

Action Research Project

In recent years, mental health issues have become an increasingly heightened and concerning topic. “Suicide is the fourth leading cause of death among 15-29-year-olds. People with severe mental health conditions die prematurely – as much as two decades early – due to preventable physical conditions” (World Health Organisation, 2022). Within a dance world with extremely high physical and mental demands, it can become an unhealthy environment if an individual is unable to find the mechanisms and coping strategies to deal with rejection, body image pressures the constant desire for perfect performances and need to be successful. It can be difficult for young adults to deal with pressures of parental expectations, study pressures and tough love tuition from dance teachers. However, dealing with the pressures that the individuals place upon themselves to achieve, can be the most difficult to overcome of all (Bartholdi, 2011). “The ideas that perfect practice, perfect performance, and flawlessness are desirable have strong resonance in sport, dance, and exercise” (Hill, 2016, p.xi). The pressures stated above continue to have a detrimental impact upon mental health within the dance world, which in many cases is becoming a taboo topic where individuals are encouraged to create a norm surrounding, “sacrificing and sometimes ignoring their physical health and well-being to attain an impossible ideal” (Hornthal, 2017).

In line with discussion above, the overall research question in which this project will explore is: Mental Health: To what extent are dance students impacted by mental health issues? During investigation into the question, research will be drawn upon to put forward suggestions and recommendations to further own personal practice with supporting students with these issues.

In view of the proposed issue, the following research questions have been designed to outline and investigate the current problems surrounding poor mental health within dance students:

- Does perfectionism create a barrier to development and learning gain?
- To what extent does “body image” have an impact on dance education and engagement?
- What pressures within dance education impact upon students’ mental health?

This work will include an explanation of Methodology used to explore and investigate the said questions and how data was obtained and analysed. There will be an in depth review and discussion of literature, to create a broader picture of the issues surrounding mental health and wellness within dance education. The work will conclude with an account of results and recommendations to aid the issues surrounding mental health and wellness for dance students, to best prepare them for a tough and demanding career.

Methodology

“Action research is a form of self-reflective problem solving which enables practitioners to better understand and solve present problems in social settings” (McKernan, 1987, p6). Secondary research has been utilised within this project. Secondary research is defined as involving, “the summary or synthesis of data and literature that has been organized and published by others” (Bouchrika, 2021). When exploring the questions proposed in the research project to investigate the impact of perfectionism, body image and mental health on dance students, it is important to consider a range of material from array of sources. Sources that have been utilised are literature, research articles, blogs, internet and journal

articles. “Quantitative studies rely on numerical or measurable data. In contrast, qualitative studies rely on personal accounts or documents that illustrate in detail how people think or respond within society” (Hoover, 2021, no page number). Within this work, both quantitatively and qualitative study has been used in order to gain a deeper insight into measurable data and personal opinions of individuals who have been directly impacted or witnessed the issues surrounding mental health, body image and perfectionism within dance education. Whilst considering secondary data as an analysis, it is important to understand the restrictions that may arise. Secondary data is unfamiliar to the researcher, due to them not collecting the data themselves. This becomes increasingly important for the researcher to familiarise themselves with the data in order to use it successfully. How was the data collected? Within the data found, who are included in the population of study? Is the data relevant to the researchers questions? (University College London, no date,p1).

Literature Review and Discussion

- Does perfectionism create a barrier to development and learning gain?

No general agreement is in existence to a current definition of perfectionism, however, based on what has been hypothesized in regards to perfectionism, a multidimensional study was developed and explored (Randy and Patricia et al. 1990, 449). During this study, a many key issues were investigated;

“(E)xcessive concern over making mistakes. Five other dimensions were identified, including high personal standards, the perception of parental expectations, the perception of high parental criticism, the doubting of the quality of one’s actions, and a preference for order and organization” (Randy and Patricia et al. 1990, 449).

