedagogies. A univariate analysis identified a significant difference in favour of the data-based pedagogy in the Data Based Dance Skills Placement Test. This is potentially due to the fact that the lessons in the data-based pedagogy included items that were in the test. The authors concluded that pedagogy should match teacher's comfort with its use and the educational goals the teacher is intending to attain. Future research was suggested to develop an assessment tool specific to dance.

Jay (1991) conducted a 12 week study of the effects of a dance program on the creativity of 17 preschool children (ages 3-5) with speech delays (ranging from verbal to non-verbal and behavioural to mental disorders). Intact groups received a dance program (n = 12) or an adapted physical education program (n = 5). Parsons' cognitive developmental theory of the aesthetic experience guided the study. A Torrance Test of Thinking Creatively containing three subscales, fluency, imagination, and originality, was administered to participants at the beginning and end of the program. Participants were rated on the way they responded to four activities; ways of moving from one place to another, moving like an unfamiliar role of sort, finding alternative ways to place a paper cup in a wastebasket, and finding unusual ways to use a paper cup. A MANCOVA indicated greater improvement of the dance group on the set of subscale scores. An ANCOVA determined a significant improvement of the dance group on the imagination

subscale. The author concluded that use of a small sample size, intact groups, diverse ages, and diverse disability types within the speech delays of participants, may have influenced the study outcomes.

The three studies mentioned above share two common aspects: (a) the population addressed- participants had intellectual disabilities; and (b) data collection which was based on rating scales evaluating changes in motor skill, self concept, or creativity. The following study by Goodwin, Krohn, and Kuhnle (2004) was conducted in Canada and differed due to its investigation of participants with a physical disability and its description of participant voices of their experience in dance.

Goodwin, et al. (2004) conducted a phenomenological case study of the experience of wheelchair dance of five children with spina bifida between the ages 6-14. The theoretical framework guiding the study was based on concepts of ableism, dualism, and the minded body. The dance program was exclusive to participants with spina bifida and ran once a week from September until May. Interviews of participants and their parents revealed four themes: (a) unconditional acceptance which was expressed as a sense of belonging and a bond based on a common experience; (b) a dream comes true which reflected a sense of pride in accomplishments; (c) beyond the wheelchair demonstrated the new role the wheelchair gained in the dance context as a means of self expression through movement, as well as wanting for others to see beyond their wheelchairs; and (d) a stronger self which was apparent in comments about increased self confidence resulting from the opportunity to participate in dance like any other child, enhanced physical strength, and independence. The authors conclude that the dancers in the study create, challenge, and initiate change in perceptions of the body and the ways they are

perceived as individuals with a disability. Emphasis is placed on the need to further investigate perceptions of individuals with a disability in order to reduce practices that disempower them.

Critical social issues in dance education research

Risner (2007) reviewed literature addressing critical social issues in dance education. He revealed that most of the existing literature consists of qualitative research, philosophical inquiries, critical autobiography, and anecdotal accounts. Three main areas were investigated: (a) gender which contains issues of social construction of gender, feminist perspectives, and gender equity; (b) diversity which consists of topics such as world dance and non-western forms, intersections of gender race and sexuality, differently abled populations; and (c) cultural context which only covers dance education and social history. The author stated that research of dance education and social class is nonexistent. Education-based research on dance and disabilities encompasses two areas of research. The first originates from adapted physical education (e.g. Boswell, 1982; Jay, 1991) while the more recent work focuses on social construction of disability and ways in which disability challenges social conceptions of dance (e.g. Cooper-Albright, 1997; Kuppers, 2000; 2003). Risner states that research on social issues in dance education is still very limited as to the population it tends to study and address (mainly university students) and fails to address the question," who gets to dance?"

Culture

According to Hanna (1999), "Culture affects who dances what, why, how, when, where, and with whom" (p. 12). Dance both evolves from culture and influences the development of culture. (Horton-Fraleigh & Hanstein, 1999; Ritenburg, 2010). Culture is a set of values, beliefs, concepts, norms, and rules that are shared by a group and are learned through a discourse process (Hanna, 1995; 1999; Löytönen, 2008). In the process of socialization, group members acquire

mental "maps" which guide what is considered as appropriate behaviour in a given setting (Gredler, 2001; Greeno & Van De Sande, 2007; Hanna, 1999; Löytönen, 2008; Kinney, 1993; Shannon, 1995; Shue & Beck, 2001). Each culture constructs its individual cultural tools which are signs and symbols used in the development and expression of thought. Cultural tools can vary in form and include language, numeration, works of art, and many others (Gredler, 2001). The cultural tools of dance include dance steps (Horton-Fraleigh & Hanstein, 1999), technique (Birringer, 2005; Wainwright, Williams & Turner, 2006), terminology (Leigh-Foster, 1997), and choreography work (Humphrey, 1959). Standards set for achievement of various participatory roles in a given cultural setting include knowledge and cognitive capacities (Kelly & Green, 1998; Greeno & Van De Sande, 2007; Shannon, 1995) as well as physical capacities (Benjamin, 1993; 2002; Cooper- Albright, 1997; Elin & Boswell, 2004; Kupers, 2000; 2003; Leigh-Foster, 1997; Ritenburg, 2010; Sherlock, 1996; Wainwright, Williams & Turner, 2006; Walker & Walker, 1997; Ward & Hutchinson, 2009). Inability to meet the required standards of a given culture could exclude individuals from participation opportunities.

Ableism

Society's tendency to compare and categorise people based on set standards of cognitive and physical norms is what Davis (1995) defines as ableism. Ableism presents a combination of power, discrimination, and prejudice that traditionally privilege those who are able-bodied (Eisenhauer, 2007). Individuals who deviate from society's set norms are perceived as abnormal, disabled (Bruce Marks, 1997; Thomson, 2005), possessing defect (Gill, 1997; Kliewer & Fitzgerald, 2001), or ill (Benjamin, 2002; Goodwin, Thurmeier, & Gustafson, 2004; Kuppers, 2003; Quinlan & Bates, 2008; Reid, 2003). Thus, disability is viewed as a separate category from 'normal' or able bodied (Cooper-Albright, 1997; Davis, 1995; DePauw, 1997; Gill, 1997;

Kuppers, 2003; Quinlan & Bates, 2008) and treated as a medical condition, thus positioning the

individual as a patient needing treatment to be repaired and normalised by a medical professional

(Benjamin, 2002; Cooper-Albright, 2001; Emens, 2007; Goodwin, 2003; Kuppers, 2000;

Quinlan & Bates, 2008; Thomas & Smith, 2000). The disability becomes inseparable from the

person's identity (Bruce Marks, 1997; Cooper-Albright, 1997; Davis, 1995; Gill, 1997; Goodwin

et al, 2004; King, 1993; Kuppers, 2000) and the person is perceived to be "suffering" from the

disability (Kuppers, 2003; Thomas & Smith, 2000). Some members of society believe disability

is as good a punishment as death (Peers, 2009) and that it would have been better for individuals

with a disability to have not been born (Davis, 1995). Thus, a true and extreme ableist society

does not conceive of any need to change architectural structure or social attitudes in order to

accommodate for those perceived as different (Benjamin, 2002). A pure example of this issue is

the inaccessibility of public transportation in some developed cities to individuals with a

disability limiting their opportunities to fully partake in routine aspects of daily living.

     "Sense experience is our sole source of knowledge relevant to understanding the external

world."(Murphy, 2007, p. 42). Disability is a sense experience. A person may be impaired by a

lack of a sense, moreover, disability is perceived through the senses (Davis, 1995). Two

modalities are apparent in society's view of disability, function and appearance. The function

modality emphasises a person's inability to do something (Bruce Marks, 1997; Davis, 1995;

DePauw, 1997; Goodwin et al, 2004; Sherlock, 1996; Whatley, 2007), be in control of various

aspects of life (Cooper-Albright, 1997, 2001; King, 1993; Paxton, 1992; Quinlan & Bates, 2008),

or be physically active (Bisson, 2005). However, a person who successfully performs is no

longer viewed as disabled (Davis, 1995; Quinlan & Bates, 2008). The appearance modality

relates to the way disability is seen, how disability marks the individual's body (Thomson,

2005). This relates to stigma and the power of the gaze of the 'normal' people, generating a

strong emotional response in the form of fear, horror, pity, compassion, and avoidance (Cooper-

Albright, 1997; Davis, 1995; DePauw, 1997; Gill, 1997; Goodwin et al, 2004; Peers, 2009;

Sandahl, & Auslander, 2005; Sherlock, 1996). The appearance modality directly affects the

function modality, as people tend to make assumptions regarding one's ability to function based

on the appearance of the disability. Goodwin et al (2004) emphasise the importance of

investigating ways in which the assumptions of ableism may limit participation opportunities for

individuals with a disability.

Ableism and dance

Defining dance is complicated and some would argue unnecessary for the purpose of

understanding dance (McFee, 1992). However, for the purpose of considering ableism in dance,

and its relationship to dance ability, a definition of dance is warranted. The Quebec Education

Program defines dance as "a symbolic art of expression and communication which utilizes

human movement as its medium and the human body itself as its material and instrument." (QEP

secondary school dance curriculum, p.5). Dance is human behaviour comprised of purposeful,

rhythmical, and culturally influenced sequences of nonverbal body movement (Hanna, 1999;

Horton-Fraleigh & Hanstein, 1999). Dance places the physical body at the core of its

representational structure (Cooper-Albright, 1997; Kuppers, 2000; Paxton, 1992; Reid, 1986).

Dance can also represent the social value of the body within a given culture (Cooper-Albright,

1997); such cultures and their relationship to dance changing over time.

In ancient cultures dance was considered essential, providing individuals with means to

express themselves, communicate with others and with nature. Dance was an integral part of

religious ceremonies and all community members participated as part of the ritual (Birringer, 1998; Elin & Boswell, 2004; Levy, 1988; Shea, 1998; Udall, 2001). During the ancient Greek period, dance was placed on a stage, out of reach for most ordinary people. Though dance spaces remained accessible, the art of dance became competitive, ruling out people who lacked classical body proportions (Benjamin, 2002). By the mid-twentieth century, dance was perceived as an elite artistic and cultural field (Elin & Boswell, 2004; Wainwright, Williams & Turner, 2006), requiring dancers to be thin (Benjamin, 2002; Benn & Walters, 2001; Cooper-Albright, 2001; Green, 1999; 2000; Jackson, 2005; Oliver, 2008; Shue & Beck, 2001; Ward-Hutchinson, 2009), possess perfect or ideal body proportions (Freire, 2001; Kuppers, 2000; Löytönen, 2008; Sandahl & Auslander, 2005; Sherlock, 1996), acquire specialised training (Elin & Boswell, 2004; Leigh-Foster, 1997; Noice & Noice, 2006), and mastery of technique (Boswell, 1989; Noice & Noice, 2006; Sandahl & Auslander, 2005; Shea, 1998; Sherlock, 1996) creating an illusion that movement is weightless and effortless (Davies, 2008; Kuppers, 2000; Morris, 2003).

The conception of ableism in dance is apparent in Kuppers' (2000) use of the term 'dancerly body' to refer to the concepts of physicality appropriate to specific dance techniques. Ballet is likely the most dominate cultural image of dance in western society (Kealiinohomoku, 2001; Kuppers, 2000; Leigh-Foster, 1997; Ritenburg, 2010; Walker & Walker, 1997; Ward-Hutchinson, 2009). Balanchine's ideal of an extremely thin body with long legs, high instep, and small head became what is perceived as perfect for dance (Elin & Boswell, 2004; Benn & Walters, 2001; Ritenburg, 2010; Wainwright et al, 2006). This ideal dance body comes in sharp contrast to a disabled body (Cooper-Albright, 1997, 2001; Elin & Boswell, 2004; Freire, 2001; Kuppers, 2000; Ward-Hutchinson, 2009)

The 1960's were characterized by many social and political changes, including increased disability advocacy and the move to deinstitutionalization (Benjamin, 2002; Spiker, 1990). In dance, the Judson Church Group was formed in New York with the intention of re-evaluating the nature and meaning of dance (Banes, 2001; Benjamin, 2002). New choreographers emerged from this group such as Steven Paxton who sought a dance language that did not require a dancerly body. This form of dance was named "contact improvisation" and its character allowed for accessibility to all, regardless of background, experience (Benjamin, 2002), or body type (Cooper-Albright, 2001; Davies, 2008; Nash, 2005). Contact improvisation is a form of dance in which participants hold equal status (Benjamin, 2002) and feed off each other's movements in a collaborative process of movement exploration to create dance (Cohen Bull, 2001; Cooper-Albright, 2001; Davies, 2008; Leigh-Foster, 1997).

Ironically, the Judson church was not wheelchair accessible, creating a situation where dance was still not accessible to all (Benjamin, 2002). In the 1970's Alito Alessi, Karen Nelson, and others formed the company "Joint Forces" in Eugene Oregon. Alessi and Nelson began collaborating with Mobility International to create an exchange program for people with a disability. However, as a professional dance company, Joint Forces began to include dancers with a disability only in the 1980's when Emery Blackwell (who had a disability) began presenting dance works with Alito Alessi as part of Joint Forces (Benjamin, 2002).

Presently, western dance education continues to focus primarily on an externalised body perception, demanding students to endeavour to achieve a specific physical appearance, while accepting performance feedback, aimed at performing set standards of proper dance technique (Benjamin, 2002; Green, 1999; 2001; Morris, 2003; Shue & Beck, 2001). Ballet schools

assessing potential candidates for professional training focus their attention on external

characteristics such as body structure, flexibility, enthusiasm, and ability to imitate movement in

determining the candidates' potential to become professional dancers (Oreck, Owen, & Baum,

2003). The ability to acquire and develop dance technique is associated with motor ability or

motor maturity (Lindqvist, 2001).

Dance ability/disability in the media

Quinlan and Bates (2008) conducted an analysis of journalistic and blogger reactions to

the performance of Heather Mills (with a prosthetic leg) on the 2007 American version of the

reality television show "Dancing with the Stars". In this show 11 celebrities are paired with

professional ballroom dancers to perform a dance every week. Based on scores from the judges

and audience votes, the couple with the lowest score is eliminated from the show. Emerging

themes from the analysis can be viewed as potentially both empowering and disempowering of

individuals with a disability. Three themes emerged: (a) "supercrip" relates to comments about

how she excelled in spite of her disability and comments about her prosthetic leg being more

powerful than an able-bodied leg; (b) taking advantage of the sick role reflected comments such

as "if she can dance, she can walk" thereby not needing disabled privileges such as parking.

Comments were also made about judges giving her sympathy votes; and (c) sexualised disabled

body which discussed comments about the costumes she wore demonstrating that people with a

disability can be sexy and feminine, and comments about the prosthetic leg inviting people to

look at it. The authors concluded that Mills conformed to able-bodied expectations of dance, thus

causing disabled dance performance to be devalued. Emphasis was placed on the need to create

space for people of all abilities to dance in the way most suitable to them.

Dance ability correlating with a dancerly body is portrayed more and more in the media as shows such as "So you think you can dance" gain popularity. These shows portray dance ability based on possessing strong technique and a perfect body. Participants with deformed bodies or a physical disability who auditioned for the show were told how inspiring it was to see them try, but that they did not belong in such a competition because they were not capable of handling its demanding physical requirements (So You Think You Can Dance Canada, season 1, episode 3). In season 7 of the American show, a man who auditioned explained with tears in his eyes that he was auditioning for his brother who cannot dance because he is in a wheelchair. His audition brought tears to the judges as they expressed how inspired they were by his story, and how much he really needed to dance for his brother (So You Think You Can Dance USA season 7, episode 2). These examples are consistent with Quinlan and Bates' (2008) description of the 'sick role' of individuals with a disability. The latter example particularly stresses that the person with a disability is passive, incapable of dancing for himself, therefore needing his brother to do it for him. These episodes demonstrate the way people with disabilities are patronised and objectified by a culture that defines being able-bodied as the basic condition for being able to dance (Cooper-Albright, 1997; Quinlan & Bates, 2008; Thomas & Smith, 2000). In a time where accessibility in all aspects of life is advocated, shows such as these should also expose their viewers to the existence of professional dance troupes that include members with disabilities.

