

Xenres Kirishima, Dancer & Choreographer
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Emotional well-being and response to injuries

Farah Fadzali, February 2021

Professional dance is a physically demanding career path with a high injury prevalence. Developing better knowledge surrounding the cultural beliefs and behaviours related to injury reporting is critical to understand their incidence and burden.

Many research has showed that most dancers have experienced injury during their careers^{8,10,12}. Different dance forms seem to promote different patterns of injury. For example, injuries to the foot, ankle, knee, and back are common in ballet^{2,7,9,13,21} knee and back injuries are more frequently reported by modern/contemporary dancers^{19,21,23} and sesamoiditis (inflammation of the tendons in the foot and/or knee) is common in flamenco¹⁶. Whatever the dance form, there is risk of injury, depending on extrinsic factors (such as training environment, floor surface, shoe condition, and performance and rehearsal schedule) and intrinsic factors (age, personality, fatigue, psychological stress, and social support).

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Psychological impact of dance injury

The psychological impact of injury on the dancer involves a number of personal and situational factors. Research in dance medicine and science provides evidence that a variety of injuries in dance are common, if not inevitable^{2,11,14}. Often injuries are ignored by the dancer^{14,18,23} and frequently not reported to a physician^{1,6,19}. Figure 1 below shows a schematic representation of the process of reaction to dance injury.



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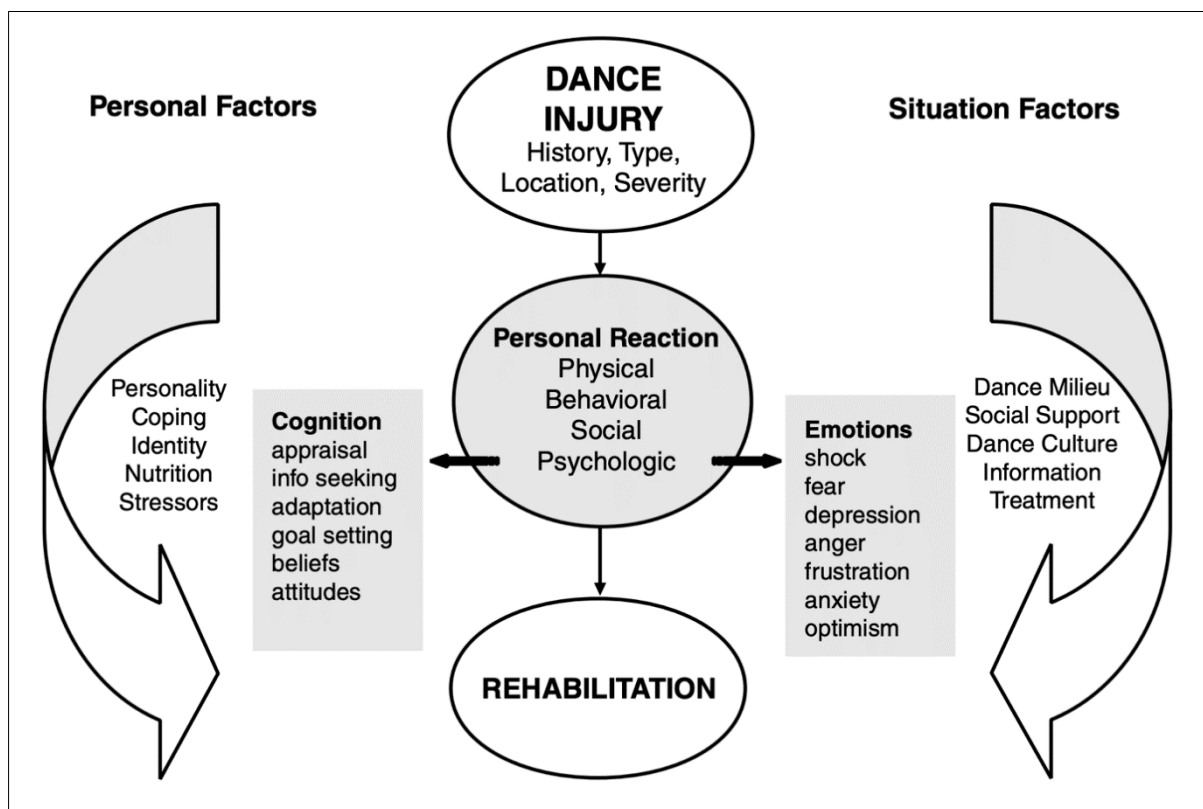