This is heightened within the arts with particular emphasis placed upon perfect performances, which are perfected by an astounding level of commitment and dedication to enable such a high level of performance. “[T]he pursuit of flawlessness is legitimized, encouraged, and even revered in sport and the performing arts” (Hall & Hill, 2012). Based upon the dimensions above, two key factors could be clearly outlined as healthy and unhealthy perfectionism. Unhealthy perfectionism displayed patterns of correlations with low self-esteem, whereas healthy perfectionism associated more with conscientiousness (Stumpf & Wayne, 1999, 837). In light of this, the increased pressure for flawless and near perfect performance seems to intensify within the dance world. The fine line of success and failure for an athlete or performer can mean that, “contests can be won or lost by one hundredth of a second...or misplaced limb. In other words, near perfect performance can be necessary for success in these domains” (Hill, 2016, p.xi). In a study which interviewed professional dancers, international athletes and musicians who identified as perfectionists, it was found that they perceived being a perfectionist, provided a greater source of self-motivation that increased their capacity for success (Hill et al, 2016). However, in opposition to this, researchers found that the label perfectionism to be restricting and unhealthy. “The selection of the labels healthy and unhealthy is an example of an attempt to find middle ground on whether perfectionism may be helpful or harmful” (Hill, 2016, p.19). Researchers Gaudreau and Thompson (2010), have advocated the issues surrounding the label healthy and unhealthy perfectionism, for its direct correlation with the description healthy suggesting a sense of wellness and unhealthy promoting only negative surroundings. In a study as part of an investigation surrounding suicide among children and young adults up to the age of twenty five, the parents of thirty three boys who had committed suicide were interviewed regarding the factors of their sons deaths.

TABLE 2. Categories of Factors Contributing to the Boy's Suicide (33 cases) from the Mothers' and the Fathers' Perspective

Category	Mothers (<i>n</i> = 28)	Label (mothers)	Fathers (<i>n</i> = 23)	Label (fathers)
Parental cogwheel				
Parents blamed themselves	19 (67.9%)	Typical	14 (60.9%)	Typical
Parents felt powerless and deprived of information	26 (92.9%)	General	20 (87.0%)	Typical
Parents did not know or understand	23 (82.1%)	Typical	22 (95.7%)	General
Death, suicide, mental illness or substance abuse in the family	24 (85.7%)	Typical	22 (95.7%)	General
Parents had relationship and communication problems	18 (64.3%)	Typical	16 (69.6%)	Typical
Parents' conflicting demands	20 (71.4%)	Typical	15 (65.2%)	Typical
Father was uncommitted, unavailable, emotionally blocked or over involved and demanding	24 (85.7%)	Typical	9 (39.1%)	Variant
Mother had sole responsibility	18 (64.3%)	Typical	14 (60.9%)	Typical
Father had sole responsibility	0 (0%)	None	3 (13.0%)	Rare
Family alliances, coalitions and secrets	26 (92.9%)	General	23 (100%)	General
Parents always worried about the boy	26 (92.9%)	General	21 (91.3%)	General
Parents' unconscious ideas about the boy's mission and role	16 (57.1%)	Typical	7 (30.4%)	Variant
Boy's cogwheel				
Boy was exposed to trauma or stressful life events	28 (100%)	General	21 (91.3%)	General
Boy was exposed to recent loss or separation	21 (75.0%)	Typical	19 (82.6%)	Typical
Somatic illness and adverse medication effects	16 (57.1%)	Typical	12 (52.2%)	Typical
Boy had problems at school with friends and grades	25 (89.3%)	Typical	15 (65.2%)	Typical
Work and money problems	20 (71.4%)	Typical	14 (60.9%)	Typical
Boy had a destructive love relationship	10 (35.7%)	Variant	8 (34.8%)	Variant
Boy had high demands and expectations	20 (71.4%)	Typical	15 (65.2%)	Typical
Identity, homosexuality and existential issues	22 (78.6%)	Typical	19 (82.6%)	Typical
Boy was deceived, disappointed, unhappy and angry	28 (100%)	General	19 (82.6%)	Typical
Boy acted out	24 (85.7%)	Typical	18 (78.3%)	Typical
Boy concealed problems and hid behind a mask	25 (89.3%)	Typical	20 (87.0%)	Typical
Boy asked parents for help	11 (39.3%)	Variant	15 (65.2%)	Typical
Boy was hunted and haunted, addicted, depressed or psychotic	26 (92.9%)	General	22 (95.7%)	General
Signs and preparations	26 (92.9%)	General	21 (91.3%)	General
Siblings and friends				
Siblings were entrusted but could gossip	19 (67.9%)	Typical	15 (65.2%)	Typical
Friends were entrusted but kept the boy's secrets	15 (53.6%)	Typical	6 (26.1%)	Variant

