

Healthier Dancers on an Olympic scale!

One year ago I felt I was one of the few in the dance/arts world whose reaction to the news that London had won the right to host the Olympics in 2012 was instinctively, entirely one of great excitement! Perhaps due to the fact that the Healthier Dancer Programme's work has always involved working closely with medics and scientists who already work in sports and regularly share expertise across the two sectors, I could only see huge potential.

'The London 2012 Olympics, with its bringing together of sport and culture, provides both an increased opportunity and a realistic target for us. The development of Sports Science over the past 20 years has shown major benefit to performance. Dance Science although in its infancy is already showing tangible benefit in the modification of training, comprehensive screening for injury risk and prevention and the increasing longevity of a dancer's career.'

'Medics and scientists in both sport and dance already work closely together and are well aware of both the synergies and added value of close collaboration. Having the target of the 2012 Olympics gives us the potential to make politicians and funding bodies aware of these benefits through our work towards healthier dancers and we are determined to build on this.'

Emma Redding, Programme Leader MSc Dance Science, Laban

That potential only seemed to grow as I focussed on addressing what remains one of the fundamental issues for many dancers: speedily accessing comprehensive and affordable, dance specific medical care and dance science services.

All professional dancers need access to multidisciplinary teams that can provide thorough physical and psychological assessments, advice, supplementary training and pre-rehabilitation programmes as well as injury diagnosis, treatment and rehabilitation; to enable them to perform at their best for longer.

Over the last 15 or more years we have seen vast improvements in medical provision for dancers in the largest dance companies, such as the Royal Ballet Company, which now have and are developing specialist multidisciplinary teams of dance medicine and science practitioners, equivalent to those provided for British elite athletes. However, smaller companies and independent dance artists still struggle to access the same levels of provision. The problem is largely an economical one. At an event held by Dance UK's Healthier Dancer Programme last year for dance company directors and

managers, those representing the medium and small scale companies agreed that a solution would be to set up specialist dance health centres. This will allow resources to be pooled so that independent dancers and those working in the small and medium scale can effectively 'share' teams of dance medicine practitioners, making this kind of comprehensive provision more practical and economically viable.

The idea of setting up specialist health centres for dancers isn't new. It was one of the recommendations arising from the original *Fit to Dance?* report in 1996, and has come to fruition in the likes of the Jerwood Centre at Birmingham Royal Ballet and Laban's health suite in London. However, while a hugely positive step forward, these two centres have large in-house populations of dancers to serve and it is clear that they alone cannot solve the problem for all dancers, but they could potentially form part of the solution.

It is clearly time for dance to look into the feasibility of establishing an independent national support service for dancers' health and performance that will ensure that all dancers benefit (not just those in the largest companies) from advances in dance medicine and science.

So that is what I have been doing since September 2005! Based on experience and input from the dance sector including medical practitioners and scientists, gathered as part of the *Fit to Dance 2* research and via the HDP's advisory committees, I have put together a draft vision paper for a National Centre for Dance Health and Performance (to see a copy please contact me on helen@danceuk.org). The vision being that there will ideally be a National Centre based in London, where the largest population of dancers live and work, but that it would form part of a network of regional centres providing support services across the country.

These services will primarily include multidisciplinary medical and healthcare provision and dance science services, and, working alongside the National Centre, could potentially operate out of existing and planned future facilities such as those at the Jerwood Centre in Birmingham and at Laban, given extra investment to cope with larger numbers of dancers accessing those services, and the expansion of services as necessary. In addition, the National Centre will ideally serve as a hub for research in dance medicine and science, and health in relation to dance, and will be a valuable central resource providing information and even training in the field for dancers, teachers and medical practitioners, as well as advice and information to those participating in dance at grass roots level.

Providing medical care and dance science services for all dancers

In developing the vision paper and starting to explore the practicalities and feasibility of setting something like this up, my investigations took me once again back to sport where existing models that dance could learn from exist in the English Institute of Sport (EIS) and at the Olympic Medical Institute (OMI) which is a partnership between the EIS and the British Olympic Association.

'Access to coordinated multidisciplinary medicine and science services is so important for athletes/dancers and also for medical practitioners and scientists. Having a multidisciplinary team under one roof develops areas of specialist knowledge, makes services easily accessible and is time efficient. With the EIS system we have what I and previous colleagues had to work hard to achieve whilst working in dance. When the team consists of a number of skilled practitioners at various locations who do not necessarily speak to each other regularly, problems can arise. These problems are reduced when communication happens face to face on a regular, often daily, basis.'

Mike Chisholm, Physiotherapist, English Institute of Sport (formerly at the Royal Ballet and in private practice working with dancers)

It is clear from the conversations I've had that in so many ways dance and sport share the same vision of support for their top athletes/dancers, for the nurturing of talents of the future, and for the part sport and dance play in contributing towards a healthier nation.

In sport this vision is expressed in part in what already exists but also in plans for the London Olympic Institute (LOI) which it is planned will form a significant legacy of the London 2012 Olympic Games.

The British Olympic Association and Dance UK are in agreement that the needs of performers, the facilities and the expertise required are so similar – with many crossovers already of medical practitioners and scientists working in both fields – that it makes sense to work in partnership. Having national dance and sports medicine services working alongside one another under one roof will make the best use of resources and combine key aspects of the Olympic Ethos: sport, culture, health and education. It will also provide the best opportunities for advancing both fields of research and comparing notes on effectively training and retaining young talent, and encouraging physical activity for a healthier nation.

'For a number of years sport has developed an infrastructure of medical and science support for top performers, culminating in a regional system of support centres. In addition to that, over the past three years, the OMI has developed a national centre of excellence

for residential rehabilitation and intensive treatment as well as providing out-patient services in sports medicine, physiotherapy and sports science support. The world of dance has recognised the value that such multidisciplinary services can offer in terms of fast-track diagnosis and comprehensive treatment for the fastest possible return to performance. An opportunity exists to pilot a similar service for dancers at the OMI which will not only provide a short cut to excellent support, but will also assist with the future, coordinated provision at the London Olympic Institute.'

Nick Fellows, Olympic Medical Institute

In preparation for (potential) collaboration within the London Olympic Institute, the OMI and Dance UK are planning a pilot scheme that will offer, in the shorter term, a select number of dancers access to existing facilities at the OMI, Jerwood and Laban. It will also work with those companies and schools that have good existing provision to effectively monitor the injury and health status of dancers over time. The pilot's purpose is to test how to effectively coordinate such 'independent' provision, how the relationship between sport and dance will work, and to test exactly what is required by the dance profession in terms of quantity and different types of medical provision, in order that future services can be effectively planned and budgeted for in the long term. Dance UK will be seeking funding for the pilot later this year and will also be looking into who c/should and how such provision might be funded in the long term.

Dance UK's Healthier Dancer Programme is interested to hear from any member organisations who wish to discuss these developments in more detail, to gain your feedback and register industry support for coordinated dance medicine and science service provision.

'Now is a good time for dance and sport to work together as sport is starting to focus on 2012 and there will be a real opportunity for sport and culture/the arts to form closer ties in preparation for this event and, perhaps as importantly, beyond this.'

'There are many benefits of dance and sport working together more closely. Each can learn from the other as the physiological and anatomical similarities are obvious but so are the demands of each discipline. And dance can learn from work done in the sporting disciplines, the successes and failures, in terms of research done to move things on and the setting up of medical and support service facilities.'

Mike Chisholm, Physiotherapist, English Institute of Sport (formerly at the Royal Ballet and in private practice working with dancers)