

# CONSIDERING A HEALTH EDUCATION ROLE IN THE TRAINING OF DANCE TEACHERS

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# Abstract

An investigation that considers a health education role in the training of dance teachers in UK and Russia and aims to raise awareness of the importance of ethical, psychological and health issues in dance teaching. Theories of health, psychology and ethics are explored together with models of health education and promotion and a theory of health education for dance teachers developed. In addition, Seedhouse's Ethical Grid is put forward as a tool to help dance teachers to develop the ability to reason morally and to support the argument for ethical dance teaching practices.

Evidence of the diversity in current requirements for dance teaching qualifications in the UK, is provided by a qualitative survey of six, examining bodies. The findings demonstrate that current professional examinations in dance expect candidates to have a varying depth of knowledge of anatomy and physiology without an understanding of health education theories and principles which is consistent with a body centred approach to dance teaching and not the person centred approach that this paper argues for.

Analysis of recorded interviews and observations inform the study about the Russian system of training dance teachers at a college in St Petersburg, and this shows consistency in approach with the UK. Difficulties and implications of carrying out research in another country are addressed together with effects of cultural influences on dance teaching practices. Health education initiatives are not evident in Russia.

In light of the development of a theory of health education for dance teachers, change and the implications of change to dance teaching practices are considered.

The study supports the 'holistic' or person centred approach to dance teaching and the training of dance teachers and it encourages further debate and research into this under researched area and recommends that priority be given by relevant, dance personnel to further explore the issues raised and it also recommends that consideration be given to the creation of an independent 'Certificate of Health Education for Dance Teachers' in collaboration with an academic body.

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# Introduction

*“Long before the dawn of history, long before he could sing or*

*even speak man danced. Moving to his own internal rhythms, the pounding of his heart, the beating of his pulse, primitive man discovered dance. It is within us always.”*

*Gene Kelly  
[from the film That’s Dancing]*

As a dancer, the writer is aware of how dance reaches deep into one’s physical and emotional being. Dance is not just about being a technician, it is about communication between the mind, body and spirit. Many dancers and teachers will be familiar with the phrases ‘dance from the inside’ and ‘born to dance’. These phrases refer to the part of dancing that the writer believes is a gift, the part that the dance teacher does not teach but the perceptive dance teacher recognises and nurtures whilst teaching technique and other dance related topics. In order to be able to teach dance without damaging or suffocating the inborn gift of dance, needs teachers with the ability to support and enhance the flourishing of each individual.

The writer believes that dance teachers who incorporate health education skills into their teaching practices are more able to consider the moral issues, or ethics, of dance, and the broader teaching skills developed by these teachers enable them to consider both the direct and indirect implications of dance teaching.

The writer further believes that encouraging a cognitive or thinking, approach,

that does not just rely on the practical aspects of dance, underpinned with theories and principles of health education, into the training of dance teachers will foster better teachers and such incorporation will encourage an holistic approach by the trainers, student teachers and for dance teaching of the future.

This belief is based on the writer's own experience as a dancer, choreographer, dance teacher and health educator. Although a traditional teacher of dance for many years, the writer wanted to develop a long term, personal interest in learning more about health and health education. The additional skills, knowledge, understanding and qualifications gained from this pursuit have greatly enhanced the writer's ability as a teacher of dance and encouraged a much broader approach which attempts to consider, psychological and ethical issues as well dance techniques. These additional skills not only resulted in better teaching practice but they have also encouraged an inquiring mind and thirst for more understanding, in other words, continuing development of the dance teacher.

### **Rationale and Aims**

The study identifies, through analysis, a theory of health education for dance teachers. Present practice is assessed by drawing on empirical evidence and critically assessing it in light of the developed theory.

Although there is research supporting the need for a health education input [Brinson & Dick, 1996], the researcher found a lack of any available research directly addressing the introduction of health education skills into the training of dance teachers and therefore believes the thesis to have originality. The study is seen by the writer as an exploratory investigation of the topic whereby the aims are mainly awareness raising of the pertinent issues and in particular :-

- to raise awareness of the importance of ethical issues, as well as health and psychological issues, for dance teachers and others connected with



dance teaching

- to compare aspects of the dance teacher training system in Russia with the British system and to find out if a health education input exists
- to encourage further research into this under researched area

Three key aspects of health education are looked at in relation to the training of dance teachers :- psychological issues, ethics and the management of change in addition to relevant health education theories and principles.

The examination of psychological issues looks at personhood and what it means in relation to the training of dance teachers. Pressures of society are considered in relation to dancers trying to conform to ideal body forms and implications for the teacher's role are also discussed and in particular, cognitive dissonance. Behaviourist theories are examined [Banyard & Hayes, 1994;] in relation to the development of holistic teaching skills.

A definition of ethics is explored together with ethical principles and theories although the section mainly centres around one ethical principle in particular; the principle of 'autonomy', and the positive contribution it can make to dance teaching practices. Seedhouse's Ethical Grid [1988] is considered as a tool to assist people in developing the ability to reason morally.

Current teaching qualification requirements for a number of professional dance teaching bodies are compared in order to seek understanding of the diversity of the existing situation and these findings are briefly compared with the Russian system.

Finally, the concept of managing change in the dance teaching profession is examined and in this context theories of change are briefly discussed [Rogers & Shoemaker, 1971; Schön, 1971].

## **Comparison with Russia**

Part of the research for this study was conducted in the Leningrad region of Russia where the researcher interviewed dance teachers, students, company professionals, medical professionals and others connected with dance for the purpose of comparing the system in Russia with the British structure. Results of observations of dance classes, assessments and performances in Russia also contribute briefly to the paper, highlighting the worth of looking at other systems.

**A Theory of Health  
Education for Dance  
Teachers**

*'There is also growing recognition that the training of dance*

*teachers is vital to the health of dance and dancers.'*

Christopher Bannerman Chair Dance UK  
[Fit to Dance Report, 1996, pp11]

## **Introduction**

In this chapter, drawing on relevant literature, the researcher argues for, and presents, a theory of health education for dance teachers. The key interrelated elements comprise theories of health, psychology and ethics, which in relation to an analysis of existing models of health education inform the overall theory.

*"Dance was a natural part of primitive life. From the moment he was born until he died, every important event in a primitive man's life had an appropriate dance. The most important events then, as now, were: Birth, Marriage and Death."*

*Percival, 1959 [pp40]*

Dance therefore, has cultural and communication value in society. As a means of non-verbal communication, Percival's [1959] quotation above, suggests that dance is not an exclusive form of communication, only to be used by people with certain technical skills. In fact, it not only suggests that dance is something that everyone has the ability to do, it suggests that dance has a fundamental, sociological role.

If this is indeed the case, then the introduction of dance techniques and taught

skills, could be thought to play a part in the segregation of dance culture to trained and untrained dancers.

Dancing to entertain a public was in existence in the heyday of Greek culture, and ballet in the form that we recognise it can be traced to the founding of L'Academie Nationale de la Danse by Louis XIV of France [Haskell, 1945]. Along with the development of taught dance skills, there evolved teachers and creative choreographers of these skills and also an ever increasing demand on dancers, for greater strength, greater flexibility and greater risks to be taken. The psychological pressures of trying to cope with these increasing risks can have detrimental effects on the overall health of dancers [Brinson & Dick, 1996]. The writer argues that before steps can be taken to improve the current situation, it is necessary for the dance teaching profession to explore and understand more about the meaning of health in it's widest context. The following section looks at definitions of health as well as considering health from a dancer's perspective.

# **Chapter One**

## **Health**

*“To assume that artistic considerations are in any way linked to health considerations is totally unrealistic and naive.....”*

Vincent [1979, pp xii/xiii]

The writer and no doubt, many other dance people can identify with the quotation above where experiences under the bravado of statements such as ‘the show must go on’ have put health at risk in the past and no doubt, still does today. Brinson & Dick [1996] refer to the need to reform dancers’ lifestyles and also teaching practices in the interest of dancers’ health. The writer would argue that before one can think of reform, the question to be asked is one which addresses the meaning of health. Without an understanding of what health is, there seems little point in trying to introduce reforms which can improve it.

The word ‘health’ as described by Naidoo & Wills [1994] is derived from whole, hale and healing, indicating that health concerns the whole person which is agreeable with the concept of the promotion of holistic, dance teaching skills in order to step away from the existing biomedical or body centred, approach [Geeves, 1993].

Unity is difficult when people hold many different views of what health is [Naidoo

& Wills, 1994] and this relative approach can cause problems for promoters of health, especially when their view of health is influenced by a consumer culture where idealised visual images of the human body are used in advertising and the media to persuade individuals that they can achieve a particular look [Featherstone et al, 1995]. Drawing on Seedhouse [1995] and other authors, the writer examines four theories of health in relation to dance teaching.

Firstly, the theory of health as a commodity. Despite incongruous views, the word 'health' is frequently used in society today ie - health food, healthy lifestyles, healthy diets, financial health, healthy mind and body, healthy societies and so on. This suggests that health is a commodity, something that can be bought or given. Medical science views health as a commodity and sees it in clinical terms where individuals are naturally healthy and would remain healthy if not for some outside influence creating a physical problem. In discussing what is wrong with this theory Seedhouse [1995] cites Oliver Sacks a neurologist and practising physician who is strongly opposed to the idea of health as a commodity :-

*... For all of us have a basic intuitive feeling that once we were whole and well; at ease, at peace, at home in the world; totally united with the grounds of being; and that we lost this primal, happy innocent state, and fell into our present sickness and suffering. We had something of infinite beauty and preciousness - and we lost it; we spend our lives searching for what we have lost; and one day, perhaps, we will suddenly find it, and this will be the miracle, the millennium.*

Sacks [1982, pp26-27 cited in Seedhouse, 1995]

It could be argued that if health is merely a commodity then keeping people healthy would be a socio-economic matter whereby, providing there is enough money to buy the commodity then everyone can enjoy good health. Brinson &



Dick [1996] refer to the cost of treatment of dancers' injuries and how the cost of treatment is often the responsibility of the dancer and good health is dependent on their 'financial health' or ability to pay. This theory of health as a commodity, is typical of the biomedical approach to health and does not take a holistic view of health, nor does it consider the broader issues and influences concerned with the health of dancers which is one of the criticisms of the current healthcare system in this country [Brinson & Dick, 1996].