(Tornblom, Werbart & Rydelius, 2013)

It can be seen in the highlighted area of the table that over 70% of the mothers and 65% of the fathers agreed to the individual having high demands and expectations as a contributing factor to the deaths.

In light of this data, it cannot go unnoticed that perfectionism is prevalent in young people who have unrealistic expectations of themselves and hold such a great importance upon being perfect. “According to recent estimates, almost 30 percent of undergraduate students experience symptoms of depression, and perfectionism has been widely associated with these symptoms” (Sandoiu, 2018). In Hill’s (2016) extensive review, athlete interviewees typically found that although perfectionism had contributed to their success through a desire to strive and self-motivate, they also associated negative effects such as anxiety, exhaustion and pressure. When exploring Maslow’s Hierarchy of Needs, an importance is placed upon lower level needs having to be met in order for individuals to progress to higher level needs, such as, esteem and self-actualization. With closer attention paid towards safety needs, love and belonging, Maslow describes the impact of security, stability and a freedom from fear, in addition to social human needs and a feeling of belonging. When lower basic needs are met, the learners are able to progress and learning becomes more successful (Reece & Walker, 2007, p76). Perfectionists have traits in which the fear of falling short of a particular goal can become debilitating and extremely hard to overcome (Ruggeri, 2018). In accordance to Maslow, without an individual’s basic needs being met, it is unlikely they will seek the fulfilment of self-actualization where “a person comes to find a meaning to life that is important to them” (McLeod, 2018, p9).

- To what extent does “body image” have an impact on dance students mental health?

There is some research that describes dance as a positive influence on health, self-esteem and body image (NHS Confederation, 2019), with an importance placed upon being fit and healthy. However, opposing research suggests that the art of dance supports a negative body image and promoting low body weight with a desire and need to be excessively thin (Bettle, Bettle, Neumarker, Neumarker, 2001, p297).

“In more than twenty years of teaching, I have watched either the expressions of doubt, fear, despair and self-disgust or alternatively, of contempt and self-righteous smugness in supposedly bodily superiority move across the faces of my female students when the issue of the dancer’s body arose, or when they faced the studio mirror. The forms of being bodily wrong that students despair over are endless” (Sandler, 1997, p200).

Body image “means the picture of our own body which we form in our mind, that is to say the way in which the body appears to ourselves” (Schilder, 1950, p11). With dance classes being conducted more often than not facing mirrors, this can be seen as a contributing factor of self-awareness, vulnerability and a sense of unsatisfactory body image ideas, with students critically observing themselves throughout sessions. “[T]he mirrors were instrumental in manipulating self-awareness by drawing direct attention to the self...for example, individuals are aware they are being noticed by others or are aware of an audience” (Radell, Adame, Cole, 2002, p1240). In an unfortunate event, Anna Marie Holmes, director of Boston Ballet asked dancer Heidi Guenther to lose weight in order to appear more visually pleasing. Guenther who died at aged twenty three from heart failure, developed an eating disorder thereafter (Oliver, 2008, p21).

In a study by Bettel, Bettel, Neumarker and Neumarker (2001), 90 teen dancers and 156 non dancer teens were asked questions regarding body image from a questionnaire titled 'My Body Right Now' (See below for table of results).

