

A Qualitative Research Study on the Professional and Personal Experiences of Women Over Forty Experiencing Changes in Their Speaking and/or Singing Voices and How These Changes Relate to Perimenopause and Menopause Stages.

MODULE 3 BMPF7326D

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PROPOSAL

A Qualitative Research Study on the Professional and Personal Experiences of Women Over Forty Experiencing Changes in Their Speaking and/or Singing Voices and How These Changes Relate to Perimenopause and Menopause Stages.

“Hormonal changes can profoundly influence the ageing voice” (Bruzzi et al., 2017, p.7). As research has already proved (Laureano et al., 2009; Bruzzi et al., 2017; Eichhorn, J. et al., 2018; Lã and Ardura, 2022), the falling of oestrogen levels and the increase of androgen levels affect the fundamental frequency (F_0), that is, the pitch (Roark, 2006). *Virilisation of the voice* (a deeper tone of voice due to the thickening of the vocal folds) is frequently found in post-menopausal women (Bruzzi et al., 2017). As Bruzzi et al. (2017) advocate, these phenomena do not necessarily make the voice less pleasant. However, they may affect women emotionally and socially, whether they are performers or other professional or avocational voice users (Lã and Ardura, 2022). As Lã and Ardura (2022) observe, many studies have reported voice symptoms associated with menopause. It appears, however, that much less research has been devoted to documenting women's experiences in their own words.

I am highly aware of female vocal professionals' self-awareness of experiences and emotional states, especially when confronting ageing and life changes. As a singing teacher and singer, I consider it essential to report how female voice users feel and think about their voices so that a voice care team or voice coach can holistically address perimenopausal and menopausal voice symptoms. That is why my research will be devoted to documenting women's stories and concerns, with the hope that the information will foster conversation among voice experts. Ultimately, further research may explore the development of specific training for voice experts, which could be designed and implemented in their professional practice.

A purposive sample of six female singers from my studio, aged 45 to 65, will be recruited as participants. Their testimonies will be collected through individual semi-structured interviews and a focus group. Once the consent and participant forms are approved, participants will be summoned to their sessions. The interviews will be conducted with fifteen semi-structured questions based on findings from the prior literature review. The sessions will be recorded.

After all the interviews, the focus group session will occur. I will serve as a facilitator and participant observer. The session will last between 45 and 60 minutes, including a 15-minute break.

The method of data analysis I will use adheres to the thematic analysis framework, as this project is descriptive and aims to identify patterns of meaning within the data (Atkinson, 2017). I will also include a fantasy theme analysis as an additional methodology, examining narratives and shared experiences within a group (Atkinson, 2017). I believe this approach aligns perfectly with the goal of the researcher.

I will follow an ethics of care approach, guided by a pattern of care, compassion, and the researcher's desire to act in ways that benefit the individuals and groups who are the focus of the study (Wiley, 2013). I will take special care in addressing sensitive topics related to voice symptoms and perimenopause and menopause symptoms in general, as they can trigger negative emotions in participants. The project has undergone ethical review by the UWTSD ethics committee.

By the end of this research, as personal learning outcomes, I expect to:

1. Effectively communicate the different experiences of hormone-related voice symptoms in women.
2. Critically analyse the discourses I have gathered in a way that fosters visibility and debate and may ultimately lead to more research.
3. Working towards creating specific pedagogical strategies to address these voice symptoms.
4. Participate actively in the voice community, developing these pedagogical strategies.
5. Working towards specialising in re-educating female voices over 40 as a voice care team member.

Expected Timeline

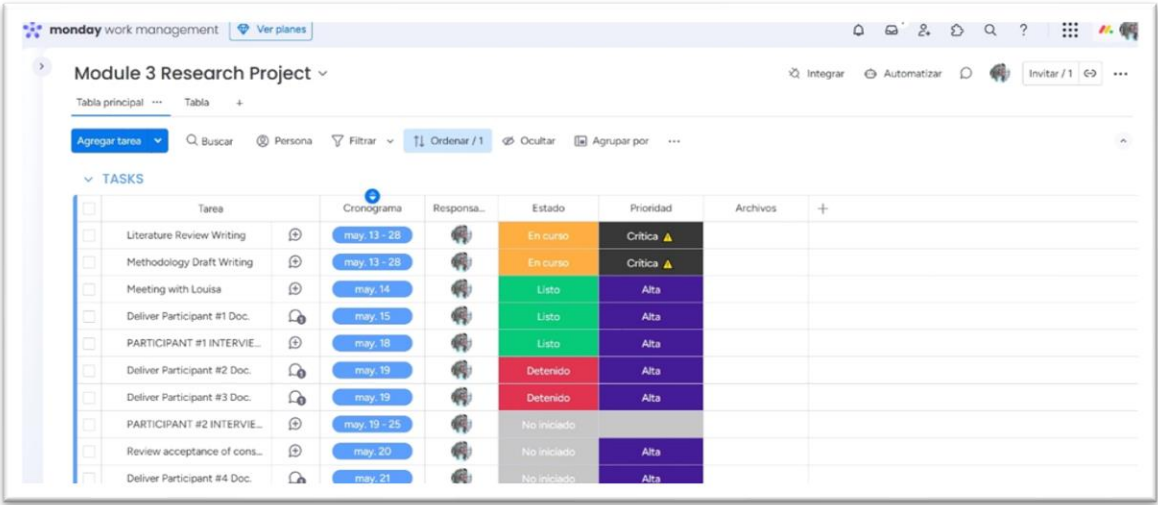


Fig. 1: Expected timeline, ascending order, May 2025.

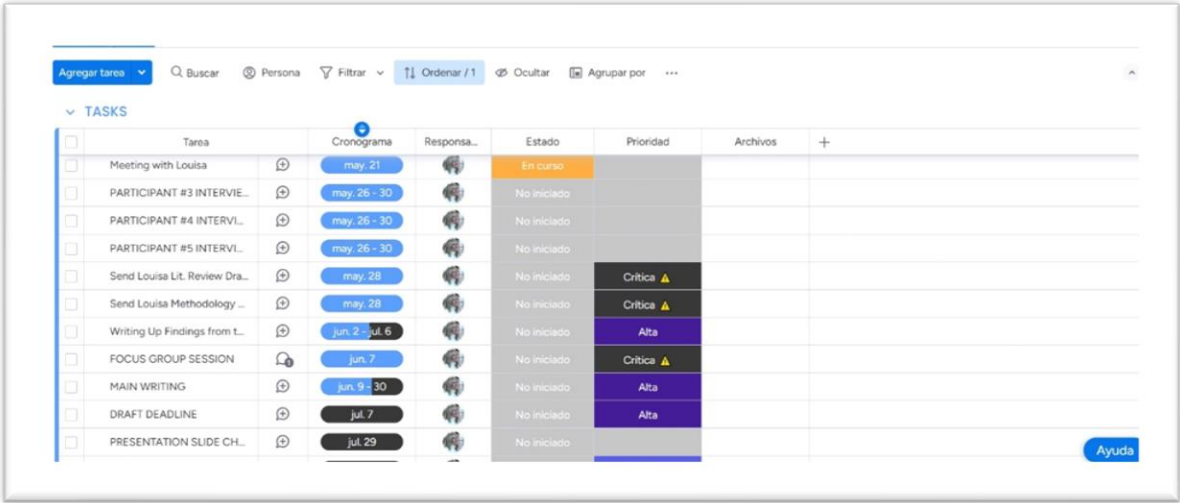


Fig. 2: Expected timeline, ascending order, May 2025.

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Module 3 Research Project

Tabla principal Tabla +

Agregar tarea 🔽 🔍 Buscar 🧑 Persona 📏 Filtrar 🔼 Ordenar / 1 🗑 Ocultar 📁 Agrupar por ...

TASKS

☐	Tarea	Cronograma	Responsa...	Estado	Prioridad	Archivos	Cronograma 1	Notas	+
☐	LIVE PRESENTATION	ago. 4		No iniciado	Media		-		
☐	ASSIGNMENT DEADLINE	ago. 1		No iniciado	Media		-		
☐	PRESENTATION SLIDE CH...	jul. 29		No iniciado			-		
☐	DRAFT DEADLINE	jul. 7		En curso	Alta		-		
☐	WRITING UP FINDINGS	jun. 14 - jul. 6		En curso	Alta		-	Postponed	
☐	MAIN WRITING	jun. 9 - 30		En curso	Alta		-		
☐	FOCUS GROUP SESSION	jun. 7		Detenido	Critica ⚠		jun. 28	Postponed	
☐	DATA ANALYSIS 1: FAMILI...	may. 30 - jun...		En curso	Alta		-		
☐	DATA ANALYSIS 2: CODING	may. 30 - jun...		En curso	Alta		-		
☐	DATA ANALYSIS 3: THEMES	may. 30 - jun...		En curso	Alta		-		

Avance

Fig. 3: Ongoing timeline, descending order, June 2025.

REPORT

A Qualitative Research Study on the Professional and Personal Experiences of Women Over Forty Experiencing Changes in Their Speaking and/or Singing Voices and How These Changes Relate to Perimenopause and Menopause Stages.

INTRODUCTION

The voice is the result of a complex combination of fluid dynamics (airstream) and structural elements (the vocal tract physiology) that produce a unique sound that serves as a fundamental feature of one's personality (Shankar et al., 2021; Bhatia et al., 2025). Gender and age are the two essential aspects of voice differentiation, with the female voice undergoing numerous changes due to hormonal shifts and ageing (Bhatia et al., 2025).

Numerous studies have been devoted to investigating and describing the impact of hormonal changes on the female voice throughout women's lifespan, especially during pregnancy and after menopause (Stathopoulos, Huber, and Sussman, 2011). Changes in the hormonal environment, such as the decline of oestrogen production, are proven to cause oedematous (thickened) vocal folds in middle-aged women (Stathopoulos, Huber, and Sussman, 2011). Bruzzi et al. (2017) affirm that these phenomena do not necessarily make the voice less pleasant. However, they may affect women emotionally and socially, whether they are professional or avocational voice users (Lã and Ardura, 2022). Many studies have reported voice symptoms associated with menopause (Lã and Ardura, 2022), but much less research has been devoted to documenting women's experiences in their own words.

As a female singing teacher and singer, I consider it essential to report how female voice users feel and think about their voices so that voice experts can holistically address hormone-related voice symptoms. That is why my research has been devoted to documenting women's stories and concerns. Through this work, I have explored how to effectively communicate the diverse experiences of hormone-related voice symptoms in women, critically analysing the discourses I have gathered in a way that may foster visibility and debate. I am working towards creating and developing specific pedagogical strategies to address hormone-related voice symptoms, with the hope of actively participating in the voice community and specialising in re-educating female voices over 40 as a voice care team member.

LITERATURE REVIEW

Since Abitbol et al. (1999) published their study 'Sex Hormones and the Female Voice', extensive medical research has focused on understanding how the female voice changes in response to hormonal fluctuations. I came across this research in 2022 while studying the Pedagogy and Technology for the Voice specialisation within the Faculty of Education at the UNED (Madrid). I also attended a lecture by Joan Bozeman, where I discovered her book *Singing Through Change: Women's Voices in Midlife, Menopause, and Beyond* (Bos, Bozeman, and Frazier-Neely, 2020), one of the few published compilations of testimonies from perimenopausal and menopausal singers. This book, although considered grey literature, inspired my project, so I began collecting literature related to hormonal voice changes using a pearl-growing strategy that has included peer-reviewed studies published between 1999 and 2025 (starting with Abitbol et al., 1999), as well as references from menopause blogs (Feedspot, 2025).

The Impact of Voice Changes on Female Singers

A recent systematic review of the related literature up to 2024 (Bhatia et al., 2025) concludes that perimenopause and menopause are associated with substantial changes in important voice parameters. These changes result in a decreased fundamental frequency (the voice lowers), increased vocal instability, and a reduced voice quality compared to that of premenopausal women (Bhatia et al., 2025).

Additionally, as Stathopoulos, Huber, and Sussman (2011) observed, ageing affects the soft tissue and cartilage in a manner that influences the glottal closure pattern, resulting in a breathier voice for women compared to men. As Shankar et al. (2011) stated, the overall voice quality of postmenopausal females is poorer than that of premenopausal females. While voice-related metrics are being thoroughly studied, the psychological, mental, and emotional effects of the changes mentioned, particularly among professional and recreational female voice users, remain underexplored, with few documents dedicated to them.

In this light, Bos, Bozeman, and Frazier-Neely's (2020) book *Singing Through Change* is one of the few. In Spain, Fiuza, Sevillano, and Lã (2023) studied the pedagogical implications of singing during perimenopause and after menopause and revealed difficulties in concentrating, sensations of loss, severe stress, fear, and frustration in

women. Additionally, Lã et al. (2022) designed and developed the Menopausal Voice-Related Work Limitation Scale (Meno VWL), which measures self-perceived voice-related symptoms in female voice professional users and can help design preventive measures for ageing voice professionals. In summary, these studies corroborate the importance of collecting and considering the experiences of female voice users in their own words.

Raising Awareness

Regarding menopause, many singers report changes to their self-identity, highlighting the feeling that they are no longer “the same singer anymore” (Elliot, 2017, p.14). Some women expressed self-doubts regarding their technical abilities or the need to find a new repertoire (Elliot, 2017). These testimonies have inspired the questions for my research interviews. I would also like to highlight that I have not found any research or article in Spanish that reflects testimonies like Elliot’s (2017) or Bos, Bozeman, and Frazier-Neely’s (2020).

Focusing on the case of Spain, I believe more awareness is needed when it comes to designing and applying vocal health techniques for female singers and actors in perimenopause, menopause or postmenopause. This belief has represented the driving force behind my research.

Going back to the international sphere, and for the past five years, perimenopause and menopause general symptoms have received much more attention from the media and the health industry, with many celebrities opening up about them. Marketing research indicates that Generation X, born 1965-1980 (Sulistiyowati et al., 2025) consumer behaviour is mainly driven by brand credibility (Bläse et al., 2024), which may relate to the significant increase in menopause marketing in social media discussions, considered “cultural institutions” with a “massive reach” (Baber, 2023, p. 172). As most women of Generation X transition into menopause, there is a growing economic interest in hearing women’s voices (Baber, 2023). Paradoxically, it is hard to find more testimonies from singers, actresses, and other professional voice users regarding hormone-related voice changes and disorders and how they cope with them. This gap in the social discourse may be motivated by the stigma surrounding voice disorders in professional singers, corroborated by Murphy Estes et al. (2024). Brown et al. (2023) confirmed that singers who depend on auditions do not openly discuss voice disorders due to fear of

consequences. Nevertheless, celebrity performers opening up not only about their general experience, but also about their voice changes, could greatly help in raising awareness and dispelling the stigma about voice problems among the professional and avocational performing community. Drawing on Bläse et al. (2024): credible testimonies motivate audiences.

Pedagogical Solutions in the Current Literature

As Kessler-Price (2022) stated in her study of postmenopausal singers, voice teachers and choral conductors can address singers' concerns by promoting good vocal hygiene, ensuring adequate hydration and sleep, and encouraging frequent, short practice sessions.

Fiuza, Sevillano, and Lã (2023) highlight the consensus in the literature about the importance of regular practice to minimise the effects of voice ageing, such as tremor, lack of endurance, or lack of agility.

Additionally, voice lessons and choral rehearsals can be customised to promote vocal ease, ultimately improving vocal beauty (Kessler-Price, 2022). In this line, listening to the experiences of women singers with hormone-related voice symptoms can be highly helpful in building personalised vocal practices.

Bos, Bozeman, and Frazier-Neely (2022) advocate for cross-training as a pedagogical framework that voice teachers should consider. This training includes continuing to sing despite vocal challenges to prevent loss of vocal and respiratory conditioning (unless a vocal injury requires rest), vocalising in all possible ranges to keep balance in phonation muscles, and exploring different stylistic choices (Bos, Bozeman, and Frazier-Neely, 2022).

The Approach of This Project

As Bos, Bozeman and Frazier-Neely (2022) state, creative teachers are key to preserving women's voices. Therefore, to develop and explore techniques that address hormonal voice symptoms, I consider it essential to listen to, collect and disseminate the testimonies of the women involved, in their own words, especially when the literature has shown that more awareness is needed in voice pedagogy in general (Kessler-Price, 2022; Fiuza, Sevillano, and Lã, 2023), and in Spanish voice studios in particular.

METHODOLOGY

Research Paradigm

The research paradigm is the philosophy that explains a researcher's beliefs about reality and what they value in their research (Pretorious, 2024). My concerns are the vocal and emotional experiences of female voice users, especially over forty. This project aims to provide a platform for women who have not previously been consulted about their experiences with their singing and speaking voices during and following hormonal changes.

