

## **Ballet Body Belief: Perceptions of an ideal ballet body from young ballet dancers**

This paper explores what is perceived and believed to be an ideal ballet body by young ballet dancers. Such bodily belief becomes, in Pierre Bourdieu's terms, a core part of a ballet dancer's habitus. A four year longitudinal, ethnographic, empirical study of the experiences of twelve young ballet dancers, 6 boys and 6 girls, aged between 10-15 years at the start of the study, examined processes of bodily construction and 'becoming' a ballet dancer in non-residential ballet schooling. Data was generated via a multi-method approach although only individual and focus group interview data is used here. Findings suggest that the twelve young ballet dancers' attempted to replicate and position themselves within what is perceived and believed to be an ideal ballet body shape and size. Ballet is a social practice which shapes the activity of the young dancer but is also shaped by that young dancer through a process of incorporation of the social into the body. The ballet dancer's body and *habitus* is produced and maintained as the young ballet dancers' accepted their bodies as an aesthetic project. It is argued that there is a strong connection between the size, shape and aesthetic of the ballet body and identity.

**Keywords:** body, ballet, Bourdieu, identity.

### **Introduction**

This paper explores perceptions and understandings of the ideal body in ballet culture through the lived experiences of twelve young ballet dancers. I have suggested in an earlier article (Pickard, 2012) that 'ballet shaped my body and my mind as it shaped my perceptions, motivations and actions.' The belief in the body becomes, in Pierre Bourdieu's terms, a core part of a ballet dancer's *habitus*. *Habitus* is an acquired set of dispositions, beliefs and habits of mind/body that cultivate particular behaviours which become engrained (Bourdieu, 1993: 86). The *habitus* shapes the person's or player's attitudes and actions as the 'rules of the game' (Bourdieu, 1990) are learnt through explicit teaching as well as practise and the *habitus* is reproduced and produced. In relation to ballet, the purpose of ballet schooling or training is to make the unnatural natural, as 'second nature' (Bull, 1999: 140) or taken-for-granted so to acquire an unconscious ballet *habitus* (Bourdieu). Importantly, the *habitus* is developed in a field which is inseparable from *habitus*. The

field is a social arena and structured system of social positions. Within the field players compete for resources and power by drawing on various forms of capital (Bourdieu, 1986) such as physical capital. Physical capital in ballet would be, for example, the ability to demonstrate technical competence, to be able learn and embody movement quickly and eventually habitually, strength, flexibility, speed and stamina as well as physical architecture and being able to convey a particular aesthetic of grace, beauty and perfection. The *habitus* is 'in things and in minds' (Bourdieu and Waquant, 1992) and become incorporated after much practice. This is the '*logic of practice*' (Bourdieu, 1990) where the values of the field, for example notions of body image, body shape and size, discipline, training regimes, identity and taste, are transmitted and perpetuated via the ballet school and ballet class to the young dancers who strive to accrue the important physical capital.

The young dancers featured in this article embodied particular beliefs about the ballet body's size and shape, how the ballet body is viewed and how the ballet body is treated. Pierre Bourdieu's conceptual schema offers a useful way of thinking about the relationship between the body and identity in ballet however, I must acknowledge that the work of Foucault, in relation to an approach to government of the self (Turner, 1982) and nutritional regimes also has much to offer. The balletic body is an archetypal example of the 'useful body' corresponding to the aesthetic norm and the discipline of thinness. Foucault (1988: 3-4) was concerned with how 'a human being turns him or herself into a subject' through practices through which individuals 'acted upon their own bodies, souls, thoughts, conduct and a way of being in order to transform themselves and attain a certain state of happiness.' According to a Foucauldian, what happens in the ballet class in the contexts of ballet schools is shaped by the dynamic relationship of discourses, practices and social relationships. Nevertheless, the practices which a Foucauldian might claim invest the body (Green, 2001; 2002), I suggest are actually done *by* the body (Pickard, 2012). Bourdieu's theory of belief and practice then, still accounts for the complexity of regularity, coherence and structure

as well as the negotiated and less predictable meaning making processes in social practice and does not ignore the active role of embodied agents.

## **Methods**

This study took place over a period of four years and involved getting to know twelve young ballet dancers, 6 boys and 6 girls, all of whom want to become professional and performing ballet dancers, in the context of their ballet institution or school. This study set out to investigate three main questions: to what extent does the social world of ballet shape young dancers' perceptions and understandings of their bodies? How do young dancers' construct, negotiate and embody social and cultural knowledge and meanings in the process of becoming a ballet dancer and how is the ballet body constructed, viewed and treated by young ballet dancers?

Initially, a letter was sent to all young dancers between the ages of 10-15 years who were involved in non-residential ballet training at an institution in the South of England and at an institution in the North of England. The letter invited the dancers to be part of the study, outlined the main focus of the study, the length of the study, the commitment, involvement and permission required and any potential risk. The letter was also sent to the parents of the dancers and the teachers who were engaged in teaching these dancers. The selection of twelve dancers was based on a number of factors (Silverman, 2009) which included an equal split of girls and boys, an equal representative sample from each school context, a range of dance experience and a spread of ages. A summary of the sample can be seen in **Tables 1** and **2**.

A multi-methods approach to gather data was used that included observations, individual and focus group discussions and extracts from the young dancer's ballet journals. However, only individual and focus group interview data is used in this article. Twelve parents and three teachers participated in one semi-structured interview in the first year of the study. I then undertook two

semi-structured interviews each year with each of the twelve young dancers on a one-to-one basis over three years. These happened near the beginning and towards the end of the academic year (November and June). In the last year of the study I undertook one final interview with each individual dancer. Each interview with parents, teachers and dancers lasted between 30 minutes to 1 hour. I also conducted one focus group discussion per year over four years with each of two focus groups of dancers. There were six participants in each group and one focus group in each of the school contexts. The focus group discussions were undertaken mid-year (March). During each individual or focus group interview I reintegrated the main focus of the study, that participation was voluntary and that the parents, teachers or young dancers could opt out at any time. In this paper pseudonyms are used in order to protect the identity of each young dancer. Similarly the schools are purposely not identified.

