

Queensland Ballet
Academy

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**Queensland Ballet Academy
Disordered Eating Prevention and Management Policy
and Best Practice Principles**

Version 2.0

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Preface

Dance is a highly aesthetic art form, with an appropriate physique required for professional artists to perform safely and successfully, in line with professional industry expectations. Queensland Ballet Academy (QB Academy) is committed to positively nurturing dancers in a way that supports adolescent growth, development, and a broader positive body image. To meet this objective, it is important that each student's nutritional needs are well-managed in order to optimise both their physique and performance. QB Academy respects that a student's physique is likely to change as they mature into young adults and dance artists and is committed to facilitating a healthy approach for each dancer during this time.

In further support of this policy, QB Academy acknowledges that dancers with inadequate nutrition have higher rates of injury and micronutrient deficiencies which may negatively affect growth, development and an individual's response to training. It is recognised that dancers are up to three times more likely to develop eating disorders and associated health conditions when compared to the general population.

Due to this elevated risk, QB Academy developed this policy in collaboration with an Accredited Sports Dietitian, which has recently been reviewed to align with the Australian Institute of Sport (AIS) published guideline for sporting organisations, and further reviewed by an Advanced Sports Dietitian in order to develop best practice management for the health and wellbeing of our dancers of the future.

QB Academy:

- seeks to provide a safe training environment that encourages positive attitudes towards nutrition, healthy eating and body image
- seeks to be proactive in the prevention, early identification, and appropriate management of eating disorders
- understands that all members of the organisation, including students, family members, teachers and support staff, have a responsibility to support a safe training environment
- understands that all students and families of the organisation have the right to expect that the training environment in which they work, train and perform is safe and supportive
- publishes this policy to set out actions implemented by the organisation to assist in providing this safe environment.

We trust this policy and best practice principles will supply helpful and relevant information and resources, to assist the development and training of the current and future students of QB Academy.



Christian Tatchev
Academy Director,
Queensland Ballet Academy

Review history of QB Academy Disordered Eating Prevention and Management Policy and Best Practice Principles

Version	Date reviewed	Date endorsed	Content reviewed/purpose
One	Created December, 2021	Published January, 2022	QB Academy Nutrition and Performance Policy established
Two	July/August, 2023	August, 2023	Aligned with AIS Disordered Eating Prevention and Management Policy Guideline, adapted to the dance context
Three			

Queensland Ballet Academy's Disordered Eating Prevention and Management Policy

Organisational responsibilities

Queensland Ballet Academy will:

- Adopt, implement, and comply with the QB Academy Prevention and Management Best Practice Principles.
- Publish, distribute, and promote the QB Academy Prevention and Management Best Practice Principles.
- Monitor and review the QB Academy Prevention and Management Best Practice Principles.

Individual responsibilities

QB Academy employees and other persons who agree to be bound by this policy must:

- Make themselves aware of the contents of the QB Academy Prevention and Management Best Practice Principles.
- Comply with all relevant provisions of the QB Academy Prevention and Management Best Practice Principles.
- Seek to engage in upskilling in the area as required to enable them to perform their role.

Who does this policy apply to?

This policy applies to all role holders within QB Academy including but not limited to:

- Dance students
- Family and dance student support system (eg. Homestay families)
- Admissions and Wellbeing Manager/s
- Support staff (for example administration, reception/front of house, facilities staff)
- Academy Director
- Dance Teachers
- Director of Health and Community
- Head of Performance Health
- Performance Health team of Academy Physiotherapists and Academy Strength Coach
- Performance Health external consultants eg. sport psychologist, doctor/s, podiatrist and sports dietitian

This policy has been approved by the Academy Director and starts on 15.8.2023 and will operate until replaced.

The current document and its attachments will be accessible via the Queensland Ballet Academy website at www.queenslandballet.com.au

Queensland Ballet Academy's Disordered Eating Prevention and Management Best Practice Principles

Introduction

Disordered eating (DE) and eating disorders (EDs) are serious and complicated issues that can impact the health and performance of dancers throughout their training and careers, from junior to senior levels. Eating disorders can occur in any athlete, in any sport, at any time. The diagram below illustrates these concepts and the full defined terms used in these principles are set out in Appendix 1.