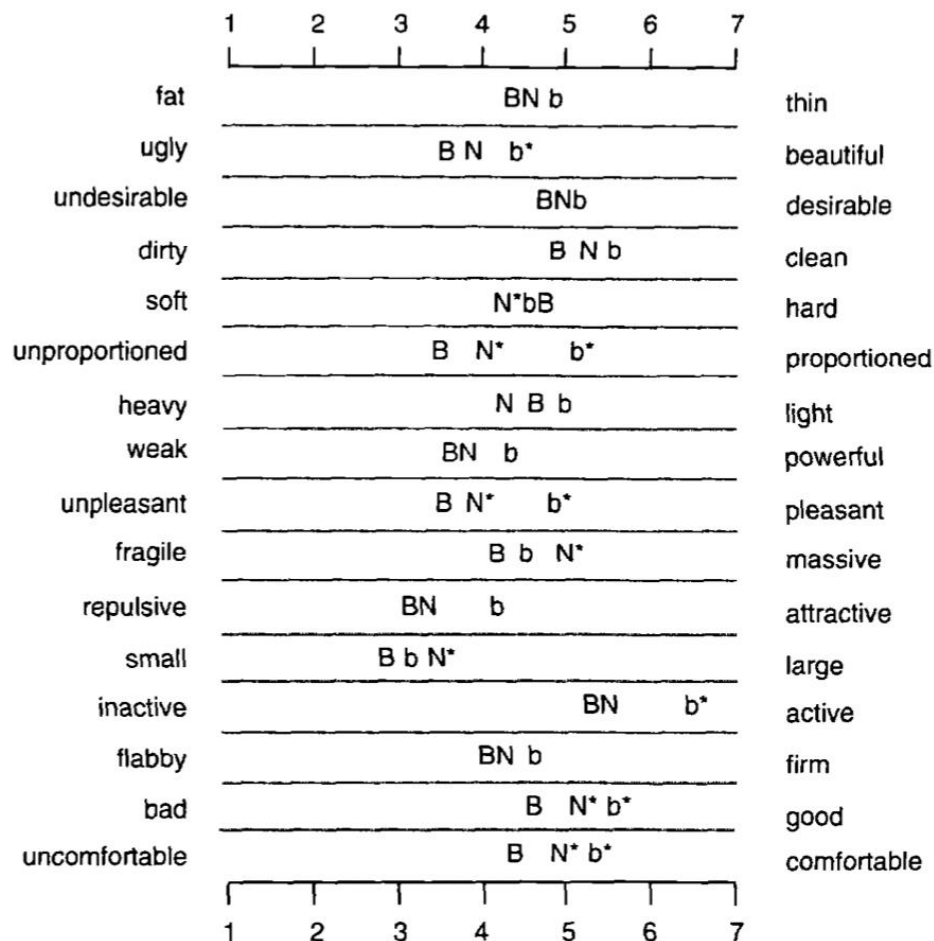


FIG. 2. Perception of body on Semantic Differential by female ballet dancers and controls (Note.—b=younger ballet dancers (11–12 yr. old), B=older ballet dancers (13–17 yr. old), N=nondancing girls (13–17 yr. old). * $p < .05$ for groups compared to older ballet dancers (Mann-Whitney U test).

(Bettel, Bettel, Neumarker, Neumarker, 2001)

As a result it was found that differences in body image between ballet students and nondancing girls seem to reflect that they had a greater extreme of body ideals. Adolescent female dancers displayed higher scores on unattractiveness for body image and a greater

undesirability than could be anticipated (Bettle, Bettle, Neumarker, Neumarker, 2001). Symptoms of eating disorders can be “depression and anxiety”, “low self-esteem along with perfectionism” and “distorted body image – for example, a person who believes they are ‘fat’ when they are underweight” (Better Health, 2021). Physical activity within individuals who suffer from eating disorders, can be extremely dangerous and put the individual at an extreme risk. With a minimal diet, and limited fuel for the body, the individual would be in danger of numerous health complications such as injuries, muscle waste and heart problems (Muhlheim, 2021). In light of this, it becomes increasingly concerning that the pressure of an inappropriate and unrealistic body image would be encouraged by a mentor such as Anna Marie Holmes. With a dancer’s journey being continually scrutinised and judged on body image and aesthetics, there is a huge emphasis placed upon the body being at its peak to improve job opportunities and the idea of a perfect performance. It is not at all surprising that “Byrne and McLean (2002) reported higher rates of perceived pressure to be thin in athletes of aesthetic sports which value thinness such as dancers” (Clements, 2020). A Study by Price and Pettijohn (2006), surrounding the impact of dance attire on body and self-perception in female dancers, displayed that dancers reported feeling lower perception ratings when in tight fitted leotards and tights attire compared to participants who were in loose-fitting clothing condition. Professor Carolyn Mair, discusses that although ‘body image’ is not a mental health disorder, it can lead to symptoms of poor mental health and create a barrier to an individual’s positive mindset resulting in a poor quality of life (Mair, 2019).