This study was an in-depth focus on the body in ballet culture with children and young people. I was therefore mindful of the 'rights, dignity and safety of the research subjects' (ESRC, 2005: 7 and 23). As children and young people could, potentially, be vulnerable to persuasion (Hill, 2005) it was paramount that the young dancers were not pressurised into participating in the study where potential risk and implications had not been properly explained to them. Participation in research could cause unnecessary anxiety as the participants may be worried about what to say, who will find out about what they have said and whether this could be used against them in some way. The young ballet dancer is used to being judged so they did share worries about whether the research was disguised as some kind of test or assessment and whether the results would be fed back to their individual teachers. Many of the young dancers were particularly concerned about the potential impact on the next steps in their ballet training so the longitudinal nature of the study in order to foster the interviewer-interviewee relationship and the development of trust over the four years were significant.

The interviewer-interviewee relationship was crucial as initially it was evident that some of the young dancers were more sensitive to my presence and less forthcoming in their interactions with me during individual interviews and each other during focus group discussions. As expected, greater trust did develop and was established over time and as the dancers saw me regularly in their context, they did appear to be much more relaxed and able to speak at length (Mertens and Ginsberg, 2008). Each individual interview and focus group discussion also took place in the familiar context of the ballet school in order for the dancers to feel comfortable. I reminded each dancer that they did not have to answer anything which they did not wish to and that they could opt out at any time. I made it clear to each dancer that the interview was confidential and that I would not share anything in an oral or written form without using a pseudonym. Many of the sample would be pre-pubescent or going through puberty during the course of the study; adolescence is a significant and erratic phase of development (Wilson, 1991) which could have a considerable impact on a young dancer's development as a dancer (Buckroyd, 2000) therefore such an in-depth focus on the body, particularly for those whose identity is strongly invested in becoming a dancer could, potentially cause harm and conflict. Should a young dancer disclose anything which may potentially render high emotions, harm or distress during the course of the study, information regarding access to further support was provided to each dancer at the beginning and midway through the study.

The interview and focus group data was fully transcribed before analysis. After multiple readings, a process of open coding was employed for analysis as patterns and themes were identified (Silverman, 2006; Bernard and Ryan, 2009; Bold, 2010). The process of open coding as described by Lincoln and Guba (2004) and Denzin and Lincoln, (2005) was used to analyse the interview scripts in looking for units of meaning making that would be the basis for defining themes. Analytical notes were also produced in order to make connections between open codes and defining themes and to note my changing views about the data as the research progressed.

For example open codes included behaviours and key quotations related to body shape and size, such as '*you have to have the right body: it must be slim*' and so on.

### **Shaping the Body**

The social world of ballet depends on a uniformity of body shape and size which is predicated on physical architecture (Foster, 2003) as the balletic body emphasises preciseness in line, placement and visual design. This corporeal perfection is usually defined as bodily practices and the slender ideal. There is a growing aesthetic among ballet audiences, companies and therefore institutions for almost skeletal, hyper-flexible, ephemeral bodies that may be more prone to injury (Bronhurst et al, 2001; Wainwright and Turner, 2004, 2006; Wainwright, Williams and Turner, 2005). Ballet is a cultural activity promoted by the powerful social group who value it and currently audiences are deemed to be predominantly white, middle class women (Bridgwood and Skelton, 2000; Hutton, Bridgwood and Dust, 2004; Keaney, 2008). The field of ballet and the schools then will produce and reproduce a particular bodily aesthetic according to demand. In Bourdieu's terms, bodies are a reflection of their *habitus* and alongside the aesthetic orientation there is a view of the world that is transmitted and valued. In striving to meet a particular ballet body aesthetic young ballet dancers are influenced by the power of the social world of ballet, role-models, teachers and peers.

Incidences and experiences of disordered eating attitudes, anorexia nervosa, bulimia and sense of control and achievement in maintaining low weight are well documented in dance (Schnitt and Schnitt 1986; Nixon, 1989; Buckroyd, 1995, 1996; Abraham, 1996a, 1996b; Brinson and Dick, 1996; Haight, 1998; Wolman, 1999; Benn and Waters, 2001; Robson, 2002; Yannakoulia, Sitara and Matalas, 2002; Ravaldi et al, 2003; Sundgot-Borgen, Skarderud and Rodgers, 2003; Koutedakis and Yamurtas, 2004; Piran, 2005; Ringham et al, 2006). Indeed several studies of

eating disorders and weight controlling behaviour amongst adult ballet dancers and ballet students have been undertaken in the last twenty years but none exist which have explored the social world of ballet and how this shapes child and adolescent ballet dancers' perceptions and understandings of their bodies over a period of time nor the lived experiences of child and adolescent dancers' and how they construct, negotiate and embody social and cultural knowledge and meanings whilst in the process of becoming a ballet dancer in a non-residential elite ballet school context.

Eating disorders are serious mental disorders with high levels of mortality, physical and psychological morbidity and disability and impaired quality of life (Klump et al, 2009). Much of the literature points to high incidences of dancers' eating behaviours such as elective restriction of food, binge-eating, purging and the maintenance of low weight through use of laxatives. It has been suggested that these disorders have a peak age of onset in adolescence, at a time in life when peer influences are particularly strong. Social influence in relation to the onset and maintenance of eating disorders have also been argued, in the clustering of eating disordered attitudes and behaviours in peer/friendship groups of young people and also within social units such as schools (Paxton et al, 1999; Forman-Hoffman and Cunningham, 2008). Benn and Waters (2001) found that many of the adult female dancers in their study were engaged in a cycle of calorie counting starvation diets and eating everything binges. Many of the dancers were only consuming between 700-900 calories per day and many under 700 calories. Furthermore, many of the dancers did not acknowledge that this was a problem or denied any potential long-term consequences because their ideas of healthy and normal were formulated according to the norms and values of the ballet world (Benn and Waters, 2001: 142).