Dance as a domain only accessible to able-bodied people was also portrayed recently on the popular television show "Glee". The show tells the story of a high school Spanish teacher who becomes the director of the school's Glee club in an attempt to restore the club's reputation. The episode named "dream on" portrayed Artie who has a physical disability aspiring to become a dancer. In his dream he became able-bodied, got out of his wheelchair and danced. The episode

ended with him accepting that his dream cannot become a reality, due to his inability to walk

(Glee, season 1, episode 19). These examples represent the social and environmental barriers that

stand in the way of accessibility in all aspects of daily living, which are directly connected to the

tradition of exclusion (Benjamin, 2002; Davis, 1995; Kuppers, 2003; Paxton, 1992). Kelly and

Green (1998) stated that it is important to re-evaluate relationships and practices in science, in

order to understand what counts as doing science. The same principle applies to dance (Kuppers,

2000; Shue & Beck, 2001).

Dance ability

According to Kaufmann (2006), dance ability is based on the following five constructs:

(a) body awareness which relates to body parts and the relationships between them; (b) spatial

awareness in regards to personal space and relationship to others sharing the space; (c) following

verbal instruction and music cues; (d) watching movement cues which is the ability to imitate

movement; and (e) visualisation and recall skills which encompass responding to imagery cues

and remembering dance patterns (kinesthetic memorization skill). Boswell (1989) suggests that

dance ability should be considered as ability to move regardless of movement size or complexity,

using energy that communicates. This perception of dance consists of movement for the purpose

of expression. Both Kaufmann and Boswell's definitions of dance ability do not offer any reason

to assume that a person with a disability would not be able to dance. Yet dance culture does not

consider people with a disability capable of dancing (Goodwin, 2004)

Professional dance troupes that include dancers with a disability such as Joint Forces,

Axis Dance, Dancing Wheels, Paradox Dance, Infinity Dance, Light Motion, Mobility Dance,

Touchdown Dance, CandoCo, Corpuscule Danse, and others emerged since the 80's with the

mission of defying conceptions of what dance is and who can be a dancer (Benjamin, 2002; Kuppers, 2000; Cooper-Albright, 1997; Ritenburg; 2010; Schwyzer, 2005; Ward-Hutchinson, 2009). However, training opportunities for individuals with a disability, preparing them for the demands of professional dance are still inaccessible (Benjamin, 1993; 2002; Goodwin, et al, 2004; Quinlan & Bates, 2008; Schwyzer, 2005). Accessibility refers to being able to enter and participate in a given setting (DePauw, 1997; Kelly & Green, 1998; Williams, 1999). Accessibility to dance education is limited by physical barriers such as stairs and lack of space to manoeuvre equipment (Benjamin, 1993; 2002; Helfenbaum, 2009; Kuppers, 2003) as well as attitudinal barriers of both teachers and students who are concerned that including students with a disability in dance classes will lower the standards for students without a disability (Block & Obrusnikova, 2007; Helfenbaum, 2009; Hill, 1976; Whatley, 2007).

Creating an accessible dance culture calls for adoption of the social model of disability in dance education by increasing student awareness to physical norms and values on which various dance forms are based and how these norms and values can change (Kuppers, 2000). The social model of disability situates the disability in the daily interactions between an individual with a disability and the surrounding social and architectural environment (Emens, 2007; Kuppers, 2000). In this model, dance becomes a way to manipulate and challenge the ableist conception of the body and aesthetics (Davies, 2008) while continuing to challenge each student based on their individual skill level (Whatley, 2007). Such re-conceptualizing can potentially be supported with the use of a situative approach in dance education.

The Situative or Sociocultural approach to knowledge construction

The situative or sociocultural approach to knowledge construction values learning that occurs through participation in a social or cultural process (Greeno, 2006; Murphy, 2007; Salomon & Perkins, 1998; Sinatra, 2002). Thus, knowledge is constructed through social experiences involved in daily living and further developed through formal schooling (Greeno, 2006; Sousa Lima, 1995) in the course of interaction with teachers and other learners (Gredler, 2001; Greeno, 2006; Salomon & Perkins, 1998). Greeno (2006) refers to learning contexts as activity systems which are defined as "complex social organizations containing learners, teachers, curriculum materials, software tools and the learning environment" (p. 79).

In this context, Greeno and Van De Sande (2007) define a *concept* as an interrelated and relatively compact set of constraints and affordances that functions in the organization of aspects in a community's activities. *Conceptions* belong to the family of concepts, but are broader and less definite. For instance, dance as a concept would be classified as a form of movement. However, a conception of dance would be that of a choreographer who knows many ways in which to combine dance steps to convey a particular message, as well as ways to integrate dance with other media forms such as computer technology or video. *Constraints* are the relationships between the situation type (i.e. a dance class) and particular events occurring in the situation (i.e. a person with a disability joining the dance class). *Affordances* are relationships between properties of a situation (i.e. capacities of the person with a disability) and properties of an action in which participants interact with each other and with other sources of information (i.e. potential modifications that would allow the person with a disability to participate in the dance class). Understanding or knowing a conception constitutes as ability to construct perspectival understanding situated in the activity. *Conceptual growth* is considered as change in concepts or

conceptions used for communication and problem solving or an increase of shared participation

amongst community members (Greeno & Van De Sande, 2007). Conceptual growth or change

can be achieved at the individual level or at the group level (Sinatra, 2002; Souza Lima, 1995).

This is reached through a process of 'problematizing' in which current conceptions are

challenged and alternatives are suggested, and a 'resolving' process involving negotiation and

new conception adoption (Greeno & Van De Sande, 2007). Thus in the context of dance and

disability, challenging current conceptions of dance based on able-bodied standards for execution

of dance steps and suggesting alternative ways to execute those steps, may potentially elicit

changes in concepts used for evaluating what constitutes as dance, thereby affording

participation of individuals with a disability in dance.

      Three interrelated dimensions are valuable in the process of conceptual growth or change:

(a) the degree of mutuality in interaction which refers to members having an equal chance to

contribute to the learning process; (b) joint focus of attention which means group members are

sharing a common focus; (c) shared task alignment which relates to establishing a collaborative

approach to problem solving (Barron, 2000). In addition it is imperative to consider personal

characteristics of group members such as beliefs, intentions, emotions, strength, coherence, and

commitment to existing ideas, as well as motivation which can potentially affect the process of

conceptual growth or change (Dole & Sinatra, 1998; Greeno, 2006; Sinatra, 2002). An

individual's motivation to change conceptions can result from dissatisfaction with existing

concepts, personal relevance, social context, or need for cognition (similar to intrinsic

motivation) (Dole & Sinatra, 1998)

      Conceptual growth in activity systems is based on acting with conceptual agency rather

than disciplinary agency. The two agencies differ in their approach to problem solving; the

disciplinary agency places the discipline in the authority role, calls for following established

procedures, and participants are evaluated for correct performance. Conceptual agency involves

adaptations based on critical thinking regarding the appropriateness and meaning of alternative

understandings and strategies in an activity domain (Greeno, 2006; Greeno & Van De Sande,

2007). In the context of dance and disability acting with conceptual agency would entail

critically evaluating what constitutes as correct performance of dance and adapting such

expectations to the bodies of participants with disabilities. Acting with conceptual agency would

thereby facilitate inclusion of those normally excluded from opportunities to engage in dance

(Souza Lima, 1995). The notion of acting based on conceptual agency is consistent with

Kuppers' (2000) thesis statement: "an accessible dance culture needs not only accessible

techniques, work spaces, training facilities and stages, but also wider educational work on the

level of dance literacy, our ability to read dance and appreciate its manipulation of bodies, spaces

and time." (p. 119).

       The learning context is valuable for its potential to stimulate conceptual change, aspects

such as task or setting can influence ways of thinking and reasoning used by group members

(Sinatra, 2002). The arts provide opportunities for participants to explore new values and

meanings for themselves as well as modes of expression (Karkou & Glasman, 2004; Löytönen,

2008; Nikitina, 2003; Reid, 1986; Winner & Hetland, 2008). Values and meanings, such as what

consists as artistry, are explored in the interaction between a work of art, and the social

environment acting as its viewers (Goodwin et al, 2004; Souza Lima, 1995; Whatley, 2007).

Bodily kinesthetic intelligence

In addition to being an artistic form, dance provides its participants an opportunity to learn through use of the body in motion. According to Stinson (1988), "To dance is to discover a new world of sensory awareness through the kinesthetic sense." (p. 53). Movement is a fundamental way of learning and developing one's ability to perceive oneself and one's actions (Horton-Fraleigh & Hanstein, 1999; Stolberg, 2006). Young children naturally sense and respond to movement as a way to understand, and negotiate with their surroundings (Gardner, 2004; Kaufmann, 2006; Lorenzo-Lasa, Ideishi, & Ideishi, 2007; Luntz & Kuhlman, 2000). According to Piaget's theory of cognitive development, the sensorimotor stage is the first stage of cognitive development (ages 0-2 years). In this stage the child experiences, explores, and learns through movement, play, and imitation. When children progress into the pre-operational stage (ages 2-7), they continue to use movement in the process of developing their mental images leading to improvement of language skills (Birney, Lutz, Citron-Pousty, & Sternberg, 2005).

In his theory of multiple intelligences, Gardner identified movement as a form of intelligence called "bodily kinesthetic intelligence" which is characterized by a person's ability to use his/her body in diverse and skilled ways for expression or goal directed purposes (Gardner, 2004). Bodily kinesthetic intelligence includes three central cognitive skills: (a) motor logic-neuromuscular skill which relates to articulation and ordering of movement; (b) kinesthetic memory which enables thinking in terms of movement by mentally reconstructing muscular effort and body position in space; (c) kinesthetic awareness or kinesthetic sense which provides conscious understanding of posture, movement and shifting of weight distribution, as well as knowledge of resistance, position, and weight of objects. All three cognitive skills are imperative in the context of dance (Seitz, 1992).

Studies of epistemology in dance have identified bodily kinsethetic intelligence as a form of knowledge, a body knowledge, which means knowing in and through the body. These studies addressed the role of body activity in knowledge construction (Parviainen, 2002), dancers' form of knowledge construction in a rehearsal setting (Risner, 2000), and the potential applicability of dance practice as research (Pakes, 2003). Risner (2000) revealed four themes describing knowledge construction in a dance setting: (a) knowing as an interpersonal construction which is based on interaction with others during rehearsal and performance; (b) knowing by doing (which in epistemological terms is considered as 'knowing how') which is based on physical execution of the dance; (c) knowing as memory which relates to ways of remembering the dance within the context of the music, the structure of the choreography, or through body memory; and (d) knowing as certainty which is one's need to possess absolute knowledge in rehearsal context.

According to Benjamin (2002), "The arts, and dance in particular, provide an environment where current prejudices might be undermined and new perspectives received and explored" (p.72). This statement is not supported by a wide range of research. Moreover, exploring individual participant experiences in dance programs and ways in which these participants construct their knowledge and interpret the world is critical for dance educators (Bannon & Sanderson, 2000; Risner, 2000). Bok Lee, Kim, Hoon Lee and Lee (2002) emphasise the importance of studying the relationships between cooperative dancing and attitudes towards peers who are socially isolated. Contact theory can potentially contribute to such exploration attempts by applying its principals to the construction of a cooperative dance context.

Contact theory

Contact theory was initially developed in exploration of ways to reduce prejudice and to improve interracial contact and relationships (Allport, 1954; Crisp, Stathi, Turner, & Husnu, 2009; Pettigrew & Tropp, 2006; Sherrill, Heikinaro-Johansson, & Slininger, 1994; Slavin, 1985). Since its development, contact theory has been used by adapted physical activity researchers in exploration of its potential to bring about attitude change in relation to students with a disability included in mainstream physical education (e.g. Archie & Sherrill, 1989; Butler & Hodge, 2004; Murata, Hodge, & Little, 2000; Slininger, Sherrill, & Jankowski, 2000; Tripp, French, & Sherrill, 1995; Tripp & Sherrill, 1991). Contact theory bridges social representations and intergroup contact (Brewer & Kramer, 1985). Allport was the most influential theorist in the development of intergroup contact theory (Pettigrew & Tropp, 2006; Sherrill, 2004).

In his book "*The Nature of Prejudice*" Allport (1954) argued that people naturally tend to form generalizations, categories, and concepts in relation to various types of people. The group referred to by individuals as familiar is termed an in-group while the out group is the group of unfamiliar or different people who are defined as such for various reasons (i.e. race, ethnic background, skin tone etc). Discrimination in this view happens when members of the out group are excluded from schools, occupations, or any other aspects of daily living. According to Allport's (1954) contact theory, reduced prejudice will occur under the following four contact conditions: (a) equal status between the groups placed in the contact situation which is defined by Sherrill et al (1994) as bidirectional relationships between peers of similar age and learning that each has a contribution to make; (b) common goals; (c) intergroup cooperation; and (d) authority support (Pettigrew & Tropp, 2006; Slavin, 1985; Slininger et al., 2000). Furthermore, contact must be frequently repeated and feel pleasant for all group members (Allport, 1954).

According to Pettigrew (1998) attitude change is mediated by four interrelated processes during the contact situation: (a) learning about the out-group is the major process by which perceptions can be altered; (b) changing behaviour - repeated contact under optimal conditions can lead to behaviour modification, potentially leading to attitude change; (c) generating affective ties - emotion is important to consider in the contact situation, anxiety can result from first experience in the contact situation, continued contact may reduce or increase anxiety, depending on the nature of the contact situation; (d) in-group reappraisal which means re-evaluating in-group and out-group norms.

Allport (1954) states that studying the consequences of each of the following six variables would be ideal for the purpose of predicting the relationship between contact and attitudes: (a) quantitative aspects of contact such as frequency, duration, number of people involved and variety; (b) status aspects of contact which relates to how participants perceive their status within the contact situation; (c) role aspects of contact which describes the relationship within the contact situation as competitive or cooperative; (d) social atmosphere surrounding the contact which deals with questions such as the degree of egalitarianism expected. Is the contact voluntary or involuntary, real or artificial? Is the contact perceived as typical, exceptional, important or trivial? (e) personal characteristics of the individuals involved in the contact situation such as initial level of prejudice, personal security level, character structure, previous experience, age, education level, and personality; and (f) contact location, that is residential, occupational, or recreational.

Contact itself will not promote positive attitude change unless the environment is carefully structured (Sherrill, 2004). It is important to place participants with and without a disability together in team work in a carefully planned fashion, and interaction should be encouraged in a

way that allows students with a disability to provide input in the decision making process (Lieberman, James, & Ludwa, 2004). Ultimately, contacts within the given context will become more voluntary, spontaneous, and of equal status leading to participants with a disability being included in activities outside of the context of the structured activities (Sherrill, 2004)

Studies in adapted physical activity that used contact theory

Archie and Sherrill (1989) studied the influence of contact and gender on attitudes of fourth and fifth grade students from inclusive and segregated schools towards peers with a disability. Their data were collected at the end of the school year using the Children's Attitudes Toward Handicapped Scale. In addition, they interviewed the principal and teachers in the inclusive school. Their results indicated no significant difference between contact groups or gender. However, there was a tendency for the contact group to evaluate children with a disability more favourably than the noncontact group. Their interviews revealed assumptions that were guiding mainstreaming practices: (a) children with a disability were viewed as equal status peers; (b) integrated physical activities were meaningful and satisfying; and (c) contact was contributing to good attitudes. This study did not include observations in the natural setting to see that assumptions are met, or that attitudes matched with actual behaviours.