Secondly, a theory of health as ideal state where it is an end in itself and where disease, illness, handicap and social problems must be absent; health is having the physical and mental fitness to do socialised daily tasks and all disabling disease, illness and handicap must be absent. Seedhouse [1995] criticises this ideological theory pointing out that it is virtually impossible to achieve and its implication condemns almost all human beings to a state of permanent unhealthiness as differences in the concept of social and physical well-being are not acknowledged, and thereby, do not take account of a dancer's well-being hinging on an ability to dance compared with another person's idea of well-being linked to social status and material possessions.

Thirdly, a theory of health as the physical and mental fitness to do socialised daily tasks whereby all disabling disease, illness and handicap must be absent in order to function normally. This theory does not take account of influences other than disease and illness being able to affect health and a person's capacity to carry out tasks [Seedhouse, 1995].

Lastly, a group of theories where health is a personal strength or ability - either physical, metaphysical or intellectual. These strengths and abilities are not commodities which can be given or purchased, they are not ideal states. They are developed as personal tasks that can be lost and they can be encouraged [Seedhouse, 1995]. This group of theories, under a humanist banner, sees health as an ability to adapt, and one version of these theories is put forward by Mansfield [1977, pp278] cited in Naidoo & Wills [1994 pp21] :-

*“By health I mean the power to live a full adult, living breathing life in close contact with what I love ..... I want to be all that I am capable of becoming.”*

Although ambiguous and rather vague, the writer can see the attraction of such a theory to the dance profession whereby health is seen as a relative concept allowing adaptation to enable a person to achieve their health goals which may otherwise cause a certain amount of cognitive dissonance or conflict of ideals. An example of this conflict, which is discussed in more detail in the psychology section, could be a dancer's over thinness, accepted by both the teacher and dancer as a necessary part of wanting to be a dancer, despite a possible awareness of health risks.

In writing about positive health Downie et al [1994, p23] identify the need for true well-being [with its roots in empowerment, and of considerable value to the individual and society] and fitness :-

*such a state entailing a balance of the physical, mental and social ingredients: over concentration on one may be to the detriment of either or both of the others. For example, an extreme commitment to physical training may interfere with the development or maintenance of mental or social skills, and may militate against mental and social well-being.*

Such imbalances when addressed by medical science are approached from a biochemical stance which disregards the unquantifiable aspects of people [Seedhouse, 1995] and again, reflects the theory that health is a commodity. This can be seen as being similar to the approach by dance professionals where the body is regarded as a machine and when the machine breaks it needs to be fixed [Featherstone et al, 1995]. However, this does not necessarily take into account other aspects related to the breakdown, for example, why it happened or why it happens time and time again. In the case of dancers, treating the symptoms may not mend the injury if it has its roots in the unquantifiable aspect of the dancer. Ivan Illich, [1977] cited in Seedhouse, [1995, pp47-48] insists that

the intervention of medicine actually harms health and also decreases autonomy, which in Illich's opinion is a necessary component for health. Illich's views and autonomy are discussed in greater depth in the ethics chapter [see page 28].

Commitment to physical training is necessary for dancers even when it results in a reduction in health and this is consistent with the findings of the report of the national inquiry into dancers' health and injury [Brinson & Dick, 1996]. Downie et al 1994] make the distinction between injury and illness demonstrating that an injured person although incapacitated may otherwise be glowing in health. It could be argued however, in the case of dancers and dance students, that the debilitating nature of injury can have serious psychological implications on the overall health of the dancer and that this impact may not be fully appreciated nor understood by medical personnel nor indeed dance teachers [Brinson & Dick, 1996].

The World Health Organisation [WHO] 1987 defines health dynamically and positively and also as a social as well as an individual product and it does not support theories which see health as an ideal state and which do not [Seedhouse, 1995] encourage the continuing development of human potential.

:-

*"[Health is] the extent to which an individual or group is able on the one hand, to realise aspirations and satisfy needs; and on the other hand, to change or cope with the environment. Health is therefore, seen as a resource for everyday life, not an object of living, it is a positive concept emphasising social and personal resources, as well as physical capacities."*

cited in Naidoo & Wills [1994, p21]

Cultural beliefs also influence views about health, and historic, ritualistic dances which existed [and indeed still exist in cultures today], for example:- fertility and medicine, where dancers, used by the witch-doctor would try to chase away the

evil spirit of disease or transfer it to themselves and conquer it [Percival, 1959]. The concept of 'Dancing your troubles away' and the dance as a health therapy is therefore not new.

All aspects of health are interrelated and interdependent [Ewles & Simnet, 1992] and dance teachers of the future need to explore and understand this in order to see the benefits of the philosophy of holistic dance teaching.

This chapter has discussed definitions and theories of health and has attempted to focus on issues pertaining to health and dance teaching practices.

# **Chapter Two**

# **Psychology**

*With his knuckles, he thumped on my sternum and down my rib cage clucking with his tongue and remarking “Must see the bones”...*

George Balanchine  
quoted in the autobiography of Gelsey Kirkland  
cited in Hanna [1988, p128]

The psychological impact of teaching needs to be considered by all those involved with dance teaching [Brinson & Dick, 1996]. Traditionally, communication in dance teaching is all about correcting mistakes in technique [Buckroyd, 1991] and this can be compared with the ‘old’ form of health care, with its problem solving approach, criticised by Seedhouse [1995], where the focus is centred on the body rather than the person. The term ‘safe dance practice’ has evolved from a biomedical approach to health and refers to reduction of risk or prevention of physiological injury, and focuses on the biological body rather than the person. This reduction of risk in dance teaching practice has promoted negative assessment and criticism without necessarily considering the implications of this practice such as the undermining of confidence and demoralisation [Buckroyd, 1991; Geeves, 1993]. There is need

to promote a humanistic approach to teaching which fosters the student's role in the learning process, positive assessment and the building of confidence or in other words, a person centred approach [Seedhouse, 1995], which relates to human flourishing of the mind and body.

In order to understand further the concept of a person centred approach, it is necessary to consider some aspects of what a person is. Human potential in abstract terms is a fundamental principle of 'personhood'. However, some potentials are more desirable than others, for example, it is usually believed that it is better for a person to value his own life because of future opportunities to look forward to, rather than a person valuing his own life because life exists [Seedhouse, 1995]. If one can value one's own life then it is also reasonable to believe that one therefore has the basic human potential for autonomy [Seedhouse, 1995]. Disregarding this basic human potential is a major criticism of dance teaching practices [Geeves, 1993; Buckroyd, 1991, Brinson & Dick, 1996] and perhaps the most important argument for developing new ways of teaching dance.

The biomedical approach to dance teaching where the concern is physiological or biological health, rather than being concerned with the person suggests a possible tension, and therefore cognitive dissonance, for the dance student resulting from the emphasis on body centred techniques, physical fitness and so on at the expense of his or her personhood. The idea that people are not just biological bodies, is of fundamental importance to the argument for making changes to dance teaching approaches and one which can support health educationalists' valuation of self-concept and self esteem as a factor of health [Downie et al, 1994].

Festinger [1957] argues that consistency between attitudes, values and behaviour is important to motivate people to change their beliefs and in his theory of cognitive dissonance Festinger [1957] argues that if an incongruence develops then the person will be motivated to change their beliefs accordingly.

If this is the case then it is reasonable to argue that certain movements required in dance may have the potential to cause harm to the body but that the resulting cognitive dissonance may be resolved by simply changing the attitudes and values forming the belief. How this cognitive dissonance is resolved is of vital importance to the dance teaching profession and of course dance students. As more is learned scientifically about the way the body works certain attitudes to methods of training can change, and one such example concerns ballistic or bounce stretching. The writer was trained at a time where ballistic stretching was acceptable and encouraged, however, there is now clear evidence to show that using momentum to force a limb beyond its natural range of movement does not lengthen tissues but it can damage them [Blakely, 1994]. This has caused changes to the writer's attitudes and values related to teaching methods of stretching to take account of scientific development.

The dance teacher who wants to avoid harming [nonmaleficence] the student on one hand but on the other hand is also aware of the potential risk of physically [and mentally] demanding technique that the student is required to achieve in order to take an examination or performance, faces cognitive dissonance on the part of the teacher. There is a body of evidence which suggests [Geeves, 1990 & 1993; Buckroyd, 1993; Brinson & Dick, 1996] that to some extent, this cognitive dissonance is ignored in current teaching practices and this of course, supports Festinger's theory above. The writer argues that dance teachers need to find ways of addressing such incongruences in a positive way, which will consider the health implications of the holistic person, rather than simply pretending that the dissonance is not there.

Theories which attempt to link psychological variables with actual behaviour nearly always involve a belief component [Shillitoe & Christie, 1989] and an example of such a theory is the health Belief Model of health promotion [Becker, 1974] which adopts a 'value-expectancy' approach. This model proposes that a number of different beliefs help to determine whether an individual will value and therefore undertake a recommended health action, for example, if a dancer



knows that she has weakness in an ankle then this will affect her readiness to dance. If advised to have treatment to improve the condition of the ankle then the cost of such treatment may affect whether or not the advice is followed. However, action may also be taken by the dancer, cued from another source such as pain.

This suggests that there is a level of control over actions taken and Rotter [1966] argues that locus of control is a significant factor in psychological well being and that the beliefs people have about how much they can control a situation can directly affect the amount of stress they might experience [Hayes, 1994]. People with an internal locus of control believe that control of their lives is largely due to their own efforts and those with an external locus of control believe that they are mostly the victims of circumstance and they also tend to suffer more stress than those who take control of their own lives.

It can be argued that dance students and dancers are often in a state of cognitive dissonance relating to body image and diet whereby the hungry dancer ignores the hunger signs from her body in preference for the feelings of control experienced by maintaining the dissonance. The dissonance may be unpleasant and by doing nothing to remove it the dancer may perceive that it increases the internal locus of control [Vincent, 1979].

This discussion of psychology has premised around Seedhouse's [1995] theory of personhood which informs the person centred approach to ethics discussed within the next chapter, and corresponds with the theory of health adopted earlier.

# **Chapter Three**

## **Ethics**

## **Introduction**

Criticism of current dance teaching practices suggests that changes need to be made and the writer believes that the body of evidence demonstrates the need for 'dance or dance teaching ethics' to be developed [Geeves, 1990; Dance UK, 1993; Brinson & Dick, 1996].

Ethical theories help people to make decisions about whether to take a certain course of action. There are two main types of ethical theory :- 'deontological' which comes from the Greek 'deontos' meaning duty and 'consequential' ethics [Naidoo & Wills, 1994]. This section will focus on Kant's deontological theory and utilitarianism as a form of consequentialism.

