Circle dance as a healthcare strategy: a narrative review of the literature

Imara Moreira Freire¹ (Orcid: 0000-0002-9805-7974) (imoreirafreire@gmail.com)
Maria Cecília de Souza Minayo² (Orcid: 0000-0001-6187-9301) (maminayo@terra.com.br)

² Escola Nacional de Saúde Pública, Fundação Oswaldo Cruz. Rio de Janeiro-RJ, Brazil.

Abstract: A narrative literature review was conducted from the scientific databases PubMed, SciELO, BVS MTCI, LILACS, and Web of Science, searching for production on the topic to analyze and discuss how the circle dance is being used in Health and, thus, understand its therapeutic potential in care. The articles found were evaluated by the thematic analysis and highlighted the following issues: the relationships established between the Integrative and Complementary Practices in Health (PICS) and care production; circle dance as a strategy to promote physical and emotional health; creativity and the senses of collectivity experienced by circle dance practitioners. We observed that the circle dance can stimulate more harmonious relationships with oneself and the community. It reduces stress and depressive symptoms, promotes expanded body awareness, self-confidence, and autonomy, improves cognitive and psychomotor skills, physical performance, and balance, and brings benefits such as a sensation of relaxation and pleasure. In this sense, the literature points to evidence of the positive effects of the circle dance practice on various health-related outcomes, which can be considered a powerful care strategy.

Keywords: Circle dance. Dance Therapy. Health. Complementary Therapies.

DOI: http://dx.doi.org/10.1590/S0103-7331202333059.en

Received: 06/06/2022 Revised: 28/10/2022 Approved: 21/11/2022
Introduction

Circle dance is part of the twenty-nine practices that comprise the Integrative and Complementary Health Practices (PICS). The PICS value forms of sensitive care guided by the perspective of Health, not the disease, accepting weaknesses as variations of living and reaffirming the importance of disciplinary plurality for developing practices that consider the human being comprehensively (SANTOS, 2016). The possibility of offering non-fragmented care, which enhances horizontal articulations between different knowledge and practices, is a way to encourage comprehensiveness, one of the fundamental principles of the Brazilian Unified Health System (SUS).

The approach used by the PICS aims to stimulate the natural mechanisms for preventing diseases and recovering Health from a conception of the human being as an indivisible unit. This understanding resonates with the discussions brought by Luz (2019) about a type of medical rationality not only concerned with pathological diagnoses and pharmacological treatments but that invests in the power of life. The vitalist paradigm sustains this thought, the basis of the philosophy of physician Georges Canguilhem (1904-1995), which brought an affirmative view of human beings and their potential. The discussions undertaken by the author about the definitions of normal and pathological point to a kind of violence contained in the modern logic of understanding these concepts, which makes subjects hostage to the unique and hegemonic discourse of medicine.

This article proposes to investigate circular dancing, included in the Policy of Integrative and Complementary Practices (PNPIC), through Ordinance N° 849/2017 of the Ministry of Health. Circle dance is an expressive body practice inspired by cultures worldwide, as folklore and contemporary dances are playful and artistic expressions.

With movements full of meanings and expressive metaphors, circle dance enables the body’s sensory awakening, reorganizes subjects’ psychic dynamics, and re-signifies their experiences (MOYA, 2021). Because it is a group activity, one can experience the interconnection between individuals, the community and the feeling of union and belonging during its practice. Also characterized as physical activity, it favors psychomotor balance and mind-body articulation and provides relaxation feelings.
People of all ages can practice circle dance. It does not require the participant to have previous knowledge and skill and does not inspire concern about performance. Its primary meaning is to provide experiences of integration and physical, mental, emotional, and social well-being. Dance circles can be offered in places like parks and squares, health and education institutions, companies, and private places. They only require to be driven by a focuser that drives the movements. According to Ramos (1998), the focuser is the person who keeps the group’s attention, supports it and backs the feelings and sensations that may arise during practice.

The repertoire of circle dances contains traditional and contemporary choreographies accompanied by music, chants, and rhythms from different cultures. The movements bring multiple symbolism and creative manifestations that tell elements of human history (BONETTI, 1998).