In addition to disordered eating which may mean a refusal to maintain body weight at or above a minimally normal weight for age and height, there may be intense fear of gaining weight and in post-menarcheal females amenorrhoea; the absence of at least three consecutive menstrual cycles, (Buckroyd, 2000: 163). Furthermore, there may also be, among a number of physical and psychological characteristics: hair loss, lowered body temperature and heart rate, low blood pressure, feeling cold and poor circulation. Warin's (2002) ethnographic study explored the various social constructions of eating disorders at an everyday level. She stated that sufferers described anorexia 'as a productive and empowering state of distinction' (Warin, 2004: 101) and argued that there are few other chronic illnesses where sufferers appear to seek out or 'desire' the condition. Furthermore, in her study of young women in a leading centre for the treatment of eating disorders, Rich (2006) suggested that to be anorexic usually has a stigmatised identity which in various contexts comes to be perceived as an irrational and self-inflicted condition. Often families, teachers and peers make sense of the condition 'through a medicalised discourse which focuses on visual aspects of weight gain/loss and often stigmatises the condition, reducing it to a position of pathology or irrationality.' (Rich, 2006: 284). She argued that the young women sought sanctuary and support from other sufferers, attempted to construct more positive self-representations of anorexia or anorexic identities and resist such medicalised discourse. Anorexia became something to 'accomplish' and a social identity; in this way the young women come 'to manage anorexia as both an illness and an identity.' (Rich, 2006: 284). Many symptoms of anorexia (e.g. amenorrhoea, strict diet control), it has been suggested, are common and even adaptive in the ballet community (Garner and Garfinkel, 1980; Garner et al, 1987) with some studies (Le Grange et al, 1994; Abraham, 1996a), explaining that the eating disorders of ballet dancers, gymnasts and some other athletes, as reactions to requirements and external pressures to remain thin. Other authors (Abraham, 1996b) have suggested that dancers have simply learned poor eating habits that persist and may be reinforced in professional ballet companies.



Dancers are considered to be particularly vulnerable to diet regimes and other technologies aimed at bodily 'correction' (Bordo, 1993: 104). In the ballet world fat bodies are 'out of bounds bodies' (Brazel and Lebesnok, 2001) as 'fat' is ugly and weak, whereas 'thin' is beautiful (Garrett, 2004). A comment from one teacher from a ballet school Steve, was particularly illuminating in relation to this preservation of the ballet body:

'Because ballet is one of the very highest art forms, you cannot attain the levels that are needed basically if you're fat (laughs). It's just impossible and also to retain balletic posture and balletic movements, you know, you can't get a *grand jete* if you can't get your legs apart. If you're tight in the groins and your bones aren't set right, it just isn't going to work and yes, it not may be politically correct but don't choose to do that profession. There are plenty of professions where you can be politically correct. This is a high standard world.'

To be thin in the social world of ballet is both the norm and the expectation. This is not to suggest however, that all dancers have eating disorders – this would simply not be true.

During the four year longitudinal study there were many examples of what may be deemed a healthy relationship with food shared by the dancers. Here is one example from one dancer Lie, at 16 years old:

'I have three meals a day and at least two snacks. I also make sure that I drink plenty of water and milk rather than fizzy drinks. My parents make sure that I have a balanced diet that includes lots of meat, fish, fruit and vegetables but I also have cakes, biscuits, chocolate, chips and crisps as part of that diet. I eat until I'm full. My weight does not tend to change but my body has. My legs have definition and shape. I am slim but can see the muscles.'

Similarly, Nick at 17 years stated the importance of a broad and balanced diet. He suggested that his knowledge had come from media attention in relation to healthy bodies:

'I love fruit so I'd choose an apple over a packet of crisps although I know that if I really want crisps I can have them. Some people panic about what the crisps would do to their body but one packet of crisps, now and again, as part of a broad and balanced diet is fine. I am aware of what is so called good for you and bad for you to eat but I think it is because of all the media attention and programmes on fat people lately. I know that I don't over eat or over do the bad stuff but we all like sweet things like cake in the week. You just have to balance that with a decent lot of proteins, carbs. etc. I need to be strong and muscular as a male ballet dancer. I think the tricky time is when I'm tired and hungry because my body screams sweet and quick – my mum usually has a baked potato waiting for me at times like these which is just right and then I'll have the sweet after.'

The young dancers featured in this study are acquiring a ballet dancer's *habitus* and are therefore still becoming familiar with the codes and norms of behaviour of the social worlds in which they inhabit. As they are in non-residential ballet training therefore they inhabit a number of other social worlds such as home and school. One young dancer, Sima, (14 years) spoke of the influence of her mum in relation to food and eating:

'my mum sorts all my food and makes sure that I eat well and the right kinds of things as well as treats and occasional what she calls junk at parties. When we go food shopping she does speak about getting plenty of fruit and veg. which is good for us as well as pasta, rice and potatoes. Then she says we can have some pudding type things. She does say that I have to be careful with the junk as I do want to be healthy so I can dance and not get ill.'