## **Kant's Deontology**

In his autobiography, Rudolf Nureyev [1969, pp63] writes about his teacher Alexander Pushkin :-

*'He was always trying to utilise the good points in each one of us - not concentrating on our defects, not trying to re-shape our personalities, but on the contrary, respecting them, so that each could bring to his dancing some individual colour, the reflection of his own inner life.'*

Nureyev is writing about Pushkin's teaching methods and how his approach to his students indicated his ability as a teacher to facilitate the flourishing of each student through equal respect for them as individual people. This may suggest that Pushkin felt it was his 'duty' as a teacher to treat his students respectfully. Respecting others in this way is consistent with the German philosopher Immanuel Kant's Categorical Imperative [Strike & Soltis, 1992 and Naidoo & Wills, 1994] which helps, through reason, to discover if a rule or moral principle exists. Naidoo & Wills [1994, p104] describe the Categorical Imperative as :-

*Act as if your action in each circumstance is to become law for everyone, yourself included, in the future. In other words, if everyone always behaved in this way, would the overall effect be good? If it would, then this is the rule to apply in all similar situations. The biblical "Do unto others as you would they do unto you" becomes a universal moral imperative.*

A formulation of the Categorical Imperative consistent with Pushkin's approach, is one which advises the treatment of human beings as 'ends in themselves' and not merely as means [Naidoo & Wills, 1994] suggesting that a moral rule is one which respects the autonomy of each person.

In deontological theories, the right thing must be done regardless of the consequences and this therefore makes it easy to make decisions because as long as the rules are obeyed, the decision must be right [Naidoo & Wills, 1994; Beauchamp & Childress, 1994]. Prima facie, this has the implication of simplifying the task for the dance teacher.

However, it points to an inflexibility which could be detrimental to the dancer or dance situation. Firstly, duties may conflict. The dance teacher may on the one hand have a duty to care but on the other hand the duty to respect autonomy. Secondly, where consequences differ. Always tell the truth - judging on the basis of the rule and not the consequence for a particular person - ie not harming that person - seemingly treats people as ends [respects autonomy] but

this can mean someone is harmed. This can have implications on 'how' the truth is told. Kant did not want a soft approach to be adopted, instead he supported the straight forward approach [Beauchamp & Childress, 1994].

In addition to the problem of inflexibility, while the respect for the person is person centred, this does lend itself to the problematic emphasis on individual responsibility and therefore the possibility of victim blaming. Clearly, a dance student needs knowledge to ensure their health as a dancer is maintained. Education goes hand in hand with facilitating autonomy and accompanying responsibility for health. However, this ignores the structural constraints on the autonomy of the dancer ie the relative poverty of a dancer may restrict their diet despite their knowledge. Thus the individualism of Kantian deontology suffers from the problem of divorcing the individual from her socio-economic context, whatever that might be and therefore legitimates victim blaming [Beauchamp & Childress, 1994].

There is also the problem of reconciling respect for the autonomy of the individual dance student with the needs of the dance group. Again, here the individualism of Kantian deontology comes up against the problem that the dynamics and consequences of group behaviour and goals are not reducible to any one individual. Thus, a focus only on the autonomy will detract attention away from the possible resulting conflict between the health of the individual and health of the group. Lastly, the principle for Kant of respect for autonomy centres on the idea for self government entirely in terms of reason [thinking]. This suffers from ignoring the emotional side of a person [Downie & Calman, 1994]. A truly person centred approach must take account of the emotional dynamics of dance with its implications for health.

## **Utilitarianism**

As a consequentialist philosophy, utilitarianism judges whether an action is good or bad according to the consequences [Beauchamp & Childress, 1994]. In its

classical form, Jeremy Bentham, defined good as 'pleasure' [or 'happiness'] and 'pain' as bad, where utility is based on maximising pleasure. The morality of an action was to be assessed in accord with the principle of the 'greatest good, or greatest happiness, of the greatest number' [Seedhouse, 1988].

Taking the above utilitarian approach as a guide to dance the advantages are :-

- 1 It avoids conflict of duties [going for best outcome]
- 2 The focus on the good of the group [maximising happiness for the greatest number] avoids conflict between the autonomy of the student and the goals of the dance group, by rejecting respect for autonomy as a moral principle.
- 3 Bentham does not ignore the emotional side of the human being.
- 4 It recognises the importance of consequences and not merely duty which suffered from the inflexibility of universal rules.

There are also disadvantages to consider :-

- 1 What is pleasure or happiness and how is it measured?
- 2 It legitimates a body centred approach in the sense although this may facilitate the maximising of pleasure for the group as an outcome [ie competition or performance production] but at the expense of the autonomy of a particular student/students of the group. In this sense, it is not person centred. This also legitimises treating people as means to serve the ends of the group at the expense of the individual as reflected in the first advantage listed above.

- 3 The problem of judging outcomes of actions.
- 4 Neglect of motives. By neglecting motives, an irresponsible teacher will still be judged as good by the consequences. This being consistent with the existing body centred approach to dance teaching [Geeves, 1993].

The body centred approach to the teaching of dance which supports a biomedical model of health, does not promote 'respect for all persons' or autonomy of neither the teacher nor student [Geeves, 1993] and is supportive of a consequentialist or Utilitarian approach. Although, a principle of Utilitarianism, maximise utility, relies on making a choice which results in the greatest benefit for the greatest number of people [Strike & Soltis, 1992], it can be argued that maximising utility should not be restricted to the greatest number of people.

Advantages of an utilitarian approach in the training of dance teachers could be to avoid potential conflict of duties, for example, when teaching a particular movement, a teacher may ignore the physical limitations of a dancer in order to achieve the final result and argue that as long as the outcome is achieved, it is a morally acceptable way of teaching. Disadvantages of this monist theory includes, the problem of predicting outcomes of actions, treating people as means instead of ends and thereby not respecting autonomy, error in making judgements and the neglect of motives. Lack of individualism in a consequentialist approach to the training of dance teachers could remove guidance relating to the individual abilities and focus instead on general outcomes of the training which could result in student dance teachers being trained to pass professional examination without necessarily achieving proper understanding of 'how' to teach [see chapter 5].

### **Principle Based Ethics**

Core principles of autonomy of respect presupposes the theory of personhood

discussed in the section on psychology - which in turn is consistent with the conclusion on a theory of health earlier.

Beauchamp & Childress [1994] identify four ethical principles as:-

- Respect for autonomy
- Nonmaleficence [avoiding harm]
- Beneficence [doing good]
- Justice [fairness and equity]

The first principle 'Respect for autonomy', is the one that this paper focuses on although it can be argued that all four principles are inextricably linked. One definition of autonomy [Collins, 1992] is :-

*'the right of self-government or freedom to determine one's own actions and behaviour'*

How this meaning is applied is of significance. For example, to allow dance students total freedom over their actions and behaviour in dance classes could result in chaos. Therefore, there is more to autonomy than just the basic definition.

Downie & Calman [1994] define 'one ought to respect [value] a human being above all' as the principle of respect for the autonomous person, thereby implying mutual respect, and Kant argued that 'freedom of the will' was the supreme principle of moral action [Doxiadis, 1991]. Downie & Calman [1994], in writing about requirements of autonomy, say that one has to have the ability to be able to choose for oneself to carry out one's own plans or policies.

Beauchamp & Childress [1994] write that virtually all theories of autonomy agree that two conditions are essential although they also acknowledge that disagreement exists over the meaning of these two conditions:-



1. Liberty [independence from controlling influences]
2. Agency [capacity for intentional action]

In addition, a third condition - acting with understanding - is identified as being significant in analysing autonomous action [Beauchamp & Childress, 1994] whereby the conditions of understanding can be satisfied to a greater or lesser degree, in the same way that acting without controlling influences can be fulfilled to a degree of autonomy. Agency, unlike the other two conditions, has to be intentional or not and therefore cannot be matter of degree. Therefore, it is reasonable to assume that for an action to be autonomous it needs a tangible amount of understanding and agency [freedom] from constraint [Beauchamp & Childress, 1994].

A professional dance syllabus may be considered as a set of guidelines as to minimum requirements whereby the teacher has the freedom to choose how to prepare student teachers for the examination within his or her understanding of the structure of the syllabus and the degree of autonomy, on the teacher's part, will therefore be dependent on the teacher's level of understanding. How teachers use this flexibility or degree of autonomy, is crucial to the development of the student teacher and their ability to recognise the disadvantages of seeking total autonomy in dance, which disregards other beings, thereby not respecting the autonomy of others and not supporting mutual respect of individuals and groups. In other words, autonomy of action within society requires some degree of restriction in order to respect the autonomy of others [Beauchamp & Childress, 1994; Seedhouse, 1995].

Geeves [1993] describes one method of dance teaching as 'teaching by terror'. It can be argued that whilst many teachers do not actually teach by terror, they do adopt a very authoritarian approach. Such practice can be justified in their eyes because they see it as a form of paternalism and it seeks to do good [beneficence and avoid harm [nonmaleficence]]. This practice removes the need for students to be autonomous and is not consistent with a person centred

approach. In other words, it does not promote the need for students to think for themselves nor to question and communicate with the teacher. It could be argued that with a reduction in this 'teacher knows best' [strong paternalism] approach, justification of paternalism is less likely [Beauchamp & Childress, 1994]. In fact, such changes may enable a balancing of autonomy and paternalism which can be viewed as a form of weak paternalism which enhances autonomy [Beauchamp & Childress, 1994]. By adopting a weak paternalistic approach, a dance teacher can facilitate students to increase their understanding and thereby, enhance their autonomy, which is consistent with the negotiating form of intervention in Beattie's [1991] model of health promotion discussed in the next section and is also consistent with working towards a self-empowerment theory of health as explored earlier..

The dance teacher in facilitating the flourishing of the student through the encouragement of autonomy and respect for the person can be described in Seedhouse's [1988] view as adopting 'moral teaching' methods because students would be equally, encouraged to achieve the fullest enhancing potentials of which they are capable. The valuing of people for what they are as well as what they can do are the basic aspects of personhood and this must surely become an integral concept of ethical dance teaching practices.

Therefore, it stands to reason that the authoritarian approach to teaching can be judged in Seedhouse's [1988] view to be 'immoral' because of the possible obstacles it creates to individual growth and development and possible disregard for nonmaleficence.

Having the freedom to make choices is one thing but having the ability to establish whether the choice to be made is a moral one, is another. Using a model or grid can help someone to develop strategies and in the case of ethics, the ability to reason morally. A clear and useful guide is Seedhouse's Ethical Grid discussed in the next section [Seedhouse, 1988].

## **Seedhouse's Ethical Grid - A Model of a Person Centred, Principle Based Approach**

Using this model as a clarification of the principle based approach it should be noted that Seedhouse regards it as reconciling deontology and consequentialism. This is important because as a dance teacher one wants to focus on the the principles of the person along with the consequences for the dance group or dance culture.