The contemporary movement of the circle or sacred circle dances began with the German/Polish dancer Bernhard Wosien in his passage through the Findhorn community in the north of Scotland. Bernhard Wosien (1908-1986) was born in Masuria, a town of Passenheim in East Prussia. In 1926, he had one of his first formal experiences with dance and performing arts with a group of young people who had been formed at the Opera Theater in Breslau (Germany) by painter Oskar Schlemmer.¹ (1888-1943) and dancer and movement theorist Rudolf Von Laban² (1879-1958).

During his training at the State School of Arts in Berlin, Wosien began working as a dancer, choreographer, and, later, a dance teacher in theaters in Germany. In 1952, contact with a Serbian folk dance group called “Sorbian Folk Art Ensemble”³ marked the onset of his interest in the poetic richness of folk dances. He also acted as a dance pedagogue, developing movement and expression therapy methods applied to children with behavioral and psychiatric disorders. In 1976, he was invited by the Findhorn community to share his knowledge of sacred dance traditions. Wosien introduced his way of interpreting folk dances, presenting variations with classical music, slow movements, and circles as a meditation to have an in-depth spiritual and community experience of Findhorn residents. As it is said in the circles that practice them, Bernhard Wosien is considered the father of circle dances, and Findhorn is considered the mother, the diffusing source of this movement to different countries in the world (RAMOS, 1998).
Circle dances arrived in Brazil at the end of the 1980s through Carlos Solano and Sarah Marriot, former residents of the Findhorn community. The Nazaré Socialization Center in Nazaré Paulista, inland São Paulo, was one of the first places to spread this practice, and the sacred circle dances indeed spread nationwide from there (BERNI, 2019). Contemporary circle dance movements are mainly organized around three axes: Health, Culture/Education, and Spirituality (BERNI, 2019). In the field of Health, some research brings the use of dance as a therapeutic strategy with the potential to improve well-being and promote quality of life.

This article aims to review the literature to analyze and discuss how circle dance is used in Health and to understand its therapeutic potential in care processes. Therefore, we present a narrative review of the literature on the practice of circle dance and its importance for Health. This methodology enables a critical analysis of the studies to consider the researcher’s subjectivity in selecting and interpreting information.

We conducted a bibliographic search in the following scientific databases: PubMed, SciELO, BVS MTCI, LILACS, and Web of Science, using the following combinations of keywords and descriptors (DeCS/MeSH), in Portuguese and their correspondents in English, along with the Boolean operator “AND”: Circle Dance, Health, Dance Therapy, Complementary Therapies.

The material was collected from August 2021 to March 2022, when national and international full articles were selected. We did not restrict the year of publication due to the scarcity of studies on the subject. Considering the publications relevant to the study, 20 articles were selected for analysis.

Results and Discussion

The 20 selected publications were read fully to answer the study’s guiding question. The analysis was based on the principles of thematic analysis proposed by Minayo (2015) and Minayo et al. (2020) to identify theoretical categories, which resulted in four axes: (1) Integrative and complementary practices and the production of health care; (2) Circle dance and promoting physical and emotional health; (3) Creativity and meeting oneself; (4) Sense of Community.
Of the articles analyzed, 11 bring results from research in Brazil, with the State of São Paulo concentrating most studies (6). Nine texts are from other countries, written in English, one from the United States, one from Nigeria, and the others from European and Asian countries.

The texts were written as of 2006, with a significant increase in publications from 2014 onwards. This growth is supported by the literature that points to the worldwide acceptance of practices that use therapeutic resources based on traditional knowledge, including bodily practices such as circle dance (SOUSA et al., 2017). In Brazil, this discussion gained momentum with the publication of the PNPIC in 2006 and the subsequent inclusion of new practices in 2017 and 2019.

Among the selected studies, a balance was identified in the methodological choices. That is, 50% of the studies used qualitative methodologies presenting participants’ experiences, reports, and narratives; 40% applied quantitative methodologies with instruments to measure the proposed objectives and control groups; and 10% used methodologies that combined quantitative and qualitative strategies. The setting points to the growth of quantitative research on the therapeutic use of dance, which, on the one hand, can bring gains in the sense of presenting scientific evidence and strengthening the importance of this practice for quality of life, prevention, and health promotion, on the other hand, research should not assume a positivist bias, reinforcing the hegemonic discourse of producing absolute, universal, and replicable truths.