Tripp et al., (1995) used a Peer Attitude Toward the Handicapped Scale to compare attitudes of 9-12 year old able-bodied children toward peers with a disability in integrated and segregated physical education settings. Their results indicated girls had more positive attitudes regardless of the setting. Children in integrated settings had more positive attitudes toward peers with behavioural disabilities. On the other hand children in segregated settings had more positive attitudes toward peers with physical disabilities. They concluded that contact theory is only

supported with regard to behavioural disabilities. This study only compared students based on their response to a rating scale. No observations were conducted in the natural settings, and there was no control of the content or instructional strategies used in the integrated environment.

Slininger et al., (2000) studied attitudes of able-bodied children aged 9-10 toward peers with severe mental retardation who used wheelchairs in three physical education settings: (a) structured contact where students were encouraged to interact throughout class time; (b) nonstructured contact in which children with a disability participated in warm up, but were taught separately the rest of the time; and (c) control where students had no contact. The study was conducted for four weeks on a daily basis. Findings indicated females initially had better attitudes than males. The structured contact setting led to significant improvement of male attitudes. However, they were unable to create equal status relationships due to the need for special helpers (children were assigned as special helpers to push the wheelchairs to and from the physical education setting). They conclude that when contact situation involves participants with severe disabilities, Allport's theory may need reconsideration.

Murata et al., (2000) used a different approach by applying contact theory to investigate permanency of attitude change. They interviewed 12 participants from a study conducted four years earlier about the effects of support personnel on ALT-PE of students with multiple disabilities and their able-bodied peers (cited from Murata, 1995). Data analysis revealed three central themes: (a) initial scepticism which reflected that participants initially felt uncomfortable interacting with peers with a disability, and were surprised to discover that their peers with a disability could engage in many of the same activities as themselves; (b) direct interaction which was characterised by participants having direct and positive contact as well as finding the

experience to be fun; and (c) appreciable differences which emerged from participants'

expressed curiosity to know how well their peers with a disability were able to perform physical

activity skills. Curiosity lead them to feel optimistic regarding their peers with a disability, in

addition participants indicated they were open minded which they claimed led them to an

appreciation of differences between themselves and their peers with a disability. The authors

concluded that providing favourable contact conditions can potentially promote positive and

stable attitudes, consistent with contact theory. Furthermore, when contact experience is

frequent, positive, beneficial, and fun, initial scepticism can be overcome. The limitation of this

study was the length of time that has passed between the initial contact situation and the

interviews. Participant maturation could have had an effect on their current perceptions.

Butler and Hodge (2004) studied interactions between two students with disabilities (a

girl with Down syndrome and mental retardation and a boy with severe juvenile scoliosis) and

their sixteen able-bodied peers in a mainstream sixth grade physical education class. Data

collection was based on observations of physical education classes and interviews with the

participants with a disability. Interviews and field notes revealed four themes: (a) fun and

cooperative interaction; (b) friendships; (c) aggressive males without disabilities created feelings

of uneasiness; and (d) favourite class. Observations revealed that interactions were limited and

did not consistently reflect equal status behaviours. However, structured contact opportunities

were pleasant, cooperative, and friendly. They concluded that favourable conditions incorporated

into structured contact opportunities can lead to positive interactions between students with a

disability and their able-bodied peers. This was the only study that investigated contact theory

using the perspectives of the students with a disability. It is important to note that they observed

existing classes, but did not make any attempt to structure the environment to create contact situations between the participants.

Overall evaluation of studies in adapted physical activity that used contact theory reveals a number of issues: (a) participants were all over 9 years old. According to Allport (1954) development of all social attitudes occurs during the first six years of children's lives, contact theory based studies in adapted physical activity should consider this fact when choosing an age group; (b) data collection - survey research without conducting any observations (Archie and Sherrill, 1989; Tripp, French, and Sherrill, 1995). One study based findings on interviews and observations of participants in an intact group in their natural environment, without attempting to manipulate the environment (Buttler & Hodge, 2004); (c) social atmosphere surrounding the contact - one study used an experimental design, but assigned able-bodied children the role of helpers, which they admitted would negate the equal status assumption of contact theory (Slininger, Sherrill, and Jankowski, 2000). By using able-bodied participants as helpers, egalitarianism would not be expected (Allport, 1954).

Pettigrew and Tropp (2006) conducted a meta-analysis of contact theory. They reviewed 515 studies including those with people with physical disabilities. Research that focused on contact with individuals with a physical disability provided a larger than average effect size of reduction of prejudice. Also, findings indicated that greater intergroup contact was related to lower levels of prejudice. Thus, contact between groups under optimal conditions could effectively reduce intergroup prejudice. Studies that did not allow participants the choice of avoiding contact resulted in slightly larger mean effect sizes in reducing prejudice than studies that provided participants the choice of having contact. Moreover, findings indicated that intergroup contact

effects were generalised to other situations outside of the immediate contact situation. The results of the meta-analysis provide support for intergroup contact theory's ability to significantly contribute to reduction in prejudice across a wide range of groups and contexts.

Assembling Ableism, Situative approach and Contact theory

Ableism, the situative approach, and contact theory share a common perspective in relation to categorization based on set standards considered as normal by a given social group. Contact theory and ableism relate to such categorization natures as prejudice where those who deviate from the norm are regarded as outside of the norm. Ableism describes the existing problem faced by individuals with a disability while contact theory and the situative approach propose solutions to the problem.

Conceptual change based on the situative approach shares commonalities with contact theory in relation to the role social interaction has in constructing knowledge and the conditions that facilitate attitude or conceptual change; participants having equal status, sharing common goals, and working in collaboration. Contact theory's fourth condition, authority support, is not discussed as a facilitator of conceptual change in the situative approach. However, studies have emphasised the relationship between teachers' beliefs regarding students' capacity to learn, and their choice of learning activities for those students (Warburton, 2004; Zohar, Degani, & Vaaknin, 2001). Moreover, research has demonstrated the determining nature of the teacher in the classroom culture. Teachers act as role models of appropriate behaviour in the given classroom culture (Bruce Marks, 1997; Lieberman, James, & Ludwa, 2004; Shue & Beck, 2001) and also can influence student perceptions of the learning environment (Shannon, 1995; Suomi et al, 2003; Tsai, 2006) as well as student achievement and motivation (Muis & Foy, 2010).

According to Cooper-Albright (1997) "Watching disabled bodies dancing forces us to see with a double vision, and helps us to recognize that while a dance performance is grounded in the physical capacities of a dancer, it is not limited by them." (p.58). According to Benjamin (2002) "Clearing away misconceptions and prejudice generates the space in which relationships can be reviewed and reinvented, and in which new movement patterns can be discerned" (p.47). The process of 'problematizing' and 'resolving' leading to conceptual change has the potential to enrich contact theory in addressing the conception of ableism in a dance context. In acting with conceptual agency, participants can be encouraged to collaborate in solving movement problems that occur in the process of working with different body types and creating new vocabulary related to bodies in dance (Kuppers, 2000). Understanding the value of creating accessible dance contexts can be derived from a brief exploration of inclusion in mainstream education.

Inclusive education

Inclusive education policies such as Public Law 94-142, or IDEA (Individuals with Disabilities Education Act) mandated in the U.S.A have influenced Canada and other countries. Such policies often state that children with disabilities should be educated to the maximum extent possible with able-bodied peers (Block & Vogler, 1994; Block & Obrusnikova, 2007; Bruce Marks, 1997; Goodwin, Watkinson, & Fitzpatrick, 2003; Kliewer & Fitzgerald, 2001; Schwartz, 1989; Walker, 1986). Such policies were enacted in order to encourage social participation and independence of people with a disability (Kaufmann, 2006; Lewis, 1995; Simeonsson et al., 2001). Yet, many environments in which children interact outside of the classroom are inaccessible to children with a disability (Doubt & McColl, 2003; Schnorr, 1990)

and children with a disability may have a limited social network outside of school (Seymour, Reid, & Bloom, 2009).

Able-bodied children's perceptions of disability

Able-bodied children's perceptions of students with a disability can be an important source of information for inclusion efforts (Block & Obrusnikova, 2007; Murata, et al, 2000; Schnorr, 1990). Suomi, Collier, and Brown (2003) found that children as young as kindergarten age were able to recognise physical, cognitive, and social differences. Bruce Marks (1997) stated that children tend to adopt the values of their parents, based on observation and imitation. Negative emotions become associated with labels describing individuals which then become associated with particular groups, potentially generalising to all members of the given group. Bunch and Valeo (2004) interviewed able-bodied elementary and secondary students from inclusive, as well as special education schools in Ontario. Results indicated that more friendships were developed between able-bodied students and peers with a disability in inclusive schools, and those schools had fewer occurrences of abusive behaviours. Furthermore, students from inclusive schools were more likely to advocate for peers with a disability. Most students agreed with the approach for educating students with a disability followed by their school.

Tamm and Prellwitz (2001) investigated Swedish children between the ages of 6-10 (most of whom did not have previous contact with a person with a disability) to learn of their perceptions of children who use wheelchairs. They found that children perceived disability to be a motor dysfunction. However, younger children perceived the reason for the wheelchair use to be a temporary injury. In general, the study revealed that children had positive attitudes towards children who used a wheelchair and were willing to include them in various activities. According

to the authors, disability issues are often presented in the Swedish media with messages

containing positive attitudes toward disability. Therefore their results may have reflected media

influence on general attitudes of the society surrounding the children investigated. The findings

of this study regarding the perceived temporariness of the disability by younger participants are

consistent with the findings of Nowicki (2007).

Schnorr (1990) explored perceptions of first graders regarding a student with a disability

who was integrated part time in their class. The study revealed that the children defined their

school experience based on themes of "where you belong", "what you do", and "with whom you

play". This study emphasised the significance of identifying context and time for student

interaction and ensuring that such settings are accessible to students with a disability. Powlishta,

Serbin, Doyle, and White (1994) emphasise the importance of examining children's specific

learning experience involving the out-group in order to understand individual differences in

initial level of prejudice. Integrated dance can provide both a context for student interaction and

an opportunity to explore children's learning experiences involving the out-group.

Integrated dance

Integrated dance (also known as mixed abilities dance or inclusive dance) is a dance in

which participants with and without a disability engage together (Dey, 2003; Helfenbaum, 2009;

Kaufmann, 2006; Nonhebel, 2007; Williams, 1999). Such dance is guided by the concept that

integration must be practiced with integrity, meaning everyone can participate in dance and is

capable of making a unique and essential contribution. Thus, all participants have equal

opportunity to explore their movement potential and collaborate with others to enhance the

creative and learning process (Benjamin, 1993; 2002; Green, 2000; Williams, 1999). Such

settings offer participants with a disability, able-bodied peers, and teachers an opportunity to discover a new dance aesthetic (Goodwin et al, 2004). For children with a disability, integrated dance settings provide an opportunity to experience moments of social intimacy. Such moments occur during activities that involve sitting in a circle or holding hands (Helfenbaum, 2009). According to Schwyzer (2005), much work is still necessary to familiarise dance educators with integrated dance. Contact improvisation, creative movement, classical ballet or modern dance can all serve as settings for integrated dance programs (Helfenbaum, 2009). For instance, Cleveland Ballet Dancing Wheels follows an adapted O'Donnel technique (classical modern dance) (Williams, 1999), whereas Axis dance in Oakland California works with contemporary dance incorporating practice of contact improvisation and creative dance (Nonhebel, 2007).

Williams (1999) studied the lived experiences of both dancers with a disability and able-bodied dancers of an integrated dance company called Cleveland Ballet Dancing Wheels. The purpose was to examine the work and significance of the company by focusing on access to dance as both practice and ideology. Methodology involved participant observation, video/photo documentation, interviews, and correspondence with dancers, students, administrators, faculty and parents. Results revealed two themes: agency and aesthetics. Agency reflected the experience of technique and choreography as empowering for all dancers both professionally and personally. Moreover, the orientation of the company in the historical legacy of modern dance contributed to dancers' sense of personal identity and community. For dancers with a disability, access to the experience of dance was considered revolutionary due to stigmatization of individuals with a disability and their bodies. Aesthetics reflected the contrast between the classical modern dance form that guides the work of the company and the non traditional bodies performing that form. Implications of the study support the need to re-evaluate dance as both art

and education. The author states that dance scholarship must recognise the contribution and challenges presented to dance by the innovations of integrated dance. Further research is suggested to explore motivation and experience of dancers with and without a disability in integrated dance.

Whatley (2007) studied inclusive dance technique classes in a university setting in the UK for a nine month period. More specifically she wanted to know the difficulties faced by students with a disability in mainstream university dance classes, challenges of mainstream dance instructors, and different perceptions of dance performed by individuals with a disability. She interviewed 15 students 18-26 years old (two used wheelchairs), and two assistants. The study also involved a survey evaluating the accessibility of higher education dance settings which revealed limited participation of students with a disability. Respondents expressed lack of knowledge in ways to accommodate individuals with a disability and concerns regarding challenges in adapting courses beginning from the initial phase of auditioning students for programs. Interviews revealed that all participants preferred instructor feedback to peer feedback. Participants with and without a disability differed in the following ways: (a) learning - was viewed by able-bodied students as identifying their faults, whereas students with a disability found it to be liberating and skill building; (b) instructional strategy preference - participants with a disability preferred less repetition of structured exercises and more imagery based exploration; (c) perceptions of progress - participants with a disability perceived themselves to be progressing less than their able-bodied peers and perceived physical discomfort to be associated with medical interventions, whereas able-bodied participants viewed physical discomfort as a positive indicator of their progress; (d) level of comfort based on class size - participants with a disability preferred smaller class sizes, whereas able-bodied students felt

larger class sizes was a good way to hide; and (e) movement sensation - participants with a disability found it difficult to relate to movement sensations communicated by the instructor and felt their execution of the movements differed from that which appeared to be the movement of their able-bodied peers. Able-bodied students initially perceived the wheelchair as invading their dance space and regarded the students with a disability as incapable of achieving any level of ability or artistry, but would benefit from dance as therapy. As the program progressed, able-bodied students began to view the wheelchair as an extension of the body integrated into the dance. This change inspired a re-evaluation of dancers and dance as an art form.

However, dance education for many students begins around preschool. Particularly for very young girls as early as three years of age, participation in dance programs is taken for granted (Risner, 2007). Parents of preschoolers seek to encourage their children's creativity and expression, as well as leave the possibility of a dance career open to them if they wish to pursue it (Stinson, 1988). According to Noice and Noice (2006) most dancers commence formal technical dance training between the ages of seven and nine. There have not been any studies to date that investigated children's experiences or perceptions of integrated dance. Research on inclusion in dance can benefit from findings of research in physical education due to the similarity in physical demands of the two contexts.

Inclusive physical education

A review of research on inclusion of students with disabilities in physical education conducted by Block and Obrusnikova (2007) revealed six areas of focus: (a) support - which included anyone who provides assistance to a student with a disability including teacher assistants, peer tutors, or specialists. Support may facilitate the physical education experience of

students with a disability and prevent negative effects on able-bodied peers; (b) effects on peers without disabilities - including students with physical disabilities did not cause significant alterations to the program for able-bodied peers; (c) attitudes and intentions of children without disabilities – these are critical for successful inclusion of students with disabilities. This section discussed the use of theory of planned behaviour and contact theory in studying ways to change attitudes of able bodied peers; (d) social interaction – dealt with the limited social interaction of students with a disability and their able-bodied peers in physical education. These findings indicate that students with a disability do not always have positive experiences in inclusive physical education; (e) ALT-PE of students with disabilities - lack of accommodations on behalf of physical education teachers led to reduced levels of ALT-PE for students with disabilities; and (f) training attitudes of GPE teachers - physical education teachers often have negative feelings and attitudes toward inclusion. Those feelings frequently relate to perceptions of inadequate training and lack of experience, as well as type and level of the disability.