Seedhouse's [1988] Ethical Grid [see appendix 1] is made up of four different coloured layers, blue, red, green and black and each of the boxes is independent and detachable. Although the boxes can stand independently, it can be argues that should be interrelated. There are various ways of using the Grid. The boxes in the blue layer, may be seen as the significant principles with a reducing amount of significance as one progresses to the outer layer. Seedhouse [1988] writes that this may not always be an appropriate way in which to use the Grid and that some users of the Grid may never use it in this way.

Seedhouse [1988] offers another option where a spiral is operated from the outer to inner layers where perhaps one box from each layer is considered as a starting point. It is also possible to see the Grid as a two, or three dimensional, object although boxes which happen to be on the same side of say, a pyramid, would not actually have any special relationship. For the pyramid to come to life Seedhouse [1988] writes that it must be applied to practical cases. However, he also indicates that the Grid does not represent the exact mental processes of moral reasoning; the purpose of the layers being to assist in the complexity of moral reasoning and the four different layers showing the minimum number of components which make up an ethical deliberation.

Each of the coloured layers is concerned with particular areas or theories. The

blue or core layer, for example being concerned with the creation of autonomy, respecting autonomy, respecting persons equally and serving needs before wants [ensuring the basic needs of society are met, such as food, shelter and so on]. The red layer corresponds to deontological theories and focuses upon duties and motives - minimising harm, promise-keeping and so on are areas of moral deliberation that should not be disregarded without good reason [Seedhouse, 1988]. The green or consequentialist layer focuses on the need to consider the general consequences of proposed intervention and is divided into :- increase of individual good; increase of self good; increase of the good of a particular group and the increase of social good. The final or black layer is the level of external consideration including risk assessment, assessing degree of certainty of the evidence, codes of practice and effectiveness and efficiency of action.

In Seedhouse's [1988] opinion, the Grid can be used legitimately only by those who are consistently opposed to dwarfing and who wish to enable the enhancing potential of people. The implications for the dance teaching profession is that only teachers or student teachers who believe in an holistic approach will benefit from the help of the Grid. In other words, the Grid should only be used by those who are committed to the promotion of ethical teaching practices.

In terms of dance, the implications are as noted earlier, the grid seeks to reconcile consequentialism and therefore utilitarianism, with deontology thus this implies the grid offers dance teachers a guide for respecting the autonomy of the individual dance student with the good or consequences of the group. As a dance teacher, it is necessary to bear in mind the need to balance the respect for autonomy of the individual student and the group. Whilst being person centred and presupposes personhood [links back to discussion on psychology and health] it takes into account the importance of consequences.

The black layer in Seedhouse's [1988] grid deals with areas such as disputed facts and risk and draws particular attention for the dance teacher to draw on

appropriate knowledge, for example, socio-economical conditions, sociological, psychological, anatomical, physiological and technical knowledge. The grid draws attention to codes and there may be conflict between existing dance codes [these may not be necessarily be written codes], or rules of dance, and ethical principles. If there is a conflict, the codes or rules are morally wrong and should, in the light of the grid, be changed thereby confirming that ethics should come before codes or rules.

This brings together support for a principle based, caring ethics which is person centred and one that can help with empathy whilst still being in line with a principle based approach, unlike Kant's philosophy discussed earlier in this section. The principles of autonomy, beneficence, nonmaleficence and justice explaining the 'why' in ethics and the principle of caring explaining the 'how' and an example of this is the important but often neglected element of caring ethics - communication, which involves considering not only what to tell someone but 'how' to tell them [Beauchamp & Childress, 1994; Gallagher 1995]. Margaret Urban Walker [1989], cited in [Gallagher, 1995, p100] points out that often :-

'The moral agent is depicted in lonely cogitations'.

Advantages and disadvantages of Kant's deontology and Utilitarianism have been explored in relation to dance teaching and support is given to 'moral teaching' methods which facilitate the flourishing of dance teachers and students through autonomy and respect for the person and the use of Seedhouse's [1988] ethical grid is also supported as a means of helping those committed to an holistic approach to reason morally. Thus corresponding with the theories of health and psychology discussed earlier in this chapter.

# **Chapter Four**

## **A Theory of Health Education**

*'Demonstrate to the dance profession the need to reform creative practices, teaching practices and dancers' life styles in the interest of dancers' health'.*

*[Brinson & Dick, 1996, pp 29]*

## **Introduction**

This theory of health education is developed in the light of the preceding sections drawing here on an assessment of models of health education and promotion.

Questions need to ask about how dancers and teachers define health and what their understanding of health education is.

Brinson & Dick [1996] appear to be limited to a biomedical model of health when writing about 'dancers and teachers' lack of health education' highlighting the need for dancers to be taught about good nutrition, safe use of the body, importance of rest and ways to prevent injury during training. This raises the question of what the dance world perceives health education to mean.

Before looking at the meaning of health education, it is useful to consider first of all, what is meant by 'education'. Seedhouse [1995] writes about two principle goals of education. The first being to provide the learner with all relevant

information about a subject area and the second to instil a childlike curiosity to encourage a questioning attitude and confidence in selection and criticism. Simply presenting information is not an education but a form of programming [Seedhouse, 1995] and a dance teacher who simply presents the basic technique is not encouraging an inquiring mind nor promoting autonomy. Consistent with the preceding conclusions on health psychology, and ethics, dance teaching needs to move away from the idea that teachers are the 'experts' who tell dance students what they must do in order to dance well [Downie et al, 1990; Geeves, 1990].

There are two definitions of health education that this paper will consider. The first is health as a planned activity.

*Health education is any planned activity which promotes health or illness related learning, that is, some relatively permanent change in an individual's competence or disposition.*

Tones [1990 p2]

Tones [1990] clearly identifies 'planning' as being fundamental to health education and that changes in attitudes or skills are intended, whereas French [1990], below, focuses on the importance of free choice or voluntarism and does not believe the aim is for overt behavioural change.

The second definition is about enabling.

*Health education is not about behavioural change, and it is not about overt political action to affect the determinants of health. Rather health education is about enabling - supporting people to set their own health agendas. Agendas they can then implement in way decided by themselves collectively or as individuals.*

French [1990, pp7-10]

Health educators acting as facilitators and working with their clients to identify

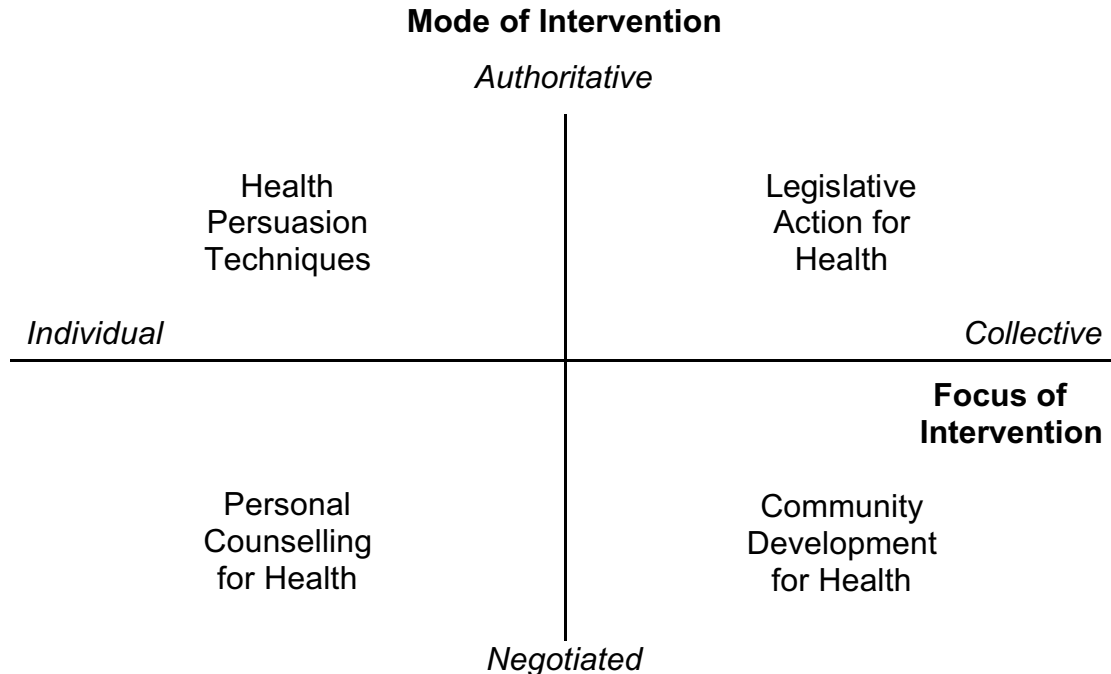


their needs also work towards their clients making an informed choice. Encouraging dance teachers to be facilitators instead of authoritarian figures supports the ideology of holistic teaching practices and is consistent with the view on health, psychology and ethics as discussed earlier either collectively or individually.

In order to explain, predict and enhance communications, models of health education can be used as tools or frameworks [Tones, 1990] to provide a certain amount of consistency to the process of education or promotion. Student dance teachers can develop cognitive skills from using models, such as the ones identified here, to plan and evaluate their teaching practices.

## Beattie's [1991] model of health promotion

Beattie's [1991] four paradigms of health promotion.



In this ideological model, the structural map characterises and summarises key features in contemporary health promotion. The mode of intervention ranges from the top-down or authoritative led approach to the bottom-up or negotiated approach which values autonomy and the dimension termed the 'focus of intervention' ranges from concentrating on the individual to concentrating on groups. These strategies provide a framework for health promoters whilst also acting as a reminder that social and political perspectives influence the choice of interventions [Naidoo & Wills, 1994].

A dance teacher encouraging dance students or dancers to give up smoking, in authoritarian mode, could be said to be using a health persuasion strategy or top down approach, whereas, the same teacher encouraging dance students to reflect on, and review, their lifestyles and their scope for individual change would be employing a personal counselling or bottom up approach.

Tones' [1990] three models of health education are considered to be more technical in nature and are termed :- the preventative model; the radical-political model and the self-empowerment model.

### **The Preventative Model**

This model aims to persuade people to adopt behaviours which will prevent disease, through increasing medical intervention such as screening or immunisation, and it's effectiveness is based on individuals or communities adopting healthy or healthier lifestyles. However, this approach does not take into consideration the true influences effecting any reduction in health, for example, the socio-economic environment, and this is one of the reasons for increasing criticism of this model in recent years [Tones 1990, Naidoo & Wills 1994].