Following Atkinson (2017), I have chosen qualitative research methods to gain insight into the processes involved in constructing meaning, experiences, cultural differences, and oppression. Thus, this research project has been developed under the Feminist paradigm, as I believe it is necessary to address the still-present gender gap, along with the misogynistic perceptions and marginalisation of women in the medical literature (Merone et al., 2022). Feminist methodology is grounded in the ontological and epistemological vision of women who have been silenced by power structures (Atkinson, 2017). Feminist researchers cannot be detached from the subject, as their experience has shaped the development of the research question from the outset (Parry, 2020). In this regard, to mitigate the bias of feminist positionality, the process has been developed as a collaborative endeavour between the researcher and the participant (Parry, 2020), in which findings reflect the participants' feelings and experiences.

Participants

The sample consists of $n = 6$ participants, all cisgender females, aged between 45 and 65 years, with no diagnosed voice injuries. None of them are using Hormone Replacement Therapy; however, this was not a requirement for inclusion in the criteria (see Appendix One for more information). The selection was based on purposive and convenient sampling (clients of my studio and a voice coach from my professional network who also fulfilled the inclusion criteria).

A taxonomy of participants is presented in Table 1. Although five of the six participants are amateur singers, their dedication and passion for singing can significantly contribute to the results. I have considered the participants' origins and singing languages

noteworthy, as cultural and linguistic differences influence how individuals perceive voice changes (Saeedi, Ghorbani, and Rong, 2024).

TAXONOMY OF PARTICIPANTS				
PARTICIPANT	AGE	COUNTRY of ORIGIN and LANGUAGES of SINGING	OCCUPATION	REGISTER and VOICE TYPE
1.	58	Catalunya, Spain. Spanish, English, and Catalan.	Social Services Assistant	Soprano. Jazz, soul, and Gospel Choir.
2.	65	Catalunya, Spain, of Andalusian origin. Spanish, English, French.	Former dancer and owner of an au pair company	Soprano. Jazz and musical theatre.
3.	45	Mexico. Spanish, Italian, German, French, English	Professional lyrical mezzosoprano, singing teacher and voice coach.	Mezzosoprano. Opera and Musical Theatre.
4.	52	Spanish. Spanish, Catalan.	Make- up artist and massage therapist	Soprano. Spanish pop.
5.	59	Catalunya, Spain, of Andalusian origin. Spanish.	Commercial and TV shows actor and producer assistant	Soprano. Spanish traditional music (copla), bolero, and Spanish pop.
6.	55	Argentina. Spanish.	Actor, playwright, director.	Mezzosoprano. Pop-rock in Spanish.

Table 1. Taxonomy of Participants, inspired by Bunch and Chapman (2000).

Data Collection Methods

The ontology and epistemology of the Feminist paradigm, based on listening to the experiences of women silenced by patriarchal power structures (Atkinson, 2017), have guided the choice of data collection methods: interviews and a focus group.

I agree with the idea that, in Atkinson's words, a feminist approach to interviews and focus groups may "help women gain a voice and build an understanding about the power structures around them" (Atkinson, 2017, p.66). A feminist methodology can assist researchers in recognising that they ought to inquire about the 'hidden' experiences of women during interviews (Atkinson, 2017).

Methods

According to Fontana and Frey (2005), structured interviews may limit the participants' possibilities for self-expression, as they follow a rigid stimulus-response format. Therefore, following Elliot (2017), Bos, Bozeman, Frazier-Neely (2020), and Kessler-Price (2022), my research methodology includes semi-structured interviews (see Appendix Two). This option explores suggested issues while enabling the interviewer to delve deeper into responses or pursue emerging themes, thus maintaining a balance between consistency and adaptability (Lim, 2025).

In addition to the literature review and the interviews, a focus group was scheduled for participants to share their experiences and thoughts that may have arisen. A focus group is a qualitative research method that gathers the experiences and perspectives of participants through facilitated discussions (Lim, 2025). This method examines people's attitudes, ideas, and reactions to specific topics within a social context (Lim, 2025). Following Munday's (2006) tenets, the interaction of the participants in a focus group represents a highly valuable tool for highlighting questions related to identity. The voice, as has previously been introduced, is an integral part of our identity (Shankar et al., 2021).

Equipment and Procedure

Interviews have been recorded using Moises' application recorder, since Voice Memos are stored in a private cloud and could be downloaded in MP3 format to my personal iPhone 11's files. Then I uploaded them to a private Google Cloud. I have used its Speech-to-Text service to transcribe the audio, and I have translated it into English using

the DeepL.com software. All translations and transcriptions have been checked and edited for accuracy (see Appendix Three).

Participants have been given the recordings and a copy of the transcripts so they could add, change, or delete any observations. The interviews took place in my studio, ensuring the participants felt comfortable. The total duration of the interviews and the focus group is 80 minutes.

Of the six participants involved, only two participated in the focus group.

Data Analysis

I initially considered a mixed-methods approach, as medical information (hormone tests, laryngoscopies) might have provided helpful data to establish a correlation between voice symptoms and specific results. However, the reflexive purpose of the study ultimately led me to first listen to the participants' experiences, analyse the conversations, and draw some conclusions that might foster further research which considers medical data. I have used reflexive thematic analysis (RTA) because of the helpful guidance of its six concrete steps, the later development of themes, and prioritisation of reflexivity (Braun and Clarke, 2006).

Ethical Considerations

The Research Ethics Committee of the University of Wales Trinity Saint David granted ethical approval (see Appendix Four).

A careful and ethical approach to data collection has been considered. Participants were provided with a participant information document, which included a detailed explanation of the project, including the nature of the required participation and the option to opt out without penalty (Lim, 2025), as well as informed consent and data anonymity (see Appendix Five). Risks of data leakage have been controlled with the use of private cloud storage.

Reflexivity as a Means of Limiting Bias

Commitment to reflexivity and seeking external feedback from the project supervisor has limited the possibility of the researchers' bias (Lim, 2025). Reflexivity involves asking: Will this research empower the participants? Would they be harmed? (Parry, 2020). Chege (2012) identified subject-centredness, sensitivity, empathy, and flexibility as key elements in reflexivity.

As recommended by Lim (2025), participants' biases have been limited through carefully conducted semi-structured interviews and member checking, where participants review the accuracy of interview transcripts.

RESULTS

The central point of this study was to actively listen to women over 45 years old who enjoy singing and may be experiencing perimenopause and menopause symptoms, to gain a clearer understanding of how hormonal shifts and ageing impact their singing and performing. This understanding may lead to the design and implementation of new pedagogical strategies in future research to address voice changes and disorders.

In the following three sections, I will provide a detailed account of how data has been collected (in-method triangulation) and further analysed, following the six steps of Reflexive Thematic Analysis to generate a set of central themes.

Data Collection and Triangulation

This project has relied on in-method triangulation, that is, multiple approaches to data gathering within the same research method (Donkoh and Mensah, 2023). Data have been collected through three methods: a literature review, semi-structured interviews, and a focus group, all within the same research approach (qualitative).

This methodological triangulation will help to understand the multiple aspects and nuances of the themes identified from the participants' experiences (Noble and Heale, 2019).

In the Discussion chapter, the origin of the data discussed is identified before reflections on the results are developed.

Thematic Framework: Reflexive Thematic Analysis (RTA)

As this has been my first research project, I have found it very helpful to rely on the concrete six steps or phases that characterise Braun and Clarke's (2006) Reflexive Thematic Analysis (RTA) (see Appendix Six).

In this section, I highlight the key features of my research in each phase of the RTA process.

The familiarisation phase started while transcribing and translating the audio recordings (recorded in Spanish and Catalan) from the interviews and the focus group. Additionally, all data gathered through the literature review were primarily classified under different collections in Mendeley Reference Manager before coding. Notes on the documents read had also been taken by hand after they were read and highlighted.

The coding phase revealed that both the data gathered through the focus group presented significant similarities. I believe this may be due to the nature of the research questions; that is, menopause and hormone-related voice changes may lead to similar discourses and, above all, the same assertive attitudes towards the renegotiation of narratives around menopause by breaking taboos (Hvas, 2023).

I initially encountered difficulties in identifying codes, since I did not want to either miss relevant data or overcode. I relied on Yardley's YouTube guides (2025) to have a better understanding of what coding entails.

I finally chose to code in one data set for both methods, even though I identified codes in the focus group data that I did not identify in the interviews. Coding the topics in the literature review appeared much easier to me.

Based on this coding, after developing a set of themes and undergoing the reviewing and refining process, seven central themes were finally generated and are listed in the following section.

Central Themes

After coding the data gathered from the interviews and the focus group, I developed seven central themes based on the participants' testimonies. One of the themes is the result of merging two themes (indicated below), since they are closely intertwined.

These are the themes developed:

- The voice is a powerful and meaningful instrument for all the participants interviewed. All participants have expressed profound emotions regarding their voices and what singing means to them.
- Participants rate their current voices better than their voices 10 or 20 years ago.
- Pregnancy and postpartum led to a dramatic negative change in the participants' voices. This has emerged as a recurring topic in the participants' discourse, to the point that I have considered it a theme that warrants further research. As this work aims to delve into the experiences of perimenopause and menopause, I will not explore this theme in depth in this essay.
- SOVT's exercises, as well as mixed voice and *twang* exercises, are key elements of a personalised voice intervention, especially for singers over 40.
- Participants have undergone patriarchal *authority* and bullying episodes in different environments: a voice coach who addresses technical, psychological, and emotional needs in a personalised way is highly beneficial, especially for singers over 40, to overcome the stress those situations create. These are two themes that have been merged for the discussion chapter, as they are closely intertwined.
- Participants have experienced dramatic personal growth in recent years.
- Body changes that occur due to hormonal shifts are a concern for all participants.

In the following *Discussion* chapter, I will delve into three of these themes, with a focus on how participants rate their current voices (see Figure 4) and how specific training and a holistic approach to voice coaching may not only mitigate the effects of hormonal voice changes but also change their perspectives about their voices.

DISCUSSION

Due to the word count needed for this research, I have chosen to discuss three of the themes exposed that mostly align with my research aim for this project: raising public awareness of the often-unavoidable vocal changes that female singers may experience from their forties onwards and how they respond to them to foster conversation, visibility, and further involvement in research.

Below are the themes to be explored, headed by subheadings.

Participants Rate Their Current Voices Better Than 10-20 Years Ago

One of the central points in the participants' testimonies is that they feel better about their voices now than twenty or thirty years ago, especially when compared with their postpartum first year and subsequent child-rearing years. Participant 1 (P1), age 58, avocational singer, post-menopausal, reported in her interview that "her speaking voice had risen considerably in pitch over the last five years". This contrasts with the assumption found in literature that, in general, F0 or *pitch* tends to lower with menopause (Lã and Ardura, 2022; Bhatia et al., 2025). She also expressed that her singing voice has reached a more consistent sound (that she refers to as "powerful") than it had two decades ago, when she had her only daughter. Although several studies prove that the decline of oestrogen levels that cause the menopausal vocal syndrome is characterised by lowered vocal intensity, vocal fatigue, and a decreased range (Raj et al., 2008), environmental factors and patterns of behaviour (vocal abuse) are also determinants in laryngeal alterations (Chernobelsky, 2002).

Participant 5 (P5), age 59, however, shared in the focus group that menopause arrived when she turned 50, and her voice, in her own words, became "rough" and "asperous", and dropped in frequency. She reported "having lost her high notes". Literature suggests that a noisier voice in females over 50 is one of the acoustic characteristics resulting from ageing (Stathopoulos, Huber, and Sussman, 2011). P5's description of her symptoms aligns with the data revealed in several studies (Berg et al., 2016; Shankar et al., 2021): she may have begun to speak with a higher sound pressure level (SPL) to compensate for her vocal discomfort. Berg et al. (2016) revealed that SPL levels increased with age, except for the shouting voice. Berg et al. (2016) also showed a

tendency for a higher SPL in smokers: P5 had been a smoker until the age of 40. In this context, data reveals that further research relating the effects of having smoked and menopause voice changes might be necessary.

This participant, however, feels much more comfortable now, as she perceives she speaks at a higher range “in front of 200 people without getting dysphonia”, and has “recovered her high notes” thanks to specific voice training that focuses on using a *mixed register* to work on her high range. The *mixed register* at higher frequencies can be helpful, not only for acoustic reasons but also for preventing and addressing voice disorders (Lee et al., 2023). This technique is discussed in the following chapter.

Participant 6 (P6), unlike P5, stated in the focus group that she did not recall any significant changes in her voice during her perimenopause and menopause. Still, she referred to “very drastic emotional ups and downs that affected her speaking and singing”, and a loss in her family that affected her a lot. She is currently using singing lessons to channel her emotions therapeutically. She referred to experiencing a new “openness” both physically and emotionally, since she felt her voice “stuck” before taking singing lessons.

Participants’ common experience of feeling better about their voices now, even after periods of vocal impairment due to menopause, pregnancy, or emotional stress, has led me to reflect on the importance of tailoring specific voice training as a valuable tool to address hormone-related voice symptoms. A recent study by Bhatia et al. (2025) demonstrates that personalised interventions are necessary to address voice changes associated with hormonal shifts and ageing. Furthermore, I believe participants rate their current voice better because they know their instrument better, thanks to specific training and attention. Additionally, having found a cultivated, safe environment of mutual support, where they are free from shaming, has encouraged singers to appreciate their voices more (Hess and Bradley, 2020). This topic is further discussed in the section that explores holistic approaches to voice lessons.

Participant 3 (P3), 46, professional classical mezzo-soprano, reported not experiencing any perimenopause symptoms yet. However, she experienced a dramatic change in her voice after her pregnancy, especially with her second child (she was 40 years old by that time. She had to modify her training approach and found another voice coach.

P3 described her voice as now being “better mixed and with many fewer breaks than years ago”.



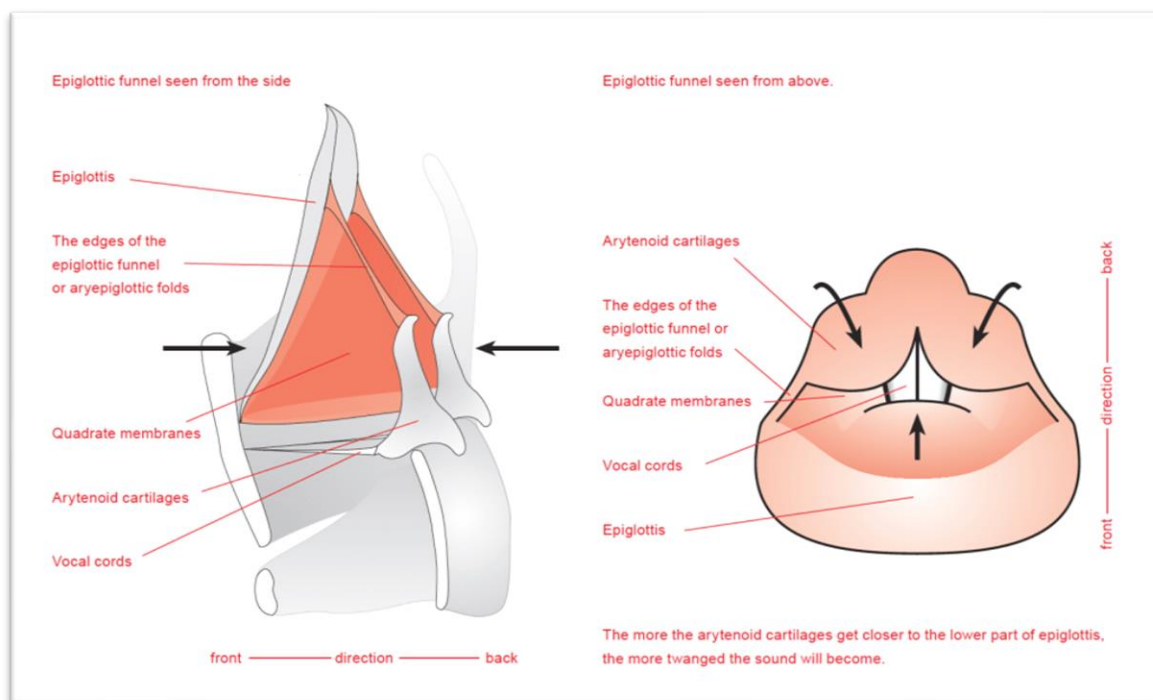
Fig 4. How participants describe their voices now, as compared to 10-20 years ago, in their own words

Both participant data and literature suggest that specific training tailored to hormone-related voice changes, along with personalisation of voice lessons, is key in addressing not only potential voice symptoms but also in empowering students to discover their genuine and unique voice.

SOVT's exercises, as well as mixed voice and *twang* exercises, are key elements of a personalised voice intervention, especially for singers over 40.

