

Pirouetting with pain: Attitudes surrounding female ballet dancers dancing with pain

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While female dancers performing classical ballet are expected to present an image of effortless grace, the actuality is often a much more painful experience. The current study examines questions related to this experience: what do dancers understand pain to be, why do they dance in pain, when should they stop dancing in pain, and how do they ultimately communicate this pain to others? This ethnographic research collects the views of current dancers, ex-dancers, dance teachers, choreographers, and artistic directors through in-depth individual interviews. The collected interviews are analyzed using Foucauldian perspectives of discipline, social hierarchies, power, knowledge, and discourse, along with feminist theory, prevalent physiological conceptions of pain, and contemporary theories of dance pedagogy, ethnography, and subjectivity. It is revealed through the interviews that pain is often a part of the dancer's life, a close acquaintance constantly watching over the dancer's shoulder. Pain is also seen to be instigated, influenced, and reinforced by the aesthetics, technique, institutions, and culture of ballet. The collected narratives demonstrate the highly subjective nature of pain and that the balletic environment still embrace a "no pain, no gain" mentality.

Keywords: ballet; pain; injury; aesthetics; ethnography

This research is driven by the key question: within the context of professional ballet, what are the attitudes surrounding female ballet dancers dancing in pain? The research focuses on the attitudes toward pain from the perspectives of dancers, ex-dancers, teachers, choreographers, and artistic directors, with my own personal experience also informing the research.

The term "pain" is complex, with multiple interpretations and meanings. Pain is defined in this research as "physical pain caused by noxious stimulus

or bodily harm” (Melzack and Wall 1965, Woolf 1995, Loeser and Melzack 1999). This definition focuses on the physiological pain experience, rather than the psychological pain experience. Defining pain in this way is not to ignore how pain is also intrinsically linked and influenced by various psychological, environmental, and cultural factors. This research aims to draw on both a biomedical model of pain, and what could be described as a contextualist approach (Loland 2006) of how pain is interpreted and shaped within the social and cultural contexts in which people live.

The pain/ballet relationship can be seen emerging in academic scholarship, scientific research, autobiographical accounts, and performances, with a growing body of literature and research that investigates wider issues related to dancer’s bodies, injuries, and health. Some notable quantitative research has investigated dancers’ pain (e.g. Anderson and Hanrahan 2007, Encarnacion *et al.* 1999, Krasnow *et al.* 1994, Tajet-Foxell and Rose 1995). This research, although predominantly through quantitative investigation, is intended to provide an understanding and awareness that dancers are experiencing pain.

Significant qualitative readings of subjective scholarship has surrounded the dancers’ body and aesthetics (e.g. Abra 1987-88, Foster 1996, 1997, Thomas 2003, Wainwright and Turner 2003a, 2003b, 2004, 2006, Wainwright *et al.* 2005). This qualitative research has illuminated attitudes surrounding dancers dancing with pain, though none of the above authors focus *specifically* on dancers and their attitudes toward the pain experience, which provides this research with a justification to address such a potential gap in the literature.

Krasnow *et al.* (1994) conducted research which demonstrated that most dancers do not seek medical treatment for injuries, with fewer than 50% of all dancers’ injuries being treated by medical practitioners. There are various possible explanations for why dancers are hesitant to seek professional help for injuries, ranging from financial constraints, pressures from teachers, artistic staff or directors, as well as themselves, to continue dancing, and feeling that there is a lack of understanding from medical practitioners about their situation (Krasnow *et al.* 1994). Consequently, injured dancers may often rely on the advice from teachers and other dancers regarding how to treat and deal with pain and injury (Krasnow *et al.* 1994). Research has also queried whether dancers really can tell the difference between different types of pain (Anderson and Hanrahan 2007). Anderson and Hanrahan have found that dancers will endure performance pain or injury pain, and the type of pain experienced does not influence the cognitive appraisal made or the pain coping strategies used to manage the pain.

MAIN CONTRIBUTION

“I am a dancer, dancing makes me who I am.... Without it I wouldn’t know who I was. I would feel like I would have lost my identity or at least a huge part of it” (Zoe). The use of the term “identity” has many and varied interpretations and meanings (Parfit 1971, Castells 2004). Identity can be described as “people’s source of meaning and experience” (Castells 2004, p. 6). More specifically, one’s own personal self-identity could be explained to be what makes each person “uniquely who they are” (Parfit 1971, p. 17), and further, our identity can be shaped and influenced by experiences, memories, and society (Parfit 1971, Wainwright and Turner 2004).

