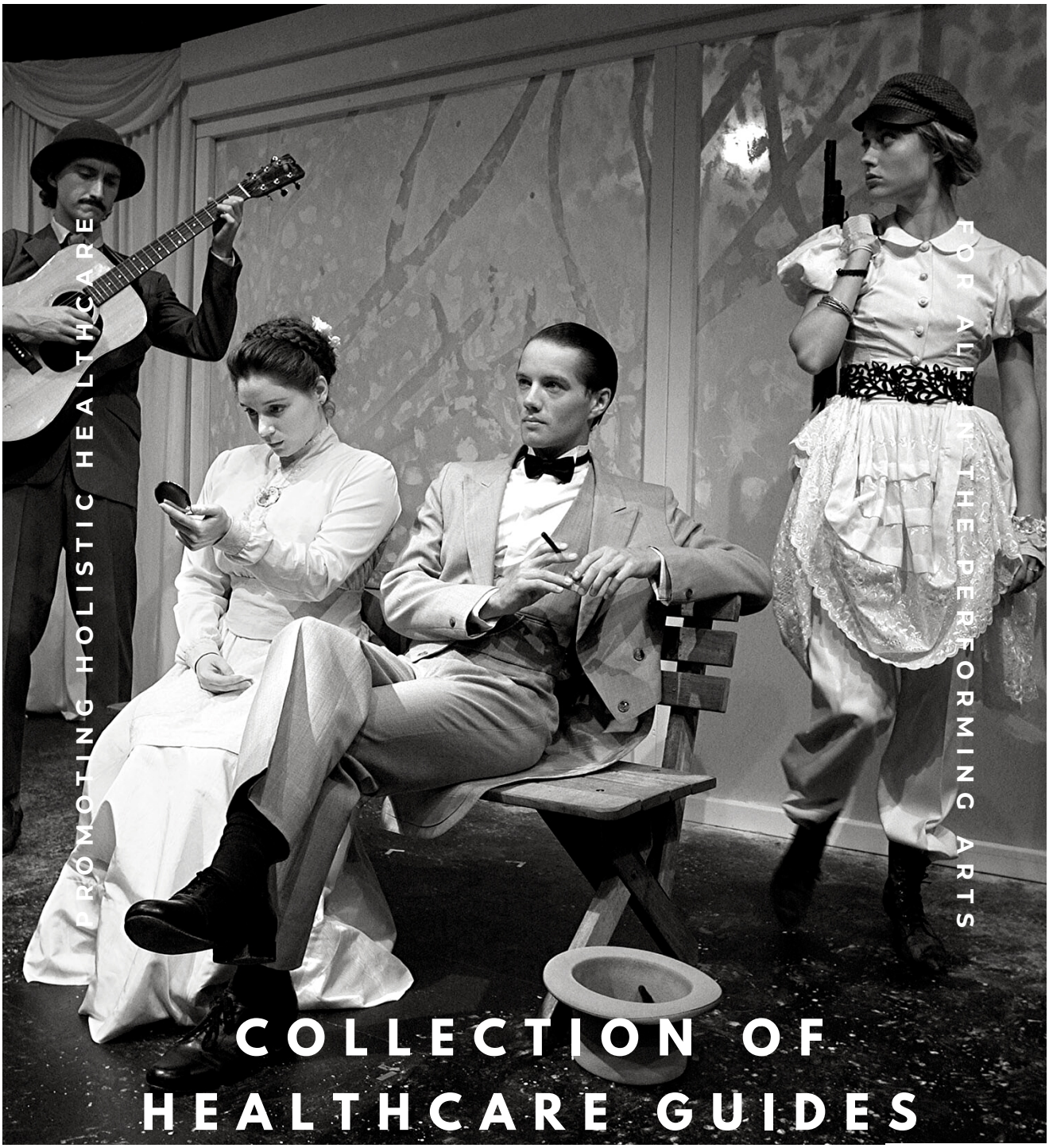
ASPAH

AUSTRALIAN SOCIETY FOR PERFORMING ARTS HEALTHCARE



The ASPAH Collection of Healthcare Guides
Edition One, first published in 2019.

ASPAH thanks all of its authors and volunteers who have contributed to this resource, including (alphabetical order):
Dr Peta Blevins, Dr David Butler, Dr Cliffton Chan, Dr Paul Duff, Melanie Fuller, Dr Shona Halson, Danica Hendry, Dr Luke Hopper, Janet Karin, Dr Susan Mayes, Amy Naumann, Prof. Leslie Nicholson Dr Mark Seton, Camilla Tafra

ASPAH is a registered charity and these resources are provided through the skilled volunteer work of healthcare and performing arts industry professionals.

ASPAH is a small organisation with a big vision:

Our goal is to provide resources that will support performing artists: their physiological and psychological health and wellbeing, and their ability to meet the challenges of a performing career with confidence and pleasure. We also aim to help healthcare professionals understand the specific health needs of those in the performing arts, and to support researchers and performing arts industry workers. As ASPAH is a not-for-profit charitable organisation, we rely on the support of our sponsors, donors and advertisers to achieve our vision.
We recognise the generous sponsorship of Harlequin Floors Australia. Harlequin are internationally respected for their work in supporting the performing arts, and we offer our deep gratitude to private donors, Pip Smith AO and Anonymous. We also thank our advertisers and exhibitors: Bloch Australia, Body Centric Physio and Pilates, Body Mapping Australia, Kinetica Physiotherapy, Melbourne Performance Therapy, Performance Medicine, Harlequin Floors Australia and MDM Performance Dancewear.
By supporting ASPAH, you support performing artists and those who care for their health and wellbeing. Please consider contacting admin@aspah.org.au to discuss how you would like to contribute to ASPAH's vision.

Important: These ASPAH Guides are intended as educational resources only and do not replace professional advice. ASPAH recommends that diagnosis and initial advice is always obtained from an accredited healthcare professional.

Cover photo: WAAPA 2nd year acting production 'The Cherry Orchard' (2007), photo by Jon Green
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ASPAH
Australian Society for Performing Arts Healthcare

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ASPAH COLLECTION OF HEALTHCARE GUIDES: FOREWORD

Janet Karin OAM, ASPAH Executive Committee member

Performing artists, whether training, recreational or professional, live in a world of potential—potential to express themselves, to communicate ideas, to evoke emotions, to inspire, and to confront issues that affect us. In return, performing artists experience the joy of sharing with audiences, the thrill of overcoming challenges, the fulfilment of working with colleagues towards a common goal, and the pleasure of breaking barriers. What an extraordinary life!

However, performing artists pay for these privileges. The cost may be physiological, in terms of pain, exhaustion or injury. It may lie in emotional challenges, especially for touring artists. At other times, or possibly simultaneously, the cost may lie in an adverse impact on psychological wellbeing. Performing artists are an integral part of our culture, and they deserve our care.

The ASPAH healthcare guides are written by experts in each field, and designed to provide information and support in areas that affect performing artists' health and wellbeing. After observing the value to performing artists of the ASPAH guides on our website, it became obvious that many more could benefit. Therefore, ASPAH is proud to publish this ASPAH Collection of Healthcare Guides, and to distribute it to Australian performing artists, training institutions, professional companies and amateur groups, healthcare providers and clinics.

ASPAH thanks the private donors and the advertisers whose support has allowed us to publish and distribute the Collection free of charge. We hope you enjoy reading this booklet, and sharing it with others who may benefit from its advice.

Photographer: Kate Longley
The Australian Ballet: Dr Sue Mayes, Physiotherapist; Lana Jones, dancer

CONTENTS

ACUTE INJURY CARE

Who gets injured? The answer is "nearly everyone". Performing artists can be injured during their everyday life, but they can also incur injuries resulting from practicing or performing. Although many of these are minor injuries, performance-specific injury care can minimise their impact on performance and maximise the chances of a speedy and complete recovery. If poorly managed, even a minor injury can become severe, and may become a chronic (long term) problem.

You are injured - What now? So, despite your best efforts, an "acute" (sudden) injury has occurred! Now you can do a lot to assist your body's recovery. Pain, swelling and heat are important aspects of the body's protective and healing responses, but you can keep them under control and assist your recovery by applying the PRICE and HARM principles over the first 48 hours after an injury has occurred.

Professional, such as a General Practitioner, Physiotherapist, or other accredited practitioner, can ensure you limit further damage and enable optimal recovery during the first 48 hours and afterwards.

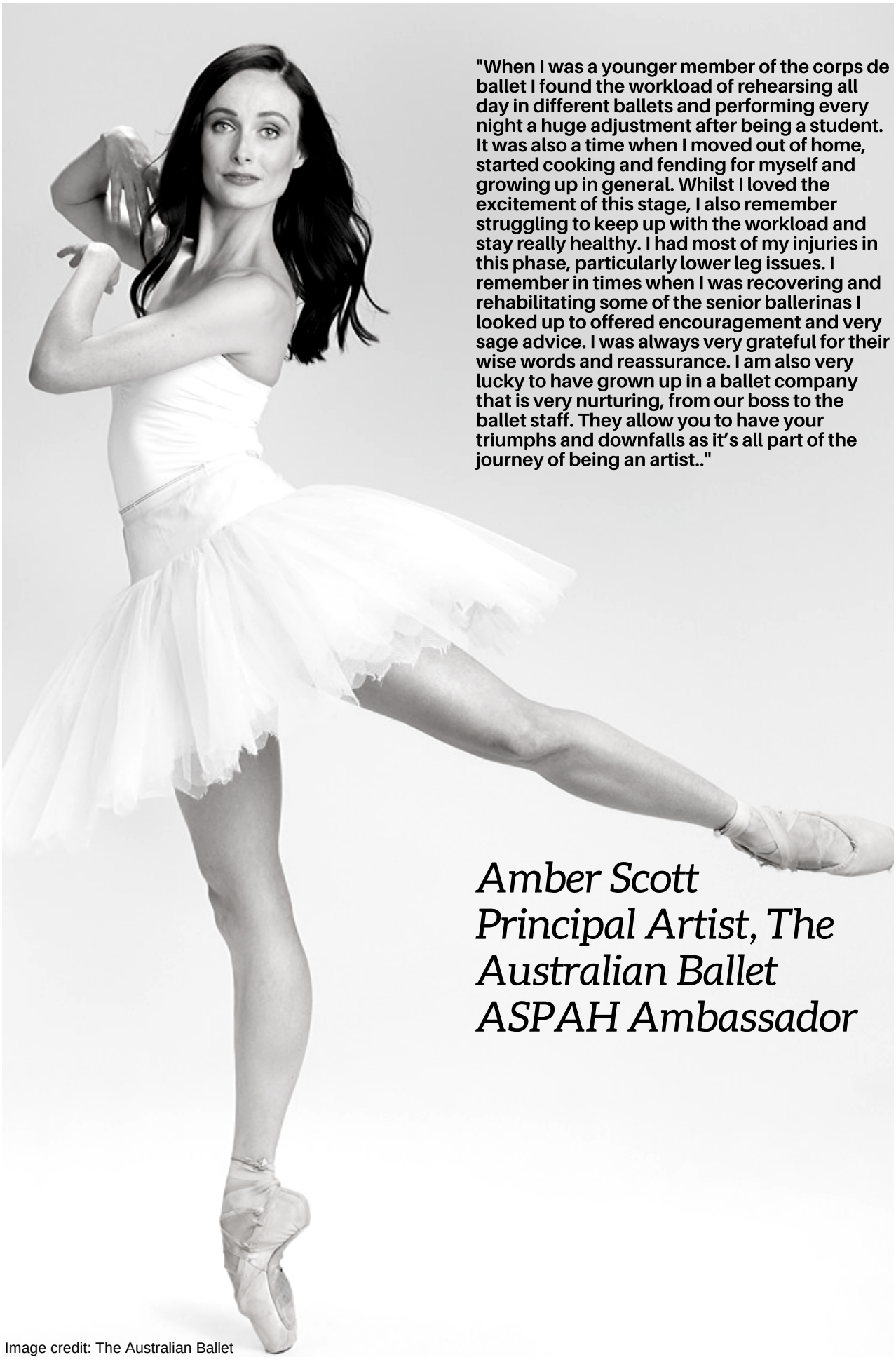
What about after 48 hours? If things are improving, your HP may encourage you to gently move the injured area, increasing the movement as tolerable. Depending on the diagnosis, your HP may encourage you to exercise into discomfort but will guide you on how much to tolerate. Maintaining fitness, especially strength and cardiovascular fitness, can encourage recovery as you gradually increase your load. As pain and swelling settle, it may be helpful to start some performance-related activities (e.g short practice sessions), progressing duration and difficulty only as tolerated. Acute injury can also produce shock and stress. Try some relaxation and healing

WHO GETS INJURED? THE ANSWER IS "NEARLY EVERYONE"

PRICE:
Protection – protect and support the injured area to avoid further harm
Relative rest – avoid painful movement until you have advice from a Healthcare Practitioner (HP)
Ice – wrap ice, an ice-pack or similar in a moist cloth and apply for 10-20 mins every 2 hours to relieve pain
Compression – an elastic bandage can help support the injured part and manage swelling
Elevation- elevating the injured area above the heart may help drainage and reduce swelling.
HARM:
Heat – may increase tissue bleeding.
Avoid heating liniments, hot packs and hot baths
Alcohol – dilates blood vessels and may increase bleeding
Rehearsing/practicing/performing –
avoid discomfort until you have advice from a HP
Massaging the injury – can
increase inflammation and worsen tissue bleeding.
Diagnosis and prompt advice from a Health

imagery such as mindfulness to reduce the negative effects of stress and focus on healing and return to performance. If things are not improving within five days, seek advice from a HP as soon as you can, and avoid practising or performing until you know more about your condition. Whenever possible, it is advisable to speak to a HP who is familiar with the specific requirements of performing artists in your field. Look for someone in your area in the ASPAH Members' Directory (see www.aspah.org.au).

Where can I find more information? Your HP is the best place to start, as each person, each injury and each recovery is unique. Your HP may refer you to other professionals as well. See also:
Explain Pain 2nd Edition:
http://www.noigroup.com/en/Product/EPBII
Playing Less Hurt: An Injury prevention guide for musicians. Janet Horvath. 2010
Dancer Wellness. Eds Virginia Wilmerding and Donna Krasnow. 2016



"When I was a younger member of the corps de ballet I found the workload of rehearsing all day in different ballets and performing every night a huge adjustment after being a student. It was also a time when I moved out of home, started cooking and fending for myself and growing up in general. Whilst I loved the excitement of this stage, I also remember struggling to keep up with the workload and stay really healthy. I had most of my injuries in this phase, particularly lower leg issues. I remember in times when I was recovering and rehabilitating some of the senior ballerinas I looked up to offered encouragement and very sage advice. I was always very grateful for their wise words and reassurance. I am also very lucky to have grown up in a ballet company that is very nurturing, from our boss to the ballet staff. They allow you to have your triumphs and downfalls as it's all part of the journey of being an artist.."