All participants who were interviewed agreed in thanking specific voice training for their voices: "more powerful" (P1) "stronger" (P2), "better mixed" (P3), "better higher notes" (P5), "more open" (P6). All participants, including the focus group members, expressed satisfaction and a sense of progress thanks to personalised voice lessons that prioritise semi-occluded vocal tract exercises (SOVTEs) and a specific training that introduces the *twang* voice quality in the exercises to use the *mixed register*. The *mixed register* connects the chest and head registers and can be perceived as a blend of the two, reaching high notes with a more consistent quality (Lee et al., 2023).

P3, a 45-year-old professional classical mezzosoprano and voice coach, highlighted that when she turned 40 and had her second child, the tone of her vocal muscles became "weak" (hypophonia). Hypophonia can be attributed to the atrophy of the vocal fold mucosa and thyroarytenoid muscles, which are common consequences of ageing (Stathopoulos, Huber, and Sussman, 2011). The acoustic signs of vocal fold atrophy are breathiness and weakness (Lombard and Steinhauer, 2007). P3 stated that her voice got better thanks to "vocal muscle toning". As a voice coach herself, she recommends "muscle toning exercises" for female singers over 40. She advocates for "the mixture of the voice" in vocal training, which she affirms can be achieved with the *twang* voice quality practice. The Complete Vocal Institute (CVI) considers *twang* as necessary for a clearer and non-breathy sound, relating an increase of 10-15 dB in volume with what they call the epiglottic funnel (CVI, 2023). The epiglottic funnel is described as a horn formed by the epiglottis at the front, and the arytenoid cartilages at the back, with the aryepiglottic folds at the side (CVI, 2023, see Figures 5 and 6).



Figs. 5 and 6: Epiglottic narrowing (funnel) seen from the side and from above, as explained by the Complete Vocal Institute (2023).

Further research is needed regarding the *twang* voice quality and its therapeutic applications; however, literature relates *twang* to improved vocal economy in loud singing and speaking (Saldías et al., 2021). P3, as a voice coach and experienced singer, entirely agrees with this approach: “I believe that women need to be aware that when they reach a certain age, they cannot neglect vocal muscle toning”.

P5 highlighted that “the warmups” she practices have “helped her in her speaking voice recovery”. I always start my voice lessons with the widely supported in the context of voice rehabilitation and training, SOVTEs. Guzmán et al. (2018) specifically refer to SOVTEs with a secondary source of vibration, i.e. water bubbling from the tube phonation with the free end immersed in water (water resistance therapy), lip trill, tongue trill, and raspberry. According to Guzmán et al. (2018), this group of voice exercises reduces muscle tension and improves self-perceived vocal resonance. SOVTEs with a secondary source of vibration could be considered as an additional treatment option for perimenopausal women experiencing voice symptoms resulting from compensatory strategies.

Participants have often undergone patriarchal *authority* and bullying episodes.

A voice coach who addresses technical, psychological, and emotional needs in a personalised way is highly beneficial, especially for singers over 40, to overcome the stress those episodes create.

The participants were open about having suffered from bullying episodes by voice coaches, peer band members, bosses, and colleagues. P1 shared her negative experiences in the past with two voice coaches, who respectively patronised her in both a mistreating and condescending way. “She said, I don’t know why you’re still here; you’re not improving as other students do” says P1 about her voice coach. She also recalled her brief stint as a background singer when she was 19 years old: she refers to the all-male band as “very critical and disempowering”. Hess and Bradley (2020) affirm that music making (and, by extension, singing) requires an environment of safety and trust, as one should not offer something so profoundly intimate as singing in an unsafe setting.

P4, a 52-year-old-woman who is in her first year of menopause, explained that singing has always been a secret passion of hers, as she considers herself a timid and insecure person. It was only twelve years ago that she started recording some demos with her partner. She shared that she had been “hiding from public judgment” for a long time. She referred to a mobbing experience at work by a boss (female) that, in her own words, “blocked her creativity”. She quit any creative activity for a long time. In a very recent study, Clavijo and Perray-Redslob (2024) reveal the patriarchal control mechanisms that companies still use for the promotion of women. These mechanisms foster the perpetuation of patriarchal dynamics by teaching them to the few women chosen to be promoted in an elitist structure (Clavijo and Perray-Redslob, 2024). These dynamics, according to Clavijo and Perray-Redslob (2024), destroy the ideas and the possibility of inventing and implementing more equitable ways of working. Patriarchal structures, therefore, still undermine women in all their life spheres.

As suggested by Flock and Aldridge-Waddon (2024), the essential principles of trauma-informed practice can serve as crucial values of best practice for a wide range of experiences, not only trauma. These principles (see Figure 7) have their origin in the Substance Abuse Mental Health Services of the USA (SAMHSA), as referenced by Flock and Aldridge-Waddon (2024).



Fig. 7: Trauma-informed care 6 Core Principles (Pennsylvania Psychiatric Institute, 2025).

As advertised earlier, these principles can be considered best practice principles, not just trauma-informed practice principles (Flock and Aldridge-Waddon, 2024). However, widespread societal problems such as bullying and power abuse affect victims psychologically and may constitute a source of trauma (Hess and Bradley, 2020). As Hess and Bradley (2020) point out, understanding all kinds of trauma is crucial for educators.

After a specific pedagogical approach based on the ethics of care, P4 considers her voice “sweet and pleasant to the ear”, something she had not considered in her younger years. She has started singing in public.

P2, a 65-year-old postmenopausal, avocational singer and former dancer, focused her conversation on how she was enjoying singing and dancing better than in her younger years, despite having lower flexibility and energy. This statement coincides with Kessler Price (2022), who collected more positive comments about their voices in women with a mean age of 65 years than those reported by peri-menopausal singers. According to Kessler Price (2010, 2022), this may suggest that the first group experienced more pleasure in singing.

P6 explained in the focus group that grief for the loss of a close relative was affecting her voice, but that singing lessons were helping her. Voice teachers are ethically obliged to address holistically what singers present (Bozeman and Ragan, 2022). As Bozeman and Ragan (2022) acknowledge, voice teachers respond to their students' needs through individual experiences as performers, teachers, and lifelong learning. Additionally, as Flock and Aldridge-Waddon (2024) note, singing teachers should develop conversational skills, including active listening and rapport building. Moreover, voice teachers should reflect on power dynamics and equalise any imbalance through co-creation and adoption of strength-based approaches (Flock and Aldridge-Waddon, 2024).

Specific training tailored to hormone-related voice changes, along with personalisation of voice lessons, is key in addressing not only potential voice symptoms but also in empowering students to discover their genuine and unique voice. Voice lessons should be holistically approached. As a voice teacher and singer over 45 myself, I believe a holistic approach to voice lessons leads to significant positive changes that I consider should be recognised and acknowledged by the voice community.

This theme also explores how some women had not even realised their potential at a younger age. All the participants in the study have highlighted the importance of starting new singing lessons, with a different approach from their former teachers.

All participants have particularly expressed their sense of content with their lives now, compared to years ago. In this line, I quote Hess and Bradley (2020, p. 14): "Music potentially offers a mechanism for healing". Musical education may also offer a means for processing complex and traumatic pasts (Hess and Bradley, 2020).

Through singing, and therefore reconnecting to their true essence, these women have learnt to value and appreciate their voices now, no matter how they sounded in the past. They have had to feel empowered first, and at the same time, this process has empowered them, in a virtuous loop that may appear as a growing and everlasting cycle.

CONCLUSIONS

The results of this research project, despite the complications that I have encountered, appear to be revealing to me. Literature supports the negative impact of hormonal changes in the female voice (Bhatia et al., 2025). However, the ongoing nature of this research and the consistency in applying a reflexive thematic analysis of the data have led me to a new *owned approach* (Braun, Clarke, and Hayfield, 2022) that might leave an open door to new perspectives. These perspectives come from the transparent testimonies of the participants involved in this study: they all feel better about themselves and their voices, even with perimenopause or menopause symptoms.

The specific pedagogical approach described, centred on addressing hypophonia with mixed-voice techniques, has proven to be highly effective for the participants involved. So has been a compassionate, empathic and non-patronising egalitarian approach to teaching. All participants have emphasised how this approach has helped them to evaluate their voices from a different perspective and to improve their singing and performing in a measurable way. I suggest, therefore, that more research and discussion among voice professionals be conducted regarding the design of specific procedures for female voices over 40.

One limitation of this project is its limited depth. Although I consider that the data collection methods chosen were appropriately selected, a more in-depth research project would be beneficial to allow a more detailed exploration. Indeed, five of the six singers interviewed are not professional singers, and their performances are not under the pressure of a highly demanding audience. However, one of the participants is a classical mezzosoprano who is actively performing, and her voice story follows the others.

I feel I have fulfilled part of my learning outcomes when it comes to identifying specific pedagogical strategies to address hormone-related voice symptoms and re-educating female voices over 40. I have learnt from the participants involved in this project that it is crucial to listen to their experiences, as well as to include them in co-creating a shared approach to fulfil their vocal and emotional needs. Writing this project has been an arduous path, especially in terms of participants' commitment and time management. This has made me reflect on my limitations, not only as a new researcher but also as a voice teacher and as a person.

APPENDICES

Appendix One: Regarding the Use of Hormone Replacement Therapy (HRT)

The fact that all six participants of this research are not on HRT is purely incidental. I decided not to consider HRT as an inclusion criterion since this was not a comparative study that might value HRT effects on women's voices.

Many women are not eligible for HRT, and non-hormonal therapy is preferred by OBGYNs in some patients (Cameron et al., 2024). This has been the case for all participants, who shared with me the supplements they use to treat menopause symptoms, including collagen, magnesium, sea buckthorn, vitamins, magnesium bi-glycinate, isoflavones, Omega-3 and Omega-7. One participant relies on homoeopathy and Bach flowers.

Appendix Two: Research Instruments

After carefully considering the research instruments I had planned to use and the realistic options available, I concluded that I would rely on the goodwill of six people I know who can be very busy by the end of this term. The commitment to a participant's diary may stress them. Also, needing two focus group meetings has been a source of stress for me, and I have asked my tutor to modify the research instruments in the following way:

A) Literature review. For my Formative Assignment for the master's degree in Voice Pedagogy, I began reviewing the literature on hormone-related voice changes. I decided to continue my research on the subject, and since then, I have been collecting and reading additional papers that will serve as sources for this project.

B) A semi-structured 15-minute interview, with the central questions relating to hormonal changes, voice changes, and the impact of perimenopause and menopause on their lives as singers, performers, and professional voice users. Participants will also discuss their methods for addressing voice symptoms (and others) if necessary.

The questions might go as follows (original Spanish, plus English translation in *italics*):

DATOS PERSONALES requeridos al inicio de la entrevista: NOMBRE DE LA PARTICIPANTE, EDAD, PROFESIÓN, CIRCUNSTANCIAS DE USO DE LA VOZ
PERSONAL DATA required at the beginning of the interview: NAME OF PARTICIPANT, AGE, PROFESSION, CIRCUMSTANCES OF VOICE USE

Bienvenida... ante todo muchas gracias por participar en este proyecto de investigación sobre la voz y cómo evoluciona con los cambios a lo largo de la vida de una mujer.

Welcome..... First, thank you very much for participating in this research project on the voice and how it evolves with changes throughout a woman's life.

1. Me gustaría que me explicaras cuánto tiempo llevas cantando/actuando/utilizando tu voz, y cómo empezaste.

I would like you to share how long you have been singing, performing, or using your voice, and explain how you started.

2. ¿Qué representa para ti LA VOZ?

What does THE VOICE mean to you?

3. ¿Has notado cambios sustanciales en tu voz en los años precedentes a la menopausia (si estás ya en menopausia) o durante la perimenopausia?

Have you noticed significant changes in your voice in the years leading up to menopause (if you are already in menopause) or during perimenopause?

4. ¿Me puedes explicar un poco estos cambios?

Could you explain these changes a bit?

5. ¿Han influido en tu uso de la voz (cantando, hablando, etc.)?

Have they influenced how you use your voice (singing, speaking, etc.)?

6. ¿Cómo te sientes al respecto de todo lo que me has contado?

How do you feel about all that you have shared with me?

7. ¿Experimentas o has experimentado otro tipo de síntomas relacionados con los cambios hormonales derivados de la perimenopausia?

Do you currently experience, or have you previously experienced any other symptoms related to the hormonal changes of perimenopause?

8. ¿Cómo han influido en tu día a día?

How have they impacted your daily life?

9. ¿Tanto para los cambios vocales como para otros síntomas, has recurrido a fármacos, opciones naturales, terapias alternativas?

For vocal changes and other symptoms, have you used drugs, natural options, or alternative therapies?

10. ¿Cuáles son estas opciones?

Which ones?

11. ¿Por qué elegiste dicha ayuda?

Why did you choose such help?

12. ¿Crees que las/los profesionales de la voz deberíamos contemplar las voces también desde el punto de vista de las diferentes etapas del ciclo de la vida?

Do you think voice professionals should also examine voices from the perspective of the different stages of the life cycle?

13. ¿Agradeces que yo te lo mencione y tenga en cuenta?

Do you appreciate me mentioning this?

14. Si no, ¿prefieres que no se observen estas circunstancias en tu educación vocal?

Do you prefer not to include these circumstances in your vocal education?

15. Por último, ¿qué característica es la que más te gusta de voz actual, que hace unos años tal vez no tuvieras?

Finally, what is your favourite characteristic of today's voice, during perimenopause or after menopause, that you may not have had a few years ago?

Muchas gracias por tu participación. *Thank you so much for your participation.*

C) Focus group. Participants will be invited to a discussion group meeting to share their experiences as female singers and professional voice users over the age of 40. The following three guiding questions, related to the conclusions from the previous literature review, will be proposed:

1) Antes de que lo mencionara en nuestras clases y entrevistas, ¿sabías algo sobre los cambios de voz relacionados con las hormonas, especialmente durante la perimenopausia y la menopausia?

Before I mentioned it in our classes and interviews, did you know anything about hormone-related voice changes, especially during perimenopause and menopause?

2) ¿Te gustaría compartir con sus compañeras participantes cómo estos cambios afectan a tu voz y cómo sientes ahora tu voz

Would you like to share with your fellow participants how these changes have affected your voice and how it feels now compared to how it did years ago?

3) ¿Te gustaría compartir con sus compañeras participantes algunos de tus remedios naturales, ejercicios, etc., que le ayudan con sus problemas de voz?

Would you like to share some of your natural remedies, exercises, and other helpful practices with your fellow participants that have helped you with your voice issues?

I will serve as a facilitator and participant observer. Notes will be recorded as audio (voice notes). The estimated duration of the meeting is 1 hour and 30 minutes (including a 15-minute break). The number of participants will range from 5 to 6.

Update: The session finally had two participants and lasted 40 minutes.