Figure 1 Process of reaction to dance injury¹⁵

Similar to the findings in sport psychology, dancers' emotions to immediate post-injury are negative and progress to more positive feelings with recovery^{21,23}. A study done by Macchi and Crossman examined the impact of injury on 26 professional ballet dancers between the

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ages of 12 and 21¹². Retrospective accounts of injuries were collected through semi-structured interviews, and revealed that the predominant emotions recalled for the initial period after injury included fear, frustration, distress, and depression. Several dancers indicated that they were initially afraid of the reaction of others like dance teachers, peers, and parents, as well as the impact the injury would have on their career.

Psychosocial issues

Treatment

A few trends have been identified with respect to the medical and psychosocial issues of injury reporting and treatment. One study found that only 20% of the injuries identified by university dancers were reported to a physician⁶. In the latter study, the dancers indicated that they did not feel comfortable seeing a physician because they perceived that



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their situations and injuries would not be understood, and that they would be told to stop dancing regardless of the severity of the injury.

Reporting and treatment of injuries, or the lack thereof, is very much tied to psychological and psychosocial issues such as personal beliefs, perceived risks, available social support, and the culture of tolerance. Assessment and treatment of injuries should include a careful history and consideration of intrinsic factors, such as associated illness, nutrition, cultural de-conditioning, and psychosocial stress²².

Culture of injury, pain and tolerance and the importance of social support

The culture of dance, like sport, also encourages dancers to be constantly aware of their physical appearance and food intake^{6,17,21}. Hence, when injury requires a dancer to reduce or modify training, weight gain is often a concern. Dancers frequently will equate the loss of muscle tone that may accompany injury with “getting fat”. Consequently, caloric intake may be reduced to dangerous levels³.

Evidence from research on dance injury suggests that events, such as a difficult relationship with a peer or teacher, are related to duration of injury⁷, maladaptive sub-scales of perfectionism⁸, injury onset⁹, and the number and severity of injuries in dance⁴.

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Likely, most dancers continue to dance despite injuries, or hasten their return to rehearsal or performance to their own detriment, because they perceive that “others” expect them to continue to work through the injury. Appropriate social support and understanding is critical. It may well be the friend, artistic director, or dance teacher who validates the emotional upheaval and the “disrupted sense of self ” that accompany the injury. Giving the dancer assurance that there will not be negative judgments surrounding time off or work modifications may be an essential element of support.

Approaching an injured dancer

There is a variety of approaches for the dance teacher or choreographer dealing with an injured dancer which includes educating and assisting the dancer to better understand how to modify dance activities during rehabilitation period (continuing verbal support and correction)^{5,14}. If the dancer is unable to participate, the teacher can ask them to assist in classes/rehearsals by taking and giving notes, coaching other dancers who are struggling with some part of the choreography, and similar roles. Reactions towards observing classes may vary in each individual. In this case, the teacher should allow the dancer to use class time for activities such as physiotherapy or minimal conditioning work if they find that passive observation is rather depressing and frustrating for them. If caloric intake is a concern for the injured dancer, dance teacher may work with a medical personnel, such as a nutritionist, in formulating a healthy diet plan that is able to hasten recovery process. Read our previous article for information on nutrition for dancers [here](#).



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Further suggestions include giving the dancer readings and videos for viewing to sustain interest and motivation, as well as encouraging imagery work. Dance teachers can also engage in a discussion with healthcare provider and family in helping them establish realistic goals. As such, a dancer-practitioner relationship is an important element in adherence to dancer’s rehabilitation journey.

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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