The Queensland Ballet Academy Disordered Eating Prevention and Management policy and Best Practice Principles is to be read in conjunction with the [Australian Institute of Sport \(AIS\) and the National Eating Disorders Collaboration \(NEDC\) Disordered Eating in High Performance Sport Position Statement](#) (see Appendix 2).

Purpose of this document

The Queensland Ballet Academy Disordered Eating Prevention and Management Best Practice Principles aims to allow Queensland Ballet Academy to model the practices required to create and provide a healthy training system within the unique QB Academy dance environment. The appropriate prevention, early identification and management of DE and EDs in dancers is important in view of the significant ramifications on a dancer's health (both mental and physical) and performance. QB Academy prioritises the health and wellbeing of our dance students and believes all role holders in our organisation have a part to play.

1. Healthy training system

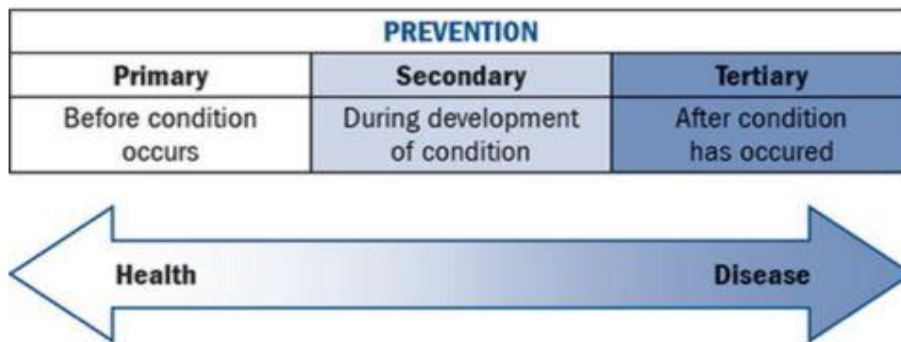
A healthy training system is needed to support and nurture our dancers. At QB Academy we support the values and actions in this document. The environment and culture at QB Academy play an important role in creating a healthy training system. We recognise that how we treat all members of our organisation is important, most importantly our dance students.

Prevention Framework Overview

Primary prevention – improving the overall health of the dancer population with the goal of preventing a dancer from developing an eating disorder.

Secondary prevention – early detection of an eating disorder with the goal of preventing it from getting worse.

Tertiary prevention – improving quality of life and reducing the symptoms of an eating disorder for a dancer with an eating disorder diagnosis.



The prevention framework of primary, secondary and tertiary treatment approaches is needed for the appropriate management of DE and the outcomes of a healthy training system. Each will be discussed individually in more detail below.

The Performance Health Team

QB Academy recognises that the Performance Health team provide an important function in the early identification and referral (as required) of DE and EDs. The Performance Health team includes health professionals within QB Academy, Queensland Ballet, and/or from external consultants as required. QB Academy has:

- An established list of health practitioners across multiple disciplines with expertise in treating dancers, which can be supplied to parents / families / students.
- Clear and flexible communication channels between the QB Academy Performance Health team to Academy support staff. This includes, where appropriate, communication and referral to external health consultants as indicated.
- In circumstances involving students under 18 years, decisions on management of DE or an ED will be by consensus of the health professionals and families involved in management / treatment of the student concerned. For students 18 years and over, this will usually also be the case, however in some cases the family may not be involved (if the student wishes). The medical practitioner involved will usually retain the responsibility for key decisions in the management of the student's health.

2. Primary prevention of disordered eating

Primary Prevention is defined as actions taken to reduce the risk of developing a condition and also aims to specifically remove causal factors for the development of the condition. To implement Primary Prevention of EDs, QB Academy recognises the ideal of preventing EDs within the high performance dance environment and will provide education, support for optimised nutrition and positive body image in dance students.

Education

Education relating to eating disorders is paramount to their overall prevention and management. The evidence suggests that providing education relating to eating disorder risk factors, development, signs and symptoms will raise awareness and literacy in the area. Further, we believe that education of all role holders of the management strategies will enable appropriate courses of action.