Appendix Three: Transcripts and English Translation

TRANSCRIPT Participant 1, age 58, Language: CATALAN, duration: 11'44''

molt bé [REDACTED] moltes gràcies per participar del l'estudi llavors aquí és el material és més còmode no o sigui me diguem si us plau el teu nom la teva edat la teva professió i les teves circumstàncies d'ús de la veu

vale em dic [REDACTED] estic a punt de fer 58 anys ehm jo treballo en violències masclistes eh gestionant recursos

i ehm pel que fa la veu doncs des de fa l'any passat vaig començar a fer classes d'apostas perquè jo sempre m'ha agradat cantar el que passa que eh bueno alguna vegada havia fet algun gol no eh també havia fet classes de cant però va trobava que no que no em sentia còmoda que em semblava que ho feia molt malament que em feia moltíssima vergonya i després el les classes que he fet de carn no o sigui compararem amb el que faig ara no té res que veure.. mmm no no avançaven ni ni ni pensava que em serveixin és més pensava justament que que no podia fer res eh

recordes que tenies més o menys a la que quan vas fer aquestes classes i en quines èpoques de la teva vida sempre per exemple? si no sempre m'ho pots afegir després perquè et passaré la transcripció m'ho pots afegim dates

t'ho intentaré mirar perquè potser que era quan estava el poble sec i aleshores era just abans de tenir l'alba, que devia ser devia tenir eh en trental i pico... mhm mhm mhm-mhm i ja està aleshores algun dia em va dir que hem preparés alguna cançó, me la feia cantar asseguda sense moure amb lo qual jo eh clar pot trobar bé no sentada no aleshores eh bueno jo cantava em va dir que no me transmites nada no i a més a més deia una mica com que clar és que mmm és que clar un i sodras alumnes no però josí sí que bueno pues res el m'acompanyar amb la guitarra i tal o sigui només al principi el el primer dia sí que em va fer una prova no em va fer una escala ostres pues tens mmm registra molt ampli no sé què i després eh doncs cantaven no i i llavors bueno pues ja està i jo ja està mm què no hi han ja et surt bé vinga doncs eh ara què vols fer no i allò pues pues no sé jo què sé vull dir però tècnica feia molt poquet, després a tot aquest periple de classes i tal

què és per tu la veu en general la veu com a instrument tant de cant com la comunicació què representa per tu la teva veu per tu mateixa

mhm-mhm clar és una cosa molt molt personal no aleshores a l'hora de cantar no doncs clar o sigui jo pensava pues en una bola prendre toca la terra simplement fa classes de guitarra i ja està no s'exposa tant però la veu és una cosa que t'estàs exposant no i que a més a més eh és eh forma part de tu i i tu no no has escollit com eh com ha de ser per tant pots tenir una veu preciosa o només enllà de que sàpignes no canta no amb lo qual doncs eh mm accents a vegades amb desvantatge no

ehm però no no escoltar meva sinó sinó canto bé saps mhm mhm mhm vaig començar les primeres coses que vaig fer que jo crec que tenia 19 anys i que a més a més vaig estar amb una banda que no ens ajudaven gens no ens explicaven res no ni ni ni ni una octava per arribar i és el que cony és una optava no l'ús no eh clar la la la estavem acollida si no ens ha sortia la veu en sentien molt insegures no eh ara ja no o sigui com que clar també sempre penso que que com jo em sento res comencem en els altres no

perquè clar nosaltres ens ascendim de dintre no així és evidentment jo al final no sé quina veu eh tinc pels altres no eh sí que és veritat que alguna vegada m'han fet fer alguna o locució perquè em deien que tenia una veu com molt maca i molt sensual i tal no i a mi em sorprenia

aleshores bueno pues si la gent em diu això o sigui fantàstic no però sempre he pensat que no tenia força mhm mhm mhm aleshores el carlitos en el seu temps em va dir a tu teniria molt bé fer-los per per bueno pel les diferents veus per la vida i mirar l'any passat vaig dir o sigui, i em vaig apuntar i vaig pensar bueno si no ja faran fora si no ho faig bé

bueno pues vaig començar i de sobte la gent em deia que cantava bé i a més a més cada vegada tenia més xulo amb lo qual ara per mi la veu és com una un és potència saps o sigui és és como un un eina és que no sé no m'agrada no m'agradaria alma no sé com dir-li però alguna cosa no que que em permet doncs som molt potent i expressa molta potència mhm

molt interessant moltes gràcies

parlem una mica del tema de com la veu pot canviar quan ets una dona al llarg del temps...canvi significatiu eh

la veritat és que no no no sóc conscient jo no sé conscient mhm-mhm però et diré que que que m'agraden molt més també de veu ara que no pas abans mhm

i sí sí sí potser abans la tenia més greu el parlar també, abans de la menopausa abans en general potser és abans de demanar a portar això no no t'ho podria assegurar ara sí que ens diguis això molt interessant pensar que potser és això perquè aquesta profe de carn que tenia em deia és que tu hauries d'esforçar-te en parlar més degut mhm llavors hauria des de fer no o sigui puja alta i tal el que sí que manera donat però això fa molts anys és que quan jo perquè anem costa cridar llavors quan vull cridar he de pujar al top sí sí sí perquè aleshores no desgastes i a persones que tenen molta capacitat per per cridar perquè tenen la veu més pesada i que parlàvem de les lleugeres i tant però després es fan molt de mal ...sí ara la qualitat de vida que hagin afectat de la teva qualitat de vida si o sigui crec que per mi lo més eh significatiu va ser a nivell emocional mhm perquè no me'n vaig adonar que o sigui de sobte pensava hòstia què em passa no com quan ets adolescent i tens la regla però però molt més extrem no aleshores amb amb qüestió d'un dia o de tres dies sobre tres hores podia estar en la misèria o està súper eufòrica de fet les eufòries era lo que més em preocupava perquè clar hem ficava en cada color perquè era si a toba saps a nivell social mhm no no podré no ehm crec que aquí vaig va em vaig anar establitzar després hi ha hagut una època també de d'insom i tal però que també se m'ha passat tot això els fogots pues tenco però oye tampoc apareix

totes aquestes coses no m'importa no i després lo que no porto massa bé és que tan tema del els canvis corporals no mengresar lo de futur en este eh abdominal no sé què tal hòstia i em costa reconèixer el meu cos i això ara decantar o per exemple de exposar-te cantant i pugem una escenari de condicionat eh no mhm mhm no perquè aviam en veig amb vídeos i de la madrid però sí una bola no aleshores què qüestiona no no m'agraden però és evident que si tu et sents no eh segura amb el teu cos doncs aquesta aquesta seguretat doncs eh doncs impregnar tot el que fas no està clar però bueno jo crec que en el conjunt quan l'altre dia vaig cantar és que en aquell moment no pensaven res d'això simplement lo que o siguiés lo que hi ha i punto no perquè totes aquestes coses no m'importa no i després lo que no porto massa bé és que tan tema del els canvis corporals no mengresar lo de futur en este eh abdominal no sé què tal hòstia i em costa

reconèixer el meu cos i això ara decantar o per exemple de exposar-te cantant i pugem una escenari que condicionat eh no mhm mhm no perquè aviam en veig amb vídeos i de la madrid estava cantant i la resta molt important no i i i era hòstia ho estic gaudint i no pensaven o o amb sento més guapa almenys no mhm mhm mhm prens algun tipus de suplement vitamínic eh o complement el col·legi pel tema davant ...estava cantant i la resta molt important mm-hmm no i i i era hòstia ho estic gaudint i no pensaven o o amb sento més guapa almenys no mhm mhm mhm

prens algun tipus de suplement vitamínic eh o complement pel tema davant menopausa

mmm prenc de manera bastant irregular col·laixen i magnesi mhm per les coses locals

o sigui molt bé creus que els professionals de la veu hauríem de contemplar la veu en aquest cas de la dona femenina també des dels punts d'avistes diferents etapes que impliquen els canvis que és que és una cosa potser una mica que no estem comptar abans d'allò que ho havia preguntat algú no

la veu en aquest cas de la dona femenina també des dels punts d'avistes diferents etapes que impliquen els canvis que és que és una cosa potser una mica que no estem compte abans d'allò que ho havia preguntat algú no

bé doncs hem d'anar totes les eh es fenomens no eh em fermentats o el que sigui que tindria veure amb les dones que estem poc estudiat això està clar no aleshores ehm

jo crec que que evidentment no les els els cicles vitals eh influenciant amb tot a part de a nivell hormonal que és evident que hi ha canvis no pues perquè quan ponente no aleshores en cada moment doncs tu tens una circumstàncies molt molt pròpies d'aquell secretari no o sigui jo què sé l'adolescència no està clar la bellesa eh mm la maternitat els dolç no les morts totes aquestes coses

tot això evidentment impacte en en en la teva fisiologia i i també amb la teva emocionalitat i i una cosa va associada amb l'altre mhm està clar està clar i les dones passem per canvis a la vida molt més que els homes perquè tenim pues això no tot el tema hormonal tot és la la menstruació no eh la menopauza eh el el els embarassos les ovulacions que són una passada no eh el nostre cos hòstia està sotmès a una pressió brutal no aleshores això mmm entenc que tu aprecies que un professional de la veu en aquest cas que és el el meu que es particular tingui en compte això en la seva el seu weborització pedagògica per suposat perquè no és evident que que que jo no cantaré ni eh podré modular el el meu parell fonador igual que ho diu molt bé amb lo qual les diferències s'han de tenir en compte està clar

si jo intento amb totes les el que té a veure amb el meu cos o el meu benestar eh emocional eh està acompanyat per professionals que tenien en compte ehm el el fet diferencial de ser donar o sigui van ser vaig amb una psicòloga com si si vaig a una dieta per exemple

molt bé per últim eh quina característica de la teva veu actual la cara escoltes d'aquest en pràctiques eh més destacades sobretot perquè potser fa uns anys no la tenies o no n'eres conscient mm-hmm una dues característiques

pues pues jo diria que que és melòdica mhm

i bonica mhm mhm eh i potent necessitaves no sentir aquest eres capaç de fer-ho no una una obrir la boca i aquest sortir un xorro és una meravella bueno parlava que em toca no no no vamos o sigui jo flipo pues moltes gràcies que sense tu o sigui mm estàs ajudant descobrir coses molt boniques sí sí sí moltes gràcies moltes gràcies participació

et passaré eh la transcripció per si vols afegir algun detall per escrit de cara i informa final i el teu nom no sortirà sortirà amb una g me'n d'acord i la teva professió vale moltes gràcies

no a tu

Participant 1 ENGLISH TRANSLATION (translated with DeepL.com, edited by Lydia Peters, answers in Italics). Duration: 11'44''

Very good, [REDACTED], thank you very much for participating in the study. **Please tell us your name, your age, your profession, and your voice usage circumstances.**

Okay, I'm [REDACTED], I'm about to turn 58. I work as a social worker with victims of sexist violence and resource management.

And, um, as for my voice, well, last year I started taking gospel lessons because I've always liked singing. The thing is, I had done some singing lessons before, but I didn't feel comfortable with them. I felt like I was doing it very badly, which made me feel very embarrassed. And then the singing lessons I've done, well, they're nothing like what I do now...Mmm, no, no, they didn't help me at all, and I didn't think they were useful. I just thought that I couldn't do anything else.

Do you remember when you took those classes and at what stage of your life? If not, you can always add it later because I'll send you the transcript, you can add it.

I will try to look it up because maybe it was when I was living in Poblessec, Alba hadn't been born yet, so I was thirty-something-...mhm, mhm, mhm -mhm and that's it, and I went to a singing teacher who only gave me vocalise exercises with the piano, then one day she told me that I prepared a song and I had to do it sitting down, difficult to sing sitting down without moving, which I can clearly find, well, not sitting down, then, well, I was singing, she said I had no feeling when singing, and what's more, she said I don't know what you're doing here, because you don't get it, and well, the other students get it, nothing, so I fet what am I doing here,,then I attended classes with Carlitos Bisonte, he accompanied me with the guitar and stuff, he did a range test, he didn't give me a scale, oh, well, you have a very wide range, I don't know what, and then, well, he used to say: well done, that's it, you got the song; , well, I don't know, I I mean, but the technique was very poor, and I felt it did not help at all either.

What does your voice mean to you in general? Your voice as an instrument for both singing and communicating. What does your voice mean to you personally?

Mhm-mhm, sure, it's something very personal, but when it comes to singing, no, of course not. I was thinking, well, if you play an instrument, just taking guitar lessons and that's it, you don't expose yourself that much, but your voice is something you expose, and what's more, it's part of you, and you haven't chosen how it is, so you may or may not have a nice voice, beyond your technique or knowledge. Sometimes you think: it's not my fault if I don't sound better.

So, when I was 19 I was in a band as a background vocalist and they made us feel very bad about our voices, to Liss and I. But not anymore.

I usually think that I don't hear my voice as others hear me. Some people have told me that I have a very sensual voice, I even did some voiceovers, but I was surprised. I always thought my voice lacked strength. And Carlitos told me I had to join a gospel choir, and I thought, if they don't like me, they'll fire me. Surprisingly, people started telling me I could sing. And the more I sang, the stronger was my voice. So I started to think: my voice is powerful, I have a voice. It's a...tool, a weapon, even I do not like to say tool or weapon.

Very interesting, thank you. Let's talk about the voice of a woman through her lifespan. Do you remember any significant change in your spoken voice during your perimenopause/menopause?

No, not really, I am not conscious of it. I have to say, though, that I like my voice better now. Plus, I can even say that my voice sounded lower before. My first singing teacher used to tell me I had to speak "higher", I did not know how to speak loud and I literally couldn't; now I know how to project my voice.

That is very good, using twang to project, you know...

In my case, the impact of perimenopause and menopause was mostly emotional, as when you are a teenager but worst, euphoria moments and lowdowns, especially the euphoria moments really worried me because they were exaggerated...physically I had insomnia and hot flashes but they didn't affect me as the body changes, The fat around my belly...I did not recognize my body anymore...

Does this affect your singing, when on stage?

No, when I am singing I do not think of it; I sang you know the other week and I did not even think of it...

Are you taking any supplements or vitamins for the menopause?

Yes, I am taking collagen and magnesium.

Do you think voice professionals should also examine voices from the perspective of the different stages of the life cycle?

Any phenomena related to women is less studied. I think, obviously, the cycles of life influence everything, apart from the hormonal level, where there are obviously changes, because when you perform, at every moment, you have circumstances that are very specific to that moment, or whatever, I don't know, adolescence, motherhood, grief, all these things.

And also with your emotionality and something associated with another person, mhm, it's clear, it's clear, and women go through life changes much more than men because we have, well, not only the hormonal issue, it's all the menstruation, eh, the menopause, eh, the pregnancies, the ovulations, which are amazing, eh, our bodies, damn it, are under brutal pressure, no, so, of course.

I understand that you appreciate that a voice professional, in this case, which is my particular case, takes this into account in their teaching approach,

Of course, because it's not obvious that I'm not going to sing or that I'm not able to modulate my instrument as a man, as you rightly say, so the differences have to be taken into account, that's clear.

If I try with everything that has to do with my body or my emotional well-being, I am accompanied by professionals who take into account, um, the difference between being a man and being a woman, so I went to the psychologist as if I were going on a diet, for example!

Very well, finally, what characteristic of your current voice, of your face, do you hear this in practice, eh, would you highlight above all because perhaps a few years ago you didn't have it or you weren't aware of it, mm-hmm, one or two characteristics

well, I would say it's melodic, mhm

and beautiful, mhm, mhm, eh, and powerful, you have to hear this, you are capable of doing it, no, no, no, open your mouth and it will come out, it's wonderful, good conversation, no, no, no, come on, I'm amazed, thank you very much, without you, mm, you're helping to discover very beautiful things, it's incredible, yes, yes, thank you very much, thank you very much for participating, I'll send you the transcript in case you want to add any details in writing and the final report, and your name will not appear. You'll be with like-minded people and your profession is worth a lot.

Thank you very much no, to you.

TRANSCRIPT Participant 2, 65, Language: SPANISH, duration: 10'18"

bueno [REDACTED] buenas tardes muchísimas gracias por participar de esta entrevista

gracias a ti

me gustaría conocer tu nombre tu edad y tu profesión antes de que me cuentes tus circunstancias de uso de la voz por favor

me llamo [REDACTED] tengo 65 años y tengo una agencia bueno de movilidad para adolescentes para adultos que los envío pues a estudiar trabajar a otros países y es una una profesión un trabajo que me gusta mucho porque sé que puedo cambiar vidas y además te comunicas mucho en tu trabajo verdad me tengo que comunicar por teléfono y bueno teléfono y a veces a nivel personal lógicamente por tanto utilizas también la voz en el trabajo además del canto utilizo la voz en el trabajo

ahora primero hablaremos del canto después de cómo utilizas tu voz en el ámbito laboral me gustaría saber cuánto tiempo llevas cantando y cómo empezaste o cómo sentiste que podías cantar o qué querías cantar

bueno yo empecé en el año 2017 bueno ya había hecho unas terapias unos talleres de meditación con una mujer increíble y ahí en las meditaciones empecé a ver que había voz que había algo y pensé bueno pues voy a voy a investigarlo entonces estuve tomando unas clases con un profesor con Jordi muy majo que me abrió un poco el camino y de ahí pues luego ya pasé a estado en dos coros y después también estuve con otra profesora durante un año en el más lírico pero me di cuenta que bueno para

ser lírico tienes que estudiar mucho más y bueno no no tengo ganas ni me interesa y bueno encontré a Lidia y fue un descubrimiento...luego de música moderna y un poco clásico también pero sobre todo costo moderno muy bien

tú has notado en los últimos años o en los años precedentes a la menopausia a la retirada de tu ciclo cambios significativos en la voz?

yo no creo tampoco no era consciente está claro no no eran consciente que tenía una voz que podía aparte de hablar comunicar de otra manera cantando y haciendo pues por ejemplo speech no entonces no me no me no noté nada fue después de tener los hijos cuando realmente empecé a investigar lo que había lo que había descubierto

qué significa la voz para ti qué importancia tiene en tu vida el uso de tu voz

primero es emoción, el poder comunicarte bien y disfrute el poder comunicarte bien y por tanto pienso si vinculas realmente el uso de la voz a las emociones y a disfrutar

no tomas o intentas no tomar pregunto pero tú me me corriges si me equivoco nada que tenga que ver con la voz como una obligación o como algo que compresión quiero decirte hay presión en tu performance se ha hablada o sea cantada o realmente te has podido extraer de esa presión y si un día llegas llegas y si un día no llegas cómo vives que tu voz sea la que es según el día según la hora según te levantes para seguir disfrutando cómo lo llevas

yo la verdad es que el tema de la voz lo llevo con disfrute y es un disfrute diario no lógicamente tienes una voz más bueno más clara otro día menos pero para mí la voz y la música es un sentimiento es una emoción y está perpetuamente en mi vida de una u otra manera eso es lo que he descubierto después de

eres una persona que te cuidas mucho y que además ha sido bailarina eres bailarina has bailado muchos años por ejemplo en cuanto a físicamente cuando llegaron los cambios físicos oseos de derivados de la perimenopausia y la menopausia como bailarina notaste algún impedimento notaste que tu cuerpo necesitaba algún extra o que tenías algún impedimento a la hora de ciertos movimientos etcétera etcétera

bueno sí que se nota un poco sobre todo después de tener hijos embarazos y todo esto si no eres muy constante y yo tengo la suerte de serlo entonces sí que se nota que hay una depresión a nivel físico notas que no estás en tu mejor momento pero en el momento que ya te recuperas físicamente y vuelves otra vez realmente el cuerpo responde sin tener la agilidad por ejemplo y y la energía que tenía cuando tenía 20 años eso está claro pero sí que lo disfrutas de otra manera sí por tanto el cuerpo te sigue respondiendo a todos a todos los ejercicios nuevos sean vocales o físicos o el cuerpo tiene memoria y lo reconoce y la voz tiene memoria y lo reconoce es como montar en bicicleta o esquiar yo sigo esquiando y lo disfruto mucho y cada vez que me monto en el esquí digo a ver qué tal y a los dos minutos ya digo bueno esto es como ir en bicicleta o conducir son cosas que no se olvidan que están ya impresas en el ADN

por tanto si tuvieras que recomendar algún tipo de mantenimiento suplemento o forma de encarar ciertos cambios que afortunadamente son inevitables porque es buena señales qué recomendarías?