Amber Scott
Principal Artist, The Australian Ballet
ASPAH Ambassador

Image credit: The Australian Ballet

AUSTRALIA'S HEALTHCARE SYSTEM

Image (C) WAAPA 2019-

As a performer, it can be difficult to find your way through the health system, especially if you are feeling vulnerable, have little money, or haven't had much experience of the system before. You may be unsure where to find health practitioners who understand performers' specific needs and appreciate your determination to resume your arts practice without restriction as quickly as possible. Before we start, some simple but important advice: Don't suffer illness or injury alone! First and foremost, you need the help of a health professional to ensure you recover quickly and completely. You may want to ask a family member, friend, or colleague, to be with you. It can make a world of difference to have someone help you negotiate better care, to hear and remember the information and advice you receive, and even just to support you at this vulnerable time.

There are two main systems:- public and private
The public system is based around public hospitals and community health centres across Australia. All public health services are free, so waiting times may be long. Depending on your needs, the hospital or health centre decides which doctor or health worker you will see, and the services you will receive. Due to cost constraints, some health services that are considered non-essential or "elective" may not be available through the public system. In this case, the public system will make sure you are safe, and then may advise you to seek further care through the private system. In a medical emergency, you should seek help at the Accident and Emergency Department of any public hospital. If the situation is urgent, ring 000 for an ambulance to take you there. An operator will ask you whether you need Fire, Police or Ambulance. When you have been connected to the right service, explain the situation as clearly and as calmly as you can and give your address. They will advise you what to do until the ambulance arrives. If you need to stay in hospital (as an 'inpatient'), or if you need to return to see a doctor or healthcare worker in the hospital (as an 'outpatient'), the service is free.

The private system: Private healthcare practitioners are those who work outside the public system. They charge patients for their services, but their fees can be subsidised in various ways, including Medicare and other health insurance options. For further information on Medicare and other health insurance options, please see the ASPAH Guide: Healthcare Insurance Options. Private insurance doesn't cover all your expenses, so

always ask about any excesses , “gaps” or additional fees you may need to pay before you make a decision to see a private healthcare professional. See the ASPAH Guide “Healthcare Insurance Options” for further information.General practitioners (GPs): GPs (doctors) have a broad range of training and experience, so they can diagnose and treat many health problems without you needing to go anywhere else. If youdo need further care, they can recommend appropriate services and practitioners. If you need a specialist, the GP can refer you to a public hospital, but the GP cannot choose which specialist you will see, or ‘speed things up’ unless your condition is urgent. The GP can also refer you to a private specialist who is likely to see you sooner. Private specialists are expensive, but it is fine to ask the fee before confirming the appointment. For more information about GPs’ skills and services, see the ASPAH Guide: Healthcare Professionals: Who does what? Approximately 85% of GPs “bulk bill”, which means they use your Medicare card to charge Medicare directly and you do not have to pay. If your GP does not bulk-bill, you need to pay the difference between their fee and the Medicare subsidy. This “gap” fee averages about $35-$40 for a standard (less than 20-minute) consultation.

Other healthcare professionals:
There are many other types of healthcare professionals who are trained in different treatment methods. Many of these are described in the ASPAH Guide: What Healthcare Professionals do. However, it can be overwhelming trying to work out who is best for your needs, so it is usually better to ask your GP for advice.

The public system:
Allied health professionals:
Public hospitals employ a broad range of registered allied health professionals, including nurses, physiotherapists, social workers, speech therapists, podiatrists and occupational therapists. These services are sometimes available to the community without charge through a doctor’s referral. There is usually a waiting list.
Alternative practitioners: Services such as acupuncture, Alexander Technique, Feldenkrais, Chinese Medicine, massage therapy, Pilates and yoga are never available through the public system.
Mental and sexual health: Recognising the very personal nature of these health issues, most public hospitals offer free support in both areas. Go to Accident and Emergency at a public hospital or make contact with the relevant service by phone. Contact details for a range of services are available in the ASPAH Guide: Safety in the Performing Arts.
Optometrists: Optometrists usually bill Medicare directly for an eyesight check-up, but you have to pay for frames and lenses.
Dental: Many public hospitals have free dental clinics for urgent care, but access may be limited to those who have a Health Care card.
Emergencies: Go straight to any public hospital or call 000 for an ambulance.

The private system:
Allied health professionals: You can go to any allied health professional without a referral, but they all charge fees. Your GP may be able to help you access some subsidies, while some private insurers cover part of the fee for some services.
Alternative practitioners: Acupuncture, Alexander Technique, Chinese Medicine, Feldenkrais, massage therapy, Pilates, yoga and similar practitioners charge fees. Some private health insurance cover some of the costs for a few of these services. Private health insurance companies vary in cost and in which services they cover. Check which services are included in a specific policy before you buy private health insurance. You can compare policies on www.privatehealth.gov.au/.
Optometrists: These services are covered by Medicare. Optometrists usually bulk-bill for an eyesight check-up but you have to pay for frames and lenses.
Audiologist: The government subsidises hearing checks for children and people over 65. Subsidies for hearing aids are available to the bearers of certain concession cards.
Dental: Most dental treatment is by private practitioners, but government subsidies are available for child dental checks.

What if I have a problem or a complaint?
The Medicare Act requires each state and territory to have its own Health Care Complaints Commission with particular focus on their public health system. Search online for details for your state.

CROSS TRAINING: STRENGTH AND NEUROMUSCULAR CONTROL FOR PERFORMERS

Cross training is participation in additional types of exercise to improve fitness and skill in your own performance area. Performing artists can be considered as athletes; they can benefit from strength training and neuromuscular control as high level athletes do. Exercise programs, especially those targeting strength and neuromuscular control, have been shown to help prevent injury.

What is strength training? Training can target either muscle strength or muscle endurance. Muscle strength is trained by lifting heavy weights/loads, for two to three sets of 8-12 repetitions, to fatigue, with approximately two minutes rest between each set, and 48-72 hours of rest between sessions. Muscle endurance training involves lifting body weight or low loads, for two sets of 15-25 repetitions, two to three times per week. Endurance training was found to be more useful than strength training in reducing perceived exertion (how tired you feel) whilst playing a musical instrument. Since fatigue was the main contributor to injury reported by Australian professional dancers, endurance training may help reduce this perceived risk factor.

What is neuromuscular control training? Neuromuscular control training can target balance, proprioception, coordination, agility and skill. Frequently these features may be incorporated into performing arts technique training, however supplemental training may further enhance this, allowing for prevention of injury and improved performance. For instance, balance training has been shown to prevent lateral ankle sprain - a common injury in dance. Neuromuscular control training in playing positions (e.g. in sitting) may ensure bilateral muscle balance, protecting against injuries related to one-sided postures while playing musical instruments. To reduce injury, a program should be performed for 30 mins at least twice per week.

Reducing injury while promoting performance Direct your strength and neuromuscular control program to support the areas commonly affected in your performing arts discipline, and also seek advice in personalising your program to counteract any personal weaknesses or limitations. In general, research shows that strength training helps prevent injury whereas stretching does not. As any injury increases the likelihood of a future injury in the same area, it makes sense to build strength in the muscles supporting the affected joint and in the surrounding areas. Studies have shown that supplementing technique classes with strength and conditioning training is more beneficial to dance performance than technique classes alone.

Where to get a program? In Australia, there are many different qualified exercise professionals, including:

- fitness instructors,
- strength and conditioning coaches,
- exercise scientists,
- exercise physiologists,
- physiotherapists,
- titled sports and exercise physiotherapists

For further information on the treatment you may receive from these professionals, please see the ASPAH guide 'What Health Professionals Do'). A General Practitioner can advise you on which type of exercise professional is best suited to your specific needs.

Monitoring improvements: Ensure your program is helping you achieve what you desire. Monitor your own perceived exertion (how tired you feel) whilst training and practicing; test how many repetitions you can achieve in a certain task for a

specific muscle group; utilise equipment such as dynamometers to quantify your force output; or measure your jump height or distance. In all these cases, an exercise professional can help you with testing, and can advise on appropriate modifications to your program.

Periodisation: Periodisation involves dividing your annual program into blocks, each with different challenges, according to your performance program. The goal is to ensure you are at your peak when you need to be, while allowing time for recovery. Aim to commence a program during a less intensive period, to allow your body to adapt positively. As much as you need consistency in your training, the volume and intensity of your overall workload is not always in your control. When your practice/performance program is more intensive, you may need to avoid overtraining by decreasing your additional exercise. These periods may be better spent maintaining your strength and neuromuscular control levels rather than attempting to push them further. The slight reduction will allow your body to adapt to other physical and psychological demands associated with periods of intensive practice and performance.

Are there any risks? It's a good idea to talk to your doctor before starting an exercise program and to complete the Adult Pre-Exercise Screening Tool (see "Resources"). Strength training interventions are considered to be safe for children and adolescents. In general, risks could include delayed onset muscle soreness (muscle pain or stiffness after exercise), and musculoskeletal injury. However, inaccuracies in the way you perform an exercise can easily creep in, so it is recommended that all programs are regularly supervised by a qualified exercise professional. Further information can be found in the following sites.

Resources

Adult Pre-Exercise Screening Tool:
https://fitness.org.au/articles/policies-guidelines/adult-pre-exercise-screening-system/4/18/20

Youth Strength Training:
www.acsm.org/docs/default-source/files-for-resource-library/smb-youth-strength-training.pdf?sfvrsn=85a44429_2

FATIGUE AND RECOVERY FOR PERFORMING ARTISTS

Fatigue: Fatigue can be described as a general feeling of tiredness, often accompanied by a decrease in performance. When you are undertaking high training loads, short-term fatigue is expected and is essential for adaptation and improvement. However, longer lasting fatigue that is not balanced with adequate and appropriate recovery can lead to impaired performance and negative outcomes such as under-recovery, overtraining, and burnout. To perform at their best, performing artists need to recognise different types of fatigue, and to know appropriate strategies for recovery. High training loads or intense performance schedules can lead to four types of fatigue: metabolic fatigue, neural fatigue, psychological fatigue, and environmental fatigue. You may experience these independently or you could experience two or more at the same time. Metabolic fatigue relates to energy depletion and may be addressed through hydration and nutrition. Neural fatigue, which relates to the central nervous system (brain) and the peripheral system (muscles), may be overcome through physical and mental recovery strategies. Psychological fatigue relates to emotional, social, and cultural stress and should be addressed with psychological recovery strategies. Finally, environmental fatigue results from stressors such as climate and travel, and may be an issue for touring performing artists or those working in poorly equipped studios or locations. The ASPAH guide 'Staying healthy "on the road"' offers advice on dealing with some of these challenges.

Recovery: Recovery is the process of restoring full physiological and psychological function. Adequate recovery allows for increases in quality and quantity of training, and may reduce the risk of overuse injuries. Performing artists encounter stress from a number of sources, both training and non-training related. Achieving a balance between stress and recovery is essential for optimal performance. Understanding the recovery process allows you to assess your fatigue and recovery, and to monitor your adaptation to training. By managing the different types of fatigue, you can 'bounce back' quickly and be ready for your next training/practise session. There are many benefits to recovery. They include reducing the incidence of training-related illness and injury (e.g., overtraining and burnout); and promoting adaptation to training stressors. By improving self-management skills, you learn how to care for yourself as a performer, and you acquire good habits for life post-career. Current evidence regarding the most beneficial modalities for enhancing recovery is inconclusive. It appears that adequate rest/sleep, nutrition, and hydration are the most effective strategies for optimal recovery. However, performing artists who use a range of fatigue management and recovery monitoring strategies improve their chances of achieving recovery-stress balance and optimal performance.

Types of recovery: Recovery strategies for performing artists can be described as passive, active, or pro-active. Passive recovery strategies include rest, sleep, sauna, massage, sitting or lying quietly, and using physiological reactions to stimuli (e.g., heat, cold, pressure) to return to your pre-performance state. Active recovery utilises moderate physical activity with the specific aim of overcoming the effects of fatigue (e.g., participating in a cool-down program directly following performance). Pro-active recovery refers to any self-initiated and purposeful action chosen by the performer to enhance recovery (e.g., dynamic stretching or breathing exercises during intermission break in a performance). Performing artists benefit from at least one rest day each week.

Monitoring recovery: Performing artists can use a combination of objective and subjective measures to monitor wellbeing and avoid poor performance and negative health outcomes. Objective measures include physiological and biochemical markers related to under-recovery and

overtraining, and may involve monitoring heart rate, oxygen consumption, or blood markers. Subjective measures look at psychological signs of overtraining including disturbance to mood and changes in perceived stress and recovery. Recovery monitoring can be useful for identifying individual recovery needs. Each performing artist will have a different and unique response to training and non-training stressors. Recovery monitoring can help you to increase your knowledge about your personal recovery needs.

How should I monitor myself? Self-monitoring helps the performer to assess their level of recovery and develop recovery strategies for their personal needs. Factors to monitor include resting heart rate, quality of sleep, levels of energy and fatigue, muscle soreness, self-confidence and self-esteem, attitude to school/work/social life, and health (injuries, illnesses, menstrual cycle). It is important for you to be able to recognise how you feel. If you notice changes in any of these areas, you should take the appropriate steps to enhance recovery efforts in these areas. A daily log or diary will help you to evaluate stress levels and adaptive responses. Your daily log should be simple so that it's easy for you to maintain.

"I think performing artists experience so much pressure (whether internally or externally) to always perform to your absolute best, or better. I think this leads to high stress loads, and perhaps people finding release through unhealthy habits (like excessive drinking, or other recreational hobbies....), which leads to lack of sleep, not eating well, and it sort of becomes a downward spiral. If we don't maintain a healthy attitude towards our art, our mental and physical state really suffers. Thankfully, I think people in general are becoming more aware of these obstacles, and it's becoming less of a taboo to talk about things that may be troubling us.

Glenn Christensen, Violinist, ACO ASPAH Ambassador

You could give yourself a score between 1 and 5 for each of the following questions.

How well did you sleep last night?

1 (Terrible) to 5 (Like a baby)

How tired/worn out are you feeling today?

1 (Totally exhausted) to 5 (Energised and ready to go!)

Do you have any physical soreness today?

1 (It's hard to move) to 5 (Not at all!)

How confident are you that you can achieve your goals?