Environmental, curricular, and instructional modifications are also imperative to successful inclusion in physical education (Block, 2007; Gretchell & Cagen, 2006) particularly as they relate to increased social interaction opportunities between participants with a disability and their able-bodied peers (Place & Hodge, 2001). Curricular modifications are adaptations of the general curriculum for the purpose of matching student skill level with lesson content. Examples of such modifications are use of different equipment or changes in game rules. Instructional modifications involve changes to the way classes are organised (including teaching style and class format) and information is presented (including use of verbal cues and demonstrations, methods of communicating with students etc). Environmental modifications

include modification of spatial boundaries of games, defining boundaries with cones or brightly

coloured floor tape (Gretchell & Cagen, 2006)

Children with a disability's experience of inclusion

Experiences described by students with a disability in inclusive environments are also

important in evaluating inclusion efforts, yet those have not been explored to great extent (Blinde

& McCallister, 1998; Fitzgerald, 2005; Fitzgerald, Jobling, & Kirk, 2003; Goodwin &

Watkinson, 2000; Goodwin, 2009). A review of literature on student experience in inclusive

physical education conducted by Goodwin (2009) identified only nine studies that captured the

experiences of children with a disability. Children's ages ranged from 5-19, and they had

physical or developmental disabilities. Children and youth with disabilities expressed enjoyment

of physical activity, and a desire to be active alongside their able-bodied peers. The two central

ideas categorising physical education participation experiences according to Goodwin and

Watkinson (2000) "good days and bad days" were proposed by Goodwin (2009) to view the

findings of the reviewed studies.

Positive aspects (or 'good days' as stated by Goodwin & Watkinson, 2000) consisted of

instrumental support provided by classmates (Butler & Hodge, 2004; Goodwin, 2001; Hutzler,

Fliess, Chacham, & Van den Aweele, 2002) and teachers (Fitzgerald, 2005; Suomi, Collier, &

Brown, 2003) that facilitated successful and meaningful participation. Knowledge acquisition

about performance enhanced skilful involvement (Kristen, Patriksson, & Fridlund, 2003; Suomi,

et al, 2003) and provided an opportunity to demonstrate physical competence. Inclusive physical

education potentially allows participants to gain a sense of belonging, social acceptance, and an

opportunity to enjoy companionship of friends (Butler & Hodge, 2004; Kristen, Patriksson, and Fridlund, 2003).

Negative aspects (or 'bad days' as stated by Goodwin & Watkinson, 2000) consisted of feelings of social isolation resulting from exclusion from extracurricular activities such as outings (Hutzler et al, 2002; Place & Hodge, 2001) or situations where students were being ridiculed (Butler & Hodge, 2004), embarrassed due to their skill competencies (Blinde & McCallister, 1998; Doubt & McColl, 2003; Fitzgerald, 2005; Hutzler et al, 2002), or completely ignored by classmates (Place & Hodge, 2001; Suomi et al, 2003). Peer help was viewed as unwelcomed because it was unsolicited thereby affecting their sense of independence (Goodwin, 2001). Lack of participation opportunities occurred due to teachers not providing adaptations or encouraging any form of involvement (Blinde & McCallister, 1998; Doubt & McColl, 2003; Fitzgerald, 2005).

One of the categories identified in Doubt and McColl's (2003) study of seven secondary school students with physical disabilities was intrinsic factors which contained ways participants found to cope with their feelings of embarrassment and exclusion from extracurricular activities. These included: (a) strategies of self-exclusion which reflected participants choosing to not participate in physical education or other activities due to their disability and embarrassment of needing adaptations; (b) masking the disability which included actions such as sitting on a regular chair in the cafeteria rather than the wheelchair, hiding accomplishments in disability sports, fashionable dressing, and listening to music that their peers would like. This factor was also identified by Hutzler et al (2002) when a participant discussed lying about his brace; (c) finding a niche which included officiating the school hockey teams and playing positions others

did not want; (d) making fun of the disability to get able-bodied peers to feel comfortable around them, this was also evident in Hutzler et al (2002); and (e) educating peers by writing an article in the school paper about sledge hockey, organizing a game with the school hockey team, and teaching friends when to offer help.

Kristen, Patriksson, and Fridlund's (2003) study was different because they interviewed 20 children with physical disabilities between the ages 9-15 who participated in inclusive sports activities after school. The six themes (getting new friends, learning, strengthening one's physique, becoming someone, experiencing nature, and having a good time) were consistent with the 'good days' category. The authors concluded that their findings support the valuable essence of programs that promote cooperation between participants from diverse backgrounds.

Fitzgerald (2005) concludes "We should perhaps look beyond strategies of adaptation and instead begin to question dominant conceptions of ability." (p.55) Ability should be re-evaluated to extend beyond standard measures of performance and normative conceptions of a sporting body. She suggests physical education teachers reconsider activities and practices that best support reconceptualising of qualities valued in physical education. This is consistent with Kuppers' (2000) argument for the need to reconceptualise qualities valued in dance education and the situative approach to teaching.

Benefits of participation in dance

Like participation in sport, participation in dance may improve development in psychomotor, affective, cognitive, and social domains (Green Gilbert, 1992; Kaufmann, 2006; Lutz & Kuhlman, 2000; Nieminen, Varstala & Manninen, 2001). The psychomotor domain includes development of dance skills, strength, flexibility, agility, stamina, control, improved posture, balance, and coordination (Green Gilbert, 1992; Ross & Butterfield, 1989). The

affective domain consists of self-confidence, expression of feelings, and appreciation of different

cultures (Lutz & Kuhlman, 2000). The social domain contains value of individual differences

(Whatley, 2007), friendship, and social skills (Bok Lee, Kim, Hoon Lee, & Lee, 2002; Green,

2000; Lobo & Winsler, 2006; Yoder, 1993). The cognitive domain encompasses enhancement of

body and spatial kinesthetic awareness (Chin, 1988; Minton & McGill 1998; Overby, 1992;

Seitz, 1992), improvement of imagination (Jay, 1991), creativity (Chappell, 2007), and enhanced

vocabulary (Dills, 2007). These benefits are the same for students with mobility challenges

(Helfenbaum, 2009; Kaufmann, 2006; Goodwin et al, 2004).

Sjostedt Edelholm (1999) interviewed children who experienced dance education in

schools in Sweden. Her findings demonstrated that children found it difficult to describe dance.

Children conceived dance as consisting of steps and combinations of steps, combined with

music, and playing. Children found it fun to dance together, but also thought dance was

something serious. They enjoyed learning different dances and thought the teacher was

important. She suggests dance education should contain discussions and analysis of dance (cited

in Lindqvist, 2001).

The combination of contact theory and the situative approach can potentially contribute

to the success of an integrated dance program because dance is not competitive in essence

though perceived by many as such (Horton-Fraleigh & Hanstein, 1999; Peter, 1997). Rather,

dance can provide an appropriate environment to explore Allport's four conditions to reduce

prejudice. Moreover, with regard to participants' initial level of prejudice, exposure to integrated

dance can still have a positive impact on perceptions of dance ability and disability, even if

participants have had previous contact with individuals with a disability in other contexts. This

was demonstrated by Kremer (2005) who described her experience as a ballroom dancer,

dancing with a partner who uses a wheelchair. She stated,

"My daughter Jenna is an exceptional child, so I am not a stranger to those with special

needs. However, before dancing with Ray, I never thought about the possibility of her

dancing with her wheelchair. Working with Ray has made me realize the pre-existing

boundaries that we place on those with special needs only exist because of our own

perceptions and limitations. "(p. 55).

Methodological considerations

Case study

Case studies are commonly used in qualitative inquiry (but can be used in quantitative inquiry as

well) to focus on one case. The 'case' can be one person or a group of people (Stake, 2005). The

case study relies on in-depth data collection, consisting of multiple sources of information such

as interviews, observations, rating scales, documents, and many other sources (Creswell, 2009;

Greig, Taylorand, & Mackay, 2007) that are important for achieving triangulation (which is a

process of clarifying meaning or interpretation). A case study seeks to provide in-depth

exploration of a phenomenon rather than generalize to other situations (Stake, 2005). Due to its

lack in distinctive methodology, case study approach is suitable for investigations in real life

settings, making it appropriate for conducting research with children. Therefore, it can be

combined with other approaches for data analysis such as interpretive phenomenological analysis

(Greig et al, 2007).

Interpretive phenomenological analysis (IPA)

Interpretive Phenomenological Analysis (IPA) is emerging as a distinctive qualitative approach to conducting empirical research in psychology (Chapman & Smith, 2002) including health, applied, social, and clinical psychology (Reid, Flowers, & Larkin, 2005). IPA stems from phenomenology in its attempt to capture participants' experience of a phenomenon (Giorgi & Giorgi, 2008) and combines symbolic interactionism by considering meanings that emerge during or as a result of social interaction (Smith, 1996). IPA is particularly appropriate for investigation of 'unexplored territory' where there may be a lack of theoretical pretext (Reid et al, 2005) Researchers applying IPA tend to recruit small homogeneous samples (Smith & Osborn, 2008). Sources from which IPA derives its data vary and include semistructured interviews, focus groups, diaries, and e mail dialogues (Brocki & Wearden, 2006; Larkin, Watts, & Clifton, 2006; Reid, Flowers, & Larkin, 2005).

IPA aims to explore ways in which participants make sense of their experiences in a particular setting (Chapman & Smith, 2002; Smith, 2004; Smith & Osborn, 2008). It emphasises the experiential accounts of the participants, those accounts are then positioned in relation to a broader social, cultural, or theoretical context in a process of developing an interpretive analysis (Larkin et al, 2006). The research process of IPA is dynamic and involves a double hermeneutic. Participants try to make sense of their world and then the researcher tries to interpret the participants' attempts at making sense of their world (Larkin et al, 2006; Smith, 2004; Smith & Osborn, 2008). The process of conducting IPA is flexible and allows one to choose a rout that is most appropriate based on their individual way of working and the explored topic (Smith & Osborn, 2008). In this study interview transcripts were analyzed using IPA procedures as

suggested by Smith and Osborn (2008). Children's experiential accounts were positioned in relation to ableism, contact theory, and the situative approach.

Focus group interviews

Focus group interviews are now widely used in qualitative research across the social sciences (Wilkinson, 2008). The interviews aim to elicit perceptions, feelings, and attitudes of participants in relation to a given topic (Costigan Lederman, 1990; Morgan & Spanish, 1984; Vaughn, Schumm, & Sinagub, 1996). Focus group interviews are conducted with small groups ranging from 2-12 participants, who can be members of the same family, class, team, or they can be brought together specifically by the researcher based on their belonging to a particular population of interest (Wilkinson, 2008). Focus groups are commonly used with special targeted populations and marketing research (Patton, 2002). In the case of the present study, separate focus group interviews were conducted with the able-bodied children and the children with a disability. Focus group interviews are appropriate for interviewing young children (Graue & Walsh, 1998; Greig et al, 2007; Krueger & Casey, 2000) as they tend to feel safer to express themselves when amongst their peers. Furthermore, participants feed off of each other and keep each other on track (Costigan Lederman, 1990; Graue & Walsh, 1998; Sanders, 1996).

Field notes

Field notes provide the researcher with the opportunity to describe certain aspects of the occurrences in the process of the program in further detail, as well as the chance to reflect on various aspects of the study in progress. Moreover, field notes can potentially contribute to formative evaluation of the program, allowing the possibility of making changes as necessary to improve the overall quality of the program (Bogdan & Biklen, 2003).

Summary

Dance education is the art of teaching dance and facilitating development and learning through dance. Dance education for individuals with a disability is provided by means of adapted dance. Adapted dance can be practiced in both inclusive and segregated settings. In inclusive settings adapted dance is often called integrated dance, which is a dance in which members with and without a disability engage together and each person is considered integral to the process of creation and learning dance.

Ableism is society's tendency to compare and categorise people based on set standards of cognitive and physical norms. Ableist assumptions common in dance, such as the ability to dance depending first and foremost on being able-bodied, limit accessibility of many dance contexts for individuals with a disability. In order to create an accessible dance culture, it is essential to re-evaluate common conceptions of the body and movement vocabulary in dance. This should foster a new understanding of what constitutes dancing.

Contact theory is consistent with ableism on the definition of prejudice based on a group defined as the norm, and those deviating from the norm being defined as different or out of the norm. They both also agree on the concept of discrimination based on inability of individuals to 'fit in' with a given group's set norms.

The situative approach to knowledge construction agrees with contact theory and ableism that standards are set for achieving roles in a given social context. Furthermore, it concurs with contact theory on the value of social interaction experiences in learning and eliciting conceptual change. The situative approach defines conceptual change or growth as either a change in concepts used in communication and problem solving, or an increase in shared participation of community members in a given context (in this case, dance). These definitions provide tools with

which a dance context can be evaluated by means of observations and interviews of participants

in the setting for its potential to elicit changes in children's perceptions of dance ability and

disability.

Contact theory and the situative approach to knowledge construction provide an

appropriate framework for undermining ableist assumptions in dance. This is due to the fact that

they both stress the importance of the context in which learning takes place, as well as the need

for participants to share equal status, common goals, and cooperative work to elicit conceptual

change or reduced prejudice. Moreover, the situative approach's condition of acting with

conceptual agency (finding appropriate and meaningful understandings and strategies for

participation that allow for adaptations in evaluating one's ability to participate in the given

context) to promote conceptual change can potentially enrich contact theory in addressing ableist

conceptions in dance. This is facilitated by encouraging participants to collaborate in solving

movement problems that occur in the process of working with different body types, and creating

new vocabulary related to bodies in dance.

Research in integrated dance is sparse and limited to adult participants such as university

students or members of professional integrated dance troupes. However, dance training for many

commences during childhood. Experiences and perceptions of children in integrated dance

settings can help shed light on the much needed work to familiarise dance educators with

integrated dance. Dance as a context that incorporates learning based on kinesthetic experiences

provides an opportunity to explore ways such experiences can potentially contribute to children's

perceptions of dance ability and disability. Furthermore, due to the context of dance not being

competitive in essence, it provides an appropriate environment in which to explore contact

theory's basic conditions to reduce prejudice.

A review of research conducted with children with and without a disability in other inclusive settings provided background with which to understand the perceptions and experiences of children in this study. Of particular interest were studies that applied contact theory in inclusive physical education contexts, or that described experiences of children with a disability in inclusive physical education. Furthermore, due to the interest of this study in children between the ages 6-9, the perceptions of able-bodied children in those age groups regarding disability were sought.

According to Allport (1954) development of prejudice occurs during the first six years of children's lives. Studies that applied principles of contact theory in adapted physical activity have tended to rely on survey research with children over nine years of age. Studies that did incorporate observations worked with intact groups, and generally did not apply contact theory principles to manipulate the environment accordingly. Therefore a study that applies principles of contact theory to manipulate the settings of an integrated dance context of children between the ages of six and nine, and relies on interview and observation data to investigate children's perceptions and experiences in the dance setting can contribute to the research on inclusion both in dance and in other educational contexts.

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To be or not to be - Able to Dance;

Integrated Dance and Children's Perceptions of Dance Ability and Disability

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Abstract

This study investigated children's perceptions of dance ability and disability and changes to perceptions following participation in an integrated dance program. Focus group interviews, field notes, and observations were used with children with physical disabilities (n =5) and without disabilities (n=9) between the ages 6-9 before and after their participation in an integrated dance program. Ableism, contact theory, and aspects of the situative approach to knowledge construction served as theoretical frameworks. An interpretative phenomenological analysis (IPA) was used to analyze the data. Pre-program interviews revealed three common themes: all kinds of moves, like ballet, and dance ability = turning/jumping. In addition, three themes emerged from interviews with able-bodied participants: can't walk/can't dance, passivity, and different because... Post-program interviews revealed two common themes: emotional/physical and body parts/levels. In addition two themes emerged describing able-bodied children's perceptions: can't walk/CAN dance and different because-equipment. One theme emerged post-program describing perceptions of participants with disabilities: competence. Participation in an integrated dance program can have a positive impact on children's perceptions of dance ability and a more subtle impact on able-bodied children's perceptions of disability.

