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Common injuries identified in Malay Dance Farah Fadzali, April 2021

The traditional dance forms of the Malay communities in Singapore are wide-ranging and diverse: *Zapin*, *Joget*, *Asli*, and *Inang* are just some of the many examples amongst others. However, the underlying beauty of this traditional dance is a series of complex and dynamic footwork, performed repetitively to achieve pinpoint finesse in its execution. Together with the countless hours of practice, it places extremely high stress and strain on the dancer's lower limbs like the foot and ankle. Along with dance practice lasting several hours a day, dancers often risk stress fractures and other overuse injuries. In this article, we will look at some common injuries identified in Malay dance.

Zapin: Elegant, soft and subtle body movements.

Joget: Performed on a quick tempo with duple and triple beat divisions while dancers make fast rhythmic hand and foot movements.

Asli: Owing to its soft and gentle rhythm, *Asli* is a graceful dance form where every movement has a meaning.

Inang: *Inang* is usually performed with grounded and graceful foot movements. Long scarves are also held in hands like props while performing, which add to the charm of this dance form.

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Evolution of Malay dance forms

During the early days, Joget was referred to as the female court dancers in the state of Pahang, West Malaysia. Whilst Zapin was derived from the Arab roots, Joget was greatly influenced by the Portuguese folk dances known as Branyo/Brundo and Farapeirra (during the Portuguese occupation of Malacca)⁵.

It was noted that the fast paced Joget music is closely related to the European 6/8 dance forms, namely the Tarantella and Fandango. Unlike the other Malay dance forms, Joget has a fairly quick tempo with music emphasizing duple and triple-beat division with movements that are generally different for both males and females^{2,8}.

Basic movements of the Latin dance traditions in Joget were seen through the rhythmic coordination of both hands and the intricate shuffling of feet. During the coda segment of the dance, known as Tandak, movements such as skipping heel-toe from one leg to another are performed by the performers. Hence, as part of a festive climax, Joget is often performed last in a repertory^{8,9}.

The old concept of Malay dance perceived as slow, gentle and monotonous has since emerged with choreographers examining the possibilities of blending in *Silat* and *Randai* (traditional Malay martial arts) and fusing movement patterns of other cultures together^{8,9}.

One of them would be the influence of Indian classical dance which have also contributed to the leg movements seen in Malay dance today. For example, dance repertoires that were performed by the Malay performing arts groups in Medan have adopted leg movements from *nritta* in *Bharata Natyam*. As a result, many of the dance motives of traditional Malay dance performed today are a result of the potent adaptation of other dance traditions^{8,9}. As such, the complexity of this traditional dance form often places stress on the lower limbs^{1,2}.

Common injuries identified

Foot and ankle injuries ^{1,3,4}:

Sprained ankle

Ankle sprains can occur when a dancer lands from a jump, overstretching or even tearing the ankle ligaments (twisting of the ankle joint). Depending on the



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severity of the sprain, the ligament injury can vary from a partial to a complete tear of the ligament. The symptoms of an acute ankle sprain manifests as pain and swelling commonly over the outer ankle region.

Achilles tendinitis and Plantar fasciitis

Inflammation to the Achilles tendon (tendon connecting from the heel bone to the calf muscle) is caused by intense, repeated physical dance activity as well as inadequate strength in the muscles that support the arch of the foot or poor footwear. Plantar fasciitis is the inflammation of the tissue that runs across the bottom of the foot and connects the toes to the heel bone. Both achilles tendinitis and plantar fasciitis can be a recurrent problem especially in dancers with long standing tightness in their calf muscles³.



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Knee injuries^{1,6}

Patellofemoral pain

Pain around or behind the knee cap may be caused by excessive dance training (overuse) of the knee joint, trauma (hitting/falling), tight hamstrings, tight achilles tendon and/or poor foot support⁷. Some symptoms include grinding or clicking sound of the kneecap when knees are bent.

Stress fracture⁶: metatarsals, tibia and lumbar spine

Stress fractures (hairline crack) occur due to overuse or repetitive impact where damage is done to the bone over time. Oftentimes, stress fracture happens when dancers suddenly increase the frequency, intensity or duration of the dance exercise without sufficient rest or proper incremental training⁷. The symptoms include pain when walking and swelling at the top/bottom of the foot.

Hip injuries⁶: snapping hip syndrome, hip impingement

Improper form, overuse and fatigue often caused injuries to the musculature around the hips. Symptoms include pain in the lower back, groin, side of the hip and glutes.

Treatment, injury prevention and conclusion

Seeking treatment early is crucial for the longevity of a dancer's career⁷. Read [here](#) for more dance injuries related articles where we address issues such as cross training, periodisation, injury prevention, rest and many more.

Since, more stress and strain are being placed on dancer's knees, feet and ankles, here are some injury prevention tips^{7,10,11}:

- proper warm up of the lower body by mobilising the joints and lengthening the muscles
- Include strength, flexibility and endurance exercises into training
- Increase training intensity, load, time and distance only per week, and allow adequate adaptation to avoid injury
- Avoid overtraining and burnout by decreasing load, intensity and time of training if performance is diminishing due to pain/injury
- Rest (active rest or constructive rest)



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It is also important to identify the unreported injuries and causes from these ethnic dancers as they often received little attention in medical literature as compared to the western dance forms. With the increasing number of traditionally trained and versatile dancers, perhaps it is a good time for dancers, dance educators and healthcare practitioners to start looking into the underlying methods of performance enhancement in relation to ethnic dancers in Singapore. This will further aid and enhance the wellbeing of our ethnic dancers.



End

An MSc in Dance Science graduate from Trinity Laban Conservatoire of Music and Dance, Farah has multiple experience in teaching movement therapy in various organisations in Singapore.

Farah is now a dance science researcher studying injury prevention and performer's health and safety practices. Together with her achievements and qualifications, Farah hopes to work towards the development of dance science research in Singapore.

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