Although policy documents and teachers in both of the contexts in the study did speak about healthy eating and the importance of hydration and sleep, there was some disparity in the rhetoric of improved knowledge with increased professional input and the lived experiences of the young dancers. The schools have focused some increased time within the training programme on aspects of 'developing the healthy dancer' where information was supplied on food and nutrition

and conversations were had with the group of dancers about the importance of a healthy diet. However, from the data I would suggest that sometimes the information has been learned passively with some misleading information 'dancers should not eat any fat' (Gary, 12 years). One teacher shared her insights with me in relation to supporting a healthy dancer:

'Tell me more about how a young dancer is supported in being a healthy dancer?' (Angela)

'I don't know very much about this non-residential programme. My ignorance suggests that there could be more. If they're at the boarding school there's a fantastic regime in place. They never tell people just to lose weight; they think let's look at what you're eating and how we can enhance it to be beneficial to you. So it's really constructive and how important. Really their whole well-being is well looked after. They are all under one roof. I mean when I was there and when I was dancing with the company, I'm not fine boned and I was asked to lose weight but it was carefully monitored. Here, they come in once a week and disappear and really the potential damage is great because they come in and perceive something and a little knowledge is dangerous. Parents are not always responsible. I know of a student and I think her mother was encouraging her to smoke because she said it would keep her thin. Aah, how stupid.' (Teacher: Elizabeth)

This teacher, a former dancer with a ballet company, drew on her own experiences as a former pupil of a ballet boarding school. She immediately connected the question to a focus on weight and spoke about 'a fantastic regime' in relation to monitoring food intake and weight loss. Rather than perhaps questioning that the bodies of very young dancers, often pre-adolescent dancers, are constantly scrutinized, monitored and encouraged to lose weight, she accepted that this is an inevitable consequence of ballet culture. Furthermore she approved of the apparent safety of dancers being 'under one roof' rather than the danger of them being with irresponsible and 'potentially damaging' parents. As Benn and Waters (2001) found, this teacher's ideas of healthy and 'normal' have been formulated according to the norms and values of ballet culture.

This longitudinal study tracked the young dancers as they developed as ballet dancers over a period of four years and, as I have suggested in previous writing in relation to this study, from an early age 'young dancers do become aware of the expectations of the ballet body physique, the idealised ballet body and performance demands' (Pickard, 2007: 38). When we talked about 'what makes a healthy dancer?' the young dancers could respond with a model or text book answer drawing on some of the specific input sessions that they had as part of their training programme. However, during a number of conversations, not particularly related to notions of 'the healthy dancer', it was apparent that a notion of the ideal ballet body was dominant in the young dancers' perceptions and understandings of their own bodies. This process was evident and is illustrated in a chronology of interviews with Tracey. Tracey's age is stated alongside her quotations:

'It is important to have five fruits and vegetables a day and drink lots of water. You have to eat well because otherwise you will be too tired to dance'. (Tracey, 12 years)

'I am aware of how I look now and am constantly looking at myself and comparing how I look with my friends. I think that I could do with losing a bit of weight even though I'm quite tall in comparison to some of my friends and the others here. My mum says that it is just how I am at the moment and as I grow taller I will also get thinner'. (Tracey, 13 years)

'I don't like my thighs or my bottom or my tummy or the top of my arms at the moment. (Tracey, 14 years)

'I know that I have to be careful. I think a lot about what I eat and what I can or should eat. I did get a bit wobbly once because I hadn't eaten enough and I didn't like the feeling 'cos I felt really weak. I know that I need lots of carbohydrates to give me energy to dance but I also know that these can be fattening. I have that sort of body. I like fruit and vegetables

and I drink lots of water so I am healthy. I still have chocolate sometimes but I limit myself. It's hard at the moment because my shape seems to be changing every day. My mum and my friends at school say that I have a lovely figure but it is different when you see everyone else here and you hear about how important it is to be a particular way.' (Tracey, 15 years)

'Is there anything that you're worried about at the moment in relation to becoming a ballet dancer?' (Angela)

'Em...my body really. I'm not fat but I'm not skinny em, and I'm well, (42 second pause)...at teenager age when you all should change and everything, but, that's the main thing I think, like, not the right size or something, got to try and keep quite nice and slim, so you look nice in a leotard and your tights and everything. That's the main thing really. It's the most important thing here.' (Tracey, 15 years)

Tracey, as a teenager and a ballet dancer, had become involved in a process of self scrutiny and monitoring. It is not unusual for teenagers to have heightened body awareness and it is often a common pursuit for teenagers to spend long periods of times in front of a mirror (Buckroyd, 2000).

Dancers have a constant view of themselves in their ballet class via the wall to wall mirrors which were evident in the dance studios in both of the contexts of study. The young dancers could 'constantly monitor themselves for bodily imperfections' (Featherstone, 1991: 175). The ballerina Gelsey Kirkland (1986) in her book *'Dancing on my Grave'* spoke about the mirror as her nemesis. I think that she is worth quoting at length because she has captured the learned importance and intense relationship a dancer can develop with the mirror:

the mirror was...seductive to the point of addiction. Stepping through the looking glass meant confronting a double who exposed all my flaws and pointed out all of my physical imperfections. Over a period of time, the image in my mind clashed with the image in the

glass. Until the opposition between the images was resolved, I saw myself as a walking apology, unable to attain or maintain my constantly refined ideal of physical beauty....With all of my insecurities intensified, I became my own worst critic, embarking on an aesthetic quest for perfection that in the end would heal the wounds I had inflicted upon myself. Trying to perfect both my appearance and the quality of my movement, I was unaware of a contradiction. ...The endless repetition of *barre* exercises in front of a mirror reflects a distorted image many people have of ballet, an image shared by many dancers. The physical side of the discipline does involve a certain degree of tedium, to say nothing of the pain. But the hours of practice are minor compared to the emotional terror that can sometimes haunt a ballerina when she studies her reflection in the mirror. This anxiety is not due to simple vanity or fear of professional rejection...but that one has been created for nothing. (1986: 72-3)

As Goldberg (2003: 307) has also asserted 'how does the fledgling ballerina vomiting in the school bathroom refuse her anorexia and recognize that the unattainable White Swan she is looking for in the mirror is an imaginary, fictional woman?' As evidenced from one young dancer, Leah, 13 years, learning to use the mirror is an important rule of the game:

'In my other dance school we didn't really have mirrors so when I came here it was nice seeing myself all the time and learning to use the mirror for corrections even though it is important to feel the movement in your body. Sometimes I love seeing my body as I look and feel so lovely but other times I hate what I see and don't want to look but kind of have to. It's weird really. Sometimes I don't think it's me. Sometimes I look too thin, sometimes I look too fat. Sometimes I just look at everyone else in the mirror and they look better than me. I'm surprised when I see myself but I can't show that on my face 'cos others will see that I lack confidence.'