Résumé

Cette étude explore la perception des enfants de leurs habiletés et maladresse en danse en plus du potentiel quant à participer à un programme de danse intégrée afin de changer leurs perceptions. Des entrevues en groupe, notes prises sur le terrain, et des observations servirent à capturer les perceptions des enfants avec handicap (n = 5) et sans handicap (n = 9) entre l'âge de 6 à 9 ans avant et après leur participation à un programme de danse intégré. Les théories utilisées incluent l'ableisme, la théorie du contact et certains aspects de l'apprentissage situé. L'analyse phénoménologique interprétative est utilisé afin d'analyzer les données. Les entrevues suggèrent la présence de trois thèmes communs : tous les types de mouvements, la préférence du ballet, et l'habilité en danse = tourner/sauter. De plus, trois thèmes émèrgent quant aux entrevues avec les participants sans handicap : ne peux pas marcher/danser, passivité, et différent parce que… Les entrevues après le programme de danse révèlent deux thèmes en communs : émotionel/physique et parties du corps /niveaux. De plus, deux thèmes émèrgent afin de décrire les perceptions des enfants sans handicap : ne peux pas marcher/ peux danser, et différent dû à l'équipement. Un thème émerge après le programme de danse décrivant la perception des participants avec handicap : compétence. La participation dans un programme de danse intégré guidé par les principes de la théorie du contact peut avoir un impact positif sur la perception des enfants de leurs habiletés en danse et un impact plus subtile sur la perception des enfants sans handicap.

To be or not to be Able to Dance - Integrated Dance and Children's Perceptions of Dance Ability and

Disability

Dance for individuals with a disability tends to be interpreted as dance therapy

(Benjamin, 2002; Freire, 2001). Therefore, a large extent of the literature covering topics on

individuals with a disability in dance is therapy based (Benjamin, 2002). Dance/Movement

therapy is defined as the psychotherapeutic use of dance for the purpose of healing the mind,

body, and spirit (Hanna, 1995; Karkou & Sanderson, 2000; Levy, 1988; Rebollo Pratt, 2004;

Sack, 1999; Ward, 2008). On the other hand, adapted dance relates to adapting dance activities,

as well as attitudes and behaviours surrounding dance and disabilities, in order to promote equal

participation opportunities for individuals with a disability (Hutzler & Sherrill, 2007; Sherrill &

Delaney, 2004; Reid, 2003). Adapted dance would be the appropriate setting for individuals with

a disability to engage in dance for the sole purpose of dancing (Sherrill & Delaney, 2004). Most

individuals' first exposure to dance is in a dance education context. Dance education is the art of

teaching dance and facilitating learning through dance (Hanna, 1999; Stolberg, 2006). Much of

the work in adapted dance is rooted in the adapted physical education movement (e.g. Boswell,

1982; Goodwin, Krohn, & Kuhnle, 2004; Roswal, Sherrill, & Roswal, 1988). Adapted dance can

be conceived as education, art, or recreation (Sherrill & Delaney, 2004). Dance may be a

beneficial tool for psychological and physical therapeutic purposes (e.g. Horton-Fraleigh &

Hanstein, 1999; Mendelsohn, 1999; Torrance, 2003; Ward, 2008). However, including

participants with a disability in dance classes is not considered by the teachers or the participants

as 'therapy' (Benjamin, 2002). When able-bodied children attend ballet, or creative dance

classes, no one asks if their program is dance therapy. Why should it be any different for children

who have a disability?

According to Risner (2007) critical social issues in dance education research address three main areas: (a) gender - consists of social construction of gender, feminist perspectives, and gender equity; (b) diversity- covers topics of world dance and non-western forms, intersections of gender race and sexuality, differently abled populations; and (c) cultural context which covers dance education and social history. The topic of differently abled populations has received attention in recent years and addresses two research areas. The first originates from adapted physical education while the more recent work focuses on social construction of disability, and ways in which disability challenges social conceptions of dance. Risner (2007) stated that much of the research is conducted with university students and fails to address the question: "who gets to dance?"

Culture is a determining factor in an individual's right to dance (Hanna, 1999). Culture is a set of values, beliefs, concepts, norms and rules that are shared by a group, and are learned through a discourse process (Hanna, 1995; 1999; Löytönen, 2008). Standards determined for achieving participatory roles within a given culture include cognitive (Kelly & Green, 1998; Greeno & Van De Sande, 2007; Shannon, 1995) and physical capacities (Benjamin, 1993; 2002; Cooper- Albright, 1997; Elin & Boswell, 2004; Kupers, 2000; 2003; Leigh-Foster, 1997; Ritenburg, 2010; Sherlock, 1996; Wainwright, Williams & Turner, 2006; Walker & Walker, 1997; Ward & Hutchinson, 2009).

Society's tendency to compare and categorise people based on set standards of cognitive and physical norms is what Davis (1995) defines as ableism. Individuals who deviate from society's set norms, are perceived as abnormal, disabled (Bruce Marks, 1997; Thomson, 2005), possessing defect (Gill, 1997; Kliewer & Fitzgerald, 2001), or ill (Benjamin, 2002; Goodwin, Thurmeier, & Gustafson, 2004; Kuppers, 2003; Quinlan & Bates, 2008; Reid, 2003). Thus,

disability is viewed as a separate category from 'normal' or able bodied (Cooper-Albright, 1997;

Davis, 1995; DePauw, 1997; Gill, 1997; Kuppers, 2003; Quinlan & Bates, 2008) and is treated as

a medical condition, positioning individuals with a disability as patients needing repair and

normalisation by a medical professional (Benjamin, 2002; Kuppers, 2000). The disability

becomes inseparable from the person's identity (Cooper-Albright, 1997; Davis, 1995; Gill, 1997;

Goodwin et al, 2004; King, 1993; Kuppers, 2000) and the person is perceived to be "suffering"

from the disability (Kuppers, 2003). Two modalities are apparent in society's view of disability:

function and appearance. The function modality emphasises a person's inability to do something

such as walk or dance (Davis, 1995; DePauw, 1997; Goodwin et al., 2004; Sherlock, 1996) and

the appearance modality reflects the way disability is seen leading to emotional reactions such as

horror, fear, pity, compassion, or avoidance (Cooper-Albright, 1997; Davis, 1995; DePauw,

1997; Gill, 1997; Goodwin et al, 2004; Peers, 2009; Sandahl, & Auslander, 2005; Sherlock,

1996). The appearance modality underlies the function modality since society tends to draw

conclusions about people based on their appearance.

Perceptions of dance may potentially contrast ableist perceptions of disability. The

Quebec Education Program defines dance as "a symbolic art of expression and communication

which utilizes human movement as its medium and the human body itself as its material and

instrument." (QEP secondary school dance curriculum, p.5). Dance has evolved through the

course of history from being a main part of people's lives in ancient cultures (Birringer, 2005;

Levy, 1988; Shea, 1998; Udall, 2001) to its current representation as an elite cultural and artistic

form only reserved for those who possess certain physical capacities and body structures

(Benjamin, 2002; Boswell, 1989; Davies, 2008; Elin & Boswell, 2004; Sandahl & Auslander,

2005; Sherlock, 1996). Ballet is likely the most dominate cultural image of dance in western

society (Kealiinohomoku, 2001; Kuppers, 2000; Leigh-Foster, 1997; Ritenburg, 2010; Walker &

Walker, 1997; Ward-Hutchinson, 2009). Ableism becomes apparent in dance when Kuppers

(2000) uses the term 'dancerly body' to refer to concepts of physicality appropriate to specific

dance techniques. Increasing popularity of television shows such as "So you think you can

dance" and "Glee" continue enforcing the conception of a 'dancerly body' as a condition for

participation in dance by limiting participation opportunities for those whose bodies deviate from

that conception (e.g. Glee, season 1, episode 19; So You think You can Dance U.S.A, season 7,

episode 2). Moreover, individuals with a disability tend to be patronised and objectified on these

shows by a culture that defines being able-bodied as the basic condition for being able to dance

(Quinlan & Bates, 2008; Thomas & Smith, 2000). Kuppers (2000) emphasises the importance of

re-evaluating dance practices in order to understand what counts as dancing.

Kaufmann's (2006) definition of dance ability is based on five constructs: (a) body

awareness; (b) spatial awareness; (c) ability to follow oral instruction and music cues; (d) ability

to imitate movement; (e) visualisation and recall skills. This definition does not offer reasons to

assume an individual with a disability would not be able to dance.

Professional dance troupes that include dancers with a disability have emerged since the

1980's with the idea of defying conceptions of who can be a dancer. However, training

opportunities for individuals with a disability are still limited (Goodwin et al, 2004; Schwyzer,

2005). Accessibility to dance training is limited by architectural barriers and attitudinal barriers

related to perceptions that including individuals with a disability would reduce dance training

standards for other participants (Benjamin, 1993; 2002; Helfenbaum, 2009; Kuppers, 2000;

2003; Whatley, 2007). Accessibility can be facilitated by adopting a social model of disability in

dance education, by increasing student awareness to physical norms and values on which various

dance forms are based, as well as ways in which these norms and values can change (Kuppers, 2000). Adopting such an approach is consistent with the situative approach to knowledge construction.

The situative approach to knowledge construction values learning that occurs through participation in a social process of knowledge construction (Greeno, 2006; Salomon & Perkins, 1998). Greeno (2006) refers to learning contexts as activity systems defined as "complex social organizations containing learners, teachers, curriculum materials, software tools and the learning environment" (p. 79). In this context, conceptual growth or change is considered as change in concepts or conceptions used for communication and problem solving, or in increase of shared participation amongst community members. Conceptual growth consists of two processes: 'problematizing' in which current conceptions are challenged and alternatives are suggested, and 'resolving', involving negotiation and new conception adoption (Greeno & Van De Sande, 2007). The process of conceptual growth suggests group members have an equal opportunity to contribute to the learning process, share a common goal, and work in collaboration (Barron, 2000). Conceptual growth in activity systems is based on acting with conceptual agency rather than disciplinary agency. The two agencies differ in their approach to problem solving. The disciplinary agency places the discipline in the authority role, calls for following established procedures, and participants are evaluated for correct performance. The conceptual agency involves adaptations based on critical thinking regarding the appropriateness and meaning of alternative understandings and strategies in an activity domain (Greeno & Van De Sande, 2007). Such notions can be conveyed in activities situated in a dance education context.

The learning context is valuable for its potential to stimulate conceptual change. Aspects such as task or setting can influence group members' ways of thinking and reasoning (Sinatra,

2002). Dance is an artistic form that provides its participants an opportunity to learn through use of the body in motion. Movement is a fundamental way of learning and developing one's ability to perceive oneself and one's actions (Horton-Fraleigh & Hanstein, 1999; Stolberg, 2006). Young children naturally sense and respond to movement as a way to understand and negotiate with their surroundings (Gardner, 2004; Kaufmann, 2006; Lorenzo-Lasa, Ideishi, & Ideishi, 2007; Luntz & Kuhlman, 2000). Gardner (2004) identified movement as a form of intelligence called "bodily kinesthetic intelligence" which is characterized by a person's ability to use his/her body in diverse and skilled ways for expression or goal directed purposes. Bodily kinesthetic intelligence is imperative in the context of dance (Seitz, 1992).

According to Benjamin (2002), "The arts, and dance in particular, provide an environment where current prejudices might be undermined and new perspectives received and explored" (p.72). This statement is not supported by a wide range of research. Moreover, exploring the individual backgrounds of participants in dance programs and ways in which they construct knowledge and make meaning of the world is critical for dance educators (Risner, 2000). Bok Lee, Kim, Hoon Lee, and Lee (2002) emphasise the importance of studying the relationships between cooperative dancing and attitudes towards peers who are socially isolated. Contact theory can potentially contribute to such exploration attempts.

Contact theory states that people naturally tend to form generalizations, categories, and concepts in relation to various types of people. The group referred to by individuals as familiar is termed an in-group, while the out-group identifies people who are unfamiliar or different for various reasons (Allport, 1954). According to contact theory, repeated interaction between the two groups would result in reduced prejudice under four contact conditions: (a) equal status between group members; (b) sharing common goals; (c) intergroup cooperation; and (d)

authority support (Allport, 1954; Pettigrew & Tropp, 2006; Slavin, 1985). Pettigrew (1998)

states that during the contact situation, attitude change is mediated by four interrelated processes:

learning about the out-group; changing behaviour which potentially leads to attitude change;

generating affective ties; and re-evaluating in-group and out-group norms. Contact theory has

been recently used by adapted physical activity researchers in exploration of its potential to elicit

attitude change in relation to students with a disability in inclusive physical education (e.g.

Archie & Sherrill, 1989; Butler & Hodge, 2004; Murata, Hodge, & Little, 2000; Slininger,

Sherrill, & Jankowski, 2000; Tripp, French, & Sherrill, 1995; Tripp & Sherrill, 1991). Most

studies had intact groups of participants older than nine years of age and used rating scales to

measure attitudes of able-bodied participants toward peers with a disability. Some incorporated

observations of natural setting, but only Slininger et al. (2000) manipulated the environment

while at the same time undermining the equal status requirement by assigning able-bodied

participants the role of helpers.

Ableism, the situative approach, and contact theory share a common perspective on

categorization based on set standards considered normal by a given social group. Contact theory

and ableism relate to such categorization natures as prejudice, where those who deviate from the

norm are excluded. Ableism describes an existing problem faced by individuals with a disability,

while contact theory and the situative approach propose solutions to the problem. Conceptual

change based on the situative approach shares commonalities with contact theory regarding the

role social interaction has in constructing knowledge and the conditions leading to attitude or

conceptual change; equal status, common goals, and working in collaboration. Contact theory's

fourth condition, authority support is not discussed as a condition for conceptual change to occur

in the situative approach. However, studies have emphasised the relationship between teachers'

beliefs regarding students' capacity to learn and their choice of learning activities for those

students (Warburton, 2004; Zohar, Degani, & Vaaknin, 2001). Moreover, research has

demonstrated the determining nature of the teacher in the classroom culture. Teachers are role

models of appropriate behaviour in a given classroom culture (Bruce Marks, 1997; Lieberman,

James, & Ludwa, 2004; Shue & Beck, 2001); they can influence student perceptions of the

learning environment (Shannon, 1995; Suomi et al., 2003; Tsai, 2006) as well as student

achievement and motivation (Muis & Foy, 2010).

Aspects of the situative approach such as acting with conceptual agency can enrich

contact theory in addressing ableism in a dance context. In acting with conceptual agency,

participants can be encouraged to collaborate in solving movement problems that occur in the

process of working with different body types and creating new vocabulary related to bodies in

dance (Kuppers, 2000).

Integrated dance (also known as mixed abilities dance) is a dance in which participants

with and without a disability engage together (Dey, 2003; Helfenbaum, 2009; Kaufmann, 2006;

Nonhebel, 2007; Williams, 1999). Integrated dance is guided by the concept that integration

must be practiced with integrity, meaning everyone has a unique and essential contribution to

make (Benjamin, 1993; 2002; Green, 2000; Williams, 1999). This is consistent with contact

theory's principle of equal status relationships.