Regarding the participants, we observed that women were the exclusive target population to receive interventions that included dance in half of the studies: two with women with breast cancer; one with primiparous women; one with menopausal women; one with women with low back pain; and five with older women. These percentages do not differ from the results that point to gender and healthcare issues. Pinheiro et al. (2002) consider that women seek more services for disease prevention, while men seek them when they get sick. The smaller male presence in studies on the dance practice associated with health can also be thought of from the social imagination, according to which dance is an activity of the female universe.

Thirty percent of the studies conducted had older adults as subjects, showing the search for alternatives or complementarity for treating chronic diseases for socially vulnerable people. We could not identify any study with children and adolescents.
The fact that half of the surveys were held in health institutions in several parts of the world shows that hospitals, PHC units, clinics, and rehabilitation centers are opening up to the benefits of dance as an accepted and legitimized complementary practice.

Four comprehensive thematic axes were built from the content of the collected material: (1) Integrative and complementary practices and the production of health care; (2) Circle dance and promoting physical and emotional health; (3) Creativity and meeting oneself; (4) Sense of Community.

Integrative and complementary practices and the production of healthcare

Research carried out by Carvalho et al. (2019) and Junior et al. (2014) points to the critical thinking established in health concerning the hegemonic biomedical model. This perspective has reinforced the concept of illness to the detriment of health promotion and comprehensive human care. Such criticisms are not new in Health. Ayres (2004) argues that health practices are undergoing a legitimacy crisis because of their limited response to the complex health needs of individuals and because they contrast with technological advances in the field.

Disease emphasis triggers fragmented care, which affects the relationship between health professionals and people seeking care. Campos (2003) also points out that the clinic has limitations, as its object of study and intervention are reduced and have an unbalanced, biological-biased approach, forgetting people’s subjective and social dimensions. This author believes such a reduction authorizes a lack of responsibility for comprehensive subjects in favor of the disease-related approach, where individuals are seen in a fragmented way and as if they personified their illness.

Luz (2005) draws attention to the crisis of medicine as an institution, which hampers the doctor-patient relationship; and the health crisis, understood as a product of societies whose care for the population reproduces the profound socioeconomic inequalities. The author points out that:

The paradigm that governs contemporary medicine has moved away from the human subject as a living totality in its diagnostic investigations and intervention practice (p. 151).
Other medical rationales have emerged in these crises, emphasizing the subject’s centrality in care practices and providing more space for the doctor-patient relationship (TESSER, 2012). Carvalho et al. (2019) highlight the importance of discussing and building approaches that transcend the individual, curative approach and stimulate interdisciplinary and intersectoral work, incorporating primary prevention actions, care, and health promotion. Actions that legitimize the perspective of and for the subjects are not limited to the biological aspects of the disease and pain but include the psychological and social aspects of any analyzed case. The authors point out that using the so-called light technologies that associate clinical care with relational issues, listening, reception, and interpretation of subjects or their caregivers is necessary.

Having as a reference the discussion held by Geertz (2001) on the importance of cooperation between the social and natural sciences, we should highlight that the criticisms of the hegemonic biomedical model do not aim to show a division but rather a complementarity between the different approaches to care in the field of Health. According to the author, it is necessary to identify the linking and unlinking aspects between the areas of knowledge so that practices are integrated, interdisciplinary, and multidisciplinary, benefiting patients. In this sense, we agree with Bateson who, back in 1958, warned that directing criticisms of an accusatory nature to the medical clinic generates disjunctions and polarizes the diverse practices so necessary in Health, artificially separating nature-culture, biological-social, physical-mental-collective health concepts.

Converging with what has been said, Wachekowski et al. (2021) and Junior et al. (2014) consider that circle dance can be used as a non-drug intervention and care humanization strategy, complementing medical treatment, as it allows body-mind coordination and promotes relaxation, concentration, and body awareness. Thus, it contributes to understanding the other as a unique being with autonomy, limitations, and singularities. The authors believe these benefits complement clinical treatments, opposing the biomedical technicism that does not consider the cultural, social, and psychological aspects of promoting, protecting, and preventing health problems.