yo recomendaría que básicamente que básicamente que cada uno tiene que ver hasta dónde tiene su límite ampliar este límite pero sin llegar a los límites que uno tenía hace 20 o 30 años entonces sabiendo tu límite seguir disfrutando porque se puede disfrutar

de muchas maneras no hace falta que hagas un gran encargo un spagat puedes hacer medio y estás disfrutando igual o estás bailando una música con otro tempo pero es un disfrute igualmente porque el músculo necesita aire músculo necesita aire como la voz y movimiento y movimiento no dejarlo de hacer no dejarlo de hacer es constancia sí constancia todo

en el informe de este trabajo se está prestando mucha atención a las mujeres por la generación X está entrando en menopausia que entran en menopausia y claro se ese mercado en algunos puntos o en algunos momentos parece que patologizante cómo bailarina como cantante te gusta que se contemple en estas cosas o crees que homogeneizar también es una forma de integrar

yo creo que es interesante siempre personalizar pero tampoco sin llegar al extremo de crear un problema de esto mismo cada uno tiene que ir eh viéndose y trabajándose dependiendo de cada de cada cuerpo cada voz pero sin demasiada importancia yo creo que cada uno es único y hay que atender las necesidades pero sin llegar a hacer un gran problema de ese tema de nada de nada yo creo que hay que aligerar todo en la vida

uy qué grande muy bien muy bien bueno por último, qué característica de tu voz actual que a lo mejor sea diferente a tu voz de hace 30 a 20 años tienes y te gusta más

a ver yo hace 20 o 30 años no sabía que tenía voz ahora tengo sé que tengo voz y sé que puedo utilizarla para disfrute mío y para disfrute de los demás entonces claro para mí es un descubrimiento fantástico claro o sea yo estoy encantada de la muerte porque para mí yo no tenía voz era una voz pues eso que hablaba y pero que sí que y yo siempre digo a todo el mundo todos tenemos voz si la trabajamos hay muchos tabús y muchos prejuicios sobre ese tema y todos podemos cantar no hablamos de grandes voces pero todos podemos llegar a cantar o disfrutar de nuestra voz que te voy a decir yo absolutamente de acuerdo

muchísimas gracias por tu ayuda

muchas gracias a ti

Participant 2 ENGLISH TRANSLATION (translated with DeepL.com, edited by Lydia Peters, answers in Italics). Duration: 10'18"

Hello [REDACTED], good afternoon. Thank you very much for participating in this interview. Thank you.

I would like to know your name, age, and profession before you tell me about your circumstances regarding voice use.

My name is [REDACTED] I am 65 years old and I have an agency that helps teenagers and adults to study and work in other countries. It is a profession, a job that I really like because I know that I can change lives.

You also communicate a lot in your work, right?

I have to communicate by telephone and sometimes on a personal level, of course, so you also use your voice at work. In addition to singing, I use my voice at work.

Now, first we'll talk about singing, and then about how you use your voice at work. I'd like to know how long you've been singing and how you started, or how you felt you could sing, or what you wanted to sing.

Well, I started in 2017. I had already done some therapy and meditation workshops with an incredible woman, and during the meditations I began to realise that I had a voice, that there was something there, and I thought, well, I'm going to look into it. So I took some classes with a very nice teacher, Jordi, who opened the way for me a little, and from there I went on to join two choirs and then I also studied with another teacher for a year in the most lyrical side, but I realised that to be lyrical you have to study a lot more, and I don't feel like it, nor am I interested in it. Then I found Lydia, and it was a discovery... choirs were of modern music and a little classical too, but above all modern.

Have you noticed any significant changes in your voice in recent years or in the years leading up to the menopause and the end of your cycle?

I don't think so, I wasn't aware of it, of course, I wasn't aware that I had a voice that could communicate in other ways besides speaking, by singing and doing speech, for example, so I didn't notice anything. It was after I had children that I really started to investigate what I had discovered.

What does your voice mean to you? How important is the use of your voice in your life?

First, it's emotion, being able to communicate well and enjoying being able to communicate well.

So, I think if you really link the use of your voice to emotions and enjoyment, you don't take or try not to take, I ask, but you correct me if I'm wrong, anything that has to do with the voice as an obligation or as something that, I mean, there's pressure in your performance, it's been talked about, I mean sung, or have you really been able to extract yourself from that pressure, and if one day you arrive, you arrive, and if one day you don't arrive, how do you live with your voice being what it is depending on the day, depending on the time, depending on how you wake up, to continue enjoying. How do you deal with it?

The truth is that I enjoy the subject of the voice, and it is a daily enjoyment. Logically, some days your voice is better, clearer, and other days less so, but for me, the voice and music are a feeling, an emotion, and they are perpetually in my life in one way or another. That is what I have discovered after.

You are someone who takes good care of yourself and who has also been a dancer. You are a dancer and have danced for many years. For example, in terms of physicality, when the physical and skeletal changes of perimenopause and menopause arrived, as a dancer, did you notice any impediments? Did you notice that your body needed something extra or that you had any impediments when it came to certain movements, etc.?

Well, yes, you do notice it a little, especially after having children, pregnancies and all that. If you're not very consistent, and I'm lucky to be so, then you do notice that there is a physical decline. You notice that you're not at your best, but once you recover physically your body responds maybe without having the agility, for example, and the energy that it had when you were 20, that's clear, but you do enjoy it in a different way. So, your body continues to respond to all the new exercises, whether vocal or physical. Your body has memory and recognises it, and your voice has memory and recognises

it. It's like riding a bike or skiing. I still ski and I enjoy it a lot, and every time I get on my skis, I say, "Let's see how it goes," and after two minutes I say, "Well, this is like riding a bike". I still ski and enjoy it very much, and every time I get on my skis, I say, 'Let's see how it goes,' and after two minutes, I say, 'Well, this is like riding a bike or driving; these are things you don't forget, they're already imprinted in your DNA.'

So, if you had to recommend any kind of maintenance, supplement, or way of dealing with certain changes that are fortunately inevitable because they are good signs, what would you recommend?

I would recommend that basically, that basically, everyone has to see where their limit is, push that limit, but without reaching the limits they had 20 or 30 years ago. Then, knowing your limit, continue to enjoy yourself because you can enjoy yourself in many ways. You don't have to do a big split, you can do half a split and enjoy yourself just as much, or you can dance to music with a different tempo, but it's still enjoyable because muscles need air. Muscles need air, just like the voice and movement, and movement. Don't stop doing it. Don't stop doing it. It's consistency, yes, consistency, everything.

Generation X is entering menopause, and of course, that market in some ways or at some times seems to be pathologising. As a dancer, as a singer, do you like to be considered in these things, or do you think that homogenisation is also a way of integrating?

I think it's always interesting to personalise, but without going to the extreme of creating a problem out of it. Everyone has to see themselves and work on themselves depending on their own body and voice, but without giving it too much importance. I think everyone is unique and we have to attend to their needs, but without making a big deal out of it. I think we have to lighten everything in life.

Wow, that's great, very good, very good. Finally, what characteristic of your current voice is perhaps different from your voice 30 or 20 years ago that you like better?

Let's see, 20 or 30 years ago I didn't know I had a voice. Now I know I have a voice and I know I can use it for my own enjoyment and for the enjoyment of others, so of course for me it's a fantastic discovery. I mean, I'm delighted because for me I didn't have a voice, it was just a voice that spoke, but I always say to everyone that we all have a voice if we work on it. There are many taboos and many prejudices about this subject, and we can all sing. We're not talking about great voices, but we can all sing or enjoy our voices. I couldn't agree more.

Thank you very much for your help.

Thank you very much.

TRANSCRIPT Participant 3, 45, Language: SPANISH, duration: 05'01''

me gustaría conocer tu nombre tu edad y tu profesión antes de que me cuentes tus circunstancias de uso de la voz por favor

Soy [REDACTED], tengo 45 años, soy cantante profesional, mezzosoprano lírica, vocal coach y profesora de canto.

me gustaría que me explikas cuánto tiempo llevas cantando y trabajando con tu voz.

Llevo aproximadamente trabajando la voz desde los 19 años, aunque ya cantaba, 17 años, y enseñando desde hace 20 años.

muy bien, qué representa para ti la voz?

representa mi vida, es mi vida entera, y en el caso de los demás un potente instrumento de comunicación.

has notado cambios sustanciales en tu voz en los años más recientes, coincidiendo con los primeros síntomas de la perimenopausa? Cambios sustanciales?

curiosamente yo justo estos últimos 10 años... sufrí un cambio importante en la voz después de mis embarazos, que tuve un desequilibrio hormonal muy heavy, en especial después de mi segundo hijo....ahora tengo la voz mejor que hace unos años... porque inicié un trabajo vocal específico...

gracias, perfecto, puedes hablarnos un poquito más de este trabajo vocal específico?

sí,venía de una hipotonía vocal muy fuerte. Fue gracias al desequilibrio hormonal que descubrí esta hipotonía y me centré en ejercicios para recuperar el tono muscular de la laringe. Por eso al llegar a esta edad no he sentido un cambio a nivel muscular.

yo creo que que una mujer tiene que ser consciente que al llegar no puede dejar de lado la tonificación de la musculatura vocal

por tanto ahora no te pregunto como cantante, sino como vocal coach, buena forma de los posibles cambios que puedan aparecer con la perimenopausa y menopausia son los ejercicios de tonificación de musculatura vocal?

Totalmente, yo creo que una mujer tiene que ser consciente que al llegar a esta edad no puede dejar de ejercitar la musculatura, es súper súper importante, sobre todo si es profesional de la voz.

cómo son los ejercicios que propones?

Bueno, tú los conoces, semiocuidos con erre, k, g, etc.

qué característica de tu voz destacarías ahora, que no tuvieras hace 20 o 30 años?

la mixtura, puedo cantar de arriba a abajo con una voz compacta,y que han desaparecido los quiebres, no es que no los tenga pero aparecen con mucha menor frecuencia.

Participant 3 ENGLISH TRANSLATION (translated with DeepL.com, edited by Lydia Peters, answers in Italics). Duration: 05' 01"

I would like to know your name, age and profession before you tell me about your voice usage circumstances, please.

My name is Grissel Ruiz Gómez, I am 45 years old, I am a professional singer, lyric mezzo-soprano, vocal coach and singing teacher.

I would like you to tell me how long you have been singing and working with your voice.

I have been working on my voice since I was 19, although I had already been singing since I was 17, and I have been teaching for 20 years.

Very well, what does your voice mean to you?

It means my life, it is my whole life, and in the case of others, it is a powerful instrument of communication.

Have you noticed any substantial changes in your voice in recent years, coinciding with the first symptoms of perimenopause? Substantial changes?

Interestingly, in the last 10 years... I underwent a significant change in my voice after my pregnancies, when I had a very severe hormonal imbalance, especially after my second child... Now my voice is better than it was a few years ago... because I started specific vocal work...

Thank you, perfect. Can you tell us a little more about this specific vocal training?

Yes, I had very severe vocal hypotonia. It was thanks to the hormonal imbalance that I discovered this hypotonia and focused on exercises to regain muscle tone in my larynx. That's why, now that I've reached this age, I haven't felt any change at the muscular level.

I believe that women need to be aware that when they reach this age, they cannot neglect vocal muscle toning.

So now I'm not asking you as a singer, but as a vocal coach, are vocal muscle toning exercises a good way to deal with the possible changes that can occur with perimenopause and menopause?

Absolutely. I believe that women need to be aware that when they reach this age, they cannot stop exercising their muscles. It is extremely important, especially if they are professional singers.

What kind of exercises do you recommend?

Well, you know them, semi-occluded, vocalise with r, k, g, etc.

What characteristic of your voice would you highlight now that you didn't have 20 or 30 years ago?

The mixture. I can sing from top to bottom with a compact voice, and the breaks have disappeared. It's not that I don't have them, but they appear much less frequently.

TRANSCRIPT Participant 4, 52, Language: SPANISH, duration: 18'28"

Me gustaría que me explicaras cuánto tiempo llevas cantando/actuando/utilizando tu voz, y cómo empezaste.

hola Lidia bueno pues a ver cantando para mí llevo toda la vida desde que era pequeña desde que era pequeñita me gustaba cantar me gustaba cantar en casa me me gustaba cantar en el coche con mi hermana cuando íbamos por ahí con mis padres me gustaba también aprenderme las canciones veía los a los artistas iba pasando el vídeo hasta que me iba aprendiendo la canción y bueno toda la vida pero sí que es verdad que era muy muy muy tímida entonces solo cantaba en un entorno muy familiar o sea con mis padres mi hermana o la ducha y nadie más sabía si yo cantaba bien o cantaba mal y ya está, cuando me hice mayor entonces sí que nadie sabía cómo cantaba porque me daba más vergüenza todavía y sí que es verdad que me moría de ganas porque alguien me descubriera o pensara que cantaba bien, pero bueno no era capaz no me atrevía me daba mucho mucha vergüenza mucho miedo y no lo hacía y bueno me fui haciendo mayor, y hace unos 12 años empecé a tener más seguridad en mí misma a quererme más y entonces empezó a darme igual si me escuchaban cantar si me decían no canta bien o cantan mejor o peor empezó a darme igual y entonces pues cantaba por todas partes no cantaba profesional no cantaba una canción para que me escucharan. pero sí estaba en cualquier sitio en el trabajo o lo que fuera pues yo me ponía a cantar y bueno así fue como un compañero y me dijo que cantaba muy bien yo no me lo esperaba para nada y luego mi pareja también cuando empecé con él y ahí fue a raíz de empezar con mi pareja cuando empecé a cantar un poquito más a aprenderme mejor las canciones a grabarlas, pero siempre para mí no profesional.

¿Qué representa para ti LA VOZ?

bueno para mí la voz representa el alma que todos tenemos dentro porque todos la tenemos y luego hay personas que son un poquito bueno más especiales en eso

Has notado cambios sustanciales en tu voz en los años precedentes a la menopausia (si estás ya en menopausia) o durante la perimenopausia?

bueno ahora estoy en menopausia creo bueno se puede decir perimenopausia porque todavía no ha pasado un año y no he notado nada físico que me pueda producir que cantar peor o lo que sea lo que he notado es que a medida que me he hecho mayor tengo más sabiduría y eso sí que influye en mi voz yo creo que ahora puedo cantar mejor porque me conozco más a mí misma bueno soy más sabia y soy mucho más segura de mí misma que antes muchísimo más y yo creo que eso es muy importante a la hora de cantar y a la hora de cualquier cosa en la vida pero yo creo que para la para cantar también es importante es muy importante pero no me ha influido bueno en la menopausia lo único que he notado son otros síntomas que no que no me han influido para para cantar síntomas de sofocos y pero no mucho más la verdad...