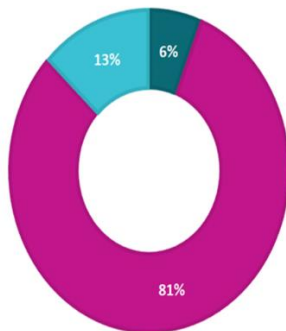
- What pressures within dance education impact upon students' mental health?

Dance is proclaimed to have multiple health benefits such as improving balance and co-ordination, building strength, increasing flexibility, raising heart rate and acting as a full body workout (McKay, 2021). Cortisol is a natural hormone which plays an integral part of how the human body deals with stress. Cortisol, when found in surplus can cause complications and other symptoms such as anxiety, depression, high blood pressure and low moods. Dance and physical activity has been proven to decrease levels of cortisol caused by excessive stress and also to release dopamine, a natural hormone in which lightens mood and increases endorphins which act as a natural pain relief (John, 2019). Taking this into consideration, dance has obvious positive benefits and supports a healthy mind and body. However, in opposition, research and findings from a 2020 IRB approved study that included 78 dance students revealed that, "dance students showed poorer mental health when compared with normative data for the same age group" (Minding The Gap, 2020). In addition to this, other studies revealed the following results.



DO YOU THINK THAT YOUR DANCE COMMUNITY DOES ENOUGH TO ADDRESS MENTAL WELLNESS?

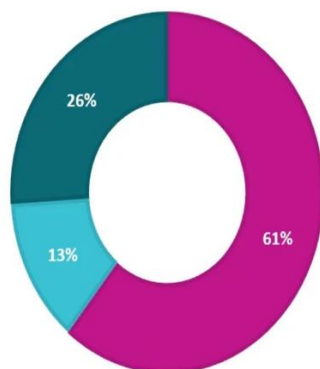
■ Yes ■ No ■ Maybe



899 dancers - 2017 Minding the Gap survey
see the full results at www.WeAreMindingTheGap.org

HAVE YOU HEARD A TEACHER TALK OPENLY ABOUT THE MENTAL HEALTH CHALLENGES IN DANCE?

■ no ■ maybe ■ yes



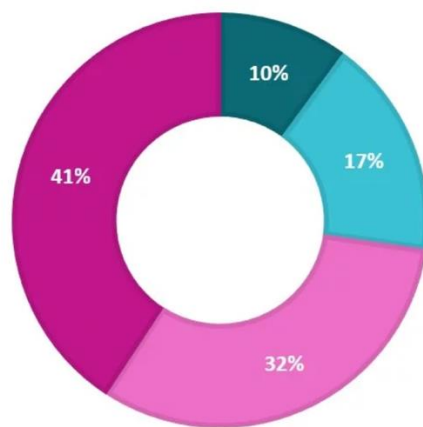
(Minding The Gap, 2020)

The study explains that 61% of the dance students reveal that they had not heard a teacher talk openly about the mental health challenges in dance. 81% of the study answered that they did not feel the dance community, “does enough to address mental wellness” (Minding The Gap, 2020). It is important within a role as a teacher, tutor or mentor to demonstrate behaviour in which you would like to see replicated by the students or learners. Although it

is important to encourage independence within learners to create a sense of autonomy and to challenge students to promote competence, mirroring and setting exemplar behaviour will allow the learners to thrive in the educational environment (Middleton & Perks, 2014). In light of this, the following chart explores the percentage of students that would feel at ease with discussing mental health issues with teachers or directors.