1 (Not confident) to 5 (Extremely confident)

Which recovery strategies should I use? To achieve and maintain recovery-stress balance, you should aim to match the recovery strategy with the recovery deficit revealed by your daily monitoring log. For example, if you have noticed a decline in your quality of sleep then you should focus on improving the quality and quantity of your sleep (see the ASPAH Guide 'Sleep for high performance' for tips). Some potential recovery strategies are included here:

Nutrition and hydration: Diet affects health and performance, so it is important that you refuel and rehydrate following training and performances. A balanced diet will help support training and may prevent excessive fatigue, illness, and injury. Dietary requirements will vary depending on individual needs and workloads.

Work to rest ratios: Include work to rest ratios in training and planning; schedule passive recovery (do nothing, meditate, sleep) and active recovery activities (a light jog, walk, swim, cycle, or Pilates, yoga, and cross training activities) after performances and training. Your daily program should help balance the physical and psychological demands of training and performance. Rest days are essential to health and to performance, and ideally one day per week should be free of training and performance. Taking time out provides you with the opportunity to engage in physical and psychological recovery and allows time for other interests and personal relationships.

Physical therapies: These include hydrotherapies (e.g., spas, saunas, pools, ice baths, contrast temperature protocols); sports massage; acupuncture; and compression garments. Evidence is mixed regarding the effectiveness of these modalities in improving recovery, but they may provide physical and psychological relaxation which in turn will benefit recovery.Psychological recovery techniques: Helpful techniques include debriefing after a performance; resilience or mental toughness training; emotional recovery strategies after severe stress or trauma; and free time for socialising with friends and family. Relaxation techniques such as meditation, progressive muscle relaxation, visualisation, breathing exercises, flotation, and music can also have benefits for psychological recovery. Relaxation techniques should be practised on a regular basis to become effective tools for aiding recovery.

Helping performing artists improve their skills: By integrating monitoring into their training and performance schedules, organisations can structure training and rehearsals, etc. around their artists' levels of recovery. This strategy reinforces the importance of recovery as an essential aspect of optimal health and performance. Teachers, coaches, trainers, directors and other industry leaders also benefit from helping performing artists to understand, plan, and use individual recovery strategies, with the ultimate aim that they will manage these for themselves. Effective monitoring and recovery management will enable both the teacher/director and artist to achieve more productive training, better and more consistent performance, a reduction in training injuries and illnesses, and the development of sound self-management strategies.

GRANTS OF UP TO $1000 FOR PROJECTS

APPLY FOR THE

PAULETTE MIFSUD MEMORIAL GRANT PROGRAM

Apply for funding for projects that:
promote the concept of healthcare for performing artists,
increase the participation of performing artists in relevant healthcare, and/or
improve the delivery of healthcare for performing artists.
www.aspah.org.au/grants/paulette-mifsud-memorial-grant-program/

GRANTS OF UP TO $250 FOR GUEST SPEAKERS

FEELING SAFE IN THE PERFORMING ARTS

Being a performing artist is a uniquely exciting and satisfying career. At the same time, most performing artists are faced with constant change – repertoire, technical and stylistic demands, colleagues, rehearsal and performing spaces. Touring artists can also face unfamiliar climates, cultural environments, and time zones. Of course, this is what makes life in the performing arts so exciting. On the other hand, adapting to change is challenging and it can reduce your sense of safety. As a young performer, you may need support as you become acclimatised to your new world and develop resilience to cope with future challenges.

Sometimes, you may feel unsafe about your work situation without knowing whether your concerns are valid, or you just need to "toughen up". You may wonder whether people will think you are "not up to the job" or are a "whinger". You may feel unsafe physically because of the technical situation – floor surface, costumes, physical structures, lighting, etc. You may feel unsafe because of the demands of the choreography or because you feel you have not had enough rehearsal, especially if you are required to interact closely with a colleague. You may feel unsafe because you are required to perform with an injury, when you are unwell, or without adequate rest. These are complex issues, and difficult for a young performer to solve without support.

Many people feel unsafe when they are in a new environment and have not yet developed a trust relationship with their peers. Without someone to listen to your concerns, even the smallest challenges can seem overwhelming. You need to be active in solving the problem. A more experienced colleague may offer you advice on solving the issue yourself, possibly through additional practice or by watching how others meet the challenge. If the situation is beyond your control, you may need to ask for help from your coach or teacher, rehearsal director, stage manager, physiotherapist or doctor. If none of these people can help you and the problem persists, you can follow a more formal procedure, as below. Before you do this, note in writing exactly what the issue is, your efforts to solve it, and how you think the issue could be resolved. Being well prepared will help you to approach the meeting calmly and positively.

Feel safe at work: You have a right to feel safe at work, and your employer has a legal responsibility to provide a safe workplace. Safety includes freedom from harassment, bullying, discrimination (including racism), violence, and situations where your physical and/or psychological safety could be at risk. Ideally, you should have been given orientation information covering your rights and responsibilities when you started your employment, and this document should describe how to lodge a complaint at your workplace. If not, start by asking a staff member for the safety and complaint guidelines, because different organisations offer different complaint paths. The websites below give you general details but, if your organisation has a human resources department or a designated manager for workplace safety, this is a good place to start. Alternatively, you could write to the General Manager, Artistic Director or Board Chairperson. If you feel these people are involved in the problem, or for any other reason are unlikely to help, you can go to the Media Entertainment Arts Alliance (MEAA) or to one of the government organisations listed below. For more information on your legal rights, see Safework Australia (website below).

Feel safe at your school or training place: You have a legal right to feel safe in your school or training organisation, free from harassment, bullying, discrimination (including racism), violence, and situations where your physical safety could be at risk. Your school or training institution is responsible for protecting you. If you have a problem, speak to your parents and friends so they can support you, then speak to someone you trust within your training place. This may be a teacher, the school psychologist, chaplain, nurse or the school principal. If none of these people can help, you may need to contact the Education Department (website in references).

Safety and the law: Human rights are rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion, or any other status. The Australian Human Rights Commission (website in references) describes laws regarding human rights, including discrimination, harassment and bullying, and offers a complaints process that is focused towards reconciliation.

Harassment: Harassment is when a person is treated unfavourably on the basis of personal characteristics such as race, sex, age, disability, sexual orientation, etc. Insulting jokes, suggestive emails or text messages, offensive posters, derogatory comments about someone's race, and intrusive personal questions are against the law.

Sexual harassment: Sexual harassment is any unwanted or unwelcome sexual behaviour, including unwanted physical contact, jokes, emails, text messages, posters, comments and personal questions that offend, humiliate or intimidate you. All these are against the law.

Bullying: The Fair Work Amendment Act 2013 defines bullying as repeated unreasonable behaviour which creates a risk to your physical or psychological health and safety. It can range from obvious verbal or physical assault to subtle psychological abuse. Bullying linked to a person's age, sex, race, or disability is illegal.

Racial hatred: Offensive behaviour based on racial hatred is against the law. Racial hatred is something done in public that offends, insults, humiliates or intimidates anyone because of their race, colour, religion, or national or ethnic origin. Racist graffiti; racist insignia; racist speeches, posters and stickers; racist abuse in public places; and publishing offensive racist comments in the media, including social media, are against the law.

Assault: Nobody has the right to assault you, and any assault is a crime. Assault is the use of intentional and unwanted physical force against you that leads you to believe you are at risk of immediate harm, regardless of whether the actual harm occurs. Assault can include verbal threats, pushing, spitting, bruising and hitting. If you have been assaulted, it is important to seek help, advice and support. If you or someone else is in danger, ring the police (000) as soon as possible. If you have been injured, go straight to a public hospital emergency department or a police station. If you need an ambulance, ring emergency (000).

Sexual assault: Sexual assault may include rape, sexual penetration, intercourse, offensive touching or gross indecency without your consent. If you are still in danger, ring the police (000). When you are out of immediate danger, go somewhere you feel safe, such as the home of a close friend or a family member. For confidential counselling and information on what to do next, ring 1800 RESPECT (1800 737 732), ring the police (000) or go to a police station. If you have been raped or sexually assaulted, you should not feel ashamed or blame yourself for what happened. If someone tells you they have been raped or sexually assaulted, it is important that you believe them and show them compassion as well as practical support. Lifeline (13 11 14), Beyond Blue (1300 22 4636), Kids Helpline (1800 55 1800), and 1800 RESPECT (1800 737 732) are all ready to help.

"NOTE IN WRITING EXACTLY WHAT THE ISSUE IS, YOUR EFFORTS TO SOLVE IT, AND HOW YOU THINK THE ISSUE COULD BE RESOLVED. BEING WELL PREPARED WILL HELP YOU TO APPROACH THE MEETING CALMLY AND POSITIVELY."

FIT AS A FIDDLE AND READY TO PLAY

What is Fitness?
Fitness can be defined as the ability to carry out daily tasks and performance goals without undue fatigue. Fitness can be thought of as either general or specific. While general fitness implies a state of health and wellbeing, specific fitness means the ability to meet the specific demands of a particular task. By improving their specific and general fitness, performers make their bodies more resilient and more efficient at handling the physical stresses of practice, rehearsal and performance.

We can divide physical fitness into components. For instance, c***ardiorespiratory*** (aerobic) fitness relates to the fitness of the heart and lungs while ***muscular*** fitness relates to the power, flexibility and endurance of the muscles. Our balance, agility and coordination are part of ***motor*** fitness.

What does exercise do?
At a microscopic level every tissue in the body responds to regular exercise. Training for as little as 6 weeks can produce measurable changes in the following:
Muscles and tendons – increases in strength, endurance, flexibility and efficiency
Bones – increases in strength and density
Joints and ligaments – increases in strength and flexibility
Heart and lungs – increases in efficiency, oxygen delivery and endurance
Nerve and brain tissue – increases in activation and efficiency

For the performer these changes add up! Improved energy levels, faster recovery after exertion, increased strength, correction of muscle imbalances, greater endurance and more flexibility, are just a few things that are likely to help you meet your performance goals and decrease your risk of injury. Balance, body awareness and posture, all vitally important for healthy performance, are also enhanced by regular training.

We also know that regular exercise has a preventative effect and helps to reduce the risk of myriad of lifestyle associated diseases such as heart disease, type 2 diabetes, stroke and colon cancer. Many other conditions are also effectively treated with exercise, and it is often prescribed as a key component with the management of depression/anxiety, osteoporosis, high blood pressure, weight problems, chronic pain, arthritis and musculoskeletal injury.

How much is enough?
To achieve the effects mentioned above, the World Health Organization (WHO) guidelines on physical activity recommend that adults aged 18 to 64 years should do at least 150 minutes/week of moderate intensity* aerobic physical activity or 75 minutes/week of vigorous intensity** physical exercise or an equivalent combination of the two. This activity should be in bouts of at least 10 minutes in duration. For * and **, see below in 'How hard should I exercise?'.

WHO further recommends that additional health benefits can be achieved by increasing this training to 300 minutes/week of moderate intensity exercise or 150 minutes/week of vigorous exercise. To strengthen muscles, specific exercises for major muscle groups should be performed three days/week with 48 hours rest between sessions. For optimum health, performers should perform around 30 minutes/day of moderate to vigorous physical activity and also include some strengthening exercises around three times/week. See the ASPAH Cross Training guide for further information.

What's the right exercise for me?
Any activity that requires moderate or vigorous physical work will increase your general fitness. To help you keep motivated, choose an activity that you enjoy and that makes you feel good. Ideally, choose something convenient and affordable which is challenging enough to keep you interested. Walking, jogging, cycling, surfing, swimming, circuit class, yoga and Pilates are all good forms of exercise. You can also increase your exercise levels by parking further away from your destination, or by using the stairs rather than

the lift. Of course, common sense must prevail. Carrying a double bass up 15 flights of stairs is not advisable. For specific fitness, you may need professional advice on strengthening or releasing areas affected by your instrument's demands. If your playing position is asymmetrical, you may benefit from activities that balance out your work position. For example, swimming could help strengthen the postural and control muscles associated with long hours playing an orchestral instrument, thereby improving your body's ability to tolerate the demand. Of course, some forms of exercise are more hazardous than others. Listen to your body, and seek professional advice if you suspect an exercise might put your performance apparatus (i.e. your body) at risk.

How hard should I exercise? If you are usually inactive, it is advisable to start with a small amount and gradually increase intensity, frequency and duration of exercise over time. This will condition your body steadily and prevent unnecessary injury. Remember your goal is 30 minutes/day, including at least 10 minutes continuously!

* **Moderate intensity** physical activity raises your heart rate and makes you breathe more rapidly. You should be able to talk but not sing. Your pulse rate should be around 65% of your maximum.
* **Vigorous intensity physical activity** makes you breathe deeply and huff and puff, making it difficult to talk in full sentences between breaths. Your pulse rate should be around 80% of your maximum.

For strengthening exercises, choose a very light weight to begin with and work towards the goal of 3 sets of 8 repetitions for each muscle group you are targeting (try 3-5 muscle groups per session). Remember safety first and don't overdo it!

Are there any risks? Exercise is generally safe if you follow the guidelines discussed but it can exacerbate some conditions. It is a good idea to complete the Adult Pre-Exercise Screening Tool (see RESOURCES) or talk to your GP before you start. Other risks related to exercise include but are not limited to Delayed Onset Muscle Soreness (DOMS); musculoskeletal injury; overtraining syndrome; and exercise dependence.

Who should I ask for advice? If you are unsure, ask your GP to refer you to an exercise specialist such as an accredited exercise physiologist, physiotherapist or fitness instructor for guidance. Alternatively, go straight to a physiotherapist for sets of exercises designed specifically for your fitness level, body and needs. It is essential to rule out any underlying injuries or conditions that might cause you problems during your fitness training. If you are exercising at a gym ask a qualified personal trainer for help. Talk to them about your needs and stress that you want to improve your performance on stage. Mention that you need core strength, endurance and muscle tone but not necessarily muscle bulk.

