

Vocal Health Protocols for Undergraduate Music Programs: A Pilot Study

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The university voice student, like the collegiate athlete, requires specific institutional procedures and protocols regarding the maintenance of vocal health and treatment of voice injury. In the collegiate voice world, the National Association of Schools of Music (NASM) provides guidelines regarding the health of the university level voice student. According to the NASM Handbook (2014, p.65), music students must be provided with basic information about the maintenance of their own health and safety. While there are a handful of organizations that provide basic vocal health guidelines for institutions (NASM & PAMA, 2014), many schools have not developed a concrete injury protocol that provides the appropriate proactive strategies and reactive responses required of an undergraduate music department.

With the intention to guide future recommendations and suggestions for proactive and reactive protocol development in individual institutions, the purpose of this study was to determine the current availability of proactive and reactive protocols in NASM accredited voice programs in the northeast. In June 2015, a survey was issued to 304 voice faculty members at 57 NASM-accredited music schools in Pennsylvania, New Jersey, New York, and Delaware. We received a response from 45 participants at 27 universities for a university response rate of 47.37%. Participants were asked to report: (1) institutional demographics, (2) experiences with student voice injury and responses to injury, and (3) any established proactive and reactive protocols in place at their institution.

The preliminary pilot study results indicate that data was received from institutions in every surveyed state. Twenty-five faculty (72%) reported they have experienced at least one student whose vocal injury made it difficult to complete major requirements. Only seven out of 45 faculty (15.56%) reported that their institution followed any established vocal health protocol. Data suggests that there may be a need for standardized vocal health protocols at NASM accredited institutions, yet formal strategies, on the whole, are lacking. A lack of reported proactive protocols suggests there is a greater emphasis on reactive protocols than proactive protocols. Reactive protocols most often included medical attention or the delay or waiving of major requirements. Other less commonly reported reactive protocols included adjusted repertoire and lesson time, use of school resources, and emotional support.

Of the few reported proactive protocols, the most common included sharing vocal health knowledge in the studio. The second most common was a pre-injury orientation with an Ear Nose and Throat specialist (ENT). Further research is necessary to determine whether a standardized procedure for proactive protocols in more institutions would result in a greater consciousness of prevention and, as a result, a diminished need for utilization of reactive responses.

A replication of this study was conducted on a national level in November 2015. This survey was sent to colleges similar to Bucknell University based on the Carnegie Classification of "BAC/A&S: Baccalaureate Colleges-Arts & Sciences." Compared with the results from the pilot study, the national survey results provide converging evidence of a need to address the prevalence of voice injury at undergraduate voice programs, specifically at liberal arts music departments across the nation. The pilot study and national survey will inform a "Wellness Initiative" for the voice area of the Bucknell University music department that outlines many of the specific proactive strategies and reactive responses discussed in both the papers.

Applications to Teaching

- **Anticipate** vocal injury through the development of formalized proactive strategies
- **Respond** to vocal injury through the development of formalized reactive responses
- **Establish** partnerships with specialists within and beyond school resources (ENTs, Laryngologists, Otolaryngologists, Speech Language Pathologists, Singing Voice Specialists, Mental Health Professionals, Faculty, Other relevant departments, etc.)
- **Tailor** all protocols and/or “Wellness Initiatives” to the needs of your specific institution and its student body.
- **Attend** to the vocal health conversation rather than accepting the general trend to stigmatize nodes, polyps, swelling, and fatigue as symbols of a lack of training, effort, and vocal skill.

References

National Association of Schools of Music. (2014). National Association of Schools of Music Handbook 2014-15. Reston, Virginia.

National Association of Schools of Music, Performing Arts Medical Association. (2014). Basic Information on Neuromusculoskeletal and Vocal Health: Information and Recommendations for Administrators and Faculty in Schools of Music.