Empirical studies of integrated dance are limited in scope. Williams' (1999) investigation

of lived experiences of dancers of the Cleveland Ballet Dancing Wheels revealed two themes:

agency which reflected personal and professional empowerment of dancers resulting from their

experience with technique and choreography; and aesthetics reflecting the contrast between the

bodies of the company dancers and the form of dance they perform. Whatley's (2007) study revealed that able-bodied students initially perceived the wheelchair as invading their dance space and regarded the students with a disability as incapable of achieving any level of ability or artistry- but would benefit from dance as therapy. As the program progressed, able-bodied students began to view the wheelchair as an extension of the body integrated into the dance. This change inspired a re-evaluation of dancers and dance as an art form.

However, dance education for many students begins around preschool. Particularly for very young girls dance programs may begin at three years of age (Risner, 2007). Parents of preschoolers seek to encourage their children's creativity and expression, as well as leave open the possibility of a dance career (Stinson, 1988). According to Noice and Noice (2006) most dancers commence formal technical dance training between the ages of seven and nine years.

Sjostedt Edelholm (1999) interviewed children who experienced dance education in Swedish schools and found that children experienced difficulty describing dance. Children conceived dance as consisting of steps and combinations of steps, combined with music, and playing. Children found it fun dancing together but also thought dance was something serious. They enjoyed learning different dances and thought the teacher was important (cited in Lindqvist, 2001). There have not been any studies to date that investigated children's experiences or perceptions of integrated dance. Therefore understanding of such perceptions and experiences must be derived from research findings of other inclusive settings.

A review of literature on experience of students with a disability in inclusive physical education conducted by Goodwin (2009) revealed that, in general, participants with disabilities enjoy physical activity and desire to be active alongside their able-bodied peers. Positive aspects

of inclusion consisted of instrumental support provided by classmates and teachers that

facilitated successful and meaningful participation. Also knowledge acquisition about

performance enhanced skilful involvement and provided an opportunity to demonstrate physical

competence. Participants gained a sense of belonging, social acceptance, and an opportunity to

be with friends. Negative aspects consisted of feeling socially isolated due to either exclusion

from extracurricular activities or being ridiculed, embarrassed, or completely ignored by

classmates. Peer help was viewed as unwelcomed if it was unsolicited thereby undermining their

personal independence. Lack of participation opportunities occurred when teachers did not

provide adaptations or encourage involvement.

According to Allport (1954) development of prejudice occurs during the first six years of

a child's life. Studies addressing young able-bodied children's perceptions of disability and

inclusion revealed that children as young as kindergarten age were able to recognise physical,

cognitive, and social differences (Suomi et al., 2003). Children between the ages 6-10 perceived

physical disability to be a motor dysfunction and the younger of these children perceived

wheelchair use to be due to temporary injury (Tam & Prellwitz, 2001). Schnorr (1990) studied

perceptions of first graders regarding a student with a disability who was integrated part time in

their class and found that children defined their school experience based on themes of "where

you belong", "what you do", and "with whom you play". This study emphasised the significance

of identifying context and time for student interaction and ensuring that such settings are

accessible to students with a disability.

Dance can provide an appropriate environment to explore Allport's four conditions to

reduce prejudice. Moreover, exposure to integrated dance can still have a positive impact on

perceptions of dance ability and disability, even if participants have had previous contact with individuals with a disability in other contexts. This was demonstrated by Kremer (2005) who described her experience as a ballroom dancer, dancing with a partner who uses a wheelchair. She stated,

> "My daughter Jenna is an exceptional child, so I am not a stranger to those with special needs. However, before dancing with Ray, I never thought about the possibility of her dancing with her wheelchair. Working with Ray has made me realize the pre-existing boundaries that we place on those with special needs only exist because of our own perceptions and limitations. "(p. 55).

The purpose of this study is to investigate children's perceptions of dance ability and disability as a function of their experience of participation in an integrated dance program. The research questions addressed are: what are children's perceptions on dance ability and disability? Would participation in an integrated dance program change such perceptions?

Methods

Participants

It was initially intended to recruit ten children with and without physical disabilities to participate in an integrated dance program. However, due to great interest of parents, and availability of volunteer assistant teachers, the limit was extended to 16 children between the ages six and nine ($M = 7. 6$). Five children had a physical disability and 11 children were able-bodied (table 1). Two able-bodied participants dropped out of the program after the first four weeks. In order to assure participant confidentiality, participant's names were replaced with a

pseudonym. Purposeful sampling was used (Creswell, 2007) and participants were recruited using posters, flyers, ads in local papers, and word of mouth (snowball sampling Patton, 2002).

Protocol

Ethical approval was obtained from a university ethics board. Prior to commencing the dance program, parents were invited to an information session regarding the program's purpose and the potential benefits for all participants regardless of physical capacity. Consent forms were distributed at the end of the information session for parents who were interested in enrolling their child in the program.

The integrated dance program ran for ten weeks and was offered one hour a week at a local YMCA. The program was taught by the researcher along with three assistants who were undergraduate student volunteers. The program was structured to encourage frequent interaction incorporating the four principles of Allport's theory (equal status, common goals, cooperation, and authority support). Each class consisted of a warm up, circle time with exercises for strength and flexibility, movement exploration in collaboration, and cool down. Cooperative work was constructed to encourage students to act with conceptual agency in a process of problematizing and resolving. For instance, the entire group learned a short dance sequence, and then were challenged to work in groups of three or four participants at a time, the common goal was to find different ways to interpret the sequence. Each group interpreted the sequence based on its group member's physical capacities as well as their interest in trying to execute the sequence in a different way (i.e. sitting on the floor vs. standing on the feet).

Data collection

A case study approach guided this study since it permits in depth exploration and description of a program (Creswell, 2007; Greig, Taylorand & Mackay, 2007). This approach is suitable for investigations in real life settings, making it appropriate for conducting research with children (Greig et al, 2007). Data collection drew upon observations, filming of classes, focus group interviews, and field notes. Observations of filmed classes provided further support for field notes taken at the end of each class.

Focus group interviews were conducted for the purpose gaining the children's perceptions of dance ability and disability. Focus group interviews are appropriate for interviewing young children (Graue & Walsh, 1998; Greig et al, 2007; Krueger & Casey, 2000) as they tend to feel safer to express themselves when amongst their peers. Furthermore, participants feed off of each other and keep each other on track (Costigan Lederman, 1990; Graue & Walsh, 1998; Sanders, 1996). The pre-program interview guide was pilot tested with a group of six able-bodied children of the same age group. This allowed the researcher to determine the appropriateness of the questions for this age group and make modifications as found necessary. Due to lack of sufficient numbers of children with a disability, it was impossible to pilot test the interview guide with these children.

Two semi-structured focus group interviews were conducted: one at the beginning of the program (Appendix A) and one at the end (Appendix B). Able-bodied children were interviewed separately from children with a disability due to potential differences in experience between the two groups (Patton, 2002). Participants were split into groups of three to five participants per group interview. Pre-program interviews were designated to evaluate perceptions of dance ability

and disability and prior contact experience. Post-program interviews evaluated potential changes in those perceptions as a function of the dance program.

Data analysis

Interviews were recorded and transcribed verbatim. Interpretive phenomenological analysis (IPA) procedures as suggested by Smith and Osborn (2008) guided analysis of the transcripts. IPA allows exploration of ways in which participants make sense of their experiences in a given setting (Chapman & Smith, 2002; Smith & Osborn, 2008). Moreover, it combines symbolic interactionism by considering meanings that emerge during or as a result of social interaction (Smith, 1996). Interpretation of the data was based on the emerging themes and their relationship to contact theory, ableism, and aspects of the situative approach as well as literature in dance and physical education.

Researcher's perspective

According to Reid, Flowers, and Larkin (2005) the nature of IPA requires the researcher to reflect upon their role in the interpretive process. The researcher holds an undergraduate degree in dance education and has been working mainly as a ballet teacher for close to ten years. She is a Master's student of adapted physical activity focusing on inclusion of participants with a physical disability in dance. The dual role of teacher as researcher provided the researcher the opportunity to build rapport with the participants during the program. This facilitated their comfort to express themselves to greater extent during post-program interviews, thereby allowing the researcher to gain an insider perspective (Smith & Osborn, 2008). At the same time, the dual role required the researcher to continuously reflect throughout the process to avoid

having one role influence the other. This was done by taking extensive field notes throughout the process of the study.

Trustworthiness

Triangulation resulted from use of multiple sources of information for assembling the data (interviews, observation, filming, and field notes). Triangulation of theoretical frameworks (ableism, contact theory, and the situative approach) also enriched the process of collecting and interpreting the data (Creswell, 2007). This provided a rich thick description of the study in order to allow evaluation of its potential transferability to other contexts (Creswell, 2007). Peer review of this study occurred throughout the process of its development and implementation. This included review of interview transcripts and discussion of the emerging themes, as well as discussion of issues that occurred during the program (Merriam, 1998). This process provided the researcher an opportunity to reflect on emerging ideas and evaluate the plausibility of such ideas. Pilot testing of the pre-program interviews also provided an element of trustworthiness by providing the researcher practice in conducting and transcribing the interview, as well as feedback regarding the appropriateness of the interview guide.

Results

Question 1: What are children's perceptions of dance ability and disability?

Common themes to all children. Pre-program interviews revealed three common themes for all children in relation to their conceptions of dance and dance ability: all kinds of moves, like ballet, and dance ability = turning/jumping.

All kinds of moves. Defining dance was difficult for all participants. Most children described dance as doing "all kinds of moves". Some were more specific about types of movements, like jumping, turning, lifting legs, the moon walk, or wiggling. Others did not differentiate between dance as a term and forms of dance. For instance, Jenny (with a disability) defined dance as, "it's like hip hop and ballet and jazz and all this stuff." Ali (able-bodied) explained, "it is like hip hop and music."

Like Ballet. Ballet was mentioned throughout the conversation as either a personal dance experience, something seen on television that sparked their curiosity, a favourite dance style, or as a specific form of dance. This latter notion was expressed by Dillon (age 6, able-bodied) "When you dance ballet, you only dance ballet". Hip hop was the second most familiar form of dance to the participants. Two able-bodied girls talked about participating in hip hop classes and two other girls (one with a disability) mentioned it as a form of dance with which they were familiar.

When asked to recall specific dance experiences, descriptions also reflected a dominance of ballet. For instance, Julia (age 8, able-bodied) talked about taking a Broadway dance class which included ballet. Children with a disability differed from able-bodied children in the types of dance memories. For two of the able-bodied girls dance memories consisted of recitals and costumes. Julia (able-bodied) remembered ballet classes as playful, "In ballet we did this thing where there was a stick and there was like a little horse at the end and we did ballet with it. We would hold it and go up and down and gidiup on it." For Jenny (age 6 with a disability) dance class was work, "you have to hold onto that rail (ballet bar) and do those moves" (demonstrates some steps from ballet technique work).

The sense of Ballet being the most familiar form of dance amongst the children was also apparent in some of the girls' movement choices in the first couple of classes. During a gesture circle activity, children were to choose a gesture with which to introduce themselves, Minnie chose to introduce herself with a 'Plie' in a ballet first position. Kaila (able bodied), Dilara and Jena (participants with a disability) began doing various forms of pirouettes upon entering the studio. The pirouettes also reflected what these girls perceived as ability to dance.

Four of the eleven able-bodied children, and three of the five children with a disability did not mention ballet at any point. These children said they had never participated in any dance programs. Hanna (age 7, able-bodied) mentioned she liked Tango but never took classes. Roman (with a disability) mentioned he dances at parties.

Dance ability = turning/jumping. With the exception of two children (one able bodied and one with a disability), all perceived themselves as able to dance. When asked why they thought they could dance, most answered that they could jump and turn. Don (age 9) who used a walker was eager to demonstrate his dance ability by leaning on his walker and jumping. On the other hand, Don also reflected a sense of hesitation, "It might be a possibility I can dance, because I think I can, not that I can, but I'm trying to, you know, dance, because I can do these moves".

There were a couple of children who described their ability to dance as doing cartwheels, or "flips". Jena (age 6, with a disability) was eager to show off her flipping skills, "I can do a flip all the way out there (points to opposite end of room), want to see?" John (age 6, able bodied) said he cannot dance, but then said he can do 'silly moves'. He did not seem to associate being able to do silly moves with being able to dance. Logan (age 7, with a disability) perceived

himself as unable to dance and when asked why he responded with a shoulder shrug. His response was consistent with his behaviour on the first day of the program since he spent the entire first part of the class on his knees and refused to get up and join the other children in any activities where they were moving through space.

Themes specific to able-bodied children. Able-bodied children were presented two pictures, one of a child with a walker and the second of a child in a wheelchair. They were asked if they thought these children could dance and why. They were then asked to try a short assimilation where one of them pretended to be the child with the wheelchair or the walker and others had to try to dance with them. Based on those questions three themes emerged regarding able-bodied children's perceptions of children with a disability and their ability to participate in dance: can't walk/can't dance, passivity, and different because...

Can't walk/ can't dance. For most able bodied children, children who used a walker or a wheelchair were similar in the sense of not being able to walk, and therefore not being able to dance. John explained, "They have something, the one with the wheelchair cannot stand, the one that is standing with the thing... (pointed at walker) could just fall. They can't stand or walk." Minnie (age 6) was very articulate in her reasoning, "They can't dance because they can't walk properly they have to have something to keep them, to help them walk". Her behaviour in the first couple of classes seemed to be consistent with her perception. She stared many times at the children using walkers as they executed various moves. Moreover, there were two children who equated the walker or wheelchair with a medical need. As explained by Dillon (age 6), "It is like a booboo, it's something like something you put on".

Three children deviated from the theme of can't walk/ can't dance. Ana (age 6) conceived that the child with the walker was able to dance "because her feet are on the ground and she has the walker", but did not find it possible for the child in the wheelchair. Even though Ana was able to conceive of the child with the walker as able to dance, her reasoning matched the notion expressed by most children that dancers need to be on their feet. Ali and Julia's perceptions differed from the theme of 'can't walk /can't dance'. Ali (age 8) explained, "He (pointing at the picture of the child with the wheelchair) can, I think because he can move the wheels side to side, and she (pointing to picture of child with walker) can also because her feet are on the ground and she can hold on and do things." Julia (age 8) explained, "Because they are the same, they can do... they can still move. I've seen a show called Glee, and there is a guy in a wheelchair-and he can dance".

Passivity. When asked to role play dancing with the child in the wheelchair or the walker, all children demonstrated an action of taking the person by the hands or moving their chair to dance together. They all talked about doing certain moves together, but their actions portrayed them as the movers, or physical manipulators of movement. The only child who differed from the theme of passivity was Daniela (age 9). She suggested they could stomp feet together and stood by the other child without taking their hands or chair and stomped her feet. There was still a sense in her demonstration of her taking the lead, but the role she chose was more of a demonstrator of movement than a physical manipulator.

The sense of needing to physically manipulate the child with a disability was also apparent in children's interactions during the first couple of classes. For instance, in the first dance class Dillon and Daniela worked with Don (who used a walker). When they were asked to

return to their places after demonstrating their work, Dillon and Daniela noticed Don was slow to

follow them; they responded by running over, Dillon grabbed his walker to push him while

Daniela ran beside Don and Dillon.

Different because... Only two of eleven able-bodied children had previously met a child

with a physical disability. Most children perceived children who use walkers or wheelchairs as

different but their responses to why they were different lacked clarity. Ali (age 8) tried to explain

but ended up stumbling on her words, "Because they are on wheels and we are on feet, well, she

(pointing at picture of child with walker) is on feet... um, oy, it's complicated". On the other

hand, Dillon (age 6) was more certain with regard to what he found different, "Because they

have those things". There were two girls who did not perceive children with a physical disability

as different from themselves. Jill (age 9) explained, "Because they are still people" and Julia (age

8) said, "before they were put in those (walker, wheelchair) they were the same as me". Though

Julia did not find children with a disability to be different from herself, her explanation indicated

children with a disability were not different from her at birth, but became different when they

needed to use the equipment.