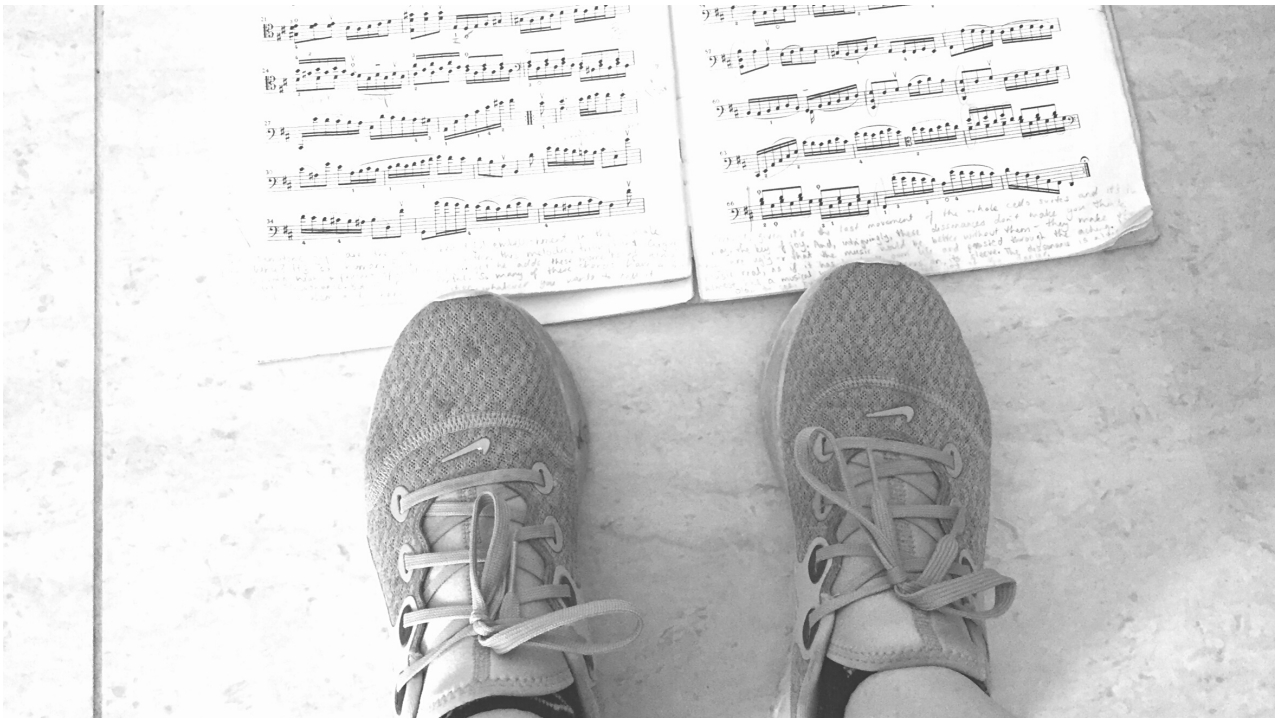


Image 'The Body Politic' (C) WAAPA 2019-

SUPPORT ASPAH SO WE CAN KEEP SUPPORTING THOSE IN THE PERFORMING ARTS INDUSTRY

We recognise that the health of the performing artist and the quality of their art are inextricably linked. At the same time we understand that the still culturally embedded perspective that artists may need to "suffer for their art" means that, often, wellbeing and artistry are treated as if they are unrelated. In its broadest sense, then, ASPAH's aim is to change this culture so that the health and wellbeing of performing artists is treated with the same importance as their craft.

ASPAH is a registered charity that recognises that all performing artists, young and old, amateur and professional, have unique needs that may not be met by standard models of healthcare. Therefore it promotes:

- Accessible high-quality holistic healthcare for all performing artists
- Education for health workers, teachers, performers and students to improve health and wellbeing
- Research across disciplines relevant to the health and wellbeing of performing artists
- A culture of lifelong preventative healthcare and safety practices for performing artists and performing arts institutions
- Multidisciplinary discourse among health professionals, educators and performing artists
- Increased community awareness of performing arts healthcare issues.

HEALTH FOR PERFORMING ARTISTS

Maximising your potential: For many young performing artists, that long-awaited first contract coincides with many other firsts: living away from home; managing cooking, laundry and household duties; balancing work, rest and social life; travel and touring; self-care for minor illnesses; managing and seeking appropriate help for ill-health and injuries; home-sickness; and maintaining self-confidence without the daily support of long-time friends and close family members. Temptations may be harder to resist when you are trying to fit in with other cast members. When things start to go off track, it is important to know how to look after yourself.
To ensure a long and fulfilling career, be active in maximising your potential and in seeking help before problems start to impact on your work, your health, or your personal happiness. Natural potential and hard work are not enough—you need to be resourceful to achieve and then maintain a rewarding career. Key components are your physical health and your mental health.

When discussing health, "mind" and "body" should not be considered separately. The physical and mental aspects of health are strongly interdependent, with the condition of one affecting the other. Poor mental health can lead to physical illness, and poor physical health can increase the risk of mental health conditions. Both mental and physical health can be influenced by lifestyle factors, including:
Exercise: Even low intensity exercise, or short bursts of physical activity, have a positive effect on the chemicals in your brain, making you feel more alert, energetic and positive. Exercise also increases resistance to injury and illness.
Nutrition: Your diet has a crucial effect on your physical and mental health, and your ability to meet the physical and mental challenges of a performer's life. Good nutrition can help prevent and manage many mental illnesses, including depression. Fast food or "comfort food" may be enticing after a heavy day of rehearsal or performance, but a healthy meal or snack is more likely to help your mental and physical capability the next day.
Sleep: Sufficient good quality sleep is essential for both mental and physical aspects of optimal performance.
Smoking: Mental and physical health can both be seriously damaged by the chemicals released into our brains and blood streams during smoking.

Physical health: Coping with the many pressures of life within the performing arts requires good physical health, but ensuring your diet, sleep, and exercise routines meet the specific demands of your work is challenging. You also need time for relaxation and social activities within the constraints of a performing life. However, all these are essential for optimal performance. Additional advice can be found in ASPAH guides such as Sleep for high performance, Fatigue and recovery, and Cross-training.

Mental health: Mental health describes your psychological and emotional wellbeing. If you can cope with normal day-to-day stresses; can work productively and realise your potential; and can generally contribute to the world around you; your mental health is good. Most of us have periods when our mental health is not as good as we would wish, but there are a range of health professionals and organisations who can help. You can start by visiting your General Practitioner (GP) who can plan appointments with a range of professionals in the public or the private system. In addition, public hospitals and the organisations listed on the next page offer appointments, telephone helplines and online chat facilities, with most free of charge. By actively caring for your mental health, you give yourself the best chance of fulfilling your potential and enjoying your life as a performing artist.

Wellbeing: Although definitions of wellbeing vary, the basic elements are generally accepted as mental, social and physical health. For more information on the mental and social aspects of wellbeing, see the ASPAH Guide "Psychological wellbeing in the performing arts".
If you are experiencing thoughts of self-harm or suicide, ring the Suicide Callback Service (1300 659 467) or Lifeline (13 11 14) without delay.

Sexual health: You can obtain 24-hour online support through Health Direct on 1800 022 222, and find clinics in your area through www.healthdirect.gov.au/sexual-health. Sites such as this also include information on contraception options, fertility, male and female sexual problems, and sexually transmitted infections (testing, advice and support). Several government sites also offer health apps. Most public hospitals and many general practitioners offer free sexual health support. Do not hesitate to seek help for any sexual health concerns. Early intervention can avoid unnecessary worry and avoid more serious problems.

LGBTI health: QLife (1800 184 527) is Australia's first national counselling and referral service for people who are lesbian, gay, bisexual, trans, and/or intersex (LGBTI). QLife provides anonymous and free LGBTI peer support and referral for people wanting to talk about sexuality, identity, gender, bodies, feelings or relationships. Webchat and telephone support are available between 3pm and midnight. Outside these hours, QLife recommends Lifeline (13 11 14) or Kids Helpline for under 25s (1800 55 1800).

Factors that can reduce your health, wellbeing and performance:
Substance abuse: Substance misuse and substance abuse include the harmful use of drugs (illicit, prescription or over-the-counter), alcohol, caffeine, nicotine, and volatile substances (e.g. petrol, glue, paint).
Addiction: Addiction refers to a physical and/or psychological need to use a substance, often caused by regular continued use. Mental, physical and lifestyle factors make some people more likely to become addicted to a substance.
Help for substance abuse and addiction
Lifeline (13 11 14) offers confidential phone, chat and online support for any aspect of substance abuse or addiction. If you fear you may have put your life in danger, call 000 immediately.

Services offering advice and support:
Ambulance, emergency or crisis:
T: 000 (be ready to say whether you need police, ambulance or fire services)
Beyond Blue – anxiety, depression, loneliness, suicide prevention, LGBTI: www.beyondblue.org.au/; T: 1300 22 4636
Butterfly Foundation – eating disorders: support@thebutterflyfoundation.org.au; T: 1800 33 4673
Kids Helpline – for under 25s, any time, any reason: https://kidshelpline.com.au/; T: 1800 55 1800
Lifeline – crisis support, suicide prevention: www.lifeline.org.au; T: 13 11 14

Suicide Callback Service - crisis support:
www.suicidecallbackservice.org.au/
T: 1300 659 467

Mental and physical health:
www.mentalhealth.org.uk/a-to-z/p/physical-health-and-mental-health
Mental health support: www.healthdirect.gov.au/community-mental-health-services; https://headspace.org.au/;
QLife – LGBTI support: https://qlife.org.au/; T: 1800 184 527

Sexual health - safe sex, STIs, testing, contraception:
www.healthdirect.gov.au/sexual-health

Substance abuse and addiction:
www.lifeline.org.au/get-help/topics/substance-abuse-and-addiction; T: 13 11 14

World Health Organisation - general information on health:
www.who.int/features/factfiles/mental_health/en/

HEALTHCARE INSURANCE OPTIONS

Medicare card: A Medicare card gives a range of medical services and prescriptions at a lower cost, with a built-in safety net. If your out-of-hospital medical costs exceed a certain amount, the safety net will subsidise a substantial percentage. The Medicare card also entitles you to free care as a public patient in a public hospital. If you do not already hold a Medicare card, check your eligibility and application process with the Medicare website (see later). Australian and New Zealand citizens and Australian permanent residents are eligible. If you are applying for permanent residency or holding certain types of visas, you may be eligible. International students need to apply for Overseas Student Health Cover (see "Useful websites").

Ambulance insurance: Ambulance and paramedic services can be essential in emergencies, but they are not covered by Medicare. Each state has different rules: some state governments cover the fees but others require you to pay a levy or to take out your own insurance. The Ambulance Cover website (see later) details the situation in each state. Emergencies can happen without warning and an ambulance trip can cost thousands of dollars, so it is important to ensure you are covered.

Private health insurance: Companies vary in cost and in the services they cover. Check which services are included in a specific policy before you buy private health insurance. You can compare policies on www.privatehealth.gov.au/.

Health Care card: A Health Care card is a concession card entitling you to cheaper medicines and some other discounts. You are eligible if you live in Australia and receive a payment from the Department of Human Services. You do not need to apply for a Health Care card, because the Department of Human Services will send one to you if you are eligible. If you are given a Health Care card, keep it up to date. It is your passport to many free or low-cost services.

Health plan with your employer: Get to know your rights and responsibilities under the health arrangements with your employer. There may be some limited fee support for clinical, medical, or therapist services. Make sure you know how to get access to Workers' Compensation.

Department of Veterans' Affairs (DVA): If you have served in Australia's defence force, and particularly if you have been injured as part of your service, you may be entitled to payments through the Department of Veterans' Affairs for a comprehensive range of Health Services not covered by any other program.

National Disability Insurance Scheme (NDIS): The purpose of this scheme is to cover the unique health and functional needs of Australians with a permanent disability. It involves an application and assessment process and may offer resources and finances to help with care needs. You can find more information at https://www.ndis.gov.au/

Aboriginal and Torres Strait Islander Health: ASPAH acknowledges Traditional Owners of country past and present; and recognises the contribution of Aboriginal and Torres Strait Islander people in our Performing Arts community. Many community organisations exist which provide support and resources which aim to empower Aboriginal and Torres Strait Islander people in maintaining and improving health. Federal programs such as Closing the Gap also aim to support these initiatives.

Workers' Compensation: If you are an employee (not self-employed or a contractor) and develop an illness or injury that is related to your work, you can make a claim on workers' compensation insurance. It pays for your wages, medical expenses and rehabilitation while you recover and gives you access to the private system. You are also entitled to sick leave if you are ill or injured.

Health insurance for international students
All student visa holders must have Overseas Student Health Cover (OSHC), which provides medical and hospital insurance and also pays limited benefits for prescriptions and ambulance services. Please note that students from Sweden, Norway, and Belgium may have special arrangements under their own national schemes. You must not arrive in Australia before your health insurance starts, and you will need OSHC coverage for the duration of your visa. Your education provider might organise your OSHC coverage for you. Otherwise you can select an approved OSHC provider and pay for the policy yourself.

Insurance for contractors or self-employed workers: You should carefully look at your ability to buy private health insurance and death/disability and income protection insurance. The regular premium costs may be challenging, but they can offer freedom and financial coverage to choose what to do in the case of a sudden illness or injury, or long-term illness or disability. Even if you are well and currently employed, circumstances change. Think carefully about what the future might hold for you and consider budgeting for insurance.

2nd Year Acting Production - ***'13'*** **(2015)**
Photography by Jon Green

OVERUSE AND CHRONIC INJURY CARE

What is an overuse injury? Training and performance intentionally load your muscles, ligaments, joints, tendons, and bones. If the tissues are loaded gradually and given sufficient time to recover, they can adapt by increasing their ability to cope with the load. If the length, frequency, or intensity of the load is too great or increases too rapidly for the tissues to adapt, overuse injuries, previously known as repetitive strain injuries, may occur. Injury often occurs following a break from training or performance because the rest period allows the muscles to lose strength and the tendons and bones to lose their load tolerance. Faulty technique can also be a contributing factor, as it can alter the way the load is distributed through the body. Muscle injuries are called strains, whereas ligament injuries are called sprains. Injured joints can become swollen. Tendons, in particular, hate sudden changes in load and can swell and become painful. In bone, sudden changes in load can result in injuries such as stress reactions and stress fractures. Unfortunately, injured tissues are more easily fatigued, less responsive, and less efficient, further reducing performance and increasing the risk of developing a more serious injury if training or performance continues. With any injury, the first step is to obtain a diagnosis and advice from a Health Professional (HP), such as a General Practitioner, Physiotherapist, or another accredited practitioner who understands the specific needs of performing artists. Search for someone in your area in the Members Directory tab on the ASPAH home page.

What is a chronic injury? While an acute injury occurs suddenly, a chronic injury develops gradually over time. It may persist considerably longer than usual, or it may intensify or recur frequently. Sometimes chronic injuries are ignored because the symptoms are mild and the pain is low-grade, but they can have an increasing harmful impact on your technique, your performance, and your confidence. Injuries that do not receive appropriate rest and adequate rehabilitation sometimes become chronic.