The preventative model is a top-down, victim blaming, approach based on the medical model which encourages people to rely on expert, medical knowledge and the authority of medical professionals and does not support voluntarism or free choice and therefore could be considered to be consistent with many current dance teaching practices [Geeves, 1990]. As seen in the criticism of Kant's views on autonomy, it was noted that in respecting autonomy account must be taken of constructional constraints such as socio-economic conditions which may prevent the dancer, eg, from improving their diet and thus lead to victim blaming. This is consistent with Seedhouse's ethical grid and his discussion of health on the Foundations for Achievement [see Health and Ethics sections] whereby if structural constraints are a barrier to individual flourishing they should be removed or modified.

### **Radical-Political Model**

This model is concerned with achieving social and environmental change by actuating political change so that health services and facilities that people need,

in order to be healthy, are more accessible. In other words, it promotes healthy public policy, for example, redistribution of wealth in a Capitalist market economy, to take care of health needs. Like the preventative model, the radical-political model is a top-down approach [Tones, 1990].

### **Self-Empowerment Model**

This third model is derived from an educational model which fosters informed choice [Tones, 1990] and leads to personal growth. In this model, the health educator acts as a facilitator and people are empowered [autonomy enhanced] to make their own decisions about their health. Unlike the first two models, this one is a bottom-up approach which promotes self-esteem, personal growth and positive health as well as facilitating health choices. Measuring successful outcomes of this model would be concerned with levels of self-esteem, social and lifestyle skills as well as knowledge, beliefs and decision making abilities and so on [Tones, 1990].

There is evidence of support for this approach from the dance world [Geeves, 1993; Dance UK, 1993; Buckroyd, 1991] and it is also consistent with the beliefs of the writer as to the way forward for dance teachers of the future. This being consistent with the writer's preceding conclusions on health, psychology and ethics which informs the theory of ethics adopted here and taking account of structural conditions [socio-economic] as mentioned earlier.

Tones [1990] maintains that self-empowerment is not gained merely by critical consciousness raising but as a result from training which has a sound, theoretical base. Seedhouse [1995] does not share this view regarding training and his view suggests that the whole concept of 'training' in dance, needs to be reconsidered :-

*The idea of training is closest to the idea of indoctrination, which is a process which involves imparting a single set of ideas. Training is proper and necessary in disciplines such as computing*

*and engineering, where correct techniques and formulae must be learnt. The importance of a thorough training in many practical disciplines cannot be overestimated, but it is improper and debilitating where human values, lives and goals are concerned.*

Tones [1990] view of self-empowerment is more consistent with Seedhouse's definition of education as discussed in the previous chapter, where cultivating skills results in the enabling of a person to choose autonomously this being consistent with his view on health education and ethics.

The teacher of the serious or promising dance student is contributing to a possible career. The teacher of the social dance student is offering the opportunity for social contact, enabling people to enjoy dance as a method of keeping active, perhaps reducing stress and contributing to the general well being of the person. Physiological studies confirm that moderate intensity activity is associated with improved fitness and lowered risk of heart disease [Health of the Nation Physical Activity Task Force, 1995]. All along the continuum are legitimate forms of dance teaching however they can require different teaching strategies.

A dance teacher's training needs to encompass a wide range of learning skills, teaching skills and methods to prepare them for their future career. Steinaker & Bell [1979] write about some of the roles that a teacher may adopt at various times :- motivator; catalyst; moderator; sustainer and critic. There are various ways of learning, although some strategies are more or less effective than others [Ryder & Campbell, 1988]. Teachers can help students 'how' to learn, thereby encouraging autonomy which is consistent with the theories discussed in this paper. Understanding the 'how' of learning or teaching methodology requires a certain amount of reflective practice. For example, Schön [1983, pp301] in discussing reflective contracts between practitioner and client, and the different kinds of competences such contracts demand, together with different sources of satisfaction, suggest that they may be expressed as follows :-

---

*Expert*

*Keep my distance from the client, and hold onto the experts' role. Give the client a sense of my expertise, but convey a feeling of warmth and sympathy as a 'sweetener'.*

*Reflective Practitioner*

*Seek out connections to the client's thoughts and feelings. Allow his respect for my knowledge to emerge from his discovery of it in the situation*

---

The 'expert' role suggests a form of paternalistic 'health' care orientation in contrast to the reflective practitioner's Principle Based, caring, person orientated approach, as mentioned in the previous section.

Strategies for planning health education within dance teaching practices, can be developed using the models of health education and promotion discussed in this section, taking into account and consistent with the theories of health, psychology and ethics discussed earlier in the chapter.

**Chapter Five**  
**A Study of**  
**Requirements for Dance**  
**Teaching Qualifications**

## **Introduction**

This chapter assesses the content of current professional dance teaching syllabi in United Kingdom by drawing on empirical data, gathered by various qualitative methods, and critically assessing it in light of the theories of health, psychology and ethics adopted in the earlier part of this paper. Comparisons made with the Russian dance teaching system, drawn from data collected during the writer's placement to the Leningrad Region, contribute an international flavour to the study.

## **Researcher's Beliefs**

In setting out to do this study, the researcher had certain beliefs about the data to be collected which were partly based on professional experience as a dance teacher, and examiner, and partly as a result of literary evidence discussed in the previous chapter. The researcher believed that analysis of the data would demonstrate that, consistent with the evidence explored earlier, in the main, current dance teaching practices adopt a body centred approach and not a person centred approach thus being inconsistent with the theory of health education for dance teachers, developed in the earlier part of this paper.

This supposition was to be put to the test by collecting data [in addition to documentary evidence] by means of qualitative methods including a survey of



seven examining dance bodies in the United Kingdom to ascertain the requirements or content of professional dance teaching syllabi, currently adopted by these bodies, and also interviews and observations with staff and students at a college where dance teachers are trained, in St Petersburg, Russia.

### **Why Qualitative?**

Selection of a research method is dependent on the purposes and circumstances of the research, for instance, time constraints and cost of research, rather than being developed from methodological or philosophical commitments [Jones, 1988]. Both qualitative and quantitative methods study the social world, however, in this instance, statistical or quantitative research which is numerically analysed, was not seen as appropriate because the researcher wanted to obtain a general picture or overview of the current professional dance teaching situation which was not limited to the raising of issues, seen by the designer of the questionnaire as important and furthermore, would also accommodate diversity within the data collected [Hammersley, 1992].

In light of the data required, a qualitative approach offered scope for the collection of descriptive, in depth, data, including detailed, positives and negatives, and also perhaps data not requested but useful to the study [Hammersley, 1992]. Qualitative methods were also felt to be more accommodating for the Russian element of the study, allowing flexibility of data collection [dependent on the circumstances and possible difficulties that could arise from the researcher's lack of Russian language skills] such as, open questioning in interviews and observation sessions and thus enabling a more ethnographic view of dance teaching culture in Russia [Fetterman, 1989].

A small scale study was purposely planned to take account of the time available for collecting and analysing the data, the cost of carrying out the research and also to take account of the 'introductory or original' nature of the project [Fetterman, 1989]. An advantage of carrying out a study of this size is that it can

provide useful information for planning areas of possible future research, and it can also offer insight into the research topic which may help to determine whether further research is thought to be worthwhile.

A representative sample of the examining dance bodies was chosen purposefully to demonstrate the diversity that exists in professional dance syllabi and although the researcher accepts that such a purposive or nonprobability sample can be limited in value because the sample is handpicked, it does ensure, in this particular study, that it is informed by a representation of a cross section of examining bodies and that it can be replicated in the future for validation purposes [reliability] and also for comparative or monitoring purposes [Dane, 1990].

Unlike quantitative research where analysis is usually carried out after the collection of data, the content analysis of this study began while data was still being collected and the researcher was able to look for commonalities and categorise them as they arose under headings, such as :- points of interest and surprising issues and cultural patterns and consider them in the light of existing theories and previous research [Jones, 1988]. As the study progressed the identified themes changed until eventually the main categories of interest to the study, emerged [Jones, 1988].

The methodology used to gather and examine the data enabled the researcher to go back to each organisation for further information or clarification when required, thus providing means of triangulation of the data. Method triangulation of the data, emphasised by post-positivists who see all measurement as infallible [Trochim, 1996], allows cross-checking of the data gathered by various methods, and this was possible between the UK and Russian data as different methods were used to collect data ie written requests, telephone requests, observation sessions and unstructured interviews and is a powerful way to compare data that is not possible in quantitative studies as validation of such data is sought through replication of method [Dane, 1990]. Validation of the

documentary evidence and data in this study, means that it could be a useful monitoring tool for a replicated study in the future [Dane, 1990].

Unstructured Interviews with an open-ended questioning approach, and observation sessions carried out in Russia add interest and help the researcher to reflect, not only, upon similarities or major differences between the dance teaching cultures of Russia and United Kingdom as well as socio-economic influences, but also to reflect on the research process itself [reflexivity] [Fetterman, 1989, Dane, 1990].

Cohen & Manion [1996, pp271-272] describe research interviews as :-

*'An unusual method in that it involves the gathering of data through direct verbal interaction between individuals.'*

The placement provided the researcher with an ideal opportunity to gain experience of carrying out research in an overseas setting using different research methods in addition to gaining experience of, liaising with a foreign government department [see appendix 4] and using interpreters during interviews and for general communication.

Permission was obtained from the Ministry of Culture in St Petersburg [see appendix 4], which effectively can be seen as the research contract [Dane, 1990], and also from individuals verbally, to make use of audio and visual recording equipment for interviews and observed sessions. These permanent records provide valuable accuracy when recollecting observations and interviews, as well as providing useful data for future, comparative purposes [Simpson & Tuson, 1995;]. and in Fetterman's [1989] opinion :-

*Videotape provides the observer with the ability to stop time. .... Over time, visual and verbal patterns of communication become clear.*

A disadvantage of the interviewing method carried out in Russia is that the data

collected is subjective and possibly biased because much of it was dependent on the services of an interpreter [provided by the Ministry of Culture] and therefore reliant on a third party's command of the language and comprehension of the issues being discussed [Cohen and Manion, 1996]. An example of the sort of difficulties that can be experienced using interpreters occurred at the famous Vaganova Ballet Academy, where the Director chose to carry out the conversation in English after hearing the interpreter's translation of his initial greeting.