The understanding of Health as a possibility of moving through the rules and norms imposed by life, experiencing changes according to personal parameters, dialogues with the thinking of Canguilhem (2009). The author understands
Health as how the subject relates to himself and the environment. The concept of vital normativity, developed by him, concerns the permanent creation of ways of being in the world, which expands (or contradicts) the classic biomedical view, as it includes and welcomes subjectivities and singularities. Vital normativity brings the idea of vitalism as an ethics of respect and defense of life as opposed to an ethics of domination and determination of life.

In a sense mentioned above, the PICS may have the potential to question the primacy of the more classic biomedical foundations and the old and canonical current healthcare standards, thus presenting themselves as a way of resisting what hinders the opening of the thinking from multiple perspectives. The advent of PICS, the growing demand for this type of care, culminating in its formalization as a legitimate practice in the Unified Health System are elements that stir reflections on the possibility of an ongoing paradigm shift, as Barros and Luz (2020) state:

The PNPIC-SUS expanded the possibility of creating new care cultures in the SUS, with a regimen of cultural representations grounded on positive meanings of non-biomedical practices and with the construction of new subjectivities of a set of agents and their non-biomedical care agencies (p. 2).

This movement towards greater supply and demand for the use of PICS shows the potential of these practices for public Health and comprehensive care for the population.

**Circle dance and promoting physical and emotional Health**

Authors Salihu *et al.* (2021), Eyigor *et al.* (2009), Koch *et al.* (2019), Borges *et al.* (2020), Abdolahian *et al.* (2014), Sawanyawissuth *et al.* (2013) and Mukherjee *et al.* (2014) conducted studies to assess how different folk dance interventions and dance therapies can positively affect participants’ physical and emotional Health. All these studies used quantitative instruments to measure in two stages in groups that practiced it and in control groups before and after the intervention with dance. They aimed to gauge results.

For Salihu *et al.* (2021), Eyigor *et al.* (2009), Koch *et al.* (2019), and Borges *et al.* (2020) studies have shown that dancing practice reduces stress and depressive symptoms, improves physical performance, balance, and quality of life. In the research by Borges *et al.* (2020), participants showed significant improvement in symptoms related to depression and no longer needed to use antidepressant medication.
Barreto et al. (2020) and Abdolahian et al. (2014) conducted studies with circle dances to reduce pain. The results indicate that the participation of women in regular groups of these dances reduced pain and improved physical, mental, and emotional well-being and personal satisfaction. Barreto et al. (2020) add that the gestural artistic expression and the choreography of the dances sensitized people and promoted and expanded their body awareness. Abdolahian et al. (2014) believe that working with dances is a low-risk complementary treatment and can reduce pain intensity and increase pregnant women’s satisfaction with care during the active phase of labor.

The articles by Koch et al. (2019), Eyigor et al. (2009), and Sawanyawisuth et al. (2013) also point out that folk dance practices and therapy through dance movement improve cognitive and psychomotor skills, physical performance, and balance.

Janyacharoen et al. (2015) evaluated the effects of Thai dance on cardiopulmonary factors in menopausal women. They concluded that the results were favorable. After six weeks of exercises with this type of dance, the participants significantly improved cardiorespiratory resistance and lung function capacity.

Mukherjee et al. (2014) research found positive results when assessing the impact of regular kathak dance practice on Bengali women. The authors considered that practicing for at least five years, one hour a day of kathak dancing, facilitated the control of obesity, helping sedentary women to achieve a healthier life.

**Creativity and meeting oneself**

Circular dance is a playful, expressive, and reflective manifestation in the studies of Fleury and Gontijo (2006) and Silva et al. (2021) conducted with older women. It is presented as a practice that allows expressing feelings and emotions through body movements, favoring creativity and expanding consciousness. Wosien (2000) describes dance as the most immediate figurative language that flows from movement, “it is the first testimony of creative communication” (p.28), a path of self-understanding, approximation, and reconnection of the human being with the divine, where body and movement find space for creative expression.

Silva et al. (2021) point out that dance stimulates the ability to dream and the imagination, providing meaningful interactions with external reality and redefining aspects of life when facing challenges. Costa and Cox (2018) add that the intense
focus and attention on the movements and music create opportunities that favor meeting oneself.