QB Academy encourages positive attitudes towards nutrition, healthy eating and body image, and provides workshops and written resources on these topics (delivered by an accredited Sports Dietitian) to dance students and where possible, parents and families. QB Academy also provides training and professional development for Academy teachers and staff on relevant topics of body image, adolescence, disordered eating and eating disorders. Students also cover related topics as part of the Safe Dance Practice subject studied in the upper levels of the QB Academy training program.

Optimised nutrition

QB Academy aims to support students by providing access to nutritional screening and support services for Upper School (Level 3-1) students, to assist in establishing harmony between health and performance underpinned by concepts that are safe, supported and purposeful. An appropriately qualified and experienced Sports Dietitian will be engaged to provide any nutritional education to students, parents and teachers. QB Academy staff who are not appropriately qualified and experienced sports dietitians are not to provide students with nutrition advice.

Body image

QB Academy recognises that a positive body image is one of the protective factors that enable a dancer to be more resilient to developing DE or an ED. Appropriate education and/or support will be provided to students to encourage a positive body image, using activities targeted at groups and individuals as appropriate. Positive body image in athletes and dancers is promoted through education and support for all role holders at QB Academy, not just for students but teachers, coaches and health staff as well.

Use of language

Respectful language must be used when speaking with and about students and their bodies. Dance students, teachers and support staff must receive education around such language. QB Academy believes all bodies deserve to be treated with respect, no matter their size, shape, colour or ability. QB Academy individual teaching staff are not to discuss a student's weight, diet, body appearance or medication with students, nor should there be general discussion relating to these sensitive topics amongst staff, students, peers or families. Functional feedback from QB Academy teachers for teaching and learning purposes is acceptable (eg. extend, lengthen, lift etc).

High risk populations, contexts and environments

Transition periods

QB Academy recognises that there are a number of transition periods in a dancer's life that may place them at an increased risk of DE including, but not limited to:

- Early start of ballet specific training
- Progression discussions
- Injury, illness, surgery, time away from dance and training
- Changes in weight and/or body shape following injury, illness or other precipitating circumstance
- Major life transitions e.g., moving away from home, moving between schools, moving overseas;
- Preparation for and competing in high pressure events (e.g., in an audition process, dance assessments, performances, academic assessments)
- Retirement (forced or voluntary)

At QB Academy we aim to be aware of increased times of pressure/stress for students and support them at these times. Our Admissions and Wellbeing Managers operate an open-door policy for students seeking support, and students can also access the Guidance Officers and Psychologist at Kelvin Grove State College. QB Academy staff and/or the Performance Health team can also provide a list of recommended health practitioners to parents/carers, students and homestay hosts, for further individualised support if required.

Working with minors

Working with minors requires appropriate care and consideration for this population. Whilst DE can occur at any age, QB Academy understands that adolescence is a formative time in the development of a dancer's body image and eating behaviour. QB Academy will utilise a variety of engagement methods to support the development of optimal body

image and eating behaviours through group sessions with a qualified Sports Dietitian, QB Academy Nutrition for Dance Performance handbook and Safe Dance classes (Upper School).

3. Secondary prevention of disordered eating

Diagnosis of an eating disorder can take many years. Secondary prevention strategies aim to identify those with clinical or subclinical eating disorders at the earliest possible stage, where management is likely to be most effective.

Early detection

QB Academy recognises that early identification of changes in a dancer's thoughts around their body image and/or eating behaviours (along the spectrum of eating behaviour) is important in allowing a greater opportunity for reversal and recovery. Timely identification and early intervention are ideal. Early detection can be achieved through population screening programs, education and self-assessments (eg. via symptom checklists that may alert someone to seek help).

Screening tools

Screening tools will be used where appropriate within the QB Academy environment. Where DE or an ED is suspected with a QB Academy student, referral and advice will be provided to the family to promote early intervention where possible (see Processes for Managing Concerns section following).

Menstrual function in female dancers

QB Academy recognises the importance of normal menstrual function in our female students. QB Academy encourages dancers to monitor their menstrual function to understand whether their cycle falls within the realms what is considered regular for optimal female health (see Appendix 3 for further details). In the case where any menstrual irregularity is identified, it is strongly recommended these be investigated with a doctor who has experience working with female dancers within an appropriate timeframe.