The sense of 'they are different from me' was also apparent in children's behaviours

during movement exploration in small groups during the first couple of classes. Daniela and

Dillon (both able-bodied) were working with Don (with a disability) with the assignment to

create together the shape of a letter that appeared in all their names. Daniela and Dillon discussed

ways to create the shape amongst them-selves, but other than Dillon leaning on Don's walker,

they both completely ignored his presence. The same attitude applied to Jill and Hanna's (both

able-bodied) work with Logan (with a disability). Interestingly, this is not consistent with Jill's

comment, "they are still people." The collaboration between group members only happened when either the instructor or assistant instructors got involved.

Question 2: Would participation in an integrated dance program change children's perceptions of dance ability and disability?

Post-program interviews revealed a positive change in most children's perceptions of dance ability. Change was inferred from children's views of what consists of dancing, and who can participate in dance. Furthermore, the kinesthetic experience of exploring various ways of moving and sharing the dance space with children who used walkers was also a contributor to inferring change in children's perceptions. The change was more subtle with regards to able-bodied children's perceptions of disability per se.

Common themes to all children. Two themes emerged from responses of all children regarding the concepts of dance: emotional/physical, and body parts/levels.

Emotional/physical. Dance as an enjoyable activity was reflected in all children's responses as they used the word 'fun' repeatedly in various phases of the discussion. 'Fun' was the first word Daniela (able-bodied) uttered when asked what is dance, to which other participants called out "ya". Don (with a disability) used the word 'fun' when discussing what he learned in the program, "I learned dancing is fun and great, and I really liked it. I think we should continue doing the dance for a while". Roman (with a disability) explained, "It is a kind of movement that is fun, and it is good for your body". Dilara (with a disability) related dance to happiness, "dance is something that makes me happy because it's a lot of fun."

Two girls referred to dance as a means of self expression, Jenny (with disability) said:

"dancing is kind of like cool to me, because when I dance, it like, like it helps me like do

stuff, like express myself, it kind of like helps me like to play and stuff like that, and my

mom, sometimes when we go to the park and stuff like that, I dance and I play, and when

I dance, it just feels like fun to me, because dancing is a really good thing and its fun."

Julia (able-bodied) explained, "I find it is something to do, a way to express your-self. It is

something that is good for you it's not like sitting on the couch and eating popcorn".

Body parts/levels. All classes involved explanation and activities related to ways the

body can move through space, create shapes, as well as time dictated by the music. However, the

notion that any part of the body can dance reoccurred throughout group discussions either as a

way children defined dance at the end of the program, or something they learned in the program.

For instance, Daniela (able-bodied) explained, "dancing is moving" to which Hanna (able-

bodied) added, "all your body". Ali (able-bodied) reflected, "I learned that when you dance, you

can use all kinds of parts of your body, and also, that when you dance, you can use the low level,

the middle level and the high level." Don (with a disability) said, "I learned about making letters

and shapes with our bodies, also, we can dance with many parts of the body, and breakdance."

Dancing as an activity that did not obligate one to be on their feet was also noted by some

of the children. For instance, John (able-bodied) explained, "We learned how to turn on our butt

and get on our stomach and back on our butt..." Logan (with a disability) said, "I learned how to

dance moving on my bum and turning on my tummy."

The idea of dancing in different levels of space or on different parts of the body seemed

to transfer to the way children played during their free time prior to or at the end of classes.

During the first three weeks Jena (with a disability) was playing tag with the able-bodied

children. Occasionally Roman and Dilara (both with a disability) would join. By the fourth class, Daniela, Hanna, and Dillon (all able-bodied) began using actions such as crawling or creeping on their stomachs as part of their game, at which point, Logan (with a disability) began joining in to play. Children's use of lower levels for play facilitated Logan's sense of comfort to join them.

Kaila and Dillon (who were siblings) were the only children whose definitions of dance following the program did not change. Kaila defined dance, "like spinning and leaping" and Dillon said, "dancing is doing all kinds of moves." Such answers reflect the types of answers that children gave at the beginning of the program when dance was associated with more general terms as "all kinds of moves" and more specifically, turning and jumping.

Themes specific to able-bodied children. Two themes emerged with regard to able-bodied children's perceptions of dance ability and disability: can't walk/CAN dance and different because-equipment.

Can't walk/CAN dance. When presented with the pictures of the child with a walker and child with a wheelchair at the end of the program, and asked "can these kids dance?" most children answered yes. When asked to justify their positive response answers were varied, and perhaps not surprisingly related to what they experienced in the program. For instance, Daniela (age 9) reflected: "we saw Logan and Don dancing with us, they are like her (pointing at picture of child with walker), they can dance." Maggie (age 6) reflected on the day Logan attended class with a wheelchair: "they can move their wheels side to side, like Logan did last week." For Minnie (age 6), the idea that children with a disability can dance was reflected at the end of the second day of the program: "I learned that if somebody is in a wheelchair that they can also dance."

Other responses related to ways children with a disability could dance, "They can dance with their feet a little bit and with their hands" said Hanna (age 7). Daniela (age 9) added, "they can dance with their head, and their bodies." John (age 6) thought they could partner, rather than use the walker; "they can stand up and dance with somebody, you can like put your hands on the other person and dance with them." Jill's (age 9) answer reflected not necessarily needing to be on the feet to dance, "Well, they don't all, like if they have a walker, you can be sitting on the floor. You don't have to be necessarily standing the whole time."

Dillon and Kaila were the only children whose responses reflected confusion. At first they both answered that these children cannot dance. Dillon (age 6) began to explain, "because they are hurt". However, he quickly began to shift his answer, to match what his sister was saying; "well, maybe a little bit." Kaila (age 7) began to explain, "they can dance with their head and arms." Then Dillon reasoned, "well, Don and Logan were dancing with us a little bit."

Different because-equipment. Most able-bodied children still found children with a disability to be different from themselves. However, their definition of difference was based on the walker. For instance, John explained, "they are different from me because they use a walker, and I don't. Also Logan wears a helmet." Other children also related to the pace in which children with a disability moved. For instance, Kaila explained, "they move more slow and they need to go with that (walker)."

Ali (age 8) was the only child whose perception of children with a disability changed. However, her reasoning still involved the walker. She said, "I think they are kind of the same, because they can still do whatever I do, but they need a walker."

The notion of the walker still imposing a difference was apparent in Dillon's behaviour around Don's walker. In the 9th lesson, Dillon repeatedly kept touching pulling and leaning on Don's walker. However, Dillon only spoke directly to Don, when they were both lying on the floor trying to create the shape of their letter. On the other hand, Dillon connected with Logan during a circle activity in the third lesson (during this section of the class, none of the children used their walkers). Their connection reached the point where it was difficult to separate the two from playing together throughout the rest of the program.

Themes specific to children with a disability. One theme emerged from children with a disability regarding their ability to dance: competence.

Competence. Responses of children with a disability revealed a sense of competence based on the dance knowledge they had acquired. Most participants with a disability found that they were not required to execute movements that they could not execute. Two children who mentioned movements they could not execute found that modifications were offered to help them. One child found suggested modifications unsatisfactory and made additional modifications of her own.

Only two children in this program used a walker. Don used his walker at all times throughout the program, excluding activities that did not require him to be on his feet. Logan only used a walker during the first four weeks of the program until he gained confidence to leave it on the side. Then, he never came with it. He did however attend one class in a wheelchair because he did not have his braces that day. This theme was apparent in their reflections of their experience in the program, as they both felt now certain that they could dance. Logan reflected,

"I can dance with my walker and my helmet." Don said, "I can dance with my walker, or I can roll or scoot on my bum, or turn on my tummy."

Discussion

The purpose of the current study was to explore children's perceptions of dance ability and disability as well as the possibility that participation in an integrated dance program would change such perceptions. Ableism and contact theory were the two main theoretical frameworks that guided this study. Aspects of the situative approach to knowledge construction were also explored for the purpose of enriching contact theory in changing conceptions of ableism in the dance context.

This study revealed that participation in integrated dance can have a positive impact on children's perceptions of dance ability. Changes in perceptions were inferred based on both kinesthetic experience of sharing the dance space and exploring diverse ways to move their bodies within that space (Gardner, 2004; Kaufmann, 2006; Lorenzo-Lasa, Ideishi, & Ideishi, 2007) which enhanced changes in children's understandings of the elements of dance such as body movement and levels of movement in space (Newlove & Dalby, 2004).

Pre-program perceptions of dance ability and disability

Pre-program interviews revealed three common themes for all children: all kinds of moves, like ballet, and dance = jumps/turns. In line with previous research findings all children demonstrated difficulty with defining dance (Lindqvist, 2001; McFee, 1992). Dance as a term was confused with forms of dance, mainly ballet. This is consistent with the observation that ballet is the most dominant form of dance in western society (Kealiinohomoku, 2001; Kuppers,

2000; Leigh-Foster, 1997; Ritenburg, 2010; Walker & Walker, 1997; Ward-Hutchinson, 2009).

Moreover, the fact that many of the girls had prior experience with taking ballet when they were

younger provides support to Stinson (1988) who discussed parents seeking to place their pre-

school aged daughters in ballet.

Dance = jumps/turns. In terms of contents of dance, only large scale movements such as

turning and jumping were considered by most children as moves that represented ability to

dance. It is often expected of dancers to be capable of executing turns and leaps across the stage

(Boswell, 1989). Therefore it was not surprising that able-bodied children did not think children

with a disability could dance.

Pre-program interviews with able-bodied children revealed three themes regarding their

perceptions of children with a disability and their ability to dance: can't walk/can't dance,

passivity, and different because... All three themes are consistent with assumptions related to

both the function and appearance modalities apparent in society's view of disability (Davis,

1995; Thomson, 2005) as children reacted to pictures presented to them of children sitting in a

wheelchair or standing with a walker. Based on the appearance of the children in the pictures,

assumptions were made regarding their inability to function.

Can't walk/can't dance. Children's responses to being asked if the children in the

pictures could dance were very much aligned with ableist assumptions relating to the function

modality (Davis, 1995) and demonstrate the tendency to make immediate assumptions regarding

an individual's inability to function based on their appearance. This alignment was demonstrated

in children's immediate and highly articulated responses relating to assumptions that the children

in the pictures were unable to stand or walk. The children without a disability made the expected

conclusion that children with a disability cannot dance (Bruce Marks, 1997; Davis, 1995;

DePauw, 1997; Funk, 1986; Goodwin et al., 2004; Hahn, 1986; Sherlock, 1996; Whatley, 2007).

Moreover, Dillon's (age 6) association of the wheelchair or walker with a medical need

coincides with ableist assumptions that position a person with a disability as a patient needing to

be cured (Benjamin, 2002; Cooper-Albright, 2001; Emens, 2007; Goodwin, 2003; Hahn, 1986;

Kuppers, 2000; Quinlan & Bates, 2008; Thomas & Smith, 2000). However, it also provides

support to the findings of Tamm and Prellwitz (2001) who found that children between the ages

6-10 perceived children sitting in a wheelchair to be injured.

Passivity. The notion of inability to participate in dance continued into the theme of

passivity which demonstrated that children felt they would need to physically manipulate a child

with a disability's body to make them dance together (Cooper-Albright, 1997; Peers, 2009).

Ableism assumes individuals with a disability are incapable of having control of aspects of daily

living (Cooper-Albright, 1997, 2001; King, 1993; Paxton, 1992). Children's behaviours during

interactive activities on their first day dancing together reflected such assumptions as able-bodied

children seemed to ignore the presence of the child with a disability in their group during

decision making processes. Moreover, Dillon's independent decision to push Don's walker

without first consulting Don emphasised the assumption of passivity by demonstrating that

Dillon assumed Don was incapable of moving himself or even asking for help.

Different because... Able-bodied children perceived children with a disability to be

different, but were ambiguous as to why. Most of the able-bodied children had no previous

contact with children with physical disabilities. As predicted by both ableism and contact theory,

the lack of contact experience within able-bodied children's natural environment would lead

able-bodied children to perceive children with a disability as outside of the norm, different, or as

the 'out-group' (Allport, 1954; Davis, 1995). Moreover, the context in which previous contact

occurred could also influence perceptions of difference. This was found to be the case for one of

the children who had previous contact with children with a disability when she visited a

therapeutic center they were attending. These findings match those of Schnorr (1990) regarding

children's tendency to categorise school experiences based on where they belong, with whom

they played and, what they did.

Post-program perceptions of dance ability and disability

Post program interviews with all children revealed two themes: Emotional/physical, and body

parts/levels. Regarding dance ability one theme emerged for able-bodied children: can't

walk/CAN dance, and one theme emerged for children with a disability: competence.

     Emotional/physical. Many comments included under the emotional/physical theme

reflected children's enjoyment of the program. Enjoying the context in which the contact

situation takes place is imperative for the contact situation to be effective in re-evaluating norms

of the in-group and out-group (Allport, 1954; Lieberman, James & Ludwa, 2004; Pettigrew,

1998; Sherrill, 2004). Some children talked about dance as good for the body. Their comments

likely reflected topics discussed in physical education classes rather than the dance program,

since one of the three competencies addressed in physical education in the Quebec Education

Program is adopting a healthy active life style (MELS, 2001).

     Body parts /levels. Children's reflections demonstrated a change from conceptualizing

the body as a whole and engaged in dance primarily on the feet, to isolated body parts dancing

and incorporating movement at different levels. This can be interpreted as a new understanding

and appreciation of dance as manipulating bodies in space (Kuppers, 2000). This change can also

be viewed as an example of conceptual growth as change in concepts or conceptions used for

communication and problem solving (Greeno & Van De Sande, 2007). This change in

conceptions transitioned into the way both able-bodied children and children with a disability

reflected on dance ability.

Can't walk/CAN dance was a theme in able-bodied children's reflections on children

with a disability participating in dance. Children used their new understanding of movement with

various body parts and using different levels in space to explain why they now thought children

with a disability could or could not dance. Reflections of children during post-program

interviews such as those of Jill, Hanna, John and others demonstrated children's ability to act

with conceptual agency in the process of evaluating what constituted dance ability (Greeno,

2006; Greeno & Van De Sande, 2007). Evaluating dance ability moved from basic discipline

expectations of able-bodiedness requiring dancers to be on their feet, to the idea that dancing can

occur without necessarily standing or walking. Acting with conceptual agency in this case led to

conceptual growth as an increase in shared participation amongst community members, as able-

bodied children reflected an ability to conceive of children with a disability participating in

dance along their side (Greeno & Van De Sande, 2007) thus facilitating inclusion of those

normally excluded from a dance context (Souza Lima, 1995). Many children also reflected the

reason for changing their conceptions of dance ability to be based on what they saw in the

program. This relates to learning through sense experience (Murphy, 2007), and points

particularly to the value of kinesthetic experiences in children's learning (Gardner, 2004;

Kaufmann, 2006; Lorenzo-Lasa, Ideishi, & Ideishi, 2007).

Competence was a common theme expressed by children with a disability. For the two children who used walkers, it came from their new found understanding that they can use their walker to dance, or leave the walker on the side and dance on other body parts. For Logan, this theme was also reflected in the increase of his self-confidence to join the able-bodied children during free play outside of the dance context. This is not only a reflection on conceptual growth (Greeno & Van De Sande, 2007) and equal status (Sherrill, 2004) but also provides support to the literature that discusses an increase in self-confidence as one of the benefits of participating in dance (Green Gilbert, 1992; Kaufmann, 2006; Lutz & Kuhlman, 2000; Nieminen, Varstala & Manninen, 2001).

Different because-equipment was the only theme in able-bodied children's perceptions of disability that demonstrated only a subtle change. Most children still perceived children with a disability as different from them-selves, the change was only that they were less ambiguous about what they found different. They all talked about the walker. It is possible that the dance program was too short (ten weeks including interview and party with parents). Other reasons can be related to the contents of the program.