Leah, at 13 years, is developing as an adolescent so are her perceptions and understandings about the size and shape of her body, how her body is viewed and how it is treated shaped by the social world of ballet or the social world of adolescence or both?

Pierre Bourdieu's conceptual schema does offer a useful way of thinking about the relationship between the body and identity in ballet in relation to *habitus*. However, Foucault's approach to government of the self (Turner, 1982) and nutritional regimes is useful here. One of the key components of self-care discussed by Foucault (1986) is the practice of self-examination. One technique for self-examination, 'gymnasia', or self-training, involves the individual in practices which function to establish and test the individual's independence from the external world. In a Foucaudian analysis of women and eating disorders Bartky (1997) and Bordo (1997) have linked femininity and eating disorders through the notion of the 'disciplined' or 'docile body'. Through 'the pursuit of an...elusive ideal of femininity...female bodies become docile bodies – bodies whose focus and energies are habituated to external regulation, subjection, transformation, improvement' (Bordo, 2003: 166). There are a myriad of practices available for women to transform the female body into 'a body of the right size and shape' (Bartky, 1997: 136). Bordo (1993) argued that such discipline and normalization of the female body as a form of social control is perhaps the only gender oppression that crosses age, class, race and sexual orientation. Femininity is a tradition of imposed limitations; a woman must be willing to limit oneself in the amount of physical public space that she takes up and uses and in the ability to live with minimal food intake (Bordo, 1993, Bartky, 1997; Benn and Waters, 2001; Young, 2005). In denying appetite, female hunger is contained:

In the course of what begins in and emerges out of conventional feminine practice - that of what begins as a fairly moderate diet regime, the young woman discovers what it feels like to crave, want and need and yet through the exercise of her own will triumph over that need. In the process of a new realm of meanings is discovered, a range of values and

possibilities that Western culture has traditionally coded as 'male': an ethic and aesthetic of discipline, self-mastery and self-transcendence, expertise and power. (Bordo, 2003: 178)

Here the female has discovered an entry into a privileged male world. Often, particularly in a social world such as ballet, the body is admired for the sense of self will and self control that it projects; this carries high cultural capital (Bourdieu, 1977, 1984, 1990) and therefore power. In the pursuit of disciplining and perfecting the body as an object to be admired by others, experiences of disordered eating which are constraining and self-destructive come to be experienced as liberating. In ballet, body power is enhanced and displayed by the 'absence of flesh' (Turner, 1995: 25). Eventually, an anorexic body is one which has eradicated all marks of the feminine and this has been done paradoxically, through pursuing conventional feminine behaviour (Bordo, 1993; Bartky, 1997).

The demand to be thin is considered to be more rigorous for women than for men and is often required of female dancers by male choreographers and male artistic directors (Novack in Thomas, 1993). It is suggested that the choreographer George Balanchine for example had a profound effect on the modern ballet aesthetic (Shearer, 1986). Gelsey Kirkland illustrates this in her autobiography:

with his knuckles he thumped me on my sternum and down my rib cage clucking his tongue and remarking 'must see the bones'...He did not merely say 'eat less,' he said repeatedly 'eat nothing'...Mr. B's ideal proportions called for an almost skeletal frame, accentuating the collar bones and length of neck...Mr. B's methods and taste have been adopted by virtually every Ballet Company and school in America...'Thin-is-in'...For those who refuse to go with the crowd, employment is unlikely. (Kirkland, 1986: 56)

The ballet school, as a culture within a culture, does attribute value to both males and females for being thin. In relation to male athletes, Baum (2006) warned that because disordered eating in



males is less prominent it can easily be missed. One young dancer, Milan demonstrated his awareness of the value of being thin:

'I do worry about the fact that I have this flabby stomach and a chubby face but I have quite thin legs and slim but broad shoulders so I reckon that I'll change when I get older and fit in a bit more with what's expected, if I keep doing this training and the stomach exercises'. (Milan, 13 years)

Failure to meet standards in body shape and size may result in the young dancer being asked to leave the school so this is a graphic demonstration that the value indeed resides in being thin as Rich (17 years) illustrated:

'It is expected that you will try hard to keep slim for the profession. Fat ballet dancers, male or female do not exist and should not exist in the main companies as a particular body is what people want to see. I have seen people come and go if they are not the right height, width whatever. It is just how it is. They have to do something else. Sometimes it is something they could have done something about like making sure they were aware of what they were eating and sometimes it was not something they could do anything about – say they were just too short or stocky or something.'

The expectations of the ballet body physique, the high standards of the ballet aesthetic of perfection and idealised ballet body that exist in ballet culture, it could be argued appear to be taken-for-granted (Bourdieu and Wacquant, 1992: 127). During puberty genetic potential in terms of physique will start to become apparent. This may make it clear that a particular body shape may not fit the requirements to become a professional ballet dancer. One teacher supported this when she explained:

'I have some in my class who, I think, will be brilliant dancers, because their physique is not ideal for the company here, but it will be enough for other companies and they are stunning, but they won't get in here'. (Teacher: Lucy)

Unsurprisingly, research by Hamilton *et al* (1988) demonstrated that those dance trainees most vulnerable to eating disorders were those whose natural shape did not conform to the requirement to be very slim. In the contexts of training, images of the ideal were reinforced in the form of paintings, statues, costumes and photographs of famous dancers. Furthermore, some classes took place between 12.00-2.00pm which perhaps suggests to the dancers that it is not necessary to eat at a time that is typically known as lunchtime; it is more acceptable and desirable to be thin.