Low energy availability and other signs of Relative Energy Deficiency in Sport (RED-S)

Low energy availability (LEA) can occur in isolation or in combination with DE, and the potential interaction and various forms of presentation must be properly identified. In order to best support the student, dancers presenting with signs or symptoms of intentional or unintentional LEA, must be referred to the Performance Health team and/or Admissions and Wellbeing Manager for appropriate support. Referral should be considered in the circumstances below:

- A dance student with known or suspected LEA
- A dance student who is diagnosed with a bone stress injury
- A dance student is identified with menstrual dysfunction
- A dance student with a repetitive injury and/or illness within a 12-month period
- A dance student with known or suspected DE behaviours

Processes for Managing Concerns

QB Academy staff may become aware of concerns regarding a student's body image or nutritional intake in a number of ways:

- students may discuss the matter themselves with a member of staff
- members of staff may notice a change in the student's behaviour or physical appearance
- parents/carers or homestay hosts may report a concern
- Kelvin Grove State College staff may report a concern
- students may report concerns regarding their peers

All concerns will be heard and appropriate action taken to support the student.

Students may experience body changes due to a number of reasons such as normal growth and development, medical / injury concerns, natural fluctuations in body composition, or as a reaction to stressful life-events. The protocol for working with students who are experiencing body changes must therefore be implemented with great care. It is vital that any discussion is handled in a very sensitive manner with the student always feeling supported, in an aim to avoid negative mental, emotional and physical reactions.

Adequate nutrition for optimum performance is essential to students participating safely in the QB Academy training program. From this perspective, QB Academy identifies the critical role of healthcare professionals in ensuring the student's wellbeing, and strongly encourages students to engage in the supports available to ensure their safety is of utmost priority.

QB Academy staff are required to report any student concerns to the Academy Director, Head of Performance Health or Admissions and Wellbeing Manager. QB Academy individual teaching staff are not to discuss a student's physical appearance, weight, diet or medication with students, nor should there be general discussion relating to these sensitive topics amongst staff, students, peers or families.

In keeping with this policy, concerns regarding any symptoms of disordered eating/an eating disorder are listed in the orange or red columns of the table below:

***Eating Disorder Assessment & Intervention:
Guide to working with Athletes***

Prevention	Early Intervention, Monitor	Intervention, Treatment
		
Choosing food appropriately for sport & training Eating socially No/low guilt around food choices & eating Considers choices without over-thinking General positive attitude towards body General feeling of health & wellbeing Socially engaged with others Connected to hunger/fullness Any modifications to diet/training managed well Appropriately managing weight and body in ways that are not problematic	A general over-focus on food, eating, weight, body comp Restricting diet: Cutting out foods, food groups, deliberate reduction in energy intake 'Rules' around eating, counting grams/calories Increased exercise, particularly beyond training requirements Change in food preferences eg. vegetarian/vegan, increased supplement use Guilt, shame, anxious about eating Excessive body checking eg. mirrors, body comparisons Mood changes, anxiety Weight gain/loss/ fluctuation Change to period, stress fractures	Binge eating Vomiting, laxative use Restricting significantly, not meeting energy requirements Can't 'not' engage in ED behaviours More rapid weight loss/gain/fluctuations Fainting, collapse Swelling around jaw Compulsive behavior eg. exercise, eating, alcohol Problematic use of supplements, steroid use Self harm
Developed by Fiona Sutherland, Body Positive Australia www.bodypositiveaustralia.com.au		

Should QB Academy staff become aware that a student is experiencing concerns in the orange/red columns in the table or have any concerns with any other aspect of a student's ability to safely participate in any aspect of their course, QB Academy will implement the following processes (See Appendix 5 for a flow chart on this process):

