



Bitesize Case Study: Singing for people with long-term illness



This case study is one in a series of studies curated to capture best practice, and highlight innovations, from the joint Health Education England (HEE) working across the North West and Voluntary Sector North West 'Learning Matters' awards 2017. The awards are part of a cross sector adult learning campaign delivered for the health and care sector through a number of key regional partnerships and collaborations. The overarching theme of the awards is simple: lifelong learning is good for people, organisations and health.

What was the issue or problem? What did you set out to do?

There is growing evidence showing that singing groups or choirs may lead to improvements in physical and emotional health and wellbeing in people with long term health conditions (Clift and Morrison, 2011; Keeler et al., 2015). This includes improvements in lung function, reductions in blood pressure and changes in mood (Stacy et al., 2002; Gick and Nicol, 2016; Bonhila et al., 2009; Grape et al., 2002). Being part of a choir involves participation in a variety of different activities, and skills including exercises to improve breathing, memory, and movement. Group singing is also very much a social activity, providing opportunities for people to make new friends in a safe and secure environment, providing people with an opportunity to participate in an enjoyable activity and a break from focussing on their long term illness (Dingle et al., 2013; Mellor, 2013). The project aim was to develop and understand how structured group signing could bring health and social benefits to people with long term health problems. The initial work concentrated on people with the breathing disorder Chronic Obstructive Pulmonary Disease (COPD) and Aphasia; communication difficulties following brain damage such as a stroke.

What did you do? What was the intervention or initiative?

Inspire is a small social enterprise consisting of professional musicians, educators and researchers. The social enterprise started in 2013 after securing a HEfCE "Do it" Award through the University of Manchester. Its aim is to encourage people with long term medical conditions to become actively involved in singing and music as a way of improving personal resilience, independence and self-care.

The respiratory and aphasia projects had a number of objectives:

- To develop singing group models that are tailored to the needs and expectations of people with a variety of long term conditions. This could include 'conventional' as well as 'virtual' choirs
- To establish a network of singing groups for people living in the North West of England
- To foster independence and build longterm sustainability into individual initiatives
- To develop links with existing and new partners locally, nationally and internationally
- To evaluate the physical and psychological benefits of the singing groups using established subjective and objective outcome measures
- To evaluate the cost effectiveness of the service in terms of personal, healthcare and societal

In 2015, the work of Inspire Social Enterprise was acknowledged with an "Outstanding Achievement Award" at the national UnLtd award ceremony in London.

What were the Key Outcomes?

• Choir members are encouraged to take ownership of how the sessions are run; venue, time, duration, and song selection. Creating a feeling of identity and belonging is very important, for example, the respiratory choir decided on their name - "The Jolly Wheezers", and their uniform. After about a year, the Jolly Wheezers became financially independent by raising money through choir subscriptions, supermarket bag packing etc. The choir also organises a variety of public performances including singing in residential homes.

Being part of the choir has enabled the • members to learn a wide variety of new skills e.g. new songs; rhythm and harmony. From the outset, the choirs are taught performance techniques and how to sing in public. They have since relished the opportunity of performing to a wide variety of audiences and venues including The Royal College of Music and the Royal Festival Hall in London and The Lowry Theatre, Salford. Choir members have also been invited to speak at a variety of meetings about their condition and the health benefits of participating in a choir including a workshop at the 2016 International Festival for Public Health in Manchester.

Following on from the success of the • Jolly Wheezers, the social enterprise was recently approached by The National Aspergillosis Centre at Wythenshawe Hospital about starting a new choir for people with the fungal lung infection Aspergillosis. Although the symptoms are broadly similar to people with COPD, Aspergillosis is much less common, with people scattered widely throughout the country. This makes regular attendance at a choir session very difficult. The National Aspergillosis Centre does however have over 1000 members who participate in monthly meetings via Skype. In March 2017 a choir "taster session" was organised in Wythenshawe hospital both for people who could attend in person and also for those who attended via the internet. A follow-up debriefing meeting took place in April 2017 to discuss how the members would like the initiative to proceed. The option being considered is to organise a "virtual choir" to enable as wide participation as possible. In addition to allowing members to participate in the choir from their own homes, a second option would be to develop on-line learning material. This could include structured breathing exercises, singing lessons and a songbook. The technological aspects and feasibility of this will be discussed with colleagues at the University of Manchester involved in online learning.

Another group of people the team has been working with are those with aphasia. Signs and symptoms of aphasia can vary considerably but usually involve communication problems with speech, writing and drawing. People with aphasia can also have difficulty finding words they would like to use when constructing sentences. Other problems may include difficulty interpreting gestures, numbers and pictures which can affect everyday activities such as reading, listening to the radio and following a TV programme. Intriguingly, although people with aphasia may have lost fluency in their speech, a proportion retains the ability to sing (Akanuma et al., 2016).