This meeting with the internal rhythm that enables the organization and understanding of external reality is grounded on the studies on creativity developed by British pediatrician and psychoanalyst Donald Woods Winnicott (1896-1971). He argues that creativity is the basis on which every relationship between the individual and the world is built, as creative appreciation gives individuals the feeling that life is worth living (Winnicott, 1975). Meeting oneself is feeling real. Having a sensation of existence promotes the integration of the self and allows interaction with the world from spontaneity, thus preventing life from being entirely subjected to the imposed reality. Winnicott believes this condition indicates Health.

Fleury and Gontijo (2006) and Costa and Cox (2018) state that dance offers multisensory, emotional, cognitive, and somatic experiences, which benefit self-esteem, self-investment, self-development, self-realization, and self-regeneration. These authors believe that dance as a unique and meaningful experience is recognized as a continuous and stimulating opportunity for learning and a feeling of competence.

Being able to express oneself according to one’s particular needs is seen by Fleury and Gontijo (2006) as a protective condition against the fear of failing or not being able to perform dance movements correctly. This feeling is replaced by the satisfaction of being in a circle of people and receiving mutual support, which strengthens the potential of each participant.

Circle dance is not a performance practice. In this sense, the error does not become a problem, and its acceptance generates greater confidence in the participants in themselves as it allows them to reorganize their internal balance. Winnicott affirms that creative living does not require exceptional talent and can be understood as a healthy and pleasant performance in the world (WINNICOTT, 1975). In the author’s words:

The creative impulse can be seen as a thing in itself, something necessary for an artist to produce a work of art. However, it is also there when anyone – baby, child, teenager, adult, or older adult – observes something healthily or does something deliberately (p. 114).

Also, Silva et al. (2021) argue that participants describe the dance experience according to their perceptions and feelings. Likewise, Junior et al. (2014) reaffirm that it is necessary to dance to discover and appropriate the meaning of this experience.
The authors believe “dance opens up playful and transitional possibilities for the path to unity” (p.2152). Here, the practice of circular dance is understood, as well as many rituals, as an inner exercise that gathers movements, interaction with others, and the sharing of affections, which, in Winnicott’s thought, means psychosomatic integration; that is, about the interweaving of the psyche and the living body, seat of sensations of emotions and movements. Drawing a parallel with the thought of José Gil (2002), philosopher and dance theorist, we can affirm that dancing opens up the body to its connections, “the danced movement releases the affections that, in a floating state, are spread in the consciousness” (p. 122).

Catib et al. (2008) affirm that the original and creative movements connect the individual with himself and allow the outbreak of previously unnoticed emotions, particularly the strengthened self-confidence necessary to undertake transformation processes. In dialogue with Gil (2002), we can understand the distinction between the body’s movements and its usual everyday functions, such as walking and the act of dancing, because “the body truly speaks” in the latter (p. 68). The author also observes that the danced gestures are endowed with meaning. This sense differentiates them from ordinary gestures, leading to understanding dance as a language endowed with symbology. Wosien (2000) argues:

Dance is scaled-up life and, therefore, delimited against other rhythmic movements attributed to sport and gymnastics and all works. The dance communicates from the point where breathing, representation, image, and oneiric experience emerge and become creative, detached from the plane of prosaic reality and earthly shackles (p. 26).

Unlike body movements in their usual functions, the gesture in dance is not instrumental due to its great capacity for expression, “It speaks of a world” (GIL, 2002, p. 69). Catib et al. (2008) understand circle dance as a cultural artistic expression. Winnicott understands art as a form of expression of culture, an experience in direct continuity with children’s games. For the author, the field of arts, culture, and religion is where the creative illusion is maintained, allowing the individual to preserve the ability to play in adult life.

The research carried out by Borges et al. (2020) talks about playing in a circle as an experience that establishes changes in the state of the body based on emotions and positive feelings. It emphasizes that playing revives collective memory, transcends the moment of dance, and expands the creative experience. Dias (2003) affirms that
playing is the basis of the symbolization process and the forerunner of the adult’s ability to get involved in culture, religion, and art.

The results presented by Borges et al. (2020) also show that the collective built around playing forms a set of emotional and social knowledge that transforms sick and depressed bodies into bodies available for joy, for meeting the other, for the act of creating and rebuilding oneself. The creative power of games favors the manifestation of personality and brings pleasure and Health.