1. If a member of staff notes that there is a health or safety concern with a student, or has a concern reported to them, or there is a notable change in the students' physical appearance, the staff member will initially communicate this to the Admissions and Wellbeing Manager, Academy Director and/or the Head of Performance Health
2. The above relevant staff will communicate regarding the concern raised.
3. The Admissions and Wellbeing Manager or the Academy Director may contact the Parent/Carer to discuss the concern, if the student is under 18 years. In this discussion, the Parent/Carer could be encouraged to arrange an appointment with a health professional such as a GP, sports physician, sports dietitian, psychologist, or psychiatrist, depending on the concern. This discussion may also involve senior Performance Health staff, if relevant or helpful.
4. The Parent/Carer will choose how they would like to carefully address the concern with the student in a sensitive and supportive manner. QB Academy staff will not discuss concerns relating to an individual's nutrition directly with the student unless the student is training in the Pre-Professional Program and is over the age of 18 years. With consent, Pre-Professional Program parents/carers will be contacted if there is a concern for their student's safety or wellbeing.
5. If the Parent/Carer chooses to address the concern with the student, or the student (over 18 years) chooses to address this concern, a follow up meeting with the Academy Director, Admissions and Wellbeing Manager, Head of Performance Health (or Director of Health and Community) and the student and/or Parent/Carer will be arranged after an agreed time period.
6. As a final recourse, and with the advice of a trained health professional, parents/carers of students who are not able to safely participate in the program for any reason, may be informed that the student cannot participate in their Program until it is safe to do so. Inability to participate may adversely impact the student's assessment and progression outcomes.

QB Academy will continue to form and strengthen relationships with health professionals that specialise in the realm of body image and nutrition in a commitment to providing a safe and healthy environment for students to learn and train.

4. Tertiary prevention of eating disorders

Eating disorder diagnosis

The first component of tertiary prevention is to gain a correct diagnosis. QB Academy recommends a clinical interview by an appropriately qualified professional, of which, should include medical oversight (preferably from a Sports and Exercise Medicine Physician).

Eating disorder treatment

Treatment of a dance student with a diagnosed eating disorder may be most appropriate through an eating disorder specialist service (for example an ED clinic, ED treatment team/unit or a credentialed eating disorder clinician), independent of Queensland Ballet Academy and the elite dance environment. Staff of QB Academy and the Performance Health team will liaise with ED specialised professionals as needed to enable appropriate treatment and management of the student concerned.

Comorbidity with mental health conditions

Eating disorders are often comorbid with other mental health concerns for example, depression, anxiety, stress and trauma. Other mental health concerns for example, depression, anxiety, stress and trauma are risk factors for developing disordered eating or an eating disorder. Therefore, it is important to promote overall mental health and wellbeing of the dancer and to have mental health support available for a range of presentations. On diagnosis, QB Academy recommends additional support from a qualified mental health professional, to ascertain any comorbidity for inclusion in the management plan.

Return to dance

There are currently no specific DE or ED return to dance guidelines in the medical literature. A QB Academy student identified with DE may need training modifications or exclusions to minimise the risk of potential injury and/or illness. The Performance Health team will work as appropriate with any external ED treatment team, teachers and other support staff to ensure an individual approach is taken to the student's training regime.

See Appendix 4 for RED-S Clinical Assessment Tool (CAT) as an example of an exclusion and return to dance guideline.

Prevention of complications relating to eating disorders

Prevention of recurrence, relapse and regression of symptoms

Dancers/students diagnosed and receiving treatment for an ED should undergo management plans for their training and/or career. Management does not cease when active treatment does. This should be communicated to the dancer/student and appropriate self-management tools provided at the clinically appropriate time.

Prevention of subsequent health problems

While a dancer/student is under management for ED's, there is an opportunity to provide prevention plans to reduce risk of serious consequences of the ED. A deficit in energy balance, related to the ED may present as injury or illness. Therefore, best practice management should include strategies to manage and where possible mitigate the risk of adverse health outcomes cause by the primary condition of ED.

Appendix

Appendix 1: Definitions and abbreviations

Body image – the perception that a dancer has about their physical self and the thoughts and feelings that result from that perception.

Positive body image – occurs when a dancer is able to accept, appreciate and respect their body. A positive body image is one of the protective factors that can make a dancer more resilient to developing an eating disorder.

Body image dissatisfaction – occurs when a dancer has negative thoughts and feelings about their body and can result in a fixation on trying to change their body. This can lead to unhealthy food and exercise practices and increase the risk of developing an eating disorder.

Energy availability (EA) – the amount of energy that is available to support the body's activities for health and function once the energy commitment to exercise has been subtracted from dietary energy intake. Energy availability = (Energy intake – Energy cost of exercise)/Kg fat free mass.

