



Healthy Dancer Canada

The Dance Health Alliance of Canada

TRANSLATING THE LANGUAGE OF DANCE AND SCIENCE

A Resource Page for the Dancer, Dance Educator, and Health Care Professional

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Introduction

Dancers and dance educators use specific terminology to describe each position and movement a dancer executes. An experienced dancer can execute the same movements whether they are demonstrated or simply described. Similarly, health professionals use anatomical language to communicate a specific health concern and its causes. Barriers to communication may arise between us because: (a) we sometimes use the same word to describe two different things (e.g. a contraction in modern dance technique vs. a contraction of a muscle); and (b) we sometimes use different words to describe the same movement (e.g. tendu devant vs. hip flexion). The purpose of this resource page is to translate between the art (dance terminology) and science (anatomical terms) of dance to facilitate communication between dancers, dance educators, and health care professionals. For more information, see our Resource Pages *Discussing Health Concerns* and *Communication Form for the Dancer, Dance Educator, and Health Care Professional*.

	The Art: Dance Terminology	The Science: Anatomical Terms
Positions of the Feet ¹	First, Second, Third, Fourth, Fifth	For photographs, see # 6 on reference list below.
Dance Movements	Turnout	External rotation of the femur in the hip socket
	Demi-Plié, Grand Plié	Half Squat, Full Squat; with the difference that during a plié, the torso remains vertical, not leaning forward.
	Demi-Pointe, Pointe	Weight-bearing plantarflexion; demi-pointe, or “half-point,” refers to standing of the balls of the feet--metatarsal heads. It combines plantarflexion of the ankle, inversion of the subtalar joint, and toe hyperextension. Pointe refers to standing on the ends of the toes in pointe shoes. It is similar to demi-pointe except that the toes are flexed.
	Port de Bras	Carriage of the arms through various positions, including varying degrees of shoulder flexion, extension and hyperextension, and horizontal abduction.
	Tendu (or Point), Flex	Non-weight-bearing plantarflexion, dorsiflexion; “pointing the foot” combines plantarflexion of the ankle, inversion of the subtalar joint, and toe

¹ Most dance positions and movements can be executed in parallel (neutral) or in turnout (external rotation).

		flexion. "Flexing the foot" combines dorsiflexion of the ankle, eversion of the subtalar joint, and toe extension.
	Battement	A fast kick of the leg.
	Développé	An action of the leg (at any tempo but usually slow) in which the gesture foot passes the standing knee and then reaches to a high point either front, side or back, straightening the leg fully.
	Forward Bend, Back Bend	Standing forward bends involve standing flexion of the spine and hip. Standing back bends involve hyperextending the spine.
	Hop (e.g. Temps Levé)	A jump from one foot to the same foot.
	Leap (e.g. Jeté)	A jump from one foot to the other.
	Jump (e.g. Assemblé, Sauté, Sissonne)	A jump from one to two feet (assemblé), two to two feet (sauté), two feet to one foot (sissone).
	Pirouette, Chaîné	Turns around the vertical axis
Directions of Movement	Devant	Movement of the lower limb using hip flexion.
	Derrière	Movement of the lower limb using hip extension.
	À la seconde	Movement of the lower limb using hip abduction, or upper limb using shoulder abduction.
	Close	Movement of the lower limb when returning from hip abduction or upper limb when returning from shoulder abduction (adducting the limb).
	En dedans/inward	A term used to describe turns on one leg in which the direction of the turn is towards the standing leg.
	En dehors/outward	A term used to describe turns on one leg in which the direction of the turn is away from the standing leg.
Structure of a Session	<p>Technique Class:</p> <ol style="list-style-type: none"> 1. Barre--A traditional warm up in ballet class and some contemporary and jazz classes; a series of exercises done using the barre to assist balance. 2. Floor work--A traditional warm up in some modern, contemporary and jazz classes; a series of exercises done on the floor. 3. Centre Floor--A series of exercises done without the use of the barre. 4. Across the Floor--A series of travelling steps typically done from one corner of the studio to another. <p>Activities Outside of Dance Class:</p> <ol style="list-style-type: none"> 5. Choreography/Repertoire 6. Conditioning/Cross-training 7. Rehearsals 8. Performances 	<p>Clinic Visit:</p> <ol style="list-style-type: none"> 1. Intake questionnaire and consent-- Paperwork you fill out before the visit begins to ensure your safety and confidentiality. 2. Subjective--An interview to discuss your concerns and your goals. 3. Objective--A range of tests from questionnaires to physical exam. 4. Assessment--A summary of key findings and possibly a diagnosis. 5. Plan--A list of recommendations including how often and when to follow up, modifications, conditioning exercises, referrals to other professionals.

References

1. American Ballet Theatre Ballet Dictionary. Available at: www.abt.org/education/dictionary/index.html.
2. American Physical Therapy Association. Glossary of Dance Terminology, 1998. Available at: www.orthopt.org/downloads/PAGlossary.pdf.
3. Healthy Dancer Canada. Suggestions for Discussing an Injury with your Dance Teacher, Choreographer, or Rehearsal Director, 2013. Available at: www.healthydancercanada.org.
4. Krasnow D, Deveau J. *Conditioning with Imagery for Dancers*. Toronto, ON: Thompson Educational Publishing Company, 2010. Available at www.citraining.com
5. Lai RY, Krasnow D, Thomas M. Communication between medical practitioners and dancers. *J Dance Med Sci* 2008;12(2):47-53. Available at: www.citraining.com/pdfs/Communication-Between-Medical-Practitioners.pdf.
6. Motta-Valencia K. Dance-related injury. *Phys Med Rehabil Clin N Am* 2006;17:697-723. Available at: www.med.nyu.edu/pmr/residency/resources/PMR%20clinics%20NA/PMR%20clinics%20NA_sports%20med/dance%20related%20injury.pdf

Please send any feedback to the Resource Committee at resources.healthydancercanada@gmail.com.