A criticism of the research carried out in Russia is that, unlike the UK part of the project where the sample was chosen by the researcher, interviewees, and arrangements regarding interview times and so on were not organised by the researcher but by the Ministry of Culture on the researcher's behalf. Therefore it is not possible to say how reliable the data is as a representation of the Russian dance teaching system. The Russian data therefore has to be viewed with this in mind and it can be seen as adding general, comparative interest to the study. The process of carrying out the research in Russia however, has enabled the researcher to gain valuable experience about collecting and analysing qualitative data.

Although many ad hoc interviews were carried as opportunities arose, the main interviews were arranged with :- the Director and teachers of the College of Culture in St Petersburg; dance teachers from other establishments; the Director of the Leningrad State Ballet Company and an orthopaedic surgeon specialising in dancers' injuries. In order to obtain a general view of the Russian Dance teaching system it was felt more appropriate to carry out interviews using a list of interview topics rather than structured questions [see appendix 5] .

The researcher was privileged to be invited to observe, and record on video, many different levels of dance classes and performances :- children being introduced to dance at kindergarten; student dance teachers learning technique and various aspects of conducting dance classes; students in dance classes and

English language classes and members of the Leningrad State Ballet Company at their morning class and also students at the Institute of St Peterburg taking their end of year assessments. In total, the researcher spent somewhere in excess of 50 hours as a non participant observer [Woods, 1986] which has resulted in an abundance of video recorded data about many aspects of dance in Russia which could be useful for future studies.

Since returning from Russia, the researcher has listened to the interview audio tapes and selectively transcribed sections of interest to the study [Riley, 1990] for analysis purposes and they inform the comparative report in the next section.

### **Findings and Discussion of the Study**

There is no one organisation or dance body in UK which governs the dance profession although the Council for Dance Education [CDET] is the leading body in the UK representing professional dance training as well as broader educational interests across the country [CDET, 1996]. Similarly, Russia does not appear to have one governing dance body and indeed, there are teachers in Russia who have become members of organisations in UK and therefore follow the UK examination system, in mainly ballroom and freestyle branches.

Seven UK examining bodies offering teaching qualifications based on their own professional syllabi were contacted [by letter or telephone, see appendix 3] by the researcher and all of them agreed to provide information, although in the end, data was only provided by six of these organisations:-

Royal Academy of Dancing [RAD]

British Theatre Association [BTA]

Imperial Society of Teachers of Dancing [ISTD]

International Dance Teachers' Association [IDTA]

British Ballet Organization [BBO] [no data received]

British Association of Teachers of Dancing [BATD]

## United Kingdom Alliance [UKA]\*

\*As an examiner for the UKA, the researcher holds the necessary information about teaching qualifications and therefore did not need to seek additional data. However, the general secretary of the UKA is aware of the study [see appendix 4].

Comparative data was gathered by the researcher by means of interviews and observation sessions carried out in St Petersburg, Russia, at the College of Culture, a state run college offering teacher training courses in dance and also courses in other cultural arts such as drama and music.

Responses were received from all the UK examining bodies except the BBO. The amount of information provided varied considerably from a one page letter to several documents providing detailed curriculum data, and follow-up telephone calls enabled the researcher to clarify any appropriate points. Initial analysis of the data found two distinct types or categories of examining bodies :-

1. Dance organisation whereby professional qualification is gained by examination and there is no compulsory teacher training programme run by the organisation. Teacher training can be arranged with appropriate teachers or examiners of the organisation.
2. Dance organisation whereby professional qualification is gained by examination in addition to following a compulsory, specified teacher training programme.

Included in the first category are :- the ISTD; the IDTA; the BATD and the UKA. All of these organisations, cover a wide range of dance subjects for the serious and social dancer and various levels of teaching qualifications are available in most subjects. Candidates may arrange to enter for the teaching examinations when they have completed their preparations and candidates for higher levels of teaching qualification are often required to have practical teaching experience prior to taking the examination. Both the BATD and UKA do not insist on a

compulsory level of achievement to be eligible to sit a professional examination, whereas the IDTA recommend that their graduate examination in the appropriate branch is held prior to sitting the teaching examination. In contrast, candidates in the ISTD must have attained a suitable level of achievement in order to be eligible to enter for a teaching examination.

Both the RAD and BTA belong in the second category as their teaching qualifications are gained only after completion of teacher training programmes of between one and three years, dependent on the choice of course and previous experience ie in the case of the RAD, as a professional dancer. Some prior teaching experience is required and applicants are required to have either successfully gained a certain level of dance examinations or be able to pass an eligibility examination before being accepted onto the programmes.

It should be noted that the RAD specialises in the training of classical ballet teachers and does not offer qualifications in other dance subjects, although students following the BA [Hons] degree course can opt to take the Associate Modern examination in the ISTD.

The College of Culture offers a three year teacher training programme which focuses on classical ballet and Russian folk dance with some input of other dance subjects and can be included in the second category along with the RAD and BTA.

Although it could be deduced from the data that organisations in category 2 appear to have more in depth requirements than organisations in category 1, the data does not provide any information regarding the training programmes of independent teachers preparing professional candidates and therefore, it should be noted that candidates taking a professional qualification in a category 1 organisation may have had a thorough training which was much more comprehensive than just the necessary requirements for examination purposes or equally possible, a candidate in this group may have received the bare

minimum training in order to fulfil examination requirements.

Further analysis of the data identified the following categories or themes in the UK and the Russian data, as the main issues emerging.



Themes in UK Data	Themes in Russian Data
Knowledge of technique Teaching Methodology Knowledge of fault correction Anatomy & Physiology Diet	Knowledge of technique Teaching Methodology Economic issues Cultural issues Diet

Examination of the data clearly shows consistency between all of the participating organisations where the main concern for all levels of the teaching examinations appears to lie in the knowledge of the technical areas of dance and teaching methodology, appears, from the data, to focus on the practical side, for example, knowledge of steps and movements, fault correction, correct body placement and so on, and none of the data appears to demonstrate a promotion of person centred teaching skills consistent with the theories of health, psychology and ethics developed earlier, although at degree level, the RAD does include child development and psychology within the teaching studies section of the three year course and as an optional subject on the one year intensive course. However, it is not possible to deduce from the data available if this psychological input supports the theories of psychology and personhood discussed earlier and it could be argued that the following extract from the RAD Prospectus suggests a paternalistic approach to student welfare that appears to support the idea of health as a commodity which is not consistent with the theory of health adopted earlier in this paper :-

*Psychology focuses on the ways in which young people develop and the teaching styles relevant to each stage of learning. The course shows you how to take care of the welfare of your pupils and to encourage them to give of their best.*

It is interesting to note that the psychology input above is restricted to young people's development and therefore does not consider the teaching skills required for teaching adults, it can be argued that the majority of teaching of classical ballet for examination purposes will involve children and young people

therefore it is appropriate that the psychological input reflects this. However, the input does not appear to consider the immediate and long term, psychological effects of dance training and how such effects can be addressed in teaching practices which would support the theories of personhood discussed previously.

The other organisation to mention a psychological input was the College of Culture, however, again it is not clear from the interview data which theories of psychology are supported and whether such theories include a theory of personhood. From observed sessions it is possible to deduce that the teaching methodology adopted at the College is consistent with the body centred approach and therefore consistent with the literary evidence discussed earlier and also with the other organisations in the study.

In the second category, the RAD , BTA and College of Culture, all include observed teaching practice as part of their curricula in contrast with organisations in the first group, whose examination systems, except in the case of the UKA which has introduced such assessment into some of their professional examinations, require only verbal assessment of theoretical aspects of the subject concerned, thus supporting the idea that having knowledge also means that one has the ability to impart this knowledge to others - an idea that is not supported by the researcher and is not consistent with Seedhouse's [1988] view regarding the promotion of ethical teaching practices and the use of the Ethical Grid to assist in the development of such practices.

As the theories being verbally assessed focus on the correction of faults rather than developing a critical approach to teaching skills, they agree with Geeves' [1993] criticism of current teaching methodology as concentrating on 'what' is in the syllabus instead of concentrating on 'how' to teach what is in the syllabus and thus do not promote holistic teaching skills consistent with the promotion of autonomy and a person centred approach.

Equally, the inclusion of observed teaching practice, does not mean that this

automatically fosters autonomy, and thereby a respect for others, and a holistic approach to teaching methodology. With the findings of the literature and the data supporting the body centred approach to dance teaching it is reasonable to assume that the main focus of observed teaching practice is correction of technique and knowledge of the syllabi, consistent with this approach and not a person centred approach supported in this paper.

All of the organisations expect some understanding of anatomical and physiological knowledge, in one or more of their professional syllabi or curricula and in the case of the ISTD, there is a separate written examination in Applied Anatomy and Physiology for dancers and teachers of dance which is compulsory for their higher level teaching candidates, and it is also accessible to outside, interested candidates who wish to take this examination.

It is possible to deduce from the data that organisations view anatomy and physiology as the 'health' input for teaching candidates, thus creating a dichotomy regarding what the dance organisations perceive to be the definition of health and health education and the theories of health and health education developed in the earlier part of this paper.

The data suggests that current dance teaching, problem-solving approaches focus on the teacher's ability to find and attempt to correct faults, thereby suggesting that the quality of dance hinges on an absence of faults, which disregards the emotional side of the person and the psychological impact of negative assessment. It can be argued that such approaches ignore the intangible area of dance that can be nurtured but not taught, and do not encourage the positive aspects of teaching dance where self-esteem is boosted, autonomy and respect for others, actively encouraged and the effectiveness and efficiency of action, considered, in other words, it does not promote, ethical teaching practices, congruous with the theory of health education for dance teachers developed earlier.

In Russia, for example, health education and healthcare are seen to be one and the same, and a medical check is seen as health education, again demonstrating the consistency with the body centred approach. Similarly, it can be deduced from the data gathered in the UK and documentary evidence examined earlier, that a dancer's health hinges on injury prevention, an absence of injury or receiving appropriate injury treatment, all of which can be considered independently of the person as a whole being, and therefore, not consistent with the holistic promoting theories of health and health education developed previously.

In discussing injury prevention with teachers at the College of Culture, the researcher was interested to note that it is generally accepted that certain types of movement, for example some steps in Russian folk dancing for men, can cause long term damage or injury. When questioned about possible injury prevention strategies, the teachers appeared reluctant to contemplate changes to long standing, traditional dance with strong cultural roots, preferring to accept such injuries and perhaps shortened careers, as inevitable. Possible psychological or ethical implications caused by inducing long term injury do not appear to form any part of the decision making process regarding the approach to teaching such work.

An interview with an orthopaedic surgeon, in St Petersburg, who specialises in dancer's injuries confirmed that knee injuries and problems are common in Russian male dancers, and it is interesting to note that the findings of the Fit to Dance Report [Brinson & Dick, 1996] show knee injuries to be the second most common injury suffered by all dancers over a one year period [not segregated into male and female].