• Over the past year the team worked with members and Speech Therapists at the Speakeasy Aphasia Charity in Ramsbottom developing a choir model designed to address the specific needs of people with aphasia. The model needed to take into account the difficulties people had reading and remembering song lyrics, difficulties in reading musical symbols, and coping with the distraction of people next to them singing different song parts (Fogg-Rogers et al., 2016).

As a result of focus groups and feedback sessions a professional animator has been commissioned to develop a series of animations which includes guidance on tune, words and harmony parts. These are projected onto a large screen and displayed at an appropriate speed for the entire group. The animation also includes prompts to remind the choristers when to breathe. In other ways the aphasia choir operates in a similar way to the COPD choir, particularly in relation to the development of skills in public performance. The aphasia choir also performed at the 2016 International Festival for Public Health and choir members were given the opportunity to talk about their condition and their experience of participating in a choir.

• The Speakeasy project has been generously supported by the Tavistock Trust for Aphasia, National Institute for Health Research (NIHR) and the University of Manchester. Provisional results of this work were presented at the International Aphasia Rehabilitation Conference 2016.

What were the lessons learned?

• The key learning of this project was how best to tailor participation in a choir to the specific needs and requirements of people with long-term conditions. As mentioned previously, initial work has concentrated on people with respiratory disease and aphasia but the team is interested in extending their interests into other areas.

• People with COPD were less hesitant in joining a choir consisting of people with similar health problems. The shared health experience appeared to help foster a community spirit and feeling of belonging.

• The role of the choir leaders is critical in establishing rapport with the members and leading them at a pace that suits everyone. Sessions also include exercises designed to encourage a different method of breathing (diaphragmatic breathing) to help maximise remaining lung function. Friends and family members are also encouraged to join the choir and a specialist respiratory nurse is now an active member of the Jolly Wheezers. This has become a particularly useful resource for the members who can now easily access information and advice on respiratory health issues. The benefits of having a nurse choir member have been recognised by the local respiratory team and participation in the choir has since become an important part of their clinical role.

- Having developed an extensive knowledge and understanding of choir needs in patients with respiratory disease and aphasia, Inspire Social Enterprise would now like to extend this to a wider population and possibly to other groups with similar needs.
- The main lesson learnt is that in spite of the many frustrations and day to day challenges the choir members face because of their health conditions, they have shown a remarkable resilience and willingness to learn. However, the team recognise that further robust evidence on the health benefits of singing is required which needs to be evaluated on larger samples of people using established subjective and objective outcome measures.



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References

Akanuma, K., Meguro, K., and Satoh, M. et al.(2016) 'Singing can improve speech function in aphasics associated with intact right basal ganglia and preserve right temporal glucose metabolism: Implications for singing therapy indication.' *International Journal of Neuroscience*, 126, pp. 39–45. doi:10.3109/00207454.2014.992068

Bonilha, A G., Onofre, F., and Vieira, M L, et al. (2009) 'Effects of singing classes on pulmonary function and quality of life of COPD patients.' *International Journal of COPD*, 4, pp. 1–8. doi:10.2147/COPD.S4077

Clift, S., and Morrison, I. (2011) 'Group singing fosters mental health and wellbeing: findings from the East Kent 'singing for health' network project.' *Mental Health Social Inclusion*, 15, pp. 88–97. doi:10.1108/20428301111140930

Dingle, G A., Brander, C., and Ballantyne, J. et al.(2013) "To be heard': The social and mental health benefits of choir singing for disadvantaged adults.' *Psychology of Music*, 41, pp. 405–421. doi:10.1177/0305735611430081

Fogg-Rogers, L., Buetow, S., and Talmage, A. et al. (2016) 'Choral singing therapy following stroke or Parkinson's disease: an exploration of participants' experiences.' *Disability Rehabiliation*, 38, pp. 952–62. doi:10.3109/09638288.2015.1068875

Gick, M L., Nicol, J J. (2016) 'Singing for respiratory health: Theory, evidence and challenges'. Health Promotion International, 31, pp. 725–34. doi:10.1093/heapro/dav013

Grape, C., Sandgren, M., and Hansson, L-O, et al. (2002) 'Does singing promote well-being?: An empirical study of professional and amateur singers during a singing lesson.' *Integrative Physiological and Behavioural Science*, 38. pp. 65–74. doi:10.1007/BF02734261

Keeler, J R., Roth, E A., and Neuser, BL., et al. (2015) 'The neurochemistry and social flow of singing: bonding and oxytocin.' *Frontiers in Human Neuroscience*, 9. doi:10.3389/ fnhum.2015.00518

Mellor, L. (2013) 'An investigation of singing, health and well-being as a group process.' *British Journal of Music Education*, 30, pp. 177–205. doi:10.1017/S0265051712000563

Stacy, R., Brittain, K., and Kerr, S. (2002) 'Singing for health: an exploration of the issues.' *Health Education*, 102, pp.156–62. doi:10.1108/09654280210434228

Level of award: Winner - HEE Ingenuity Award

Organisation: Inspire Social Enterprise

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