The subject of identity was an issue I did not foresee emerging from the interviews, though it was a discovery which gives context and understanding to the particular attitudes expressed by the interviewees. The dancers interviewed primarily identified themselves as dancers and expressed that the act of dancing contributed heavily to their identity. An interesting association emerged where dancers also often identified themselves with athletes in relation to their bodily experiences, understandings, and dealings with pain. Emily explains, “the thing is we are athletes, there is no difference.”

All participants interviewed stated that they had danced in pain before. Some explained that they danced with some level of pain every day, such as Amy who states, “I would say every day in class or performance there is some sort of pain and something not quite right....” Others stated that they did not experience pain every day but only when their bodies had been overworked, they were performing new choreography, or they were managing or experiencing an injury.

The dancers interviewed often perceived pain as a purely physiological event, which was something they experienced in their body only, not in their mind. This raises the Cartesian dualist notion of mind/body separation, that the body is an object controlled by one’s mind (Grosz 1994). This concept was carried throughout many of the dancers’ perceptions and understandings of what they as dancers have to do, who they are as people and how they should respond to various pain situations. Several of the dancers revealed that they “chose” to ignore pain, stating that “I just block it out” (Amy) or “I don’t choose to have it” (Tatiana). Such “mind over matter” in the ballet class or performance appeared to be entrenched in their thinking, with some of the dancers stating that they selected to ignore their thoughts and feelings of pain.

All interviewees voiced an understanding of the significance of the ballet aesthetic in relation to pain—that having the desired body type of long limbs,

a well proportioned body, arched feet, and being slim yet strong, made the technique of ballet somewhat easier to physically perform and more aesthetically pleasing to the eye. Lisa, a dance teacher, explains this further: "...of course if helps to have the right body, it is a visual art form, and I think an audience wants to see a certain aesthetic.... [Ballet] can be so much easier when things like turn-out are naturally there, the right balance of strength and flexibility." Foucault's (1977a) notion of "normalization" of the body, through social practices and institutional structures and regimes, could be applied to the experience dancers have in trying to normalize their body into the ballet aesthetic.

From speaking to the interviewees it can be seen that pain is something that is part of their daily lives, so much so that many consider pain to be normal; yet most dancers felt uncomfortable to disclose or discuss pain openly. The lack of disclosure around the subject of pain was expressed by Kerry who said, "we don't discuss it, talking about it ruins the illusion that we work so hard for; talking about it puts us at risk of jeopardizing our opportunities...", or as Amy explains, "...it goes without saying that ballet hurts in some way at sometime, talking about it isn't going to change that; it will just make us look weak..."

The dancers, ex-dancers, and teachers and choreographers all spoke of the pressures from the ballet culture that contributed to dancers postponing the decision to seek treatment for pain or have time off dancing to let the injury causing the pain to heal. These included practical constraints of time, scheduling, and the need to produce a performance. Pressures felt by the dancers came from the company management, teachers, repertoire, and peers. This led to the feeling that their position in the company was not secure and that they were easily replaceable; moreover, time off from dancing was often seen as essentially "wasting time," jeopardizing their career progression. Foucault (1977b) describes culture as a "hierarchical organization of values, accessible to everybody, but at the same time the occasion of a mechanism of selection and exclusion" (p. 173). The ballet culture and hierarchy of the ballet company, with its own system of beliefs and structures, can shape how and when dancers decide to stop dancing with pain through the surveillance and disciplinary power it holds as an institution (Foucault 1977a).

IMPLICATIONS

From the analysis of the interviews and the narratives collected, it is apparent that dancers are dancing with pain. They are dancing for prolonged periods of

time with pain. They often do not know when to stop dancing with pain and are fearful of the repercussions stopping dancing may have on their career and identity. In a dance style that is evolving, extending and creating new physical boundaries, while also trying to maintain and adhere to the structure and form of the classical aesthetic, do these attitudes surrounding female dancers dancing in pain need to change? It is one thing to acknowledge that there are particular attitudes towards pain in the ballet environment; it is another to demand that these attitudes must change. From this research it can be concluded that if we would like dancers to have longer and healthier careers with less physical pain, then yes, these attitudes will have to shift. The question of how this shift might occur within the balletic culture, which holds power over the dancers' bodies and minds, imposing constraints, prohibitions and obligations, is something that will take more than a "quick fix" solution and will require much research and investigation.

This research has not attempted to uncover one particular truth or prove a certain hypothesis; rather it has aimed to further open up a dialogue about ballet and pain, and through the collected ethnographical interviews and analysis, present multiple accounts and experiences. Ballet is not always easy; achieving the physical form it requires, and the mindset that allows this form to take place, may not always be pain free. Yet by beginning to understand how and why dancers feel the need to excessively conceal and silence pain, to dance through it, ignore it, even crave it, rather than listening to their bodies, there is potential to offer alternatives and directions to allow them to experience less pain while dancing.

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