¿Han influido en tu uso de la voz (cantando, hablando, etc.)?

bueno sí sí que experimento por ejemplo tengo tengo asma y sí que lo noto a la hora de cantar creo que es lo que me influye a lo mejor estoy equivocada también ya no soy tan tímida pero sigo poniéndome nerviosa y eso también me influye a la hora de cantar porque bueno lo noto lo noto en la voz que se me va yendo también puede ser porque bueno estoy aprendiendo técnicas de voz contigo y noto que es mucho mejor ahora pero sigo sintiendo ese moco en el pecho que seguramente es o del asma o que me pongo nerviosa todavía es pronto pero pero vaya por lo demás muy bien

¿Tanto para los cambios vocales como para otros síntomas, has recurrido a fármacos, opciones naturales, terapias alternativas?

ahora mismo estoy tomando espinos amarillo bueno soy consciente porque escuchaba muchos podcast y he intentado aprender bastante de la perimenopausia y de la

menopausia lo que nos va bien a las mujeres y estoy tomando espinoso amarillo y todo lo que todos los alimentos que son naranjas son muy buenos porque son antiinflamatorios también tomo mucha cúrcuma canela y bueno sé que va muy bien para las mucosas todas las mucosas que tenemos y entonces la garganta pues también lo agradece claro también he tomado magnesio bis glicinato de magnesio que va bien también para dormir mejor calmar vitamina C en algunas ocasiones y sobre todo también que es muy importante para la menopausia y la Amper y menopausia omega 3 y luego está el Omega 7, que ya lleva todo lo que he dicho antes de espinoso amarillo lleva muchas cosas que son naranja y nada yo creo que me ayuda también me ayuda mucho lo que he dicho antes para mí es muy importante cómo he crecido como persona cómo me siento ahora como persona y entonces siento que no me influye ni me afectan tanto las cosas como me afectaban antes y entonces para mí mi Perimenopausia no está siendo una tragedia pero porque he aprendido a gestionar creo mis emociones y lo llevo mejor pero bueno eso no significa que no haya mujeres que lo estén pasando mal por supuesto y la respeto y he pasado muchos momentos de mi vida que lo he pasado mal por eso que no quiere decir que ahora me estoy metiendo con nadie ni mucho menos simplemente creo que he crecido y llevo las cosas mejor las gestiono mucho mejor

Creer que las/los profesionales de la voz deberíamos contemplar las voces también desde el punto de vista de las diferentes etapas del ciclo de la vida?

creo que es súper importante que lo mencione eso que lo mencione porque creo que es es el valorar a la persona que tenéis enfrente darle buen seguridad darle calor darle buen mimarla y cuidar a esa persona eso es súper importante creo que es muy muy importante cuando tienes una persona en frente con una creatividad con miedo que se siente insegura tenga la edad que tenga el darle calor y darle calor humano y cuidar a esa persona va a hacer que esa persona sea que lo mejor de ella si es al contrario bueno hay personas que piensan que cuando fuerzas a alguien o le hablas mal o bueno es más duro con esa persona va a sacar mucho más partido pero yo creo que no sé habrá gente que le pase

pero la mayoría de gente no es así y te pueden romper por completo tu creatividad a mí me pasó con mi jefa en mi trabajo yo maquillaba y deje de maquillar por porque yo éramos insegura no por supuesto no es culpa de ella espero ella era una persona muy dura conmigo yo era muy insegura y mi creatividad pues en ese aspecto no no siguió creciendo se fue al garete claro que si me pasara ahora no sería igual pero sí sí creo que es súper importante creo que se agradece muchísimo

Por último, ¿qué característica es la que más te gusta de voz actual, que hace unos años tal vez no tuvieras?

pues mi característica que antes no lo tomaba en cuenta o no lo sabía creo que creo que es mi dulzura al cantar no sé siento que canto dulce que canto a mí me gusta o se ve bonito y creo que es muy característica principal soy muy suave cantando y bueno también es un poco como soy yo y bueno tengo 52 años me dedico a buen trabajo en un programa maquillando y también soy masajista en otro trabajo bueno soy esteticista, pero yo me considero más masajista muchas gracias

I would like you to tell me how long you have been singing/performing/using your voice, and how you got started.

Hi Lidia, well, let's see, I've been singing all my life, ever since I was little. When I was little, I liked to sing. I liked to sing at home. I liked to sing in the car with my sister when we went out with my parents. I also liked to learn songs. I would watch the artists and play the video over and over until I learned the song. And well, my whole life, but it's true that I was very, very shy, so I only sang in a very familiar environment, that is, with my parents, my sister, or in the shower, and no one else knew if I sang well or badly, and that was it. When I got older, no one knew how I sang because I was even more embarrassed, and it's true that I was dying for someone to discover me or think that I sang well, but I wasn't able to, I didn't dare, I was very embarrassed, very scared, and I didn't do it. And then I grew up, and about 12 years ago, I started to feel more confident and love myself more, and then I started not to care if people heard me sing, if they said I didn't sing well or that others sang better or worse, I started not to care, and then I sang everywhere. I didn't sing professionally, I didn't sing a song for people to hear me. But if I was anywhere, at work or whatever, I would start singing, and that's how a colleague told me I sang very well. I didn't expect that at all, and then my partner did too when I started with him, and that's when I started singing a little more, learning the songs better, recording them, but always as a non-professional.

What does THE VOICE mean to you?

Well, for me, the voice represents the soul that we all have inside, because we all have it, and then there are people who are a little bit more special in that regard.

Have you noticed any substantial changes in your voice in the years leading up to the menopause (if you are already in the menopause) or during the perimenopause?

Well, I am now in menopause, or rather perimenopause, because it has not been a year yet, and I have not noticed anything physical that could cause me to sing worse or anything like that. What I have noticed is that as I have grown older, I have gained more wisdom, and that does influence my voice. I think I can sing better now because I know myself better. I am wiser and much more confident than before, much more so. And I think that's very important when it comes to singing and when it comes to anything in life, but I think it's also important for singing, it's very important, but it hasn't affected me. Well, the only thing I've noticed about the menopause are other symptoms that haven't affected my singing, symptoms like hot flushes, but not much else, to be honest...

Have they affected your use of your voice (singing, speaking, etc.)?

Well, yes, I do experience it. For example, I have asthma, and I do notice it when I sing. I think that's what influences me. Maybe I'm wrong, but I'm not as shy anymore, but I still get nervous, and that also influences me when I sing because, well, I notice it. I notice it in my voice, which is fading. It could also be because I'm learning voice techniques with you, and I notice that it's much better now, but I still feel that mucus in my chest, which is probably either from the asthma or because I get nervous. It's still early days, but otherwise everything is going very well.

For both the vocal changes and other symptoms, have you resorted to medication, natural remedies, or alternative therapies?

Right now I'm taking sea buckthorn. I'm aware of it because I listened to a lot of podcasts and tried to learn a lot about perimenopause and menopause, what's good for us women, and I'm taking sea buckthorn and all foods that are orange are very good because they're anti-inflammatory. I also take a lot of turmeric and cinnamon, and I know it's very good for all the mucous membranes we have, so my throat also benefits, of course. I have also taken magnesium bisglycinate, which is also good for sleeping better and calming down, vitamin C on some occasions, and above all, which is very important for menopause and Amper and menopause, omega 3, and then there is omega 7, which already has everything I mentioned before about sea buckthorn, it has many things that are orange and nothing, I think it helps me too, it helps me a lot, what I said before, for me it's very important how I've grown as a person, how I feel now as a person, and so I feel that things don't influence or affect me as much as they used to, and so for me, my perimenopause isn't a tragedy, but because I've learned to manage my emotions and I cope better, but that doesn't mean that there aren't women who are having a hard time, of course, and I respect that. I've gone through many moments in my life when I've had a hard time.

I think I've grown up and I handle things better, I manage them much better.

Do you think that voice professionals should also consider voices from the perspective of the different stages of the life cycle?

I think it's really important to mention that because I think it's about valuing the person in front of you, giving them confidence, warmth, pampering them and taking care of them. That's really important. I think it's very, very important when you have a person in front of you who is creative but afraid, who feels insecure, whatever their age, to give them warmth and human warmth and take care of them. That will bring out the best in that person. If it's the opposite, well, there are people who think that when you force someone or speak badly to them or are harder on them, they will get much more out of it, but I think that there are people who experience that

, but most people are not like that, and they can completely destroy your creativity. It happened to me with my boss at work. I used to do make-up, and I stopped doing make-up because I was insecure, not because of her, of course. It's not her fault. She was very hard on me, and I was very insecure, and my creativity didn't continue to grow. It went down the drain. Of course, if it happened to me now, it wouldn't be the same, but I do think it's very important. I think it's very much appreciated.

Finally, what characteristic do you like most about your current voice that you may not have had a few years ago?

Well, the characteristic that I didn't take into account before, or didn't know about, I think is my sweetness when I sing. I don't know, I feel that I sing sweetly, that I sing in a way that I like, or that sounds nice, and I think it's a very important characteristic. I sing very softly, and well, it's also a shade like how I am. I'm 52 years old, I work on a TV show doing make-up, and I'm also a masseuse in another job. Well, I'm a beautician, but I consider myself more of a massage therapist. Thank you very much.

Buenos días a las dos muchas gracias por estar aquí y por participar de este de este focus group que tanta ilusión me hacía aunque seamos poquitas vamos a sacarle mucho partido a esta conversación yo os conozco pero me gustaría que os presentará las dos así que como queráis por orden, empezamos por ti...

pues tengo mucho trabajo pero me pude pude venir aquí estoy muy contenta y te puedo decir que llevo actuando más de 30 años dando clases 25 cantar cante muy poquito te comenté de niña nada más y según un hice un curso de vocal y en ese de técnica de la voz y de canto solo con otros dos profes y contigo ahora y estoy muy contenta para mí la voz es algo muy emocional y la verdad un canal un canal energético un canal energético.

bueno pues yo lo que puedo decir es que soy, bueno, me dedico soy actriz coordinadora de figuración aunque casi toda mi vida he trabajado en hostelería he sido gobernanta de Hotel ahora mismo tengo 59 años aunque al final de año cumpliré los 60 para mí la voz es esencial es mi manera de comunicarme aunque yo soy muy expresiva la verdad y a veces no me hace falta abrir la boca para que se vea lo que quiero decir pero soy una persona que tanto en el trabajo como con los amigos la familia me gusta expresarme me gusta hablar tener conversaciones para mí la voz es pues eso una manera de comunicarme y necesito que se me entienda perfectamente por lo tanto es básica básica

pues muchas gracias muchísimas gracias chicas antes de que lo mencionara en nuestras clases y entrevistas sabíais algo sobre los cambios de la voz relacionados con las hormonas especialmente durante la perimenopausia y menopausia y bueno también me gustaría saber si si habéis tenido síntomas y habéis notado cambios en la voz es algo que también me gustaría saber

y bueno no la en la voz no noté esos cambios la verdad si tuve cambios en el cuerpo pero lo mío fue bastante suave no no y sí me cuide mucho con homeopatía la verdad que para mí es una gran aliada o las Flores de Bach son grandes aliados que tengo para cuando tengo problemas hormonales pero bueno tú sabes de esto y yo creo que sí que que está bueno porque hay mujeres que les ataca más la menopausia entonces yo creo que todo lo que se ayude pues la verdad es que está está muy bien y sí sí sí sí hay que tenerlo en cuenta también sin duda ese bueno lo estábamos hablando con con ella no que que sí que es complicado y no todas lo tenemos igual no hay mujeres que y bueno no la en la voz no note esos cambios la verdad si tuve cambios en el cuerpo, hay mujeres que les ataca más la menopausia entonces yo creo que todo lo que se ayude pues la verdad es que está está muy bien y sí sí sí sí hay que tenerlo en cuenta también sin duda ese bueno lo estábamos hablando con con ella no que que sí que es complicado y no todas lo tenemos igual no hay mujeres que se tengan en cuenta la voz la voz es algo muy emocional y yo agradezco mucho que vos lo mencioné si lo tengas

en cuenta así sin duda se tienen en cuenta la voz la voz es algo muy emocional y yo agradezco mucho que vos lo mencioné si lo tengas en cuenta así sin duda sin duda

uy yo sí yo sí que he notado muchos muchos cambios en mi voz de hecho yo desde que tengo los 50 tengo menopausia y reconozco que he tenido situaciones de perder la voz muy a menudo de hecho yo era fumadora entonces ahora mismo hace 20 años que no fumo pero eso aunque lo he notado muchísimo el no fumar porque para mí fue un problema quedarme afónica la tercera conversación o por ejemplo llegar la Navidad nos reunir en familia como he dicho antes esto es muy cantarines y el segundo villancico y yo ya no tenía voz aparte de la afonía el tono era como muy crudo la voz se me notaba muy áspera y bueno claro todo eso ha cambiado mi forma de reaccionar en cuanto a la voz sobre todo desde que desde que canto desde que hago canto

claro los cambios por ejemplo pues los he notado cuando me irritaba y bueno sobre todo al tener que dar una charla o he notado que pues mi voz se pasaba a ser como mucho más bruta vale no tan aguda más grave y sobre todo con muchísimo dolor de garganta mucho mucho

y sí claro claro que la menopausia ha influido muchísimo en el uso de mi voz porque yo antes o sea no era consciente que podía comunicarme cómo me comunico ahora me comunicaba a gritos hace 200 personas y tenía que subir la voz sin micrófono y bueno me ha venido muy bien que tú me enseñarás sí acababa siempre comprándome el lizipaina y sipack y bueno muchas veces me decían que estás bien estás constipado te ha cambiado la voz y a mí eso me preocupaba me hacía pensar que que no estaba haciendo bien las cosas y que no me no me estaba cuidando

y bueno por la parte de la emoción yo he tenido una pérdida muy reciente y y la verdad es que canalizo totalmente con el canto y las emociones que te acaban siendo corporales y puede que se me quiebre la voz tengo quiebres pero son quiebres emocionales no siento que no sean sea un quiebre que no es emocional es para mí 100% emoción mientras que no tenía otra manera de canalizarlo no me había salido de ninguna manera y es venir a clase y me pongo como llorar y depende qué tema estamos cantando el sin ti no soy nada de Amaral y de repente empiezo a llorar como no había llorado en semanas no y eso creo que es súper importante porque al final necesito expresar de alguna manera y mi cuerpo es expresándose...

bueno los problemas emocionales que yo tenía por ejemplo es que ya no podía hablar iba a trabajar afónica perdida y cuando el tercero o sea desde tenía que trabajar influye a mi día a día tres días seguidos me causaba un problema el primer día dolor de garganta afónica y el segundo ya no podía hablar iba a trabajar sinfónica perdida no te cuento el tercer acabas hablando acabas teniendo problemas porque con dolor pues me dolía sentía fatal la garganta incluso como te diría como si estuviera con anginas y bueno me siento muy seca y bueno sí sí sí sí sí y he recurrido a un montón de fármacos porque he notado muchas sequedad fármacos sin receta médica bueno pastillas que tenía un poco para ser la garganta para la mucosa en general de mi cuerpo bien eso está bien pero bueno hizo flavonas también he tomado pero sí sí me ha afectado muchísimo muchísimo muchísimo

yo por ejemplo como remedio recurría mucho a la farmacia y a la parafarmacia y las herboristerías incluso a las herboristerías me mandaban a hacer pues gárgaras con tomillo también jengibre eso me da muy bien caramelos de jengibre e incluso alguna que otra infusión hasta que llegó un amigo y también me habló de que a ti qué te gusta cantar y estás cantando y el sigo viendo se queda sin voz deberías ir a ver una vocal coach que te ayude alguien que esté enseñándote lo que debes y no debes hacer y bueno pues elegí cantar y tomar las clases para sobre todo no para cantar profesionalmente porque no estaba en mis pensamientos pero sí estaba el mejorar tanto mi audición con la música como la manera de abordarla con mi voz y entonces pensé no me va a venir nada mal para nada y sobre todo me va a ayudar pues a lo mejor lo que no debo hacer enseñarme ejercicios para mejorar mi postura vocal, yo creo que yo creo que todos los vocal coach deberíais tener en cuenta o sea estas voces maduras después de la menopausia las mujeres sobre todo nos cambia la voz se nos hace mucho más grave y perdemos esa elasticidad y agudeza entonces pues sería fantástico que los profesionales todos tuvieran en cuenta el estado de nuestro tono muscular tanto dentro de la garganta como la flacidez y la sequedad que estaría entonces chicas comentad un poquito también como lleváis vuestro día a día con con la menopausia

bueno yo la verdad es que no lo pienso mucho pero sí que corporalmente a veces

bueno yo engorde bastante kilos y no soy la que era antes en ese sentido tuve que hacer mucho más ejercicio sí sí yo por ejemplo tengo que hacer mucho ejercicio así engordado mucho era muy delgada muy delgada era un palillo y ahora pues no y la verdad es que eso es de las cosas que llevo peor porque me me preocupa mucho mi aspecto físico y la verdad es que sí que cuando estoy trabajando en los anuncios de la tele o tengo algo de producción pues sí lo llevo muy mal muy mal que obviamente prefiero tener salud por encima de cualquier otra cosa pero ciertamente está pensando ahí también todo el tema de lo cómo te cuelga todo no te cuelga el brazo te cuelga la cara etcétera etcétera

...y practicáis algún deporte algún ejercicio físico que os ayude etcétera etcétera y bueno si practicamos yo hago mucho mucho yoga y me siento muy cómoda en el Pilates también ejercicios de estiramientos

bueno yo antes iba al gimnasio pero ahora no hago muchas cosas las que hago contigo en clase los ejercicios de conexión y sí que camino mucho camino muchísimo por toda Barcelona como sabes a mí me encanta caminar así que...