How can overuse and chronic injuries be managed? These conditions often require a multifaceted approach, so it is important to start by asking your HP for guidance (for questions to ask, see next section). Your management may include:

Relative rest – unloading the injured tissues to some extent is the essential first step towards recovery. Guidance from your HP is key to optimal recovery because careful load management is essential to resolving chronic injuries. Although some injuries need complete rest, most will recover with relative rest.

Risk factor analysis – recognising the risk factors that may have contributed towards the development and continuance of overuse and other chronic injuries is fundamental to full recovery.

Physical condition – a high level of general fitness, strength and overall health are important contributors towards optimal performance and recovery. Your rehabilitation will be improved by increasing your general fitness and practising movements that do not involve the injured body part. Remember that adequate sleep will assist your healing.

Technique analysis – ask your teacher whether technical habits are contributing factors.

Practice habits – examine the way you use your time, the balance between movement and recovery, your focus, your mental and physical response to challenges, etc.

Posture analysis – use a video or mirror to examine your postural habits during training and performance.

Treatment – your HP may recommend further treatment such as manual therapy, acupuncture or electrotherapy, and may suggest you make use of ergonomic and supportive aids.

Exercise – you may be prescribed a rehabilitation program of strengthening, cardiovascular exercise, proprioception and stretching

Movement and somatic therapies – practices such as yoga, Feldenkrais®, Alexander Technique, Ideokinesis, etc. can restore your coordination and movement patterns

Medication – ask your GP or Pharmacist before taking anti-inflammatory or analgesic drugs.

What should you ask your HP? Before you visit your Health Professional, make a list of what you want to know. This may include:

- Can you explain simply what the injury is, and what treatment I may need?
- How long before I can expect to return to practising, and to performing?
- How much practice, rehearsal or performance can I do now?
- Can I still do other activities (e.g. a hobby or playing sport)?
- How can I help my own recovery (e.g. walking, swimming, modified training, fitness training)?
- What should I avoid to make sure I recover as well as possible?

Managing pain associated with these injuries: To manage pain, it helps to understand what pain is and why it may become chronic. See the ASPAH Guide to Understanding Pain to familiarise yourself with the relationship between pain and tissue damage, and how pain can be managed. Your emotional state will directly affect the severity of your pain. Unfortunately, the existence of pain can also change the way you move the rest of your body. Many people with chronic pain become scared to move, and this can ultimately prolong or prevent recovery. Understanding painprocesses gives you the weapons to manage or even avoid this potentially debilitating situation.

Prevention is better than cure - be alert to early warning signs: Even better than good injury management is injury prevention. If you have any of the following warning signs while practising, rehearsing or performing you could be risking an overuse injury:

- Physical, mental or emotional fatigue
- Tingling
- Weakness
- Reduced coordination or clumsiness
- Stiffness and difficulty with normal daily activities

Early advice from your HP, careful attention to your loading, and an exercise program may prevent the development of an overuse injury, while a change in practice routine may alleviate stress on vulnerable areas.

PSYCHOLOGICAL WELLBEING

What is psychological wellbeing? You may feel that if you are feeling OK about yourself – that is you're not feeling any distress - that that's all there is to your psychological wellbeing. However, the World Health Organisation has identified a more positive and proactive set of definitions about what psychological wellbeing can be.

1. Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.
2. Mental health is defined as a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.

So, you can see that psychological wellbeing is something we can all contribute positively to both for ourselves and those we work or study with. The Centers for Disease Control and Prevention note that "[t]here is general agreement that at minimum, wellbeing includes the presence of positive emotions and moods (e.g., contentment, happiness), the absence of negative emotions (e.g., depression, anxiety), satisfaction with life, fulfilment and positive functioning. In simple terms, wellbeing can be described as judging life positively and feeling good". Equally important is the fact that our psychological wellbeing is never simply about us. We all need others, in a healthy interdependent way, which will support us as we support them in ensuring and promoting aspects of psychological wellness. Knowing what we can reasonably do for others, without overstepping our own necessary personal boundaries, is invaluable for our mutual health and wellbeing.

Psychological wellbeing at your training place or workplace: If you feel unsupported at your training place or workplace, you should be aware that all institutions (and workplaces) have a primary duty under the Australian Work Health and Safety (WHS) Act to manage risks associated with exposure to hazards arising that could result in physical or psychological harm. According to SafeWork Australia (2019), as a student, staff member or visitor of a training institution or employee or contractor of a workplace, you have a duty to take reasonable care of your own health and safety and not adversely affect other people's health and safety. Psychological hazards may be environmental (aspects that affect your comfort and performance), organisational (including task demands and role clarity, recognition, reward and justice) or individual (acknowledging each of us may respond differently to a common hazard). Work-related stress refers to the physical and psychological response of a person who perceives that the demand of their work/study or workplace/study environment exceeds their ability or resources to cope. Psychological wellbeing is both individual and social so training institutions or workplaces that tolerate environments in which bullying, harassment and discrimination occur are failing in their WHS accountability.

Nurturing your psychological wellbeing at work or while studying: As you discover and nurture your gifts and talents for expression you should experience respect and support from employers, work peers or teachers and fellow students so you can generate good, if not exceptional creative outcomes. Otherwise creative processes which often require vulnerability and risk-taking can adversely impact your thinking (cognitive), feeling (emotional) and connection to others (social). The following are some tips from Secrets of Performing Confidence (2013) by Evans & Evans for maintaining your cognitive, emotional and social health while working or training.

Cognitive health: Dealing with stress and burnout.

- diversify your creative expression – produce, direct, arrange, write
- say no if you feel 'used' and eliminate badly paid work or work that is constantly stressful, without respite
- do challenging work so you keep constructively stretching yourself

Emotional health:

- meditation, mindfulness and emotional self-regulation can offset the 'rollercoaster' highs and lows during rehearsal and performance phases

- if you or a colleague or fellow student experiences sustained periods of sadness, tearfulness, loss of energy and appetite for a period of two weeks or more, seek support from your GP to ascertain if you may need help with these and other indicators of depression

Social health:

- join with friends to try things out just for pleasure

Support for psychological wellbeing in life: For performing artists, while performing may be a passion, it is actually something that should not consume all of life – you need to eat, sleep, travel, stay close to family and friends, feel the mutual support of significant others, and enjoy the journey as much as any destinations along the way. Here are some tips for bringing the best you can to your life choices, your sense of love, safety and connection through the ups and downs of life.

Cognitive health:

- have at least one other passion – hobby, reading, sport, the more interactive the better
- keep variety in your lifestyle choices

Emotional health:

- laughter keeps you healthy
- lean into joy (really savour it) and practise gratitude on a daily basis

Social health:

- stay connected to family, friends and keep participating in regular face-to-face times of socialising

Crisis support: If you or someone else is in danger, ring the police or ambulance (000) as soon as possible.
Self-harm: www.suicidecallbackservice.org.au/; T: 1300 659 467
Support Act Wellbeing Helpline (24/7) https://supportact.org.au/wellbeinghelpline/ T: 1800 959 500

"For performing artists, while performing may be a passion, it is actually something that should not consume all of life – you need to eat, sleep, travel, stay close to family and friends, feel the mutual support of significant others, and enjoy the journey as much as any destinations along the way. Here are some tips for bringing the best you can to your life choices, your sense of love, safety and connection through the ups and downs of life."

2nd Year Music Theatre Production - ***'RENT'*** **(2016)**
Photography by Jon Green

SLEEP FOR HIGH PERFORMANCE

Defining sleep: Sleep is a naturally-occurring state of altered consciousness, with reduced activity of almost all voluntary muscles, reduced sensory awareness, and very little interaction with your surroundings. At the same time, your brain is active, passing through a repeating cycle of different brain states.

The purpose of sleep: Sleep is essential to survival. It affects almost every type of tissue and system in the body – from the brain, heart and lungs, to metabolism and prevention of Illness. During sleep, your psychological and physiological systems replenish and prepare for the next day's requirements. Psychological recovery restores mood, motivation, ability to learn, and ability to recall and consolidate memories . Physiological recovery enables your body to repair and strengthen muscle; maintain bone health; reduce inflammation; metabolise fats and glucose; and to support your cardiovascular, neuroendocrine and immune systems.

Sleep and the performing artist: Most people need 7-9 hours of sleep each night to support optimal general health and daily activity. However, many performing artists are likely to benefit from 10 hours of sleep each night when coping with the physical, emotional and cognitive demands of training, rehearsals or performances. When challenges are high, extended sleep can lead to better mood and higher quality performance while also contributing to recovery from psychological and physical injury.

If your night-time sleep has been disturbed or insufficient, a short (30-minute) daytime nap can assist your alertness as well as your mental and physical performance. To ensure you can sleep well at night, allow as much time as possible (ideally 8 hours) between waking from your nap and going to bed for the night.

For performers, it can seem impossible to schedule sufficient, regular sleep within constantly changing rehearsal and performance times; long-distance travel and jet-lag; unfamiliar environments and climates; and extra training time to maintain performance levels. Planning your sleep hours as each day's schedule is posted can help you keep rested and ready to perform.

Sleep disturbances: Difficulty in falling asleep and/or numerous waking periods can lead to insufficient amounts of each of the sleep stages and negative health and performance outcomes. For instance, REM (rapid eye movement) sleep, enhances recovery processes and leads to better wakefulness during the day. Since periods of REM sleep are more frequent and last longer in the last third of night-time sleep, performers benefit by scheduling extended sleep each night.

Insomnia: Insomnia is defined as persistent difficulty in falling or staying asleep, or nonrestorative sleep, associated with distress and/or with significant impairments in daytime function. To arrive at a comprehensive solution, sufferers are strongly advised to ask a doctor whether their insomnia may be linked to health problems such as sleep apnoea, depression or anxiety. A chronic lack of sleep increases the risk of high blood pressure, cardiovascular disease, diabetes, depression, and obesity. Short-term sleep deprivation, even as little as one night, reduces cognitive function (e.g., concentration and memory). Longer term sleep deprivation reduces muscle power, strength and speed, reaction times, cardiovascular performance and endurance. Inadequate sleep also has a negative impact on emotional stability, motivation and feelings of stress, while increasing the perception of pain and lowering performance levels in athletes and performing artists. However, research is now producing effective, low-cost remedies.

Solutions for sleep disturbances and insomnia: Cognitive Behaviour Therapy-Insomnia: (known as CBTI, CBTi, CBT-I or CBT-I). Extensive research shows that Cognitive Behaviour Therapy is the most effective treatment for sleep disturbances and insomnia – as effective as medication in the short term but with continued beneficial effects in the longer term. CBTI training may include stimulus control, sleep restriction, relaxation

training and biofeedback, cognitive control and/or individualised sleep hygiene. You can attend CBTI sessions individually or in a group. However, safe, high quality CBTI training is also delivered through the Internet. Many of these are PDF or MP3 based, most include sleep diaries, and some include personal email contact with a therapist.

Sleep Hygiene: Sleep hygiene has long been the traditional first-step treatment for sleep problems. Current research suggests that different elements of sleep hygiene are effective for different individuals, so the focus should be on finding which help improve your sleep. The general sleep hygiene guidelines for performers are:

1. Schedule enough sleep (usually 7-10 hours) to ensure you wake refreshed and ready for the day ahead
2. Maintain consistent times for going to sleep and waking up
3. Relax before going to bed (e.g. possibly with a warm bath or light reading).
4. Maintain the room temperature around 19-21°C
5. Make sure your bed is comfortable and your bed-clothes will not overheat you
6. Sleep in a dark, quiet environment.

Although a performer's life can present its own challenges to healthy sleep routines, you do have some control over the following additional factors that can interfere with good sleep.

1. Jetlag: Reset your body clock by spending time outside during daylight hours
2. Napping: Avoid napping during the 8 hours before going to bed
3. Stimulants: Avoid caffeine, nicotine and alcohol before going to bed
4. Light: Blue light is a component of daylight and many artificial light sources. Exposure to blue light signals your brain that it is daytime and you should be awake. Set TV and electronic device displays so they automatically switch to a blue light filter each evening. If your device does not have a blue light filter option such as "Night Shift", "Night Mode" or "Night Light", a variety of free apps for all devices are available online.
5. TV and electronic devices (including phones, computer games): Turn these off 30 minutes before going to bed
6. Mental readiness: Avoid thought-provoking conversations and exciting novels before bed-time.

Medication: In some cases, prescribed medication can offer short term assistance with sleep problems. However, research shows that neither short-term nor medium-term (up to 6 months) medication leads to long-term resolution of sleep problems. On the other hand, risks of continued medication include tolerance, dependence, residual daytime effects, cognitive and psychomotor impairment, withdrawal symptoms, and interaction with other substances. The role of over-the-counter medications is seen as limited.

If the above information does not help you reduce your insomnia, your doctor may be able to diagnose and treat any underlying health issues. Your mood, your physical condition and your performance will show the benefit.

"MANY PERFORMING ARTISTS ARE LIKELY TO BENEFIT FROM 10 HOURS OF SLEEP EACH NIGHT WHEN COPING WITH THE PHYSICAL, EMOTIONAL AND COGNITIVE DEMANDS OF TRAINING, REHEARSALS OR PERFORMANCES."

STAYING HEALTHY 'ON THE ROAD'

Many performing artists revel in the pleasures and benefits of travel, be it regional, national or international. You may travel alone, or as part of a small touring group or a large company; for performances, festivals, workshops, competitions, auditions or specific tuition opportunities. The experience of travel can have a profound effect on our understanding of the world and our place within it, and this personal growth is likely to be reflected in our development as performing artists. Although the rewards far outweigh any difficulties, travel can be challenging at times. If you travel internationally, you may be faced with jet lag, often combined with unfamiliar climates, languages, currencies, food and local customs. Regional touring presents its own challenges such as accessing healthy food at appropriate times, and feeling isolated from city life. These can be both exciting and exhausting. However, gaining insight into the challenges ahead can give you confidence to enjoy all travel has to offer.