Low energy availability (LEA) – occurs when there is a mismatch between energy intake and exercise load, leaving insufficient energy to cover the body's other needs. It may arise from inadequate energy intake, increased expenditure from exercise, or a combination of both; and is either advertent or inadvertent.

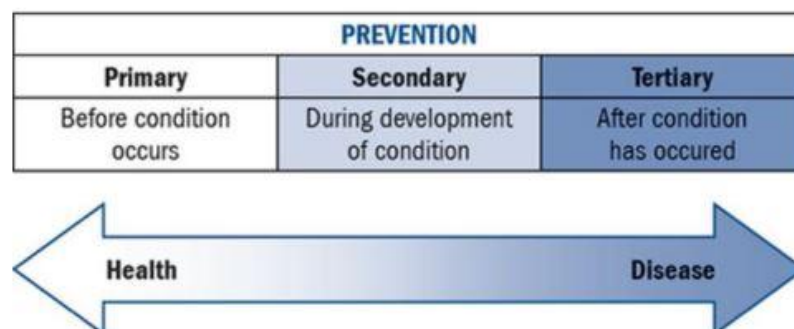
Relative energy deficiency in sport (RED-S) – the syndrome of impaired physiological function including, but not limited to, metabolic rate, menstrual function, bone health, immunity, protein synthesis, cardiovascular health that arises from low energy availability.

Prevention Framework

Primary prevention – improving the overall health of the dancer population with the goal of preventing a dancer from developing an eating disorder.

Secondary prevention – early detection of an eating disorder with the goal of preventing it from getting worse.

Tertiary prevention – improving quality of life and reducing the symptoms of an eating disorder for a dancer with an eating disorder diagnosis.



Spectrum of eating behaviour – in the high performance athlete/dancer from optimised nutrition to disordered eating to an eating disorder. All athletes/dancers sit on this spectrum and individuals move back and forth along the spectrum at different stages of their career, including within different phases of a training/rehearsal/performance cycle.

Optimised nutrition – involves a safe, supported, purposeful and individualised approach. It promotes healthy body image and thoughts about food, and is adaptable to the specific and changing demands of a dancer's workload.

Disordered eating (DE) – any eating behaviour that is not optimised. DE may range from what is commonly perceived as normal dieting to reflecting some of the same behaviour as those with eating disorders, but at a lesser frequency or lower level of severity. DE can occur in any athlete/dancer, in any sport, at any time, crossing boundaries of gender, culture, age, body size, culture, socioeconomic background, athletic calibre and ability.

Eating disorder (ED) – A serious, but treatable mental illness with physical effects that can affect any athlete/dancer. Feeding and eating-related disorders are defined by specific criteria published in the diagnostic and statistical manual of mental disorders (DSM-5) which include problematic eating behaviours, distorted beliefs, preoccupation with food, eating and body image, and result in significant distress and impairment to daily functioning (e.g., sport, school/work, social relationships).