**IF YOU WERE HAVING A MENTAL HEALTH CHALLENGE WOULD YOU
FEEL COMFORTABLE REACHING OUT TO YOUR TEACHER OR
DIRECTOR?**

■ definitely ■ maybe ■ unlikely ■ not at all



(Minding The Gap, 2020)

The chart shows that 41% answered not at all and 32% answered unlikely. In total 73% of said students felt they would not or are unlikely to discuss mental wellness with a teacher. This highlights the importance of the role of a tutor to encourage the topic of mental health discussion, creating a healthy relationship and norm regarding mental health struggles within the dance sector. With this in place, perhaps the study would have reflected a greater percentage of students who would feel more comfortable in discussing such issues with mentors and tutors, steering away from the perspective of mental illness being a taboo topic.

“The ballet world treats mental illness much like the rest of the world does, like laziness, like a character flaw...We’re expected to show up, put our bodies and minds through rigorous hoops day in day out, do it all exceptionally well, not complain, and not let on that anything other than sunshine might be going on with our health or in our personal lives. That mentality in itself erases a person’s full humanity.”

(Magruder, 2017).

Magruder (2017) goes on to discuss the issues surrounding the taboo topic of mental health and the idea that ballet dancers or dancers are required to have a positive attitude all of the time. There is an unrealistic expectation of an artist during a performance, which stresses the need to leave personal issues aside and not allow their own feelings to impact performance persona. However, this mentality trickles into rehearsals, training and college studies as tutors, mentors and teachers attempt to prepare them for a future career.

Rejection is a misfortune of a dancers career and during dance education students are often reminded of how this will be a theme within their dance journey. “If she takes any criticism personally, she will never improve. It is important that she understands that a rejection from a company is not personal” (Howell, 2013). However, this concept can be incredibly difficult to come to terms with and impact upon mental wellbeing. In a fMRI study it was revealed that the same areas of the brain are activated when a human experiences rejection to when they experience physical pain (Winch, 2013). Rejection also “destabilizes our "need to belong"” (Winch, 2013). In reference to Maslow’s Hierarchy of needs as previously discussed, the need to feel love or belonging is a basic need in which becomes a barrier for learners to progress up the hierarchy unless satisfied. In an article addressing dancers mental health the writer explains;

“I have seen individuals with promising careers succumb to addiction, perfectionism, and pressure; to trying to become someone or something they are not. The dance world is no stranger to mental health issues, and yet it is not sufficiently addressed, openly discussed, or prioritized”

(Hornthal, 2017)

It is described as 'the norm' for dancers and dance students to experience rejection in casting and auditioning for dance colleges. However, a dancer in Dance Magazine explains how the rejection she faced from such a young age, destroyed her ability to bounce back and during her training, "over time, the micro-failures that dancers must overcome each day started to chip away at me" (McGuire, 2017).

Results & Conclusion

The question in which this action research project set out to explore, was the issue surrounding Mental Health and to what extent are dance students impacted by mental health issues?

The research outlined three objectives for further investigation in order to aid the overall aim.

- Does perfectionism create a barrier to development and learning gain?
- To what extent does "body image" have an impact on dance education and engagement?
- What pressures within dance education impact upon students mental health?

Findings after and in depth review and discussion of literature has revealed that there is a current ongoing issue surrounding mental health within the dance world. "While their bodies and physical health are prioritized, many dancers do not recognize their poor mental health, which may suffer due to the pressures they face from the studio to the stage" (McDonald, 2021). Findings also suggest that when students or performers do recognize mental health issues, they are reluctant and uncomfortable in discussing them with tutors, mentors and

teachers. “[M]ost injured dancers will see doctors, physical therapists and Pilates instructors while never seeing a mental health professional (McGuire, 2017). The taboo topic of mental health has trickled down from teachers to students, which results in an unhealthy obsession of hiding mental health struggles.