muy bien contadme cómo os ayuda el canto es decir cómo desde que tomáis clases conmigo o desde que cantáis...

que obviamente prefiero tener salud por encima de cualquier otra cosa pero ciertamente cómo os hace sentir el hecho de estar cantando cómo cómo lo vivís bueno yo te tengo que decir que desde que tomo clases o sea físicamente hablo mejor tengo una voz mejor y ya no me quedo sin voz lo cual es muy importante pero además siento que estoy

teniendo una estoy mejor estoy muy contenta de lo que has conseguido sacar de mí que era algo que tenía como muy guardado pero que sigo que forma parte de mí...

y bueno yo llevo muy poco tiempo y todavía necesito tiempo para descubrir mi voz más pero con con voz estoy como como más como realmente descubriendo quién soy como vos como realmente sintiendo una realidad que antes no sentía

y... os gustaría cantar en público es decir ahora que ya tenéis como esa sensación más de eso es bueno sobre todo tú eh cantarías en público bueno ya sabéis que cante el 23 de mayo que me encantó lo pasé súper bien estuve genial y a mí me encanta a mí me encanta o sea realmente cuando estoy en el escenario me olvido de todo me olvido de lo que me cuelga de lo que no me cuelga después me veo en los vídeos en las fotos y sí que es terrible pero sí realmente me encanta me encanta cantar y yo siempre que puedo intento intento tener un escenario

bueno y ahora mismo sabes que estoy pensando en un espectáculo en el que es posible que me anime a cantar un poco sé que son monólogos pero tal vez alguna canción puede ser que realice no puedo contar mucho más pero si me gustaría empezar a descubrir esto pero a mí aún me queda necesito más tiempo necesito una vacaciones de este descansar y tal vez a la vuelta me lo planteé

bueno sabéis que en este trabajo he leído mucha documentación en la que se describen muchos síntomas relacionados con la menopausia y la voz y hay una serie de ejercicios que están más o menos recomendados vosotras sentís que los ejercicios que hacemos en clase os sirve

sí a mí me sirve muchísimo por ejemplo todo lo que tiene que ver con con los y todo este tipo de ejercicios me yo todas las mañanas me levanto y a veces incluso cuando voy por la calle etcétera etcétera voy haciendo MIR porque realmente me hace sentir muy bien siento que no fuerza nada la voz que estoy donde tengo que estar me gusta mucho y los ñeños miau miau miau todos estos ejercicios a mí me han cambiado muchísimo la forma en como yo ya después puedo utilizar mi voz a lo largo del día y sí sí lo mismo lo mismo me ayuda mucho y es difícil mantener la constancia de todos los días hacerlo pero realmente vale la pena porque son son maravillosos estos ejercicios es una pasada como como se nota

y tenéis algún algún ejercicio más que os guste que os haga sentir bien que creáis bueno no sé en las clases siempre nos hace sentir bien si pudiéramos vendíamos todas las semanas sí las clases son sí son un buen lugar de encuentro me alegro me alegro por la parte que me toca y qué pensáis de vuestras de vuestras voces de ahora

como como vivís y qué característica de vuestra voz de ahora os podría gustar más que vuestra voz anterior

bueno yo no tengo mucha conciencia de mi voz anterior porque era diferente era no la vivía igual no la sentía igual entonces no no siento como esa esa necesidad de comparar

yo no no miro mucho atrás no miro mucho atrás necesidad de comparar yo no no miro mucho atrás no miro mucho atrás

ok eso está bien creo que es muy muy saludable y tú

mira yo la siento más mejor más aguda he recuperado mis agudos me siento más cómoda con ellos puedo empezar a hablar sin cansarme y cantando evidentemente pues estoy aprendiendo a hacer muchas cosas con más potencia con más control en ese sentido es todo muchísimo mejor estoy muy contenta y la verdad es que me encanta poder con casi 60 años decir que mi voz está muchísimo mejor que hace 10 años y respecto a la joven como tampoco siempre hemos sido de cantar en la familia y todo pero tampoco prestaba tanta atención bueno obviamente a lo mejor no tengo la misma voz que cuando tenía tenía 20 años pero pero estoy bien me encuentro bien y te se lo gusté mucho mejor que hace 10...agradezco enormemente que me lo que me lo hagas ver Lidia y sobre todo agradezco que lo tengas en cuenta y me hagas ver que posiblemente mi voz pueda tener esos cambios y me ayudes a subir en vez de mantenerme abajo por ejemplo en las escalas que me vayas directo a la segunda escala para para ayudarme a que mi voz siga ahí y trabajarla ahí es de agradecer y por supuesto no dejes de hacerlo o sea no estoy de acuerdo con la 14 no quiero que sigas preguntándome y haciéndome observar que todo eso tiene que que para mí y para cualquiera que se quiera dedicar o simplemente que sea una persona que hable mucho o que trabaje cara al público, y las características de mi voz actual es que me has enseñado a hablar en un tono que no me perjudica y siempre agudo no me vaya hacia abajo sobre todo incluso cuando tengo que discutir con alguien lo intento hacer en este tono no no me voy abajo porque es mucho más fácil sabes llevarme hacia los instintos interiores pero he notado que mi voz ha mejorado incluso a la hora de tener que ir a trabajar cara al público o cantar o tener una conversación lo primero que hago es prepararme la garganta haciendo esos ejercicios que de los que me has enseñado y de los cuales estoy orgullosa

bueno chicas pues muchísimas gracias por vuestra ayuda este grupo ha sido súper interesante me ha encantado poder contar con vosotras con vuestra ayuda y espero que que podemos vernos pronto y repetir esa experiencia gracias gracias gracias

TRANSCRIPT FOCUS GROUP with TWO PARTICIPANTS: Participant 5, 59, and Participant 6, 55. DURATION: 35' 50"

Good morning to both of you. Thank you very much for being here and participating in this focus group, which I was so excited about. Even though there are only a few of us, we are going to get a lot out of this conversation. I know you both, but I would like to introduce you, so whichever order you prefer, let's start with you...

Participant 6: Well, I have a lot of work, but I was able to come here. I'm very happy, and I can tell you that I've been acting for over 30 years, teaching for 25, singing very little. I told you that I sang as a child, but that's all. Then I took a course in vocal technique and singing with only two other teachers and you, and I'm very happy.

For me, the voice is something very emotional and, honestly, a channel, an energetic channel, an energetic channel.

Participant 5: Well, what I can say is that I am, well, I am an actress and extras coordinator, although I have worked in hospitality for most of my life. I have been a hotel housekeeper. I am 59 years old now, although I will be 60 at the end of the year. For me, the voice is essential. It is my way of communicating, although I am very expressive, to be honest, and sometimes I don't need to open my mouth for people to see what I mean. But I am a person who, both at work and with friends and family, I like to express myself, I like to talk, to have conversations. For me, my voice is a way of communicating, and I need to be understood perfectly, so it's essential, essential.

Thank you very much, thank you very much, ladies. Before I mentioned it in our classes and interviews, did you know anything about hormone-related voice changes, especially during perimenopause and menopause? I would also like to know if you have had symptoms and noticed changes in your voice. That is something I would also like to know

Participant 6: Well, I didn't notice any changes in my voice, to be honest. I did have changes in my body, but mine were quite mild. No, no, and yes, I took good care of myself with homeopathy, which is a great ally for me, or Bach Flowers, which are great allies I have for when I have hormonal problems. But you know about this, and I think it's good because there are women who are more affected by the menopause, so I think anything that helps is good, and yes, yes, yes, yes, we have to take that into account too, without a doubt. We were talking about it with her, that it's complicated and not all of us have it the same way, there are women who

well, I didn't notice any changes in my voice, but I did have changes in my body, there are women who are more affected by the menopause, so I think that anything that helps is very good, and yes, yes, yes, we have to take that into account too, without a doubt. We were talking about it with her, no, it is complicated and we don't all experience it in the same way, there are women who don't take their voice into account, the voice is something very emotional and I really appreciate you mentioning it, if you take it into account, without a doubt The voice is something very emotional, and I really appreciate you mentioning it. You should definitely take it into account, without a doubt...

Participant 5: Oh, yes, I have noticed many, many changes in my voice. In fact, since I turned 50, I have been going through the menopause and I admit that I have often lost my voice. I used to be a smoker, but I haven't smoked for 20 years now. However, I have noticed a big difference since I stopped smoking, because losing my voice was a problem for me. The third conversation, or for example, when Christmas comes and we get together as a family, as I said before, this is very cheerful, and the second Christmas

carol, and I no longer had a voice. Apart from the hoarseness, the tone was very harsh, my voice sounded very rough, and of course all that has changed the way I react in terms of my voice, especially since I sing, since I do singing

, of course, I've noticed the changes, for example, when I was irritated and, well, especially when I had to give a talk, I noticed that my voice became much rougher, not so high-pitched, more serious, and above all with a lot of sore throat, a lot

And yes, of course, menopause has had a huge impact on the use of my voice because before, I wasn't aware that I could communicate the way I do now. I used to shout to communicate to 200 people and I had to raise my voice without a microphone. Well, it's been very good for me that you taught me. I always ended up buying Lizipaina and Sipack, and many times they told me, 'You're fine, you have a cold.' your voice has changed, and that worried me. It made me think that I wasn't doing things right and that I wasn't taking care of myself.

Participant 6: And well, in terms of emotion, I have recently experienced a loss, and the truth is that I channel it all through singing and the emotions that end up being physical, and my voice may break, I do break, but they are emotional breaks, I don't feel that they are breaks that are not emotional, for me they are 100% emotion, as I had no other way to channel it. It hadn't come out in any other way, and then I come to class and I start crying, depending on what song we're singing, like "Sin ti no soy nada" by Amaral, and suddenly I start crying like I haven't cried in weeks, and I think that's really important because, in the end, I need to express myself in some way, and my body is expressing itself...

Participant 5: Well, the emotional problems I had, for example, were that I couldn't speak anymore. I went to work hoarse, and when the third one, that is, since I had to work, it affected my daily life. Three days in a row caused me a problem. The first day, I had a sore throat and was hoarse, and the second day, I couldn't speak anymore. I went to work hoarse. I won't tell you about the third day. You end up talking, you end up having problems because it hurts. My throat hurt, I felt terrible, even like I would say it was like having tonsillitis, and well, I feel very dry, and well, yes, yes, yes, yes, yes, and I've resorted to a lot of medicines because I've noticed a lot of dryness, medicines without a prescription, well, pills that I had a little bit for my throat, for the mucous membranes in general in my body, well, that's fine, but well, I've also taken flavones, but yes, it has affected me a lot, a lot, a lot.

For example, as a remedy, I used to go to the pharmacy and the parapharmacy and the herbalists a lot, and even the herbalists would tell me to gargle with thyme and ginger, which works very well for me, ginger sweets and even the occasional herbal tea, until a friend came along and also told me that you like to sing and you're singing and I keep seeing him losing his voice, you should go and see a vocal coach to help you, someone who can teach you what you should and shouldn't do. So I chose to sing and take classes, not to sing professionally, because that wasn't on my mind, but to improve both my hearing with music and the way I approach it with my voice. I thought it couldn't do me any harm and, above all, it would help me, because maybe what I shouldn't do teach me exercises to improve my vocal posture. I think

I think all vocal coaches should take into account that mature voices after the menopause, especially in women, change. Our voices become much deeper and we lose that elasticity and sharpness, so it would be fantastic if all professionals took into account the state of our muscle tone, both inside the throat

as well as flaccidity and dryness.

So, please comment a little bit on how you cope with your daily life with the menopause.

Participant 6: *Well, to be honest, I don't think about it much, but physically, sometimes...well, I've put on quite a few kilos and I'm not the person I used to be in that sense. I've had to do a lot more exercise.*

Participant 5: *Yes, yes, for example, I have to do a lot of exercise. I've put on a lot of weight. I used to be very thin, very thin, I was a stick, and now I'm not, and the truth is that that's one of the things I find hardest because I worry a lot about my physical appearance, and the truth is that when I'm working on TV adverts or I have some kind of production, then yes, I very badly, very badly.*

Obviously, I prefer to be healthy above all else, but I'm certainly thinking about the whole issue of how everything sags. It's not your arms that sag, it's your face, etc., etc.

...and do you practise any sport or physical exercise that helps you, etc., etc.?

Participant 6: *Well, if we practise, I do a lot of yoga and I feel very comfortable with Pilates too, stretching exercises...*

Participant 5: *Well, I used to go to the gym, but now I don't do many things, the ones I do with you in class, the connection exercises, and I do walk a lot, I walk a lot all over Barcelona, as you know, I love walking, so...Obviously, I prefer to be healthy above all else...*

Very well, tell me how singing helps you, that is, how since you've been taking classes with me or since you've been singing...how does singing make you feel? How do you experience it?

Participant 5: *Well, I have to tell you that since I've been taking classes, physically, I speak better, I have a better voice, and I no longer lose my voice, which is very important, but I also feel that I'm having a better time. I'm very happy with what you've managed to bring out in me, which was something I had kept very hidden, but which is still part of me...*

Participant 6: *And well, I've only been doing this for a short time and I still need time to discover my voice more, but with my voice I'm like, really discovering who I am, like you, really feeling a reality that I didn't feel before*

and...

Would you like to sing in public, now that you have that feeling more secure? It's good, especially for you. Would you sing in public?

Participant 5: Well, you know I sang on 23 May and I loved it, I had a great time, I was great, and I love it, I really love it. When I'm on stage, I forget everything, I forget what's hanging over me, what's not hanging over me, then I see myself in the videos, in the photos and yes, it's terrible, but I really love it, I love singing and whenever I can, I try to have a stage

Participant 6: and right now, you know I'm thinking about a show where I might be encouraged to sing a little. I know they're monologues, but maybe I'll sing a song. I can't say much more, but I'd like to start exploring this, but I still need more time. I need a break from this, to rest, and maybe when I come back, I'll think about it.

Well, you know that in this job I've read a lot of documentation describing many symptoms related to the menopause and the voice, and there are a series of exercises that are more or less recommended. Do you feel that the exercises we do in class are useful?

Participant 5: Yes, they help me a lot. For example, everything that has to do with the and all these types of exercises. I get up every morning and sometimes even when I'm walking down the street, etc., etc., I do MIR because it really makes me feel very good. I feel that it doesn't strain my voice at all, that I'm where I need to be. I really like it, and the ñeñes miau miau miau, all these exercises have changed the way I how I can use my voice throughout the day, and yes, yes, the same thing, it helps me a lot, and it's difficult to be consistent and do it every day, but it's really worth it because these exercises are wonderful, it's amazing how you can feel the difference

Do you have any other exercises that you like, that make you feel good, that you think are good?

I don't know, in class it always makes us feel good. If we could, we would sell out every week. Yes, the classes are a good meeting place. I'm glad, I'm glad for my part.

What do you think of your voices now, How do you experience them, and what characteristics of your current voice do you like more than your previous voice?

Participant 6: Well, I'm not very aware of my previous voice because it was different. I didn't experience it the same way, I didn't feel it the same way, so I don't feel the need to compare. I don't look back much, I don't look back much. The need to compare, I don't look back much, I don't look back much.

OK, that's fine, I think it's very healthy, and you ...

Look, I feel it's better, higher pitched, I've regained my high notes, I feel more comfortable with them, I can start talking without getting tired and singing, obviously, because I'm learning to do many things with more power, with more control, in that sense, everything is much better, I'm very happy and the truth is that I love being able to say, at almost 60 years old, that my voice is much better than it was 10 years ago, and as for the young woman, we haven't always been singers in the family and everything, but I didn't pay that much attention to it either. Obviously, I may not have the same voice I had when I was 20, but I'm fine, I feel fine, and I like it much better than 10 years ago... I am very grateful that you make me see this, Lidia, and above all, I appreciate that you take it into account and make me see that my voice may have undergone these changes and help me to improve instead of keeping me down, for example, in the scales, by going straight to the second scale to help me keep my voice there and work on it there. I am very grateful for that.

I don't want you to keep asking me and pointing out that all of that has to do with me and anyone who wants to dedicate themselves to it or is simply a person who talks a lot or works with the public. and the characteristics of my current voice are that you have taught me to speak in a tone that does not harm me and always high-pitched, so I don't go down, especially when I have to argue with someone, I try to do it in this tone, no, I don't go down because it's much easier, you know, to take me to my inner instincts, but I've noticed that my voice has improved, even when I have to go to work in front of the public or sing or have a conversation, the first thing I do is to prepare my throat by doing those exercises you taught me, which I'm proud of.

Well, ladies, thank you so much for your help. This group was super interesting. I've loved having you and your help, and I hope we can see each other soon and repeat this experience. Thank you, thank you.

Appendix Four: Application for Ethical Approval and Admission Letter



PG2 / E1 FORM

APPLICATION FOR ETHICAL APPROVAL

RESEARCH STUDENTS

This form is to be completed by the student within **SIX** months for full-time students and **TWELVE** months for part time students, after the commencement of the research degree or following progression to Part Two of your course.