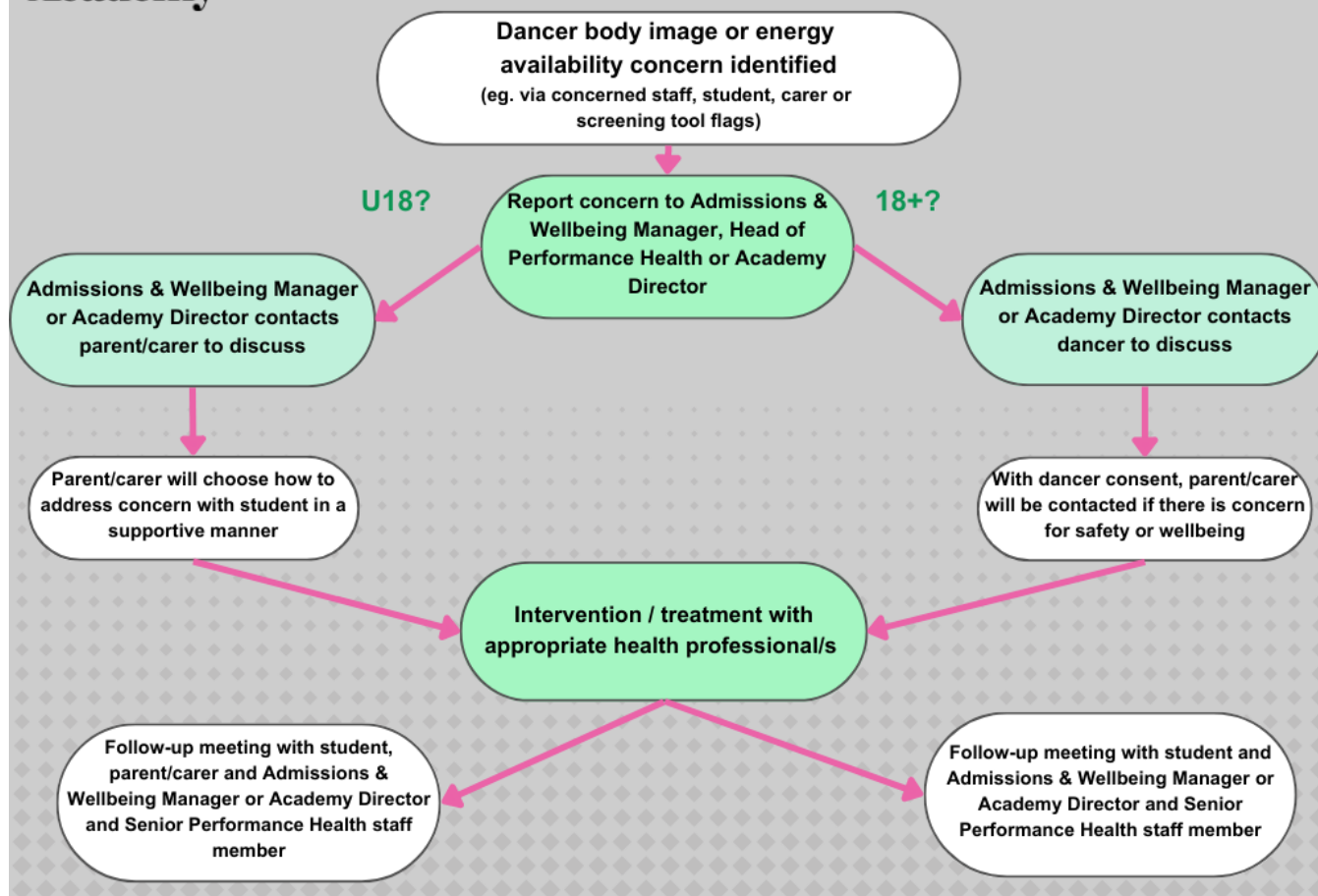
[Appendix 2: The AIS-NEDC position statement on disordered eating in high performance sport](#)

[Appendix 3: AIS Female Performance & Health Initiative | Understanding Your Menstrual Cycle: What's Normal, What's Not?](#)

[Appendix 4: RED-S Return to Play Clinical Assessment Tool](#)

[Appendix 5: QB Academy Processes for Managing Concerns - flow chart](#)
(see following page)

PROCESSES FOR MANAGING CONCERNS



Acknowledgements

This document was first created by Queensland Ballet Academy in collaboration with Shane Jeffrey (Accredited Practising Dietitian, Accredited Sports Dietitian & Strength and Conditioning Coach). It was reviewed and updated using the reference tool and guideline provided for sporting organisations by the Australian Institute of Sport ('Disordered Eating Prevention and Management Policy and Best Practice Principles template', AIS, 2022), and in collaboration with Sally Anderson (Advanced Sports Dietitian, Exercise Physiologist).

References

- [High performance toolkit | Australian Institute of Sport \(ais.gov.au\)](https://www.ais.gov.au)
- QB Academy Nutrition and Performance Policy (2021)
- [Disordered Eating in High Performance Sport Position Statement \(ais.gov.au\)](https://www.ais.gov.au)
- [Body Care | Gymnastics Australia](https://www.gymnasticsaustralia.com.au)
- [Home \(nedc.com.au\)](https://www.nedc.com.au)
- [Support for Eating Disorders and Body Image Issues | Butterfly Foundation](https://www.butterflyfoundation.org.au)