Contact theory states that reduced prejudice occurs when participants in a contact situation share equal status, common goals, work in cooperation, and have authority support (Allport, 1954; Pettigrew & Tropp, 2006; Slavin, 1985; Slininger et al., 2000). All participants were treated equally by the instructor and assistants. However, equal status depends on participants sharing a bidirectional relationship where each of the participants has something to gain from the contact situation (Sherrill, 2004). A strong sense of equal status was felt on the second day of the program when the lesson was about levels. However, this sense of equal status

was more of a kinesthetic experience than the idea of sharing a bidirectional relationship as

defined by Sherrill (2004). Working close to the ground at the middle and deep levels allowed

children who used walkers to leave them on the side, thereby physically removing all visible

differences. Perhaps adding a couple of extra classes of this type could have helped with

changing children's perceptions of difference. Due to time constraints that was not possible. Also

the goal was to fully include children with a physical disability in dance as equals without having

to necessarily remove their equipment and make them look 'the same' as able-bodied children

(Doubt & McColl, 2003; Whatley, 2007). Participants shared a common goal which was

preparing a short presentation for their parents at the end of the program. In addition, each class

incorporated activities that were meant to engage children in cooperative work. However, most

of the time, if an adult did not remain present supervising the work, children either began to play,

or did not converse much amongst themselves. It is important to emphasise that the issue of

children not conversing much amongst themselves was not specific to interactions between able-

bodied children and children with a disability. Adult supervision is imperative for young

children's cooperative work from the initial phase of assigning children to groups and throughout

the process of interaction between group members. This is consistent with the findings of Suomi

et al (2003) who described the formation of the 'leftover' culture resulting from teachers

allowing students in early elementary physical education to pick their own partners, as well as

situations during tag games where students with a disability were left standing after being tagged

because none of the able-bodied children wanted to save them. Therefore, when setting up

cooperative work with young children an adult should remain in the role of a facilitator, not

necessarily providing direct instruction but assuring that all children are equally contributing to

the cooperative process.

Increase in occurrences of free play between Logan (with a disability) Dillon, Daniela, Hanna and others would indicate a sense of Logan being accepted by able-bodied children as part of their in-group (Pettigrew, 1998). However, incidences of free play did not generalise to Don (with a disability) as he never participated in free play with any of the other children throughout the program. This can be an issue of personal characteristics of the individuals involved in the contact situation (Allport, 1954). One of those aspects is personality which could pose a significant barrier on the process of able-bodied children accepting Don as part of the in-group. When Don attended classes, he fully participated in the dance context of each class. However, during free play prior to or after class, Don tended to sit on the side, many times turning his back to the other children. Kaila (able-bodied) only interacted with her brother during free play. The only child with whom she played other than her brother was Jenny (with a disability). This is also most likely due to Jenny's active and outgoing personality in addition to her disability not being very visible.

Another issue relating to participants was the consistency of attendance. On average children attended 80% of the program. However, Don who was the only participant who used a walker at all times, was absent for four consecutive weeks. Contact theory states that for contact to be effective in reducing prejudice, contact must be repeated consistently (Allport, 1954; Pettigrew, 1998). This can also explain Dillon's (able-bodied) need to touch Don's walker during the ninth lesson. Logan attended all but one class. He stopped bringing his walker to class after the fourth lesson and began to fully participate in all class activities independently. Moreover, he began playing frequently with Dillon. Perhaps consistent with Tamm and Prellwitz (2001) Dillon perceived Logan as someone who was hurt but got better since he did not need his walker any more.

The only children whose perceptions of dance ability and disability did not change from pre- to post-program interviews were Dillon and Kaila (siblings). Their responses post-program reflected a tone of confusion. Given that the two of them attended 90% of the program, it is impossible to infer that their confusion was related to inconsistency of their attendance. Davis (1995) stated that disability is a sense experience that is both perceived through the senses and impairs a person's senses. The level of visibility of disability in this program setting may have impacted the confusion in Kaila and Dillon's responses. They were asked if the children in the pictures presented to them could dance. One picture was of a child with a walker and the other was of a child in a wheelchair. The equipment makes the disability more visible. Three children with a disability in this program did not use equipment. Out of those three, two children had gait issues but were able to walk, run, and play tag like any of the able-bodied children. Even parents of the two who used equipment thought their children were the only ones with a disability in the group. Logan stopped bringing his walker to class after four weeks, and fully participated in class activities as well as free play. Don was the only child who needed his walker at all times (thereby matching the description of the children in the pictures), and he was absent 40% of the program. Perhaps Dillon and Kaila needed more time with children who used walkers and wheelchairs to be able to re-evaluate their perceptions of dance ability in relation to participants with a disability.

Davis (1995) stated that once a person with a disability successfully performs, they are no longer considered to have a disability. This notion was also apparent in Quinlan and Bates (2008) when they discussed the sick role which no longer suited Heather Mills due to her performance on Dancing with the Stars. Consistent with these findings, perhaps Dillon and Kaila were able to

conceive that Logan and Don could dance because they did attest to seeing them dance in the class. However, the children in the pictures were still hurt. Therefore they could not dance.

Conclusions

This study sought to explore two main questions. What are children's perceptions on dance ability and disability? Would participation in an integrated dance program change such perceptions? Perceptions were investigated with the use of semi-structured focus group interviews at the beginning and at the end of a ten-week integrated dance program. Additional information regarding children's behaviours during the program was derived from observation field notes.

The present study demonstrated that participation in integrated dance may change children's perceptions of dance ability as it relates to the ability of those with a disability to dance. Able-bodied children's perceptions of disability per se presented only a subtle change. Thus it provided partial support for Benjamin's (2002) statement, "The arts and dance in particular, provide an environment where current prejudices might be undermined and new perspectives received and explored" (p.72). The application of contact theory principles (repeated interaction opportunities perceived as fun, non-competitive, and encouraging equal status relationships) to the construction of the dance activities along with acting on conceptual agency from the situative approach (accepting that there are many ways to dance, and not all of them require the dancer to be on their feet) contributed to conceptual growth viewed as an increase in shared participation of all group members in the dance context. This was accompanied with conceptual growth viewed as change in concepts used for communication and problem solving. Children were able to transfer their learning of certain elements of dance such

as movement with different parts of the body and in different levels to reflect on how children with a disability can participate in dance. With regard to changing able-bodied children's perceptions of disability, the change was subtle, reflecting a transition from viewing disability as something different and unclear to viewing it to be different only because of the equipment. Perhaps more time spent in an integrated dance program would help undermine children's perceptions of difference.

Limitations of this study

There were no participants who used wheelchairs. The difficulty in recruiting children who use wheelchairs could be related to parents thinking that children who use wheelchairs cannot dance (Goodwin, 2004). However, it can also be related to transportation issues. This limited the visibility of disability in the dance context.

Able-bodied children were asked to respond to questions about children with a disability based on pictures of a child with a walker and a child with a wheelchair. It is possible that these pictures limited the extent to which disability was perceived, particularly when three participants with a disability in this study did not use any equipment. Another potential limitation was that children with a disability were not asked about their perceptions of disability, or if they perceived able-bodied children to be different from them. This was due to researcher's concern regarding the sensitivity of such questions and the young age of the children.

Given that this study was a case study, findings from this study cannot be generalised to other situations. However, results of this study can provide insight for future studies of children in integrated dance.

This study did not explore the process of change in children's perceptions within the dance context. Therefore it did not provide sufficient evidence to fully evaluate equal status relationships between participants in the program. Interviews with the participants demonstrated change in their perceptions but it is difficult to determine if the change was influenced by the existence of equal status, common goals, cooperative work, or just participants enjoying the context.

Recommendations for future research

Given the limited extent of empirical studies of integrated dance and that this study may be the first empirical exploration of children in integrated dance context, research in this area could take a variety of directions. Questions that have been investigated in physical education such as how teachers feel about including a child with a disability in physical education should also be explored in dance. Parents are just as important in the process of participation in dance as they are in any other context, how do they feel about their child with a disability participating in integrated dance? The same concern can affect parents of able-bodied children deciding whether or not to enrol their child in integrated dance. Based on the findings of this study, future studies should investigate the process of change in children's perceptions relating to their experience of participation in an integrated dance program. It would also be valuable to explore children's perceptions of dance ability and disability in relation to social economic status, gender, and age as those factors can influence such perceptions.

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Table 1

Description of participants

Age	Gender	Disability	Assistive device
	Participants with a disability		
6 y 4 m	f	Left arm	None
9 y 6 m	m	CP-Hemiplegia	None
6 y 0 m	f	CP	None
9 y 1 m	m	CP	Walker
7 y 0 m	m	CP	Helmet, braces, occasionally walker or wheelchair.
	Participants without a disability		
8 y 11 m	f		
6 y 0 m	f		
8 y 6 m	f		
6 y 8 m	m		
9 y 0 m	f		
7 y 0 m	f		
6 y 2 m	f		
9 y 2 m	f		
6 y 5 m	f		
7 y 9 m	f		
6 y 9 m	m		

Appendices

Appendix A

Interview Guide-pre-program

Pre interview routine

Introduction

The purpose of this meeting is to learn about what you think about dance, and who can dance.

There are a few important rules we have to follow so that everyone can have the chance to

participate: 1. There is no special order for speaking here, if you have something to say, say it.

2. When someone else is speaking, wait till they are done, then speak. 3. You don't need to agree

with everything other people are saying, but say what you think without hurting anyone's

feelings. 4. We don't have a lot of time together, so I may need to stop you, or move to another

question. If you have more you wanted to say, you can either write it down and give it to me next

time, or come talk to me at the end of the meeting.

Do you have any questions before we start?

Opening questions

1. What is dance?

2. What styles/kinds of dance do you know?

3. What is your favourite type of dance?

4. Did you ever participate in dance classes?

- What kind of dance was it?

- When did you participate in dance classes?

- What do you remember from those classes?

Key Questions- Questions about participants' perceptions of dance ability and disability.

5. Has anyone been watching "So you think you can dance"?

    - Was there anything that you saw in the show that you really liked?

6. Do you think you can dance? What kinds of moves can you do?

7. (Show picture of child in wheelchair) How about this person, do you think s/he can dance? Why?**

8.   Have you ever met a child like him/her?**

    - Where did you meet this child?

9. Do you think they are different from you?

    - What makes them different or the same as you?**

10. In this program we are going to dance together with children just like him/her. Do you have any ideas for how we will do that?(participants role play for this question, one participant will play the child in wheelchair/walker while other will play able-bodied participant, they will explore movement potential in the given situation)

11. This program is brand new. Do you have anything special you would like to try to do in this program?

Concluding questions

12. Is there anything you would like to add?

13. Do you have any questions?

(**questions that were not used when interviewing the children with a disability)

Appendix B

Interview guide- post-program

Introduction

Now that our dance program is over, I have a few questions I would like to ask you so that I can learn from you about things you liked or did not like in the program. I also want to see what you think now about dance and who can dance.

There are a few important rules we have to follow so that everyone can have the chance to participate: 1. There is no special order for speaking here, if you have something to say, say it. 2. When someone else is speaking, wait till they are done, then speak. 3. You don't need to agree with everything other people are saying, but say what you think without hurting anyone's feelings. 4. We don't have a lot of time together, so I may need to stop you, or move to another question. If you have more you wanted to say, you can either write it down and give it to me next time, or come talk to me at the end of the meeting.

Do you have any questions before we start?

Opening questions

1. What is dance? (I know I asked you this question last time, but now I want to hear if anyone has new ideas about dance)

2. Did you enjoy being in this dance program? Why?

3. Which activities did you like? What did you like about these activities?

4. Which activities did you not like? What did you not like in these activities?

Key Questions- Questions about the program and participants' perceptions of dance ability and disability.

5. What did you learn in this program?

6. Tell me about your first day in the program.

7. *Show pictures of children with walker and wheelchair, can these children dance?

    •   What makes you think these children can/cannot dance?

    •   What kinds of moves can they do?

8. *How did you feel about dancing with children who used a walker?

    •   Did it make your class harder or easier and how?

9. *Once you started talking to each other, dancing together, and playing did you feel you were different from each other?

    •   What made you feel you were different or similar?

10. Would you register to a dance program like this again? Why?

11. Do you have any suggestions to make this program better?

Concluding questions

12. Is there anything you would like to add?

13. Do you have any questions?

(Participants with a disability were not asked questions marked with *)

<div align="center">Questions for children with a disability</div>

1. For some of you this was the first time you participated in a dance program outside of your school. Can you tell me a little bit about how it felt for you?

2. How did you find the exercises we did in this program?

    •   Were there things you felt you could not do?

- If there were things you could not do, were you able to find a different way to do them? How?

3. I noticed that in the beginning you did not join the other kids in their games, then when you started to play with the other kids, there were days that you played and other days you sat on the side. What made you decide to play or not?

Appendix C

Description of the integrated dance program provided to the Westmount YMCA

(Components of this letter were also used to explain the program to the parents in the information session)

My name is Michelle Zitomer, and I am a graduate student in the department of Kinesiology and Physical Education at McGill University, focusing on integrated dance. I hold an undergraduate degree in dance education and a Quebec teaching permit for dance. As part of my thesis study, I am looking to create an integrated dance program for children between the ages of six and nine with and without physical disabilities.

My goals for this program stem from the interaction between my functions as a researcher and a dance educator.

- As a researcher, I am looking to explore children's perceptions of dance ability and disability, as well as how a program of this sort can increase interaction opportunities between children with a disability and their able bodied peers. In such, I will have two focus group sessions. The first one will be held prior to beginning the program, in order to explore children's initial perceptions of dance ability and disability, as well as to gain some feedback regarding their expectations of the program. The second focus group will be held at the end of the program. It is meant to see whether perceptions of dance ability and disability have changed as a function of the program, as well as get feedback regarding the program itself for future improvements of the program. In addition, classes will be filmed in order to allow me to further explore the courses of interaction between the participants. The films will not be used beyond the purposes of this study, and will be destroyed as soon as the study is completed.
- As a dance educator I am looking to create an environment in which each member has an equal opportunity to participate and contribute to the group activities. In doing so, each participant will be challenged to find movement solutions, work in collaboration and develop dance skills based on individual ability.

Given that this program is my thesis study, I cannot charge participants for their enrolment in the program, therefore, the program will be offered for eleven weeks free of charge. As a thesis study, this program is supervised by my McGill thesis supervisor Dr. Greg Reid (email: greg.reid @mcgill.ca), as well as two other professors on my thesis committee. In such it must also pass a McGill ethics review prior to commencing, in order to assure that participants' rights are protected and there is no risk of physical or psychological harm.

This program is the first of its kind in Montreal offering a unique opportunity for children with a physical disability to participate in dance alongside their able-bodied peers. Integrated dance

programs are becoming more common in the U.S.A and Europe. In Canada they are still not as developed. Programs are offered in Ottawa, Calgary and Vancouver.

Integrated dance allows its participants to gain many benefits associated with participation in dance. Such benefits are:

Physical development:

- Dance as a form of exercise, has the same benefits of any physical activity in reducing health risks.
- Development of dance skills
- Body awareness, control, balance, posture, and coordination
- Physical strength, flexibility, agility and stamina.
- Stress release

Cognitive development:

- Increase vocabulary in relation to dance resulting from interaction and exploration of movement potential.
- Solve movement problems finding alternative ways to execute movement based on individual capacity.
- Follow directions
- Creativity and imagination
- Critical thinking

Affective development:

- Understanding one-self
- Expression of feelings
- Increase self-esteem
- Self-discipline
- Appreciation of different cultures

Social development:

- Cooperate with others
- Bonding through sharing space and ideas
- Discover the value of individual differences and develop tolerance.

Please do not hesitate to contact me should you have any further questions or concerns.

Sincerely,

Michelle R. Zitomer

Email: michelle.zitomer@mail.mcgill.ca

Appendix D

Recruitment poster