Based upon these findings an account of recommendations have been suggested in order to further develop own practice and support any future students with issues listed above:

- Perfectionism although can be a positive trait, can also be a barrier for personal development within students. Encouraging students to be lifelong learners can be difficult when the intense amount of pressure surrounding the topic in which they are studying is too much for a student or professional to comprehend. With perfectionism having “some correlation with anxiety and OCD” (McGuire, 2019), it becomes increasingly difficult to motivate a dancer or athlete to continue to strive for success, when the success that they desire comes at such a physical and mental cost. In light of this, the importance of regular communication with students is vital. Regular student-teacher check ins are essential to gain insight into the students current mental wellbeing. Tutorials, 1:1’s with tutors and qualified professionals, to discuss these issues would be a welcomed intervention, to start opening up regarding mental and physical wellness. Relating this issue with professional standards, “Demonstrate commitment to learners, their learning, safety and well-being”(Welsh Government, 2017) gives an increased responsibility to teachers to ensure that learners are maintaining well-being within their learning environment.
- “[T]rauma can cause some to harbour fears of success that keep them from achieving what they want and are capable of” (Babell, 2011). In opposition to this, success can cause an adrenaline rush needed for some individuals in order to motivate them to

push for higher aspirations. This is where a recommendation comes in with regards to the teacher's role to manage students' goals, aspirations and motivations. Goal setting and targets are brilliant ways of motivating students and keeping track of progress. Allowing students to have realistic goal setting is the vital recommendation suggested after studying findings.

- Modules and curriculum study topics purely dedicated to mental and physical well-being in dance, would be a suggestion to engage learners in the importance of safe dance practice. This suggestion would encourage students to learn of the risks and benefits of unsafe and safe practice. This would also enforce tutors and mentors to participate in continued professional development within this subject matter, to allow them to teach the module and study topic efficiently, professionally and with the most current and up to date subject knowledge.
- A positive relationship with students is essential in noticing changes within students' moods, physical appearance and engagement levels. "To teach effectively, we must make every effort to get to know each student. Sometimes, this involves looking past external characteristics and accepting individuals for who they are" (Cooper and Garner, 2012, p2). As a teacher, we have a duty of care to learners and in order to avoid unfortunate eventualities, it is vitally important to ensure dance students are not displaying signs of mental health issues and if they are, acting in an appropriate and timely manner to avoid disruption to learning and decline in health.
- Body image and negative associations surrounding a dancers ideal body were common in findings. In order to make change, educators must make the conscious choice and effort to design curriculum that promotes inclusivity and positive role

models. Simple changes such as studying dance companies who promote body positivity can create a change in students image of the perfect dancer.

- Rejection heavily contributed to mental health issues in the findings of the project. Students unable to cope with and manage rejection. A recommendation surrounding this issue is to ensure that students have the mechanisms in place to prepare them for a sector in which does unfortunately bring rejection. Alongside this, ensuring institutions have the qualified professionals in place to support students in these scenarios.
- Findings suggest that in order for students to be the best that they can be, basic needs must be met for this to happen. A common thread throughout the findings were, “love and belonging”. If a student feels judged, in an unsafe environment or not accepted, then barriers to learning will be developed. With suggestions and recommendations previously made, the student should begin to feel accepted within the learning environment, creating an opportunity for the student to progress with learning.

Suggestions made above if taken into consideration by educators, could aid the issues surrounding poor mental health within dance students. These recommendations would also allow educators to deal with mental health issues in an efficient manner when they do arise, in order to give learners the best possible chance of overcoming and learning to cope safely with barriers, struggles and factors which prevent them from learning progression and good quality of life.

Change is something which is often resisted and causes a feeling of unease due to the risks associated with it (Schreiber, 2016). However, this action research project has concluded that in order for students to be happy, successful and safe within a learning environment, change

is essential in making this happen. Dance studies demand a vast amount of physical and mental strength, which places an enormous amount of responsibility upon teachers and mentors to ensure this is done whilst following safe dance and teaching practices. In order to optimise and maximise students capabilities, a positive, safe and nurturing learning environment is essential.

Word Count: 4003

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