In the ballet environment competitiveness, discipline, self control and a preoccupation with the body carry high esteem and physical capital (Bourdieu, 1990). The embodiment of a particular aesthetic orientation is more complex than simply maintaining a low body weight; there is a view of the world that is transmitted and valued. Cultural and physical capital is accrued in the form of the ballet body:

'I'm so lucky because I'm naturally slim and little and that's exactly how you must be in ballet. I don't have to diet at the moment but I know lots of my friends have to be very aware of what they eat because they have those sorts of bodies'. (Megan, 11 years)

Megan has increased physical capital because she is 'naturally slim and petite'. This notion of the ideal body for ballet was also evidenced in responses from parent interviews:

"I would say that physique is very important, their look is very important. At her local dance school you see good dancers but they have not really got the physique that you would particularly like to watch. Natural physical make-up is not something you can change either.' (Father of Megan)

An important focus group discussion revealed much about the group's perceptions and belief about the maintenance of the ballet body:

'There is no way you can be a ballet dancer, boy or girl, if you are fat. You can't even be chubby – no way. There should be no big, chunky bits, no wobbly bits. Everything has to be lean and light but also muscles must be tight and strong. That's why it is so hard 'cos

you know you've gotta eat so that the muscles work but you are very conscious that you must eat the right things and the right amount. At the moment I'm pretty balanced 'cos I have the fish, meat, fruit and vegetables and some cakes, biscuits, crisps and chocolate but I dread getting a tummy appear when I'm older.' (Jon, 16 years)

'To be honest I'm fine at the moment but you can see how easy it is not to eat properly. If I'm busy dancing, practising or rehearsing then I just keep going and don't feel hungry. I do eat when I get home but that's only two meals a day – breakfast and dinner with no snacks. I know I'm using up a lot of energy as I'm always on the go. I can get by like this but then I suddenly get really hungry and want to eat and eat but I have to check myself as I don't want to over eat and get a swollen tummy. I also feel guilty that I put all that junk inside me. The thing is we're all like that here. You can't be heavy for your partner to lift either. And outside of here all my friends expect me to be a certain shape and size as that is what they expect a ballet dancer to look like. We're all thin here but I do find myself checking out how flat the tummies are and we all know if someone starts putting on weight or if their tummy is bulging.' (Anna, 17 years)

There is a high social value in the ballet body aesthetic and some young dancer's shared how they wanted to experience their bodies as aesthetically pleasing:

'I want my body to look good so that I can show it off. I want muscles and a six pack. Ballet makes you look good and it wants you to show off your body so it's all good.' (Gary, 14 years)

Leah also spoke about the importance of enjoying the appearance of her body:

'I love looking at myself in the mirror, at the shape of my legs, where the muscles are and how they look in my shoes. I love looking at my slim waist and I love it when other people

comment on how lovely I look. Ballet training has made me like this which is why I love it so much and why I want to keep this shape.’ (13 years)

The appearance of the body signifies as a socially acceptable source of pleasure for these dancers but there is also awareness that an individual's body may be or should be admired and enjoyed by others. The body is and continues to be an aesthetic project.

## **Discussion**

This paper argues that there is a strong connection between the size, shape and aesthetic of the ballet body and identity as a ballet dancer. Drawing on Bourdieu, the social game of ballet is inscribed in individuals through encounters between the *habitus* and field, ‘in things and in minds’ (Bourdieu and Wacquant, 1992). The young dancers gain a ‘feel for the game’ (Bourdieu, 1990) through engagement with the rules and findings suggest that the young ballet dancers’ positioned themselves within what is perceived and believed to be an ideal ballet body shape and size: the female ballet body as petite, elegant and weightless and the male body as slim, strong and muscular. As the ballet *habitus* develops after much practice it was important to track how the values of the field are transmitted, perpetuated and become engrained as ballet *habitus* in the mind/body of the young dancers. Evidence suggests that the notion of the ideal ballet body, in terms of size and shape, is fostered early in a dancer’s schooling or training as even the youngest children in the sample had a perception of what a ballet dancer *should* look like. What was interesting to explore further was how the young dancers’ constructed, negotiated and embodied the social and cultural knowledge and meanings over a period of time during part of the process of becoming a ballet dancer and how the ballet body was constructed, viewed and treated by young ballet dancers.

Ballet is a social practice which shapes the activity of the young dancer but is also shaped by that young dancer through a process of incorporation of the social into the body. The young dancers were aware of and accepted the expectations of the ballet body physique, the high standards of the ballet aesthetic of perfection and idealised ballet body that exist in ballet culture. Failure to meet standards in body size and shape may contribute to and result in the young dancer being asked to leave the school so this is a demonstration that value resides in maintaining a particular size and shape. Being and maintaining a particular shape and size was considered to be beneficial by the dancers and brought with it a sense of accomplishment. It is possible then that young dancers are particularly vulnerable to diet regimes and other technologies aimed at bodily 'correction' (Bordo, 1993: 104) but it would be wrong to suggest that *all* dancers have or may develop disordered eating attitudes or an inappropriate relationship with food. However, the perceptions and understandings of the ballet body of the young, adolescent dancers in this study do suggest that if a body does not fit with the expectations of slim in size and shape then, they will not fit the expectations of ballet and will not be able to call themselves or claim identity as a ballet dancer. As all the dancers in this study desire to become professional, performing ballet dancers, being and maintaining a particular ballet body size and shape is accepted as part of becoming and embodying an identity as a ballet dancer.