Nutrition and hydration: Nutrition and hydration are two of the factors that can easily be neglected on tour, but they are two of the most important in maintaining your general health and supporting your immune system. During long road trips: Roadside food is notoriously unhealthy, and long hours of boredom and repeated temptations of junk food can quickly impact your health and fitness. Ideally you should pack your own meals in a cooler bag for long trips. Don't forget to pack plenty to drink; water flavoured with a splash of fruit juice or a squeeze of lemon is both simple and tasty. If you are travelling by car, do some research on healthy food stops on your way. During long flights: The most important advice here is to maintain your levels of hydration. The combination of very dry air and difficulty of access makes it hard to stay in front but try to drink whenever possible. The cabin staff will always provide you with water if you ask. Consider taking an empty drink bottle which you can fill once you

3rd Year Acting Production - ***'Summer of the 17th Doll'*** **(2012)**
Photography by Jon Green

"THE EXPERIENCE OF TRAVEL CAN HAVE A PROFOUND EFFECT ON OUR UNDERSTANDING OF THE WORLD AND OUR PLACE WITHIN IT, AND THIS PERSONAL GROWTH IS LIKELY TO BE REFLECTED IN OUR DEVELOPMENT AS PERFORMING ARTISTS. ALTHOUGH THE REWARDS FAR OUTWEIGH ANY DIFFICULTIES, TRAVEL CAN BE CHALLENGING AT TIMES."

are on the plane. Don't be tempted by alcohol. A cold beer might wet your mouth for the moment, but you will be more dehydrated overall. Be careful of caffeinated drinks too, as these have a mild diuretic effect and can impact on your sleep. If your airline offers food choices, vegetarian meals can be the healthier option. Don't be afraid to advise the airline in advance if you have any other food sensitivities, like gluten or FODMAPs.

When away from home - regional touring: Regional cities and towns may not offer healthy dining at times that suit performers, and the post-performance receptions are unlikely to satisfy your hunger or restore your energy. As soon as you arrive, head for a supermarket and stock up on fruit, packaged salads, prepared food, yoghurt, cheese, etc. If you know you will be staying in one place for a few days, aim to book accommodation with cooking facilities and take something from home – your favourite olive oil, garlic press or pepper grinder can be very comforting on tour.

When away from home - overseas touring: One of the joys of travel is sampling the different flavours, aromas and textures of unfamiliar food. Depending on the city, it can be hard to find restaurants serving healthy food at appropriate times for performers, so you may need to ask advice from local theatre employees, hotel reception and from anyone on tour with you who has been there before.

Traveller's diarrhoea: Travellers' diarrhoea is a term often applied to any type of diarrhoea in travellers, irrespective of cause. Classically, travellers' diarrhoea is an illness with non-bloody diarrhoea, without a fever, that starts within one or two weeks of arrival in a foreign country and lasts for 3-5 days. It can vary from a few loose bowel movements per day to an illness with profuse bloody diarrhoea and fever (dysentery). The microbes that cause travellers' diarrhoea are usually spread by contaminated water or food. It is seen in visitors to virtually all countries, with only Australia, New Zealand, northern Europe, Canada and the U.S.A. being regarded as low risk destinations. Treatment of travellers' diarrhoea is with fluid replacement. In most cases, oral replacement using watered down fruit juice (one part juice to four parts water) is sufficient. In severe cases, a visit to a doctor or hospital for intravenous fluids may be necessary.

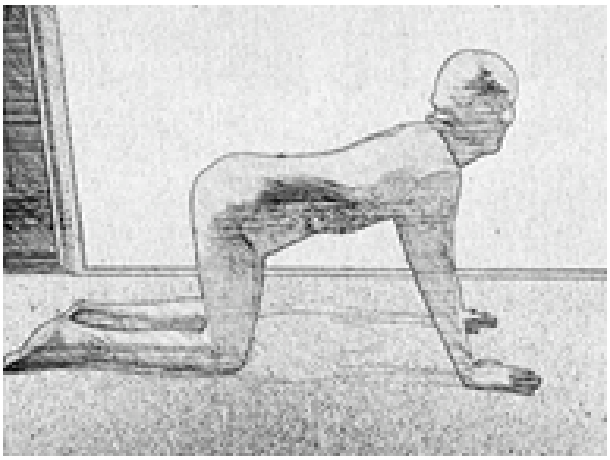
Travellers' diarrhoea can be prevented by practising simple food and water precautions and

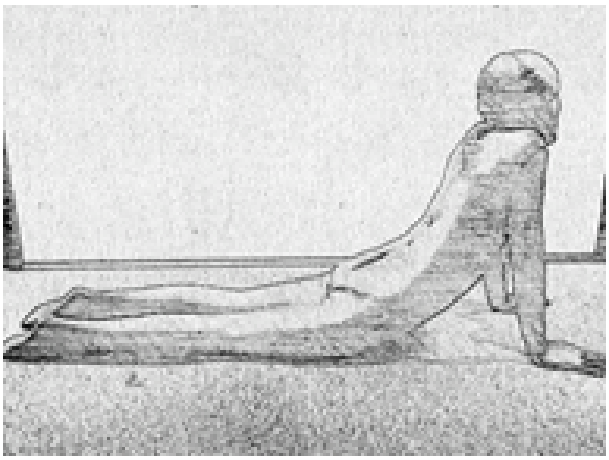
always washing your hands before eating. An easily remembered aphorism is 'boil it, cook it, peel it, open it yourself or forget it'. As a rough rule, it is advisable to avoid food unless it is served steaming hot; has come out of a packet or tin you have opened yourself; is a fruit or vegetable you have peeled yourself; or is food you have washed or cooked yourself. Preventive measures against other illnesses include oral cholera vaccine, some probiotics and hyperimmune bovine colostrum, but these do not replace good food hygiene practices.

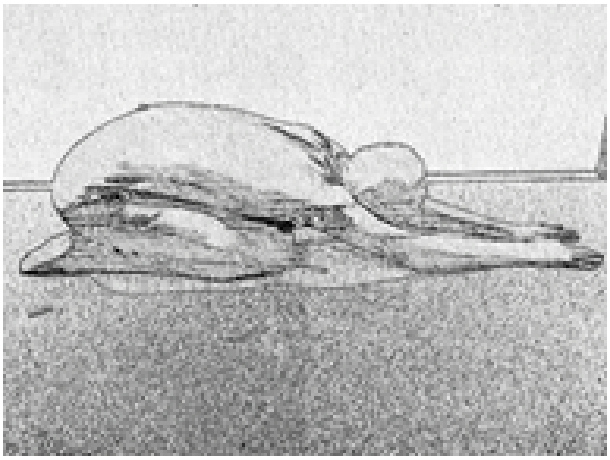
Physical selfcare: Long trips take a toll on the body, regardless of how you travel. Inadequate room to move freely for hours at a time can lead to stiffness, cramps and, at worst, deep vein thrombosis (DVT). For performers, it is essential to maintain your body in shape, ready for the rehearsals and performances ahead, so following the following tips may help.

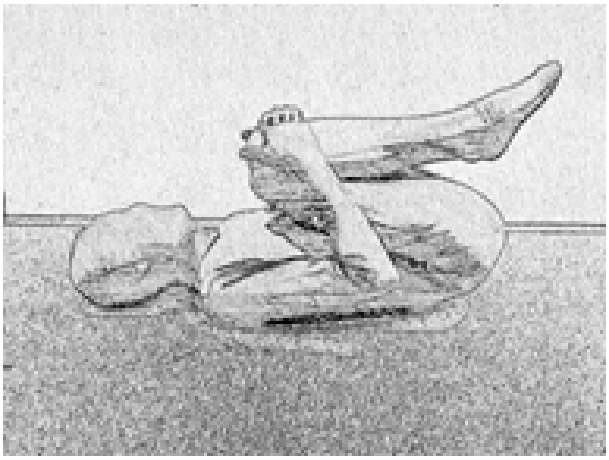
General mobility: Sitting motionless can put a lot of strain on some parts of your body, and stiff muscles and joints are much more prone to cramp and injury. Helpful strategies include using back and neck support cushions for long trips, standing and stretching every hour that you're awake, adjusting your posture and position for a few seconds every 5 minutes while seated, practising deep-breathing, and pushing down with your feet whenever you remember to promote circulation and prevent deep vein thrombosis (see below).

Stretching, self-massage: This collection includes some illustrations of some simple stretches on the following pages. These exercises promote circulation, improve coordination and relax the body for performing. Don't overdo it, though, and check with your healthcare professional first if you have a history of injury or surgeries and are unsure if these are right for you. We now know that prolonged stretching and overstretching (lengthening beyond the muscle's limit) reduce performance in the short term. Never overstretch, never bounce and never stretch into pain.Try to allow 5 -10 minutes each day, especially before practising or performing, to do some stretches. Repeat each stretch three times, breathing slowly and deeply throughout.









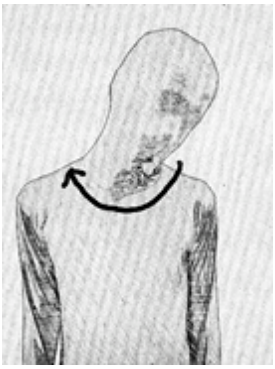










"TRY TO ALLOW 5 -10 MINUTES EACH DAY, ESPECIALLY BEFORE PRACTISING OR PERFORMING, TO DO SOME STRETCHES. REPEAT EACH STRETCH THREE TIMES, BREATHING SLOWLY AND DEEPLY THROUGHOUT."

always washing your hands before eating. An easily remembered aphorism is 'boil it, cook it, peel it, open it yourself or forget it'. As a rough rule, it is advisable to avoid food unless it is served steaming hot; has come out of a packet or tin you have opened yourself; is a fruit or vegetable you have peeled yourself; or is food you have washed or cooked yourself. Preventive measures against other illnesses include oral cholera vaccine, some probiotics and hyperimmune bovine colostrum, but these do not replace good food hygiene practices.

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Avoiding injury: It is understandable when you are in a new environment to want to do everything and try everything. While you may feel energised this does not suddenly make you superhuman. If you wouldn't normally go for a 10km walk in 35-degree heat or try to climb 20 flights of stairs for a view, then being on tour is not the time to start. On the other hand, increasing your fitness before you leave is a great idea, and will make you trip much easier and more enjoyable.

Avoiding infection: The single most important thing you can do to avoid infection is to wash your hands. Not just before eating, but whenever you can. Door knobs, stair and escalator railings, lift buttons, taxi cabins, toilets... there are so many public places that are potentially contaminated with respiratory and gastro viruses, all waiting to stick to your hands and then your face. Simply washing with soap and water markedly reduces this risk. Rubbing your hands with an antiseptic gel can also make a big difference, and a small travel bottle is easy to carry and apply.

What to wear: Knee-length travel stockings (available at most pharmacies) are well worth the investment. They reduce the risk of a blood clot on long flights, they prevent ankle swelling and they can be surprisingly comfortable. A number of layers of loose clothing is a simple way to maintain a comfortable body temperature, especially while sleeping. Inflatable travel pillows can support your neck while sleeping, and so prevent cramping, pain and stiffness. Earplugs and noise-cancelling earphones can be a great way to block out constant engine and people noise. Alternatively, various phone apps offer soundscapes designed to support sleep patterns.

Luggage: Unless you have a butler, your two priorities for luggage should be 'lightweight' and 'easy to manage'.
Cabin baggage: Soft hand luggage, such as a light nylon backpack, can be surprisingly roomy, comfortable to wear, and easy to squash into overhead luggage compartments. A lightweight backpack can also be invaluable during stopovers and at your destination. Small cabin-size cases with wheels are a great help when you are roaming airports between flights. However, many European train stations do not have escalators, so you will be grateful for a backpack as you go up and down interminable stairs. Do your research before taking a large case to a train station. One entrance may be better than another, or it may be easier to use a different station altogether.

Check-in luggage: a good quality suitcase is an important investment. It should be light, well-balanced, and have good quality wheels and handle. It is surprisingly easy to injure yourself lifting and manhandling heavy, awkward luggage. Don't forget to use hotel, airport and station luggage trolleys wherever possible. Lifting suitcases and instruments from carousels, overhead lockers, etc, is a frequent cause of injury. When moving large bags or instruments, plan your technique. Start by facing the load, place your feet apart, brace your abdominal muscles, and bend your knees. Keep the load close to your trunk and keep your abdominals braced as you lift and as you put it down. If you are not sure you can lift a heavy load safely, for instance, from a crowded carousel, wait until there is more room to move or ask a staff member for help.

Avoiding some of the hazards of touring:
General fitness while touring: Maintaining your general fitness is more important than ever while you are touring. If you don't have a simple daily exercise and fitness routine consider adopting one before you leave, even if it only involves 15 to 30 minutes a day, and maintaining it while travelling. This alone won't completely protect you from the hazards of travelling but it will help.
Jet lag: Jet lag is the result of a number of factors. Obviously, there is the need for the body's biological clock to reset to a new time zone, but being cooped up in the tight seating for hours, poor sleep, dry air, dehydration and the all too frequent hangover also play their part. Then there is the low oxygen level. The popping of your ears on take-off and landing bears testimony to the fact that for the duration of the flight the air pressure (and particularly the oxygen concentration) in the cabin is less than most people are used to. As a result, flying is physically and mentally stressful, and most people are pretty exhausted by the end of it. Fortunately, the rules for minimising jet lag are simple, and are based on common sense.

· Firstly, don't start from behind. Make sure that you are well rested before the flight.
· Try going to bed early/late for a few days before you leave to start your adaptation to the new time zone.
· Drink plenty of fluids and avoid alcohol.
- Change your watch time to your destination time as soon as you get on the plane and try to rest and wake according to your watch.
-- Stretch and move whenever possible. Chat with the cabin crew as you replenish your water bottle.
- When you arrive, try to get into the local sleep/wake cycle. Go out into the daylight as much as possible and avoid napping during the day if you possibly can.
- If you know from past experience that you are likely to be awake in the early hours at your destination, ask your GP about a prescription for melatonin; a naturally occurring hormone which your body can use to reset your body clock.

Alcohol: Alcohol can be part of socialising, a complement to any good meal and an almost traditional way to wind down after a performance. However, it can also increase the risk of injury and of making poor choices, risks that are amplified when you are in unfamiliar places surrounded by unfamiliar people, or are offered drinks with a higher alcohol content than you are used to in Australia. More than this, the effects of alcohol are amplified by fatigue, sleep deprivation, dehydration and hunger, which are all more likely when touring. So remember; the maximum healthy daily intake is two standard drinks a day. Stick to that while travelling.
Deep vein thrombosis (DVT): DVT is now a well-recognised risk factor of long-haul flights. Some studies have suggested that the rate of asymptomatic DVT may be as high as 10%. Contrary to common belief, aspirin is a very poor preventer of DVT. Much more useful recommendations are:

· Keep moving. Wiggle your toes, tap your feet, stretch your ankles, calves and knees and do it frequently and often.
· Keep well hydrated. Concentrated blood is viscous and more likely to clot, so drink, drink drink…
· …But not alcohol. The pharmacological action of alcohol as a diuretic means it worsens dehydration, so more than one or two drinks is an invitation to a DVT.
· Avoid sedatives. It is tempting to try and sleep through a long trip but you are safer with multiple naps followed by walking and stretching every couple of hours.