The possibility of seeking new meanings for emotions, stories, and experiences through circle dances can offer those who participate a creative experience regarding their healthcare. It also promotes the production of new symbolizations based on psychic elaborations about health and illness experiences. After all, as Laurens Van Der Post (apud Barton, 2006 p.77) reminds us in “A Story Like the Wind”: “By dancing the magic circle with the sick, not in body but in heart, they dance health from one to the other and bring the divided person back into the unity of the tribe.”

Sense of Community

One of the central characteristics of circle dances is their realization as a group practice. Costa and Cox (2018) recall that the essence of circle dances is linked to different peoples’ cultures and ancestral histories and, therefore, can be considered facilitators of the socialization process without distinction or hierarchy.

The groups are seen as strategic for developing and maintaining bonds, providing a sense of belonging, considered by Costa and Cox (2018) as a motivating factor for dancers to attend the circles. The feelings of support and recognition guarantee and strengthen individuality. The authors believe that the ethos of circular dance authorizes participants to build a social identity as “circle dancers”, expanding their geographical horizons to different spaces where the circles take place.

Simultaneous belonging to a local group and a universal community was described by Fernandez and Beltran (2022). According to the authors, dancing together promotes a sense of family and community, helping to collectively create conceptions of identity, Health, and well-being that combine ancestral and intergenerational knowledge. Traditional cultures are recreated and manifested in urban contexts through the “Kalela” dance, as analyzed by Mitchell (1956). A mediator of sociocultural changes, this tribal dance is experienced as symbolic resistance and affective and social refuge. In Wosein’s view (2000, p. 43): “dance is
not only an ideal means of meeting oneself but also oneself meeting the community so that the step of each one finds their live expression in the group”.

The feeling of support, reception, and belonging offered by the dance group brings us to the thought of Kaes (2005). The author affirms that the group is an intermediate space of support and mediation that favors the capacity for symbolization, the internal transformation processes, and the production of meaning and creativity, returning to what has already been said in the analysis of the categories above. Castanho (2017) ends this reflection by stating that circular dance is collective, aggregating, and playful, allowing access to group representations and the subject’s singularization.

In the light of Winnicottian theory (1975), reaffirming what has already been said by other authors, the circular dance circle can be understood as a holding space. This safe environment allows the dancer to trust, live a creative experience, express feelings and emotions, and feel welcomed. The author’s concept of holding refers to constructing a reliable environment where the support function allows for integration experiences. The possibility of transiting between the space of subjective reality and social reality concerns the function of the group that favors a subjective and intersubjective experience of tolerance and trust. This understanding is similar to that of Brasi and Couto (2019) and Costa and Cox (2018), who add that the environment experienced in circle dances favors the inclusion of all, a term very dear to Collective Health. Wosien (2000) argues that properties such as encouraging expression and dissolving tensions, contractions, and inhibitions are elements of the circle that stimulate the release of creative and organizing energies (p. 109). In the wake of Dunker’s thinking (2015), circle dance circles can be experienced as an affective “clearing”, where subjects find a place to walk cooperatively, facing the suffering of competitive relationships in the contemporary urban world.

Frison et al. (2014), Junior et al. (2014), and Fernandez and Beltran (2022) point out that the possibility of working with the individual and the community in the dance circle is enhanced by the arrangement in a circle that favors homogeneity among the participants who, hand in hand, turn their attention to the center in an experience of rooting and union among equals. Junior et al. (2014) emphasize the power of the circle, stating that circle formation and holding hands have a special meaning because it provides uninterrupted contact: “The circle represents all, and its points denote the identity and individuality of each participant” (p. 2.152). Its
image evokes balance and integration of differences and interdependence. Silva et al. (2021) and Vianna et al. (2012) also emphasize the position of equality among the participants, which favors coexistence with diversity and difference, which has an inclusive nature. That is, it does not matter where the dancers are in the circle dance group, as each participant has a unique and equally valuable role that helps the circle to function as a family in constant cooperation.