## **Conclusion**

Ballet is a cultural activity promoted by the powerful social group who value it; the social world of ballet depends on uniformity of body size and shape in order to meet the demand for a ballet body physique, the ballet aesthetic of perfection and idealised ballet body. The dominant values and body beliefs are transmitted through a process of continued perpetuation of the ballet aesthetic: particular size and shape of the ballet body, how the ballet body is viewed and how it is treated. Ballet body perfection is prevalent, legitimised and accepted as the expected norm in ballet culture. The belief in the body becomes, in Pierre Bourdieu's terms, a core part of a ballet dancer's

*habitus*. It could be argued then that the young dancers appear to be beginning to take some aspects of the social world of ballet for granted (Bourdieu and Wacquant, 1992: 127).

The empirical evidence suggests that the young ballet dancer's body, *habitus* and identity continues to be constructed, produced and maintained as the young ballet dancers featured in this study accepted and positioned their bodies as an aesthetic project. The young dancers' commitment, motivation and actions suggest that they were aware of and accepted the need to gain physical capital and power in order to compete for possible rewards and future success in their desire to become professional and performing ballet dancers. Such desire engaged the young dancers in this study in replicating and shaping their body to what is perceived and believed to be an ideal ballet body shape and size.

## References

- Abraham, S. (1996a) Eating and weight controlling behaviours of young ballet dancers, *Psychopathology*, 29, pp. 218-22.
- Abraham, S. (1996b) Characteristics of eating disorders among young ballet dancers, *Psychopathology*, 29, pp. 223-29.
- Bartky, S. L. (1997) Foucault, Feminism and the Modernisation of Patriarchal Power. In K. Benn and Waters, (2001) *Between Scylla and Charybdis. Nutritional education versus body culture and the ballet aesthetic: the effects on the lives of female dancers*, *Research in Dance Education*, 2 (2), pp. 139 – 154.
- Bordo, S. (1993) *Unbearable Weight: Feminism, Western Culture and the Body*. Berkeley: University of California Press.

Bronhorst, P. Rijven, M. Roes, A. Sirman, R. Staines, M. and Wuersten, S. (2001) *Not just any body: Advancing health, well-being and excellence in dance and dancers*. Ontario, Canada: Ginger Press.

Conboy, N. Medina and S. Stanbury (eds.), (1997) *Writing on the Body: Female Embodiment and Feminist Theory*, Second Edition. New York: Columbia University Press, pp. 129-154.

Baum, A. (2006) Eating Disorders in the Male Athlete, *Sports Medicine*, 36 (1), pp.1-6.

Bourdieu, P. (1977) *Outline of a Theory of Practice*, Cambridge: Cambridge University Press.

Bourdieu, P. (1984) *Distinction: a social critique of the judgement of taste*, London: Routledge.

Bourdieu, P. (1990) *The Logic of Practice*, Cambridge: Polity Press.

Brady, J. (1982) *The Unmaking of a Dancer: An Unconventional Life*, London: Harper and Row.

Brazel, J.E. and Lebesnok, K. (2001) *Bodies out of bounds: Fatness and transgression*. Berkeley: University of California Press.

Bridgwood, A. and Skelton, A. (2000) The arts in England, developing a survey of attendance, participation and attitudes, *Cultural Trends*, 10 (40) pp. 47-76.

Brinson, P. and Dick, F. (1996) *Fit to dance: The report of the national inquiry into dancers' health and injury*. London: Calouste Gulbenkian Foundation.

Buckroyd, J. (1995) *Eating Your Heart Out*, London: Optima Books.

Buckroyd, J. (1996) *Anorexia and Bulimia: how to cope*, Shaftesbury, Element.

Buckroyd, J. (2000) *The Student Dancer: Emotional Aspects of the Teaching and Learning of Dance*. London: Dance Books.

Carter, A. (1999) Dying Swans or Sitting Ducks: A Critical Reflection on Feminine Gazes in Ballet, *Performance Research*, 4 (3), pp. 91-98.

Featherstone, M. (1991) The body in consumer culture. In Featherstone, M.

Hepworth, M. and Turner, B.S. *The Body: Social processes and cultural theory*, Thousand Oaks, CA: Sage, pp. 170- 196.

Forman-Hoffman, VL. Cunningham, C.L. (2008) Geographical clustering of eating disordered behaviors in U.S. high school students. *International Journal of Eating Disorders* 41(3), pp. 209-14.

Foster, S. L (2003) Dancing Bodies. In J.C. Desmond (ed.) *Meaning in Motion: New Cultural Studies of Dance*. Third Edition, Durham, NC: Duke University Press, pp. 235- 258.

Foucault, M. (1988) *Technologies of the self*. In M. Luther, M. Martin, H. Gutman and Garrett, R. (2004) Negotiating a Physical Identity: Girls, Bodies and Physical Education, *Sport, Education and Society*, 9, pp. 223-237.

Garner, D. M. and Garfinkel, P.E (1980) Socio-cultural factors in the development of anorexia nervosa *Psychological Medicine*, 10, pp. 647-656.

Garner, D. M., Garfinkel, P.E. Rockert, W. and Olmsted, M.P. (1987) A prospective study of eating disturbances in the ballet, *Psychotherapy and Psychosomatics*, 48, pp.170-175.

Hutton, P.H. (eds.) *Technologies of the self*, Amherst: University of Massachusetts Press, pp.16-49.

Hutton, L. Bridgwood, A. and Dust, K. (2004) Research at Arts Council England, *Cultural Trends*, 13 (4) pp. 41-64.

Goldberg, M. (2003) Homogenized Ballerinas. In J. C. Desmond (ed) *Meaning in Motion: New Cultural Studies of Dance*, Third Edition. Durham NC: Duke University Press, pp. 305 -320.

Gordon, S. (1983) *Off balance; the real world of ballet* Pantheon: New York.

Green, J. (2001) Socially Constructed Bodies in American Dance Classrooms, *Research in Dance Education*, 2, pp.155-173.

Green, J. (2002) Somatic Knowledge: The Body as Content and Methodology in Dance Education, *Journal of Dance Education*, 2 (4), pp. 114 -118.