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- Consider compression stockings. These markedly reduce the risk of DVT in general. In particular, those at moderately increased risk, such as smokers, women on the pill, women who are pregnant, and anyone over the age of 60, should be using such stockings if possible. Those who have had a previous DVT, anyone traveling with a significant leg injury and anyone with cancer should ask their own doctor about stronger pre-flight prophylactic clot-busting medication.

Healthcare access while touring: Travelling means you are away from your usual network of healthcare resources. Even if you are fit and healthy, you need to plan for the possibility of illness and the fact that you won't be able to drop into your usual healthcare professional.
In Australia: In Australia we are lucky to be covered by two levels of universal health cover, either through the public hospital system or through Medicare. This means that there should be no financial barriers to care if you need it if you are an Australian Citizen or otherwise eligible for publicly funded healthcare. Please see the 'Australia's Healthcare System' guide. Access in rural and remote areas can still be a problem due to workforce shortages, so be prepared. If you plan to travel around the country, ask your doctor for a full health summary outlining your medical history, medications and any allergies. This will make it as easy as possible for a new health professional to meet your needs. Make sure you have adequate supplies of any medications, and carry repeat prescriptions if necessary. Also, make sure you are up to date with recommended vaccinations, including influenza.
Overseas: While the advice about carrying a full health summary, taking adequate medications and being fully immunised while travelling overseas still applies there are other precautions you should take:
· Make sure you are covered by adequate travel insurance, including full hospital and evacuation cover.
· Go online and make sure you have contact details for English-speaking medical services in or near the places you are visiting.
· Make sure you are vaccinated for any indigenous diseases such as typhoid, and avoid the risk of insect-borne disease like malaria by keeping yourself protected if traveling in areas at risk. A good quality insect repellent and staying indoors at dawn and dusk in risky areas can save you weeks of illness.
- If you wear glasses, carry a copy of your current prescription. This makes it easy to get new glasses overseas, and you will avoid paying for unnecessary eye testing.

Travelling with medicines: If you take regular medicines you need to plan around this aspect of travelling. However, some simple rules can save you a lot of trouble. Keep your medication close Always pack all your medication in your hand luggage so you have it on hand regardless of flight delays, unexpected stopovers, airlines losing your luggage, or over-zealous customs officials.
Documentation: Carry a letter from your doctor detailing that your medicines are for your own personal use, what they are, and what conditions you are taking them for. This documentation can be very useful even when touring within Australia – it can save a lot of time if you lose your medication or need to see a doctor on the road.
Leave the medicine in its original packaging so it is clearly labelled with your own name and dosage instructions. This can save you long and frustrating interviews with customs officials. Do not try to save luggage space by combining medications into one container.
Injections: If you have to inject your medication (e.g.: insulin for diabetes, or adrenalin for severe allergy) it is best to carry pre-filled injection pens. If you need to carry needles and syringes with you on a plane, inform the airline before you travel and get a letter from your doctor explaining why you need to carry them. Carry a few copies of the letter for various officials and flight attendants, just in case.

Over the counter medications: It is important to be aware that some medicines that are available over the counter (OTC) in Australia may not be available overseas, or if they are available they may be packaged under a different brand name. For these reasons it is wise to have a letter from your doctor even if travelling with OTC medications. If you do consider buying OTC medications overseas, carefully double check on - the active ingredients – they can vary in both type and strength.

Some suggestions for a simple first aid kit for travellers:

Medicines: to use if you get ill. The list below is over the counter unless specified. Leave everything in its original packaging when travelling:

- Loperamide, an antidiarrhoea medicine
- Nizatidine, a stomach acid suppressor for heartburn
- An antihistamine
- Prochlorperazine, a motion sickness medicine (prescription only)
- A nasal decongestant spray for very short-term use if you get a cold
- Paracetamol for pain and fever
- Coloxyl, a mild laxative
- 1% hydrocortisone cream for itches, rashes and bites
- Antibacterial and antifungal ointments for minor skin infections
- Antihistamine eye drops for eye irritation and allergy
- Supplies for treating small injuries (dressings like Band-Aids and Steristrips, cotton tips for applying ointments, an elasticated bandage for minor sprains and bruises, a pair of tweezers for small splinters)

Supplies to prevent illness or injury:

- Hand sanitizer (containing at least 60% alcohol) or antibacterial hand wipes
- Insect repellent (with an active ingredient like DEET or picaridin)
- Sunscreen (SPF 50 or higher), sunglasses and hat
- Condoms
- Earplugs to help you sleep

ASPAH WISHES YOU HAPPY, HEALTHY TRAVELLING!

UNDERSTANDING PAIN

What is pain? Pain is an unpleasant experience that occurs when your brain concludes, rightly or wrongly, that your body is in danger. Specialised nerves (nociceptors) throughout your body send signals to your brain when they sense any changes that might possibly be dangerous. Your brain evaluates the signals by drawing on evidence from many areas including your thoughts, vision, emotions, and memories. If it concludes that your body needs protecting, your brain produces pain and also stimulates other protective mechanisms. Although you seem to feel pain in the injured area, the pain is produced within your brain.

Does having pain mean I have an injury? No, you can have an injury without experiencing pain, and you can feel pain with little or no tissue damage. Your brain can increase or decrease your pain depending on your perception of danger. For instance, a lip injury would probably be more painful for a trumpeter than for a dancer, because healthy lips are crucial to a trumpeter's performance. You may feel more pain if a scan shows something unusual, even though the "unusual" condition may be completely harmless – the scanned image convinces your brain that you are in danger. Fatigue and stress can also increase your sensation of pain. You can even feel pain in body parts that no longer exist, for instance in an amputated limb. Although pain is an unreliable indicator of actual injury, *it is essential to understand that each person's pain is a real and personal experience.*

Why should I learn about pain? Understanding pain is a type of therapy – the more you understand, the less pain you are likely to feel and the more you can do to relieve it. Pain research has made enormous advances over the past decade and current information can help you resist outdated beliefs and unhelpful suggestions. Understanding that pain is the result of complex processes including, but far beyond tissue damage allows you to decide how you can change your experience. Improving your fitness, strengthening any weak body areas, eating wisely, sleeping adequately and exercising can all help reduce your brain's alertness to danger. Your brain changes rapidly when you are injured, but it keeps responding to changing circumstances throughout your life. Your brain is "plastic" – you can mould it by what you know, what you believe and what you do.

If pain is an unreliable indicator of danger, what use is it? The brain generates pain to make us react immediately, possibly saving us from serious harm. A quick reaction is helpful when stepping on a tack, even if you discover later that the "tack" was something harmless. Pain prompts you to protect the area, and to investigate whether harm has actually occurred. Pain encourages you to seek professional advice, to be active in rehabilitating any injury, and to make any necessary changes to your technique or to your health and fitness. Pain is essential for health. There is a rare condition where people experience no pain, but without the protection of pain, these people constantly injure themselves and may even die. Value pain as a signal, but realise that you have power over it.

What should I do about pain? Luckily, your brain's evaluation process is ongoing, so any pain experience can be increased or decreased according to the evidence of your own eyes, your own expectations, the expectations of those around you, your previous experiences, your beliefs about the potential impact of the injury, your stress levels, and your general feeling of security. Since your brain produces pain because it sees more evidence of danger than of safety, you can kick-start your brain's plasticity (its ability to change) by strengthening the evidence of safety and reducing your fear of danger. As a performer you are likely to focus on how much pain you have, how much you can't do, and how much it will harm your career. By contrast, your pain can be reduced by focusing on positive aspects.

Pain and the healing process

1. Initial pain, redness and swelling are all signs that your protective systems are actively starting the healing process
2. Although they are less obvious, other systems such as your immune, respiratory, endocrine, autonomic, cognitive, emotional and motor systems are also facilitating your recovery
3. Your brain's first priority is to keep you healthy, and your body has an inbuilt capacity to repair damage
4. Every injury is a learning opportunity – use your recovery time to prepare your body against future injury.

How do I know which advice to trust? Given the rapid increase in pain research over the last few years, it is not surprising that many people are unaware of new knowledge and still give misleading information. Traditional advice such as "no pain, no gain", that you should "push through pain", or that enduring pain is "a sign of dedication" and "the price you pay for success", is not only incorrect, it can lead to serious injury and have a disastrous impact on your career. It is wise to check with the resources listed at the end of this guide if you suspect you may be receiving outdated advice. For your own protection, equip yourself with sound, up-to-date knowledge based on current research. The resources listed below may help you.

What is chronic pain? If pain persists long after injured tissue has healed, it can be labelled "chronic pain". It may be that the tissue is being repeatedly re-injured (see the ASPAH Guide to Overuse and Chronic Injury Care). It is possible that poor or inadequate rehabilitation has not prepared the healed tissue to resume its normal workload. However, persisting pain may also mean that the brain has "learnt" to continue producing pain despite the absence of danger signals. Luckily, the brain's plasticity (capacity for change) allows it to "unlearn" the faulty response and restore its normal protective function.

By the time pain has become chronic, it is likely to be multidimensional, with physical, emotional and medical aspects. Your emotional state and stress hormones can sensitise nerve tissue and heighten the pain experience, whereas learning to effectively manage stress and restore emotional balance will improve emotional wellbeing and may reduce chronic pain. Poor sleep stresses your body and thus can aggravate pain. Lifestyle choices can also make a difference – poor diet, excessive alcohol use, too little sleep and smoking can all contribute to sensitising your nervous system.

Modifying the above factors can really help with reducing chronic pain. Therefore, you may benefit by asking your doctor to arrange coordinated help from specialists in the relevant areas. This is particularly important for people who have previously been prescribed strong pain killers.

REMEMBER THAT YOUR BRAIN'S PLASTICITY MEANS YOU CAN "UNLEARN" PAIN

WHAT HEALTH PROFESSIONALS DO

Choosing a health practitioner: At this stage, Australia does not have a formal category of health practitioners specializing in the performing arts. However, there are practitioners within many of the disciplines listed below who have expertise in the specific health needs of performing artists. Check below to find which type of practitioner suits your needs, and then search ASPAH's online Directory of Members for a practitioner in your area.

Acupuncturists: Acupuncture is the insertion of very thin needles through your skin to improve overall wellness and stress management.
Alexander Technique trainers: A practical method for improving ease and freedom of movement, balance, support and coordination.
Association for Body Mapping Education (formerly Andover Educators): is a organization of musicians teaching intentional movement to enhance expressiveness while preventing and reducing performance-related injuries. While an Alexander lesson might contain similar information, an Andover Educator® would do no hands-on teaching, relying on changes in the student's body map.
Chinese Medicine practitioners: Chinese Medicine aims to maintain physical, emotional, and spiritual balance in order to prevent and treat disease. Modalities include acupuncture, moxibustion, herbal medicine, Chinese massage, tai chi, qi gong, nutrition, and lifestyle modification.
Chiropractors: Chiropractic is the diagnosis, management and prevention of mechanical disorders of the musculoskeletal system, using hands-on spinal manipulation and other treatments.
Counsellors: Counsellors generally focus on short-term solution-focussed strategies for dealing with specific life events such as bereavement, relationship problems, and domestic violence.
Dietitians: Dietitians assess, diagnose and treat nutritional problems according to the client's health and individual needs.

Ear, nose and throat (ENT) specialists: An ENT specialist is a doctor who specialises in diseases that affect the ears, nose and throat, as well as the head and neck. They treat a wide range of problems including deafness, loss of balance, allergies, speech and voice, tumours and infections.
Ergonomists and Human Factors Specialists: analyse, assess and design solutions for the physical and cognitive interactions between people, tasks, and their environment. The goal is to make these tasks and environments compatible with people's needs, abilities and limitations, while optimising human performance, providing safety and preventing injury.
Exercise physiologists: Exercise physiologists offer health education, exercise counselling and physical rehabilitation. They prescribe tailored exercise programs, promote leisure-time and incidental activity, and advise on reducing sedentary behaviours.
Feldenkrais teachers: A system of gentle movements that promote flexibility, coordination, and self-awareness.
Fitness or personal trainers/gym instructors: These instructors help the general public to increase fitness and improve aesthetics by losing weight and toning up.
General practitioners (GPs): GPs (also known as doctors or physicians) diagnose and treat physical and mental illness, disease and injury. If necessary, they can refer you for tests or to see other health professionals. A GP referral ensures that specialist visits attract a Medicare rebate. GPs can also refer you to services that may cover some of the costs of seeing a large range of allied health professionals.
Medical specialists: Specialists are doctors who have completed extensive additional training in a specific area. Some specialise as surgeons and some as non-surgical physicians. There are specialist physicians and surgeons in most areas of medicine.
Occupational Therapists: Occupational Therapists work with people to enable them to engage and participate in their occupations. They work closely with GPs and other health clinicians.

Treatment approaches may involve treatment, enhancing skills, adjusting of your occupational task and environment, or prescribing assistive technology.

Osteopaths: Osteopaths focus on how the skeleton, joints, muscles, nerves, circulation, connective tissue and internal organs function as a holistic unit. Treatment may include manual therapy (mobilisation, stretching, massage and manipulation for ligaments and joints), exercise therapy, lifestyle advice and patient education.

Physiotherapists: Physiotherapists assess, diagnose, treat, and prevent a wide range of health conditions and movement disorders. Their expertise covers injury prevention, acute care, rehabilitation, maintenance of functional mobility,chronic disease management, patient education and occupational health. They work closely with GPs and other health clinicians to plan and manage treatment.

Pilates instructors: Exercises using special apparatus, designed to improve physical strength, flexibility, posture, and mental awareness.

Podiatrists: Podiatrists (formerly known as chiropodists) prevent, diagnose and treat a wide range of foot and ankle problems. Treatment may include specific exercises, custom-made shoe inserts, or medications for skin conditions.

Psychiatrists: Psychiatrists are medical doctors who have additional specialist training in diagnosing and treating a large range of mental health problems. Since psychiatrists are medical doctors, they can prescribe medication. Your GP can advise you and refer you to the type of psychiatrist or psychologist best suited to your needs.

Psychologists: Psychologists are trained in how people think, feel, behave and learn. Some psychologists assess and diagnose mental illnesses and psychological problems, while others help people to recover from or self-manage other problems that can affect your performance, health and wellbeing. Your GP can refer you to the type of psychologist that suits your needs.