The circle’s power as a symbol is present in different cultures; Lévi-Strauss (2008) describes the social organization of certain peoples based on a circular housing configuration. The author argues that this circularity is social life’s regularity. The circle’s image as a gathering of complementary opposites is related to the principle of reciprocity. In analogy, circle dance can be considered a social cohesion and sociability factor.

Sampaio (1998, p. 102) affirms that the circle represents the “awareness of the communion of each individual with the whole”. Personal identity is preserved within the community, as the circular format that represents the whole has individuality at each point, which is why it is considered that cooperative relationships represent the ability to live together in unity within diversity in circular dance. In forming the circle, each participant is always supported by the two people beside him. In a nutshell, symbolically, the circle formed by the circular dance circle is a space of belonging, cooperation, security, solidarity, and unity.

Final considerations

The research results show that circle dance is a strategy to access emotional life, transforming the physical body and the social experience of participants in the circle. The unique movements provided by the playful dance language trigger creative processes, favoring psychic reorganizations and the construction of senses and shared meanings about the reality experienced by the dancers, allowing the experience of the vital normativity proposed by Canguilhem. The literature points to evidence of the positive effects of practicing this dance on Health, reaffirming it as a powerful care strategy in certain circumstances and for different groups. All cases studied showed its effectiveness for care humanization.

Bateson (1958) states that the integration of a society is to preserve some balance between aggregating and disaggregating trends. In this sense, this review joins the
search for understanding the complexity of health-disease processes – which are not just a biomedical occurrence – giving space for the emergence of subjects in their singularity and universality. The focus is psyche-soma integration which, in feelings of belonging, solidarity, and reception provided by dance, promotes Health.

Although the amount of research production on PICS is still timid, we can infer the increasing demand for these practices, circle dance being one of them. However, it is necessary to invest in new experiences, expand the groups and conduct other investigations that further study the aspects already demonstrated or pointed out in-depth. For example, we have not identified any experience of the circle dance’s effects on children and adolescents.

Finally, this study is aligned with the need for the health area to adopt new care practices and evaluate their effectiveness for comprehensive care.4

References


BATESON, G. Naven: a survey of the problems suggested by a composite picture of the culture of a New Guinea tribe draw from three points of view. 2nd ed. California: Stanford University, 1958.


Notes

1 Oskar Schlemmer: German painter and sculptor, professor at the Bauhaus school of avant-garde design. Inventor of mechanical gestures and sculptures to serve as costumes in ballet.

2 Rudolf Von Laban: dancer from Slovakia, his theories on movement and choreography are among the main foundations of modern dance. He understands dance as a natural language of the body and reconnected with its mythical, ritualistic and philosophical roots (KING, 2016).

3 Serbian Folk Arts Group in Bautzen. It still exists and is inspired by the traditional cultural and folk traditions of all regions of Lusatia in the form of songs, music, costumes, dances, and customs.

4 M. Freire and M. C. S. Minayo: Conception and design; data analysis and interpretation; article writing; Critical review of the content; Final approval of the version to be published.
Resumo

A dança circular como estratégia de cuidado em saúde: revisão narrativa da literatura

Com objetivo de analisar e discutir como a dança circular está sendo utilizada na área de saúde, e assim compreender seu potencial terapêutico nos processos de cuidado, procedeu-se a uma revisão bibliográfica a partir das bases de dados científicas PubMed, SciELO, BVS MTCI, LILACS e Web of Science, buscando a produção sobre o tema. Os artigos encontrados, avaliados pela análise temática, evidenciam as seguintes questões: as relações estabelecidas entre as Práticas Integrativas e Complementares em Saúde (PICS) e a produção de cuidado; o uso da dança circular como estratégia de promoção da saúde física e emocional; processos de criatividade e os sentidos de coletividade vivenciados pelos praticantes da dança circular. Observou-se que a dança circular é capaz de estimular relações mais harmoniosas consigo mesmo e com o coletivo, reduz o estresse e sintomas depressivos, promove a ampliação da consciência corporal, autoconfiança e autonomia, contribuindo para melhorar habilidades cognitivas, psicomotoras, desempenho físico e o equilíbrio, trazendo benéficos como sensação de relaxamento e prazer. Nesse sentido, a literatura aponta evidências sobre efeitos positivos da prática de dança circular em vários resultados relacionados à saúde, podendo ser considerada uma estratégia potente de cuidado.