Although Russian student teachers cover some basic anatomy and physiology, it is limited because of the difficulties that arise in obtaining appropriate text books due to the high costs [especially translation costs] and it could be argued that the resulting implications for student teachers concern accessibility of up to

date knowledge and research reflecting developments in dance and sport science which not only has implications concerning the safety of the biological body but also the whole person.

Interviews with teachers and students at the College highlighted some of the other economic problems encountered in Russia.

*We cannot afford to buy more than one apple at a time because we need to keep the money in case bread is more expensive tomorrow.*

*We cannot afford to buy fresh vegetables and fruit very often.*

*We have a large bag of character shoes available in class for anyone who needs to borrow them because they do not have a pair of their own.*

*The College cannot afford to turn away students so we now accept some students that before would not have been taken.*

Dance teachers at the College receive a very small salary in comparison with the researcher's experience of an employed dance teacher's earning capacity in the UK, for instance, a dance teacher at the College earns less in one week than a dance teacher in the UK would expect to receive for teaching for one hour. Therefore, the socio-economic and cultural influences on teaching practices need to be taken into consideration when formulating teaching strategies and policies and although this study has not been able to investigate this area, due to constraints, the researcher recognises the importance of this area.

In commenting above about availability of food in Russia, it should be noted that the researcher can report from personal experience and observations that the Russian diet has a high fat content and the promotion of this diet was confirmed by a Russian, medical doctor who said :-

*dancers need to eat a diet high in butter, cheese and meat to provide energy*

This was confirmed as also being the beliefs of the teachers at the College and therefore conflicts with recommendations of Chmelar & Fitt [1990] advising that fats should only make up 15-25% of total intake and carbohydrates should make up 55-65% of total intake. From the data available it appears that only two of the UK organisations expect some knowledge of diet in their syllabi - RAD [included in the studies entitled :- The Structure and Function of the Body] and ISTD [anatomy & physiology examination] and it further appears that both view it from the biomedical approach and not the psychological or person centred approach, focusing on the physiological needs of the body rather than considering the psychological factors for dancers and although providing knowledge, the researcher suggests that it does not necessarily facilitate an understanding of diet issues facing dancers such as the pressure to be overly thin [Arnheim, 1984] and resulting consequences.

In conclusion, responses to the researcher's questions about 'health' suggest that in the main, health is viewed as a commodity, the body being a vehicle which carries the dance, and this vehicle, needing all its tangible parts in working order, to enable it to function properly, and this is consistent with the biomedical approach to health and why the researcher felt the study needed to be carried out. Teaching practices appear to be limited to this biomedical view of health, whereby avoiding harm, the principle of nonmaleficence, is generally restricted to the mechanics of the body at the possible expense of the whole person, and therefore it can be concluded that current professional qualifications are not promoting ethical teaching practices which foster, a respect for autonomy and individual growth and development of both the dance teacher and the dance student, consistent with practices developed through moral reasoning [using a guide such as Seedhouse's [1988] Ethical Grid].

# **Chapter Six**

## **Looking to the Future**

*'If I can provide a certain type of relationship, the other person will*

*discover within himself the capacity to use the relationship for growth and change and personal development will occur'.*

*Carl Rogers [1995, p33]*

The study has demonstrated, consistent with the rationale, aims and the theory of health education for dance teachers, developed earlier this paper, that the training of dance teachers needs to include wider aspects of teaching and promote the development of ethical practices which will foster dance teachers who promote holistic teaching methodology where communication, discussion and reasoning are an integral part of the teaching and learning process. In order to move towards ethical dance teaching practices, it is essential for organisations to consider the current syllabi and training and ask questions about the ability of these methods to create fully rounded teachers, capable of moral reasoning leading to continual development and effective self evaluation. In other words, change and the management of change, should be considered.

Before change can be introduced, it is necessary for dance organisations and dance teachers to know why changes are needed and what is trying to be achieved by considering change and how strategies for effecting change may be implemented, for instance, the introduction of a series of intermediate targets, defined as stepping stones, as a means of heading towards the final outcome [Child et al, 1992]. How dance organisations consider change to the way dance teachers of the future are educated is of vital importance and thought needs to be given to the approaches to be adopted, such as, a top down approach,



instigated by the organisations themselves, whereby changes are made to the professional syllabi for future candidates, although this does not address how existing teachers develop changes to their practices. Alternately, consideration can be given to a bottom up approach whereby existing dance teachers and trainers of dance teachers take responsibility for future changes by developing their own teaching skills. In light of the theoretical and empirical sections earlier, the researcher suggests that another approach should be considered and that is one which combines these approaches resulting in one that advocates a bottom up approach which is supported by the dance organisations, and is consistent with the theory of health education for dance teachers developed in this paper.

*“The importance of the involvement of all concerned in the change process cannot be over-emphasised and this should take place as early as possible.”*

Child et al [1992, pp96]

When looking at change, additional or alternative methods of assessment can also be considered, for instance, competence methods of teaching and development, such as National Vocational Qualifications [NVQ's] where the emphasis encourages the development of the 'process' or core skills which are likely to remain relevant while dance steps or content changes [Jessup, 1991]. Such assessment can also be seen to encourage reciprocal learning and communication between teacher and student as well as promoting a respect for the autonomy of others, consistent with the theories of psychology and ethics discussed previously, and a person centred approach.

As with any proposed change, there are likely to be those who are resistant to it [rejectors] and being able to identify the various categories of 'user of change', for example, laggards [sceptical although not openly hostile to change] and early adopters [readily accepts the change] can have implications on how change proposals are communicated within the dance teaching population [Rogers & Shoemaker, 1971]. Russia has a strong traditional background in dance, and

the teaching methods, especially in classical and folk dance, are very highly regarded by Russian teachers and there is little evidence to suggest any interest in reviewing teaching methods to take account of current research and therefore, it is reasonable to expect that dance teachers in Russia are likely to be resistant to changes in the way that dance teachers are trained, and in Rogers and Shoemaker's [1971] view, they are likely to be rejectors of such proposals. Of course, economic health for dance teachers is also problematic in Russia and the socio-economic influence regarding the viability of change should not be neglected by the change agents, at any stages in the change process [Child et al, 1992].

Resistance to change cannot be an acceptable reason for not improving the methods of dance teaching today, nor can it be morally right to continue to promote teaching practices that do not respect the autonomy of others and value people as ends in themselves and not as means.

Ways of encouraging, autonomous dance teachers and dancers need to be developed in order for student teachers to develop into thinking teachers who promote a holistic training which educates the mind and the body and thus promotes the flourishing of the full person, and it is necessary to broaden dance teaching education to incorporate skills which will facilitate this development. The utilisation of Seedhouse's Grid [1988] could be one way of helping student teachers to develop the ability to reason morally and understand what is meant by moral dance teaching practices. Understanding the different layers of Seedhouse's [1988] Ethical Grid, can not only help teachers to reason morally but can also assist in the preparation of ethical policies or codes of practice for the future, provided of course, that the grid is used by people who have integrity.

In light of the evidence and theories, encouragement should be given to dance teachers and dance bodies to explore ways of making changes to existing systems so that holistic methods which can be viewed positively, are adopted,

facilitating safer dance teaching practices for the mind and the body, whereby the focus is on the flourishing of the whole person and not just the body and thereby being consistent with the theory of health education for dance teaching developed in this paper.

# **Chapter Seven**

## **Conclusions**

This concluding chapter reflects upon the issues raised in the paper and also the strengths and weaknesses of the study and considers the contribution of this paper to possible research, in this under researched field, in the future. The researcher writes about the outcomes of the study together with a summary of events that have occurred as a direct result of this research and recommendations for the future are given.

This research has been an exciting project for the researcher, enabling study into an area of both professional and personal interest which has led to the researcher gaining an immense amount of knowledge and insight and some of this new found knowledge relates to the actual research process such as, the difficulties that can arise when relying on others to arrange interviews and, how research material can be influenced by the quality of interpreters. The study has highlighted the need for cultural differences to be taken into consideration when planning and carrying out research and it has also enabled the researcher to experience first hand the impact that culture can have on health education.

Despite problems arising from verbal language barriers, the researcher has spent many exciting hours in Russia learning aspects of the culture through dance. This demonstrates the significance of dance as a form of nonverbal communication and conceptualises a philosophy of a language that has the potential to be universal. Links forged with many of the people in Russia will continue in one way or another, for a long time to come.

The survey, although a very small sample, demonstrates the usefulness and diversity of carrying out small scale research and the data inform the study of current requirements for dance teaching qualifications in UK and a College in Russia and can be a valuable source of comparative data for further research in the future. The diversity of requirements is evidence of the range of skills that can contribute to the training of a dance teacher and in the light of the study, perhaps it is necessary to consider the implications of such diversity.

### **Strengths and Weaknesses of the Study**

The main strength of the study has to be that it raises awareness of an under-researched area in health education and dance teaching, in other words, it is like the first step of the ladder. The base of knowledge and theories developed in this paper promote a joint cognitive and practical approach to the training of dance teachers which can be built on in the future and it endorses ethical teaching methods which value and promote self-esteem, or in other words, it supports the holistic approach.

The study is thought provoking and serves as a document for dance bodies and dance personnel to debate the issues surrounding this area of health education and dance teaching for future practice and the results of the survey can be used for comparative studies in the future and to determine the extent of any changes.

The cultural links forged during this study not only provide material for the research but also demonstrate how dance is a cross cultural medium.

The study of course, has weaknesses and these must not be overlooked. A number of them are connected with the placement in Russia and the problems that can be encountered in attempting to carry out research in another country. As the majority of interviews and observations in Russia were organised on behalf of the researcher by staff at the Ministry of Culture, it is not possible to know if there were other people that the researcher may have chosen to make contact with. It is also not known whether the apparent open access to information was indeed as open as it appeared. As discussed earlier, relying on interpreters poses problems for the accuracy of the interview material. Therefore it is not possible to say that the interview findings are as valid and reliable as they could be.

The study is only the first step on a long ladder of exploration and therefore does not provide full answers to the questions being posed.

Upon reflection, the researcher would make certain changes if carrying out similar research again. Perhaps one of the major changes would be to the survey process. In order to make the request for information as simple as possible the researcher did not provide the examining bodies with a questionnaire, thus leaving it to the organisations to send as much or as little data as they wished. Although the researcher followed up some of the responses by telephone to clarify points, structured telephone or face to face follow-up interviews could enhance the data gathered.