Haight, H.J. (1998) Morphologic, Physiologic, and Functional Interactions in Elite Female Ballet Dancers, *Medical Problems of Performing Artists*, 13, 1, pp. 4–13.



Hamilton, L.A., Brooks-Gunn, J., Warren, M.P and Hamilton, W.G. (1988) The role of selectivity in the pathogenesis of Eating Problems in Ballet Dancers, *Medicine and Science in Sports and Exercise*, 20, pp.560-565.

Keaney, E. (2008) Understanding arts audiences: existing data and what it tells us, *Cultural Trends*, 17 (2), pp. 97-113.

Kirkland, G. with Lawrence, G. (1986) *Dancing on My Grave: An Autobiography*, New York: Doubleday.

Koutedakis, Y. and Yamurtas, A. (2004) The Dancer as Performing Athlete: Physiological Considerations, *Sports Medicine*, 34, 10, pp.651–661.

Le Grange, D., Tibbs, J. and Noakes, T.D. (1994) Implications and Diagnosis of anorexia nervosa in a ballet school, *International Journal of Eating Disorders*, 15, pp.369-376.

Nixon, H. L. (1989) Reconsidering Obligatory Running and Anorexia Nervosa as Gender Related Problems of Identity and Role Adjustment, *Journal of Sport and Social Issues*, 13, pp. 14-24.

Paxton SJ, Schutz HK, Wertheim EH, Muir SL. (1999) Friendship clique and peer influences on body image concerns, dietary restraint, extreme weight-loss behaviors, and binge eating in adolescent girls. *Journal of Abnormal Psychology*, 108(2), pp. 255-66.

Pickard, A. (2007) Girls, Bodies and Pain: negotiating the body in ballet. In I. Wellard (ed.) *Rethinking Gender and Youth Sport*, London: Routledge pp.36-50.

Pickard, A. (2012) Schooling the dancer: the evolution of an identity as a ballet dancer, *Research in Dance Education*, 13(1), pp. 25-46.

Piran, N. (2005) The Role of Dance Teachers in the Prevention of Eating Disorders, In R. Solomon, J. Solomon and S. C. Minton, (second edition) *Preventing Dance Injuries*, Champaign: Human Kinetics, pp. 201-210

Rich, E. (2006) Anorexic dis(connection): managing anorexia as an illness and an identity, *Sociology of Health and Illness*, 28(3) pp. 284-385.

- Ringham, R. Klump, K. Kaye, W. Stone, D. Libman, S. Stowe, S. Marcus, M. (2006) Eating disorder symptomatology among ballet dancers, *International Journal of Eating Disorders*, 39(6), pp. 503-508.
- Ravaldi, C. Vannacci, A. Zucchi, T. Mannucci, E. Cabras, P.L. Boldrini, M. Murciano, L. Rotella, C. M. Ricca, V. (2003) Eating Disorders and Body Image Disturbances among Ballet Dancers, Gymnasium Users and Body Builders, *Psychopathology*, 36(5), pp.247-254.
- Robson, B. E. (2002) Disordered eating in high school dance students: some practical considerations, *Journal of Dance Medicine and Science*, 6(1), pp.7-13.
- Sharpe H. Musiat P. Knapton O. Schmidt U. (2011) Pro-eating disorder websites: facts, fictions and fixes, *Journal of Public Mental Health*, 10(1), pp. 34-44.
- Shearer, M. (1986) *Balletmaster: A dancer's view of George Balanchine*, London: Sedgwick and Jackson.
- Schnitt, J. M. and Schnitt, D. (1986) Eating disorders in dancers, *Medical Problems of Performing Artists*, 1, pp. 39-44.
- Sundgot-Borgen, J., Skarderud, F. and Rodgers, S. (2003) Athletes and Dancers. In J. Treasure., Schmidt, H. and van Furth, E. (eds.) *Handbook of Eating Disorders*, Indianapolis: Wiley and Sons, pp.400-415.
- Thomas, H. (1993) *Dance, Gender and Culture*, London: Macmillan.
- Turner, B.S. (1982) The discourse of diet, *Theory, Culture and Society*, 1, pp. 23-32.
- Turner, B.S. (1995) *Medical power and social knowledge*. Second Edition. London: Sage.
- Wainwright, S. P. and Turner, B. S. (2004) Epiphanies of embodiment: injury, identity and the balletic body, *Qualitative Research*, 4 (3) pp. 311-337.
- Wainwright S. P. and Turner, B. S (2006) 'Just Crumbling to Bits?' An Exploration of the Body, Ageing, Injury and Career in Classical Ballet Dancers, *Sociology*, 40(2), pp. 237-255.
- Wainwright, S. P. Williams, C. and Turner, B. S. (2005) Fractured Identities: injury and the balletic body, *Health*, 9 (1), pp. 49 -66.

Warin, M. (2002) *Becoming and unbecoming: abject relations in anorexia*. Unpublished Doctoral Thesis, Departments of Anthropology and Social Inquiry, Adelaide University, Adelaide.

Warin, M. (2004) Primitivising anorexia: the irresistible spectacle of not eating, *The Australian Journal of Anthropology*, 15(1), pp. 95–104.

Wolman, R. (1999) Body Weight and Bone Density. In Y. Koutedakis and G. Sharp (eds.) *The Fit and Healthy Dancer*, New York: John Wiley and Sons, pp. 249–265.

Yannakoulia, M., Sitara, M. and Matalas, A. L. (2002) Reported eating behavior and attitudes improvement after a nutrition intervention program in a group of young female dancers, *International Journal of Sport, Nutrition and Exercise Metabolism*, 12, 1, pp.24- 32.

Young, I. (2005) *Throwing Like a Girl and Other Essays in Feminist Philosophy and Social Theory*. Second Edition. Bloomington, IN: Indiana University Press.