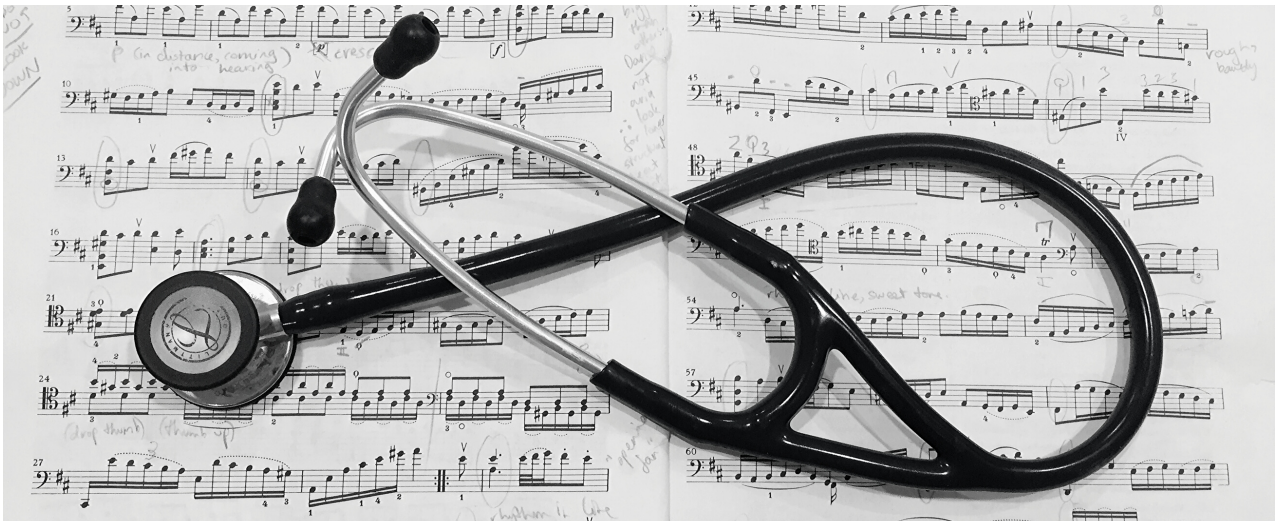
Psychotherapists: Psychotherapists focus on assisting their clients to explore and understand aspects of themselves and their experience. They help their clients understand how past experiences influence and shape their current responses to life events.

Speech pathologists: Speech pathologists (formerly called speech therapists) diagnose and treat communication disorders, including difficulties with speaking, listening, understanding language, reading, writing, social skills, stuttering, and using voice.

Sports physicians: Sports physicians are doctors who have completed additional specialist training in sport and exercise medicine and have been awarded the title of Fellows of the Australasian College of Sports Physicians (FACSEP). Sportspeople, athletes and dancers often seek the help of sports physicians but they are expert in treating medical and health issues for all active people.

Sports doctors: Sports doctors, or sports medicine practitioners, are doctors with qualifications and/or an interest in sports medicine. They are not members of the Australasian College of Sports Physicians but may be affiliated with Sports Medicine Australia.

Strength and conditioning coaches: A strength and conditioning coach works with fit, healthy, athletic people to improve performance.



RESOURCES

Fitness: Adult Pre-Exercise Screening Tool: https://fitness.org.au/articles/policies-guidelines/adult-pre-exercise-screening-system/4/18/20

Fitness: American College of Sports Medicine physical activity guidelines: https://health.gov/paguidelines/second-edition/

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Fitness: American College of Sports Medicine physical activity guidelines: https://health.gov/paguidelines/second-edition/

Fitness: World Health Organization (WHO): www.who.int/dietphysicalactivity/factsheet_adults

Fitness: Youth Strength Training: www.acsm.org/docs/default-source/files-for-resource-library/smb-youth-strength-training.pdf?sfvrsn=85a44429_2

Insurance: Aboriginal and Torres Strait Islanders: www.healthinfonet.ecu.edu.au/

Insurance: Ambulance cover - www.comparethemarket.com.au/health-insurance/ambulance-cover/

Insurance: Fair Work Ombudsman (leave, sick pay): www.fairwork.gov.au/leave

Insurance: Fair Work Ombudsman for visa holders: www.fairwork.gov.au/find-help-for/visa-holders-and-migrants

Insurance: Health Care Card: www.humanservices.gov.au/individuals/services/centrelink/health-care-card

Insurance: Medicare card: www.humanservices.gov.au/individuals/medicare

Insurance: Medicare card forvisa-holders: www.humanservices.gov.au/individuals/medicare.

Insurance: National Disability Insurance Scheme: https://www.ndis.gov.au/people-disability

Insurance: Overseas Student Health Cover: www.homeaffairs.gov.au/trav/stud/more/health-insurance-for-students

Insurance: Repatriation Benefits Scheme: www.dva.gov.au

Insurance: Workers' Compensation: www.fairwork.gov.au/leave/workers-compensation

Pain: Explain Pain 2nd Edition: Dr David S. Butler & Prof G. Lorimer Moseley. Noigroup Publications (2013) ISBN: 978-0-9873426-6-9

Pain: Explain Pain: Supercharged. Prof G. Lorimer Moseley & Dr David S.Butler. Noigroup Publications (2017) ISBN:978-0-6480227-0-1

Pain: The Explain Pain Handbook: Protectometer. Prof G. Lorimer Moseley & Dr David S. Butler. Noigroup Publications (2015) ISBN: 978-0-9750910-9-8

Pain: The Sensitive Nervous System. Dr David S. Butler. Noigroup Publications (2000) ISBN:0-9750910-2-6

Sleep: Brain basics: Understanding sleep. https://www.ninds.nih.gov/Disorders/Patient-Caregiver-Education/Understanding-Sleep

Sleep: What is sleep and why do we do it? https://www.sleepassociation.org/about-sleep/

REFERENCES

Ackermann B, Adams R, Marshall E. (2002). Strength or endurance training for undergraduate music majors at a university? Medical Problems of Performing Artists, 17(1), 33-41.

Angioi M, Metsios, G, Twitchett, E, Kouteadkis, E, Wyon, M. (2009). Effects of supplemental training on fitness and aesthetic competence parameters in contemporary dance: a randomised controlled trial. Medical Problems of Performing Artists, 27(1), 3-8.

Bird HA. (2009). The performing artist as an elite athlete. Rheumatology (Oxford), 48(12), 1469-70.

Brown A, Wells, T, Schade, M, Smith, D, Fehling, P. (2007). Effects of plyometric training versus traditional weight training on strength, power, and aesthetic jumping ability in female collegiate dancers. Journal of Dance Medicine and Science, 11, 38-44.

Dowse RA, McGuigan MR, Harrison C. (2019). Effects of a resistance training intervention on strength, power, and performance in adolescent dancers. Journal of Strength and Conditioning Research 2017, epub ahead of print.

Dubetz, C. Cripps, A. (2017). Sleep deprivation affecting athletic performance. Journal of Sports Medicine and Allied Health Sciences: Official Journal of the Ohio Athletic Trainers Association, 3(1), 11.

Emery CA, Roy TO, Whittaker JL, Nettel-Aguirre A, van Mechelen W. (2015). Neuromuscular training injury prevention strategies in youth sport: a systematic review and meta-analysis. British Journal of Sports Medicine, 49(13), 865-70.

Fueggle, S., Bucks, R., & Fox, A. (2017). The relationship between sleep and performance monitoring in young adults: an event-related potential (ERP) study. Sleep Medicine, 40(s1), E101–E101.

Garber CE,Blissmer B, Deschenes MR, Franklin BA, Lamonte MJ, Lee IM, Nieman DC, Swain DP. (2011). American College of Sports Medicine position stand. Quantity and quality of exercise for developing and maintaining cardiorespiratory, musculoskeletal, and neuromotor fitness in apparently healthy adults: guidance for prescribing exercise. Medicine and Science in Sports and Exercise, 43(7), 1334-59.

Halson, S. (2008). Nutrition, sleep and recovery. European Journal of Sport Science, 8(2), 119–26.

Hubscher M, Zech A, Pfeifer K, Hansel, F, Vogt, L, Banzer, W. (2010). Neuromuscular training for sports injury prevention: a systematic review. Medicine and Science in Sports and Exercise,42(3), 413-21.

Irvine S, Redding E, Rafferty S. (2011). International Association of Dance Medicine and Science. Dance fitness. https://www.iadms.org/general/custom.asp?page=303. Accessed 2nd February 2019.

Kenny SJ, Whittaker JL, Emery CA. (2016). Risk factors for musculoskeletal injury in preprofessional dancers: a systematic review. British Journal of Sports Medicine, 50(16), 997-1003.

Koutedakis Y, Hukam H, Metsios G, Nevill A, Giakas G, Jamurtas A, Myszkewycz L. (2007). The effects of three months of aerobic and strength training on selected performance-and-fitness-related parameters in modern dance students. Journal of Strength and Conditioning Research, 21(3), 808-12.

Lauersen JB, Andersen TE, Andersen LB. (2018). Strength training as superior, dose-dependent and safe prevention of acute and overuse sports injuries: a systematic review,qualitative analysis and meta-analysis. British Journal of Sports Medicine, 52(24), 1557-63.

REFERENCES

Lauersen JB, Bertelsen DM, Andersen LB. (2014). The effectiveness of exercise interventions to prevent sports injuries: a systematic review and meta-analysis of randomised controlled trials. British Journal of Sports Medicine, 48(11), 871-77.

Marshall, GJ, Turner,AN. (2016). The importance of sleep for athletic performance. Strength and Conditioning Journal, 38(1),61-7.

Simmons, AL, Duke, RA. (2006). Effects of sleep on performance of a keyboard melody. Journal of Research in Music Education, 54(3), 257-69.

Stalder AM, Noble JB, Wilkinson GJ. (1990). The effects of supplemental weight training for ballet dancers. Journal of Strength and Conditioning Research, 4(3), 95-102.

Sugimoto D,Myer GD, Barber Foss KD, Pepin, MJ, Micheli, LJ, Hewitt, TE. (2016). Critical components of neuromuscular training to reduce ACL injury risk in female athletes: meta-regression analysis. BritishJournal of Sports Medicine, 50(20), 1259-66.

Sunderland, M. A. (2001). Stages of sleep. In Neuroscience, 2nd ed. https://www.ncbi.nlm.nih.gov/books/NBK10996/

Vassallo A,Hiller C, Pappas E, Stamatakis, E. (2017). Safe dance report IV: Investigatinginjuries in Australia's professional dancers. Canberra: Australian DanceCouncil – Ausdance Inc.

Vassallo AJ, Hiller C, Stamatakis E, Pappas, E. (2017). Epidemiology of dance-related injuries presenting to emergency departments in the United States, 2000-2013. Medical Problems of Performing Artists, 32(3),170-75.

Wyon M. (2010). Preparing to perform: periodization and dance. Journal of Dance Medicine and Science, 14(2), 67-72.

Wyon, M. A., & Redding, E. (2005). Physiological monitoring of cardiorespiratory adaptations during rehearsal and performance of contemporary dance. Journal of Strength and Conditioning Research, 19(3), 611-14.

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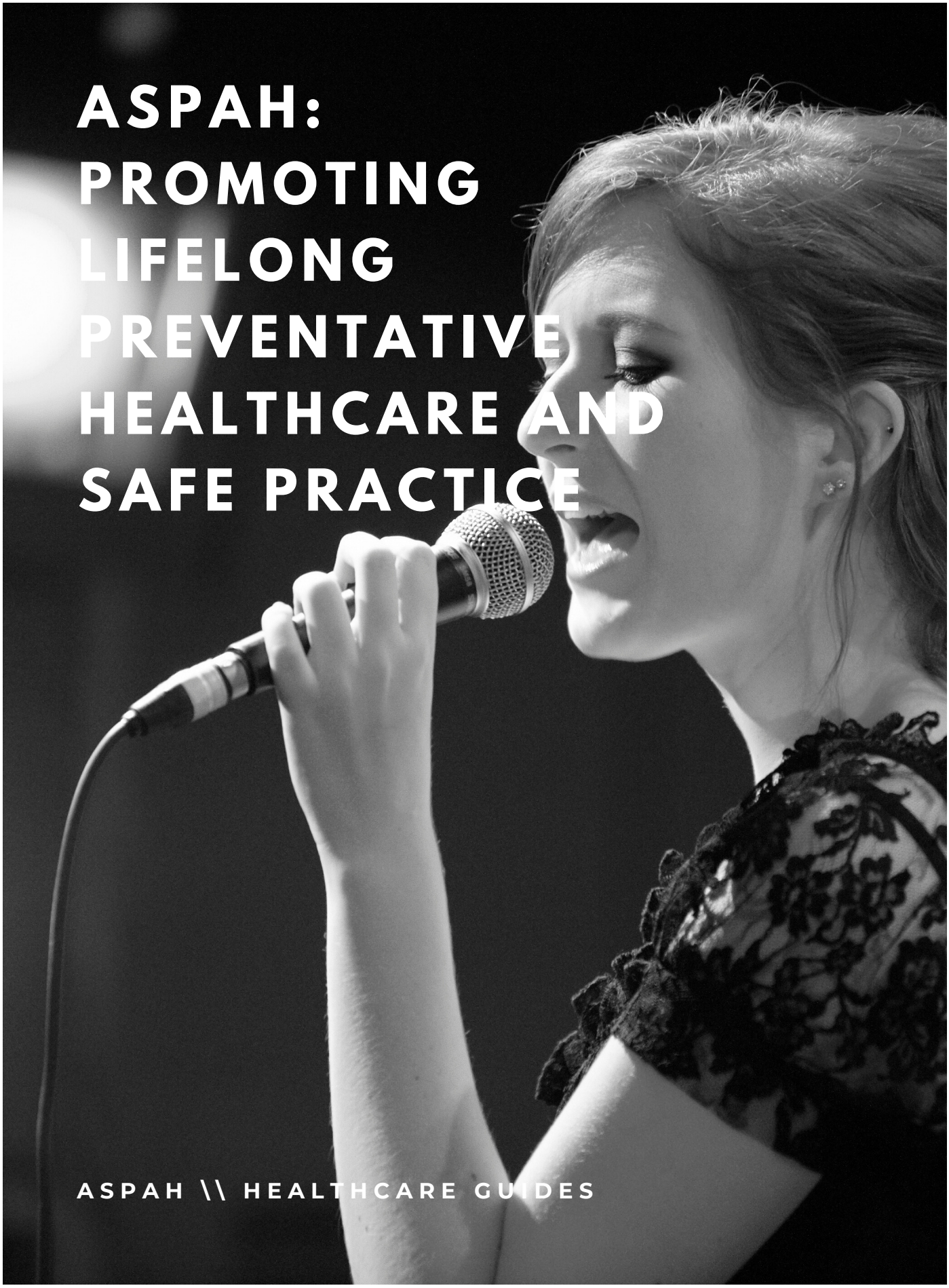

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