Although Russia is an ideal choice of placement from the dance perspective, perhaps from a research viewpoint, it is not ideal. It could be argued however, that because of the language, cultural and socio-economic differences such a placement provides excellent learning opportunities at the time and for planning future research.

While this study has been carried out, the researcher has encountered considerable increase to work commitments and although changes of this nature

are not perhaps foreseeable at the outset of any research, it is necessary to give matters such as, time available, consideration before and during the research period and to make alterations to the proposed timetable where needed. It is essential to be realistic about one's ability in meeting deadlines.

### **Outcomes of the Study**

In keeping with the aims, the study has compared aspects of the dance teacher training system in UK and Russia and it has raised awareness of health education matters in relation to the training of dance teachers, in particular, ethical issues, and it is hoped that the document will be useful for dance organisations/societies and other dance bodies to consider when formulating future policies and syllabi.

A positive outcome is that the following dance bodies have shown interest in receiving a copy of the finished paper :- The Royal Academy of Dancing; The Council for Dance Education and Training; Dance UK; British Association for Performing Arts Medicine [Dance Advisory Committee]; United Kingdom Alliance and the British Ballet Organization.

There are several positive outcomes that have been initiated by this study. The researcher is presenting a paper entitled 'Health Education and the Training of Dance Teachers', at a Health and Dance conference in July 1997 at Huddersfield University, and it is the intention for the papers from this conference to be published.

The researcher organises various events in East Sussex promoting health and dance for all ages and levels of ability, as part of the British Heart Foundation's national Dance to the Heart Beat campaign which promotes dance as an ideal form of exercise.

The researcher has made an instructional Line Dance video at the media centre



at the University of Brighton. The video highlights health and safety issues related to Line Dancing as well as covering 10 dances in detail. It is intended as a learning resource and feedback will be evaluated at some time in the future.

As a direct result of the researcher's visits to Russia and in collaboration with the UKA, four dance teachers and a pianist have made two trips to the United Kingdom in 1995 and 1996. Workshops for student and teachers were conducted and extremely well received, at venues around England and Scotland. Appendix 6 is a copy of a cutting from a monthly, newspaper Dance Express [October 1996], showing the researcher in St Petersburg with the General Secretary of the UKA and the Minister of Culture at the signing of the cultural agreement for 1996/97.

The researcher has also been asked to look into possibly setting up a youth dance group exchange for 16 to 25 year olds, with Russia.

Short articles have been written by the researcher for various dance bulletins raising awareness of matters connected with this study and the researcher is keen to continue with this work.

## Recommendations

Most research projects make recommendations for the future and this one is no different. In fact, the researcher suggests that part of the value of this study is that it provides hypotheses for further work in this field and recommends :-

- Further research is needed in order for greater understanding to be achieved in this under researched area.
- Encouragement be given to the educators of student dance teachers by examining bodies and dance organisations to promote the benefits of a cognitive approach to the training of dance teachers in addition to practical approaches.
- Priority be given by the relevant dance personnel to further explore the psychological and ethical issues raised in this paper and in particular, the person centred or holistic approach to dance teaching.
- Consideration be given by dance examining bodies, teachers and organisations to the creation of an independent 'Certificate of Health Education for Dance Teachers' in collaboration with an academic body. Such a qualification could perhaps, be open to all eligible teachers and student teachers and therefore each examining body would not require a separate syllabus. Consideration be given to the possible National Vocational Qualification [NVQ] status of such a Certificate.

The researcher believes that the study demonstrates the need for further research to be carried out and would welcome an opportunity to continue studying this area of dance and health. Being involved in the development of a possible 'Certificate of Health Education for Dance Teachers' is of particular interest.

This last stage of the study is one of the most difficult. Deciding when the project is finished is recognised as a hurdle which faces all researchers. Simpson & Tuson [1995, pp85] write :-

*“It is an universally acknowledged feature of doing research that the data collected will never answer all the questions which are raised in your study, and it will always seem that just one more set of observations, a few more interviews, or one or two visits to another school are all that are needed to get it rounded off or complete..... You will simply open up more territory which invites exploration.”*

Although this chapter brings this particular piece of research to a close, the researcher firmly believes that it is merely the beginning of a long and exciting journey which will lead to improved dance teaching practices of the future.

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# Appendices

**1 - Seedhouse's [1988] Ethical Grid**

### 2 - Facsimile to Ausdance, Australia

**27 October 1995**

Text of facsimile sent to Ausdance, Australia

MA HEALTH EDUCATION [EUROPE] DISSERTATION

I am studying part time for the above degree at the University of Brighton, England. For my dissertation I am looking at a health education role in the training of dance teachers and I have completed a month's comparative study in Russia looking at some of their training facilities and methods. I am a member of BAC and Dance UK and have various excerpts from the Safe Dance Report and have seen the Safe Dance video and I think it would be helpful to actually have a copy of the full Safe Dance Report. Please can you arrange to send me a copy and advise me of any costs.

I would also appreciate if you can suggest any further literature that may be useful for my study. I am just about to start working on a seminar and assignment looking at dance teacher's awareness of the psychological aspects of nutrition for dancers.

I look forward to hearing from you.

### 3 - Letters to Examining Bodies

**22 July 1996**

Text contained in letters sent by the researcher, to the following examining bodies :- BTA; ISTD; IDTA and BATD.

#### MA HEALTH EDUCATION [EUROPE] DISSERTATION RESEARCH

I am currently preparing to write up my dissertation for the above degree. The subject matter is about a possible health education role in the training of dance teachers. Part of this research has involved my travelling to Russia to carry out interviews and observations at dance colleges, companies and health clinics. The main focus of the paper is obviously related to the training of teachers and within this study I would like to show what the current requirements are for candidates in this country wishing to become qualified dance teachers. The information I require is an outline of the teaching examination syllabus or work that a student dance teacher would be required to cover, however, there is no need for me to have details of any set dance work.

I would be very grateful if you are able to provide me with details of your qualification requirements. Much of the research that is available focuses on classical ballet and contemporary modern, however, I would also like to include other dance disciplines if at all possible.

Should you require any further details please do not hesitate to call me. I will be happy to provide a copy of the finished paper upon request.

I look forward to hearing from you.

### 4 - Correspondence about Placement

Text of main letters and facsimiles sent by the researcher in connection with the research placement in Russia. It should be noted that, as explained earlier in the paper [pp27], much of the placement organising was done by telephone.

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#### **15 September 1994**

Text of letter to David Roberts, General Secretary, UKA

#### MA HEALTH EDUCATION [EUROPE] PLACEMENT

After I spoke to you yesterday I thought it would be helpful if I sent you a copy of a leaflet which gives very brief details about the MA Health Education [Europe] course.

I would like to do my research and dissertation on 'Health Education and the training of dancers/teachers'. I am not aware of any work done in this country directly related to this topic although I know that certain areas of dance in Europe have already brought health education into their coaching qualifications on the ballroom, competitive side [Stuart Saunders lecture at conference '94].

Going to St Petersburg for part of my placement sounds ideal and would certainly offer the opportunity for comparative study. I am happy to make the trip at Christmas if you wish me to. This would give the chance to start my research, then I could perhaps visit again in the summer to complete it.

I am hoping that through this research I will be able to produce a document that will be both stimulating and enlightening.

I look forward to speaking to you next week.

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**12 January 1995**

Facsimile to the Head of the International Department at the Ministry of Culture,  
St Petersburg, Russia

**RETURN VISIT TO TIKHVIN AND ST PETERSBURG**

Happy New Year. I would like to convey my thanks and appreciation to yourself and everyone connected with my recent trip to St Petersburg. Please could you pass my thanks to all at the College of Culture, Tikhvin and Sosnovi Bor. The trip was most interesting and my husband and I look forward to returning in March.

In addition to adjudicating at the dance festival in Tikhvin, I would also like to spend time in St Petersburg to continue with my research for my MA Health Education [Europe]. If possible, I would like to carry out interviews at the College of Culture and Academy of Ballet and as you know I am happy to observe any classes.

I look forward to hearing from you again.

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**13 March 1995**

Facsimile to Head of the International Department, Ministry of Culture, St Petersburg, Leningrad Region, Russia

**MA HEALTH EDUCATION [EUROPE] DISSERTATION RESEARCH**

The following questions are about my main areas of interest :-

1. Do dance teachers consider the 'holistic student' and the long term effects of dance training?
2. Is Health Education included in the curriculum for students training to become teachers of dance?
3. Do dance teachers incorporate elements of health education within the training courses they offer to dance students?
4. Does the type of dance establishment affect the need for dance teachers to have a knowledge of Health Education?

I am interested in comparing aspects of Russian dance schools and British dance schools, for example :-

- How are dance schools set up?
- Are the majority of dance teachers in Russia self-employed or employed?
- What is included in the professional, examination work that Russian dance students and student teachers study?
- Are there opportunities for dance teachers to do further training?

I hope that I will be able to record [with a small tape recorder] interviews with

teachers and students, for my research. In addition to the teachers and students at the College of Culture, I would be delighted if you could arrange for me to interview someone from the Academy of Ballet [Vaganova School]. I do not know if it is possible to conduct a short interview with someone from one of the ballet companies but again it would be fabulous if this could be arranged.

Please call or fax me if you need any further information and/or if there is anything in particular you would like us to bring with us.

I am looking forward to seeing you again soon.

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### 5 - Interview Topics and Prompts [Russia]

Dance teacher training in Russia

Holistic? Traditional? Further training? Set up of dance schools?

Dance teaching qualifications/examinations

Requirements? State or private system? Dance organisations and examining bodies?

Health Education

Is it included in teacher training? Outside input from health educators?

Health

Health and well-being matters related to dancers/teachers?

Nutrition for dancers

Advice? Outside input from health educators etc?

Relaxation and Stress Management techniques

Advice? Development of relaxation techniques during training?



### **6 - Cultural Agreement Signing**

Copy of photograph cutting which appeared in an article about the UKA in Dance Express [a monthly paper published by Mortons of Horncastle], October 1996, reproduced with kind, verbal, permission of the editor, Ken Rush. The researcher is standing behind the Minister of Culture and the General Secretary of the UKA.

## 7 - Suggestions for Further Reading

Bem D J [1970] Beliefs, Attitudes and Human Affairs California Wadsworth

Blacking J [1984] Dance as Cultural System and Human Capability: an Anthropological Perspective in Report of the third Study of Dance Conference University of Surrey Dance - A Multicultural Perspective Guildford National Resource Centre for Dance

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Williams G [1992] Dance, Language Development and the young child Early Child Development and Care Vol 79 pp 107 - 124