Once complete, submit this form via the [MyTSD Doctoral College Portal](https://mytsd.uwtsd.ac.uk) at (<https://mytsd.uwtsd.ac.uk>).

This document is also available in Welsh.

RESEARCH STAFF ONLY

All communications relating to this application during its processing must be in writing and emailed to pgresearch@uwtsd.ac.uk, with the title 'Ethical Approval' followed by your name.

STUDENTS ON UNDERGRADUATE OR TAUGHT MASTERS PROGRAMMES should submit this form (and receive the outcome) via systems explained to you by the supervisor/module leader.

In order for research to result in benefit and minimise risk of harm, it must be conducted ethically. A researcher may not be covered by the University's insurance if ethical approval has not been obtained prior to commencement.

The University follows the OECD Frascati manual definition of **research activity**: "creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of man, culture and society, and the use of this stock of knowledge to devise new applications". As such this covers activities undertaken by members of staff, postgraduate research students, and both taught postgraduate and undergraduate students working on dissertations/projects.

The individual undertaking the research activity is known as the "principal researcher".

Ethical approval is not required for routine audits, performance reviews, quality assurance studies, testing within normal educational requirements, and literary or artistic criticism.

Please read the notes for guidance before completing ALL sections of the form.

This form must be completed and approved prior to undertaking any research activity. Please see Checklist for details of process for different categories of application.

SECTION A: About You (Principal Researcher)

1	Full Name:	LYDIA PETERS			
2	Tick all boxes that apply:	Member of staff:	☐	Honorary research fellow:	☐
	Undergraduate Student	☐	Taught Postgraduate Student	☒	Postgraduate Research Student
3	Institute/Academic Discipline/Centre:	WAPPAR			
4	Campus:	Carmarthen			
5	E-mail address:	lydia.peters@gmail.com			

6	Contact Telephone Number:	00 34 655 912 621
For students:		
7	Student Number:	2335205
8	Programme of Study:	MA Professional Practice (Voice Pedagogy)
9	Director of Studies/Supervisor:	Louise Emanuel/Julie Crossman/Debbie Winter

SECTION B: Approval for Research Activity

1	Has the research activity received approval in principle? (please check the Guidance Notes as to the appropriate approval process for different levels of research by different categories of individual)	YES	☒	NO	☐
					Date
2	If <u>Yes</u> , please indicate source of approval (and date where known): <i>Approval in principle must be obtained from the relevant source prior to seeking ethical approval</i>	Research Degrees Committee	☐		
Institute Research Committee		☐			
Other (write in) WAPPAR Ethics Board Representative		☒			

SECTION C: Internal and External Ethical Guidance Materials

Please list the core ethical guidance documents that have been referred to during the completion of this form (including any discipline-specific codes of research ethics, location-specific codes of research ethics, <u>and also</u> any specific ethical guidance relating to the proposed methodology). Please tick to confirm that your research proposal adheres to these codes and guidelines. You may add rows to this table if needed.	
1	UWTSD Research Ethics & Integrity Code of Practice ☒
2	UWTSD Research Data Management Policy ☒
3	Universitat de Barcelona (UB) Code of Conduct for Research Integrity ☒

SECTION D: External Collaborative Research Activity

If there are external collaborators then you should gain consent from the contact persons to share their personal data with the university. If there are no external collaborators then leave this section blank and continue to section E.

1	Institution	
2	Contact person name	
3	Contact person e-mail address	
4	Is your research externally funded?	YES ☐ NO ☐
5	Are you in receipt of a KESS scholarship?	YES ☐ NO ☐

6	Are you specifically employed to undertake this research in either a paid or voluntary capacity?	Voluntary	YES	☐	NO	☐
7		Employed	YES	☐	NO	☐
8	Is the research being undertaken within an existing UWTSD ~~Athrofa~~ Professional Learning Partnership (APLP)?	If <u>YES</u> then the permission question below does not need to be answered.	YES	☐	NO	☐
9	Has permission to undertake the research has been provided by the partner organisation?	(If YES attach copy) If NO the application cannot continue	YES	☐	NO	☐

Where research activity is carried out in collaboration with an external organisation

10	Does this organisation have its own ethics approval system?	YES	☐	NO	☐
	If <u>Yes</u> , please attach a copy of any final approval (or interim approval) from the organisation (this may be a copy of an email if appropriate).				

SECTION E: Details of Research Activity

1	Indicative title:	Report on women's experiences of changes in their singing and speaking voices associated with hormonal fluctuations during perimenopause and menopause.			
2	Proposed start date:	31/03/2025	Proposed end date:	16/09/2025	
	Introduction to the Research (maximum 300 words per section) Ensure that you write for a <u>Non-Specialist Audience</u> when outlining your response to the points below: <i>Purpose of Research Activity</i> <i>Proposed Research Question</i> <i>Aims of Research Activity</i> <i>Objectives of Research Activity</i> Demonstrate, briefly, how <u>Existing Research</u> has informed the proposed activity and explain <i>What the research activity will add to the body of knowledge</i> <i>How it addresses an area of importance.</i>				
3	Purpose of Research Activity This research aims to describe the experiences of professional voice users over forty years old, particularly regarding vocal symptoms associated with perimenopause and menopause. I believe these experiences should be documented so that voice specialists can be aware of them and implement specific pedagogical support in their work practice. Numerous studies address the clinical aspects of voice symptoms related to perimenopause and menopause, and collecting women's testimonies could provide a much-needed complement to the extensive research that has already been conducted.				
4	Research Question What are women's experiences related to the changes in singing and speaking voices over the age of forty?				

5	Aims of Research Activity As an independent voice teacher and master's student in Voice Pedagogy, as well as a female singer in the live gig circuit, I am sensitive to and aware of the emotional experiences of female voice professionals. I believe there is still a knowledge gap regarding the voice symptoms related to perimenopause and menopause among professional voice users. This research aims to gather women's testimonies regarding their voices and hormone changes as detailed data that may unveil shared experiences and emotions among female professional voice users over forty. I aim to raise public awareness of the often-unavoidable vocal changes that female singers may experience from their forties onwards and how they respond to them (if they do) to foster conversation, visibility, and further involvement in research.
6	Objectives of Research Activity The project aims to gather women's testimonies through participant diaries and two focus group discussions. This will allow us to hear their perspectives on their experiences of vocal changes, how they cope with them, and their feelings regarding potential approaches to their vocal disorders, if necessary.
	Proposed methods (maximum 600 words) Provide a brief summary of all the methods that may be used in the research activity, making it clear what specific techniques may be used. If methods other than those listed in this section are deemed appropriate later, additional ethical approval for those methods will be needed. You do not need to justify the methods <u>here</u>, but should instead describe how you intend to collect the data necessary for you to complete your project.
7	By employing a qualitative research approach, the data collection methods will include: 1) Literature review. For my Formative Assignment for the master's degree in Voice Pedagogy, I began reviewing the literature on hormone-related voice changes. I decided to continue my research on the subject, and since then, I have been collecting and reading additional papers that will serve as sources for this project. 2) A semi-structured 45-minute interview, with twelve questions relating to hormonal changes, voice changes, and the impact of perimenopause and menopause on their lives as singers, performers, and professional voice users. Participants will also discuss their methods for addressing voice symptoms (and other menopause symptoms) if necessary. 3) Focus group. Participants will be invited to a discussion group meeting to share their experiences as female singers and professional voice users over 40. Two or three guiding questions related to the conclusions from the previous literature review and the interviews will be presented. I will serve as a facilitator and participant observer. Notes will be recorded as audio (voice notes). The estimated duration of the meeting is 1 hour and 30 minutes (including a 15-minute break). The number of participants will range from 5 to 6. (this box should expand as you type)

	Location of research activity Identify all locations where research activity will take place.
8	To provide a safe space for the participants, the focus group activity will be held in the space I usually rent for group classes, a lovely and comfy space named 2estones in Barcelona. Any conversation regarding the research will be held at my private studio, which is also located in Barcelona. Semi-structured interviews will also be held at my private studio, unless a participant prefers 2 estones room for proximity reasons. <i>(this box should expand as you type)</i>
	Research activity outside of the UK If research activity will take place overseas, you are responsible for ensuring that local ethical considerations are complied with and that the relevant permissions are sought. Specify any local guidelines (e.g. from local professional associations/learned societies/universities) that exist and whether these involve any ethical stipulations beyond those usual in the UK (provide details of any licenses or permissions required). Also specify whether there are any specific ethical issues raised by the local context in which the research activity is taking place, for example, <u>particular cultural</u> and/or legal sensitivities or vulnerabilities of participants. If you live in the country where you will do the <u>research</u> then please state this.
9	I have reviewed and plan to adhere to the <u>Universitat de Barcelona (UB) Code of Conduct for Research Integrity</u> . <i>(this box should expand as you type)</i>

10	Use of documentation not in the public domain: Are any documents NOT publicly available?	NO ☐	☐
		YES ☒	☒
11	If <u>Yes</u> , please provide details here of how you will gain access to specific documentation that is not in the public domain and that this is in accordance with the current data protection law of the country in question and that of England and Wales. Participants may voluntarily share medical records such as phoniatic examinations and hormone tests. <i>(this box should expand as you type)</i>		

	Does your research relate to one or more of the seven aims of the Well-being of Future Generations (Wales) Act 2015?	YES	NO
12	A prosperous Wales	☐	☒
13	A resilient Wales	☐	☒
14	A healthier Wales	☐	☒
15	A more equal Wales	☐	☒
16	A Wales of cohesive communities	☐	☒
17	A Wales of vibrant culture and thriving Welsh language	☐	☒

18	A globally responsible Wales	☐	☒
19	If YES to any of the above, please give details:		
	(this box should expand as you type)		

SECTION F: Scope of Research Activity

	Will the research activity include:	YES	NO
1	Use of a questionnaire or similar research instrument?	☐	☒
2	Use of interviews?	☒	☐
3	Use of focus groups?	☒	☐
4	Use of participant diaries?	☐	☒
5	Use of video or audio recording?	☒	☐
6	Use of computer-generated log files?	☐	☒
7	Participant observation with their knowledge?	☐	☒
8	Participant observation without their knowledge?	☐	☒
9	Access to personal or confidential information without the participants' specific consent?	☐	☒
10	Administration of any questions, test stimuli, presentation that may be experienced as physically, mentally or emotionally harmful / offensive?	☐	☒
11	Performance of any acts which may cause embarrassment or affect self-esteem?	☐	☒
12	Investigation of participants involved in illegal activities?	☐	☒
13	Use of procedures that involve deception?	☐	☒
14	Administration of any substance, agent or placebo?	☐	☒
15	Working with live vertebrate animals?	☐	☒
16	Procedures that may have a negative impact on the environment?	☐	☒
17	Other primary data collection methods. Please indicate the type of data collection method(s) below.		
	Details of any other primary data collection method: Notes taken will be stored on a personal computer and in a Google Drive file. (this box should expand as you type)	☒	☐

If NO to every question, then the research activity is (ethically) low risk and may be exempt from some of the following sections (please refer to Guidance Notes).

If YES to any question, then no research activity should be undertaken until full ethical approval has been obtained.

SECTION G: Intended Participants

If there are no participants then do not complete this section, but go directly to section H.

Who are the intended participants:		YES	NO
1	Students or staff at the University?	☐	☒
2	Adults (over the age of 18 and competent to give consent)?	☒	☐
3	Vulnerable adults?	☐	☒
4	Children and Young People under the age of 18? (Consent from Parent, Carer or Guardian will be required)	☐	☒
5	Prisoners?	☐	☒
6	Young offenders?	☐	☒
7	Those who could be considered to have a particularly dependent relationship with the investigator or a gatekeeper?	☐	☒
8	People engaged in illegal activities?	☐	☒
9	Others. Please indicate the participants below, and specifically any group who may be unable to give consent.		
Details of any other participant groups:		☐	☒
(this box should expand as you type)			

Participant numbers and source Provide an estimate of the expected number of participants. How will you identify participants and how will they be recruited?	
10	How many participants are expected? There will be a maximum of 6 participants for all the above data collection activities. Semi-structured interviews: 6 participants Focus Group: 5 or 6 participants (this box should expand as you type)
11	Who will the participants be? Female avocational and professional singers and other voice users over 40 years old. (this box should expand as you type)
12	How will you identify the participants? Drawing on a convenient sample approach, the participants will consist of students from my voice studio and colleagues from my professional network. I will personally ask them during teaching sessions or via phone call whether they are interested in participating in the study. Since I know all the participants personally, I already have their contact details. (this box should expand as you type)

Information for participants:		YES	NO	N/A
13	Will you describe the main research procedures to participants in advance, so that they are informed about what to expect?	☒	☐	☐

14	Will you tell participants that their participation is voluntary?	☒	☐	☐
15	Will you obtain written consent for participation?	☒	☐	☐
16	Will you explain to participants that refusal to participate in the research will not affect their treatment or education (if relevant)?	☒	☐	☐
17	If the research is observational, will you ask participants for their consent to being observed?	☒	☐	☐
18	Will you tell participants that they may withdraw from the research at any time and for any reason?	☒	☐	☐
19	With questionnaires, will you give participants the option of omitting questions they do not want to answer?	☒	☐	☐
20	Will you tell participants that their data will be treated with full confidentiality and that, if published, it will not be identifiable as theirs?	☒	☐	☐
21	Will you debrief participants at the end of their participation, in a way appropriate to the type of research undertaken?	☒	☐	☐
22	If NO to any of above questions, please give an explanation			
<i>(this box should expand as you type)</i>				

Information for participants:		YES	NO	N/A
24	Will participants be paid?	☐	☒	☐
25	Is specialist electrical or other equipment to be used with participants?	☒	☐	☐
26	Are there any financial or other interests to the investigator or University arising from this study?	☐	☒	☐
27	Will the research activity involve deliberately misleading participants in any way, or the partial or full concealment of the specific study aims?	☐	☒	☐
28	If YES to any question, please provide full details			
The equipment for the audio and video recordings will include an iPhone 11. The material will be stored on a personal laptop and in a Google Drive file, ensuring that it is deleted immediately from the iPhone device. <i>(this box should expand as you type)</i>				

SECTION H: Anticipated Risks

Outline any anticipated risks that may adversely affect any of the participants, the researchers and/or the University, and the steps that will be taken to address them. If you have completed a full risk assessment (for example as required by a laboratory, or external research collaborator) you may append that to this form.						
1	Full risk assessment completed and appended?	<table border="1"> <tr> <td>Yes</td> <td>☐</td> </tr> <tr> <td>No</td> <td>☒</td> </tr> </table>	Yes	☐	No	☒
Yes	☐					
No	☒					
2	Risks to participants For example: sector-specific health & safety, emotional distress, financial disclosure, physical harm, transfer of personal data, sensitive organisational information					
	Risk to participants: 	How you will mitigate the risk to participants: 1. Ensuring a safe space for the audio recordings at the focus group activity. Creating a comfortable				

	1. Emotional distress when talking about a sensitive topic. 2. Psychological consequences of opening up about a sensitive topic. 3. Transfer of personal data. <i>(this box should expand as you type)</i>	atmosphere. Providing a full account in advance of all the steps that will be taken and details of the research: purpose, aim, steps, storage, privacy, etc. Remind participants that they can withdraw from the study at any moment. 2. Ask the participants about their emotions about a sensitive topic, remind them they could leave the study anytime and ask for professional help, and provide contacts if necessary. 3. Participants will be informed of their personal data collection, storage details, and risks. A GDPR form (RGPD in Spanish) will be facilitated for signing. The material will be stored encrypted on a personal laptop and in a Google Drive file, ensuring it is deleted immediately from the iPhone device. Recordings will be deleted as soon as transcripts have been made. <i>(this box should expand as you type)</i>
3	If research activity may include sensitive, embarrassing or upsetting topics (e.g. sexual activity, drug use) or issues likely to disclose information requiring further action (e.g. criminal activity), give details of the procedures to deal with these issues, including any support/advice (e.g. helpline numbers) to be offered to participants. Note that where applicable, consent procedures should make it clear that if something potentially or <u>actually illegal</u> is discovered <u>in the course of</u> a project, it may need to be disclosed to the proper authorities	
	<i>(this box should expand as you type)</i>	
4	Risks to the investigator For example: personal health & safety, physical harm, emotional distress, risk of accusation of harm/impropriety, conflict of interest	
	Risk to the investigator: 1. Emotional distress due to the weight of responsibility 2. Adverse publicity in case a participant becomes distressed or feels uncomfortable. 3. Robbery of the devices where the data is stored. <i>(this box should expand as you type)</i>	How you will mitigate the risk to the investigator: 1. Assuring all the information is transparent to the participants. Self-care: I will stick to running workouts, not answer text messages after working hours, and keep a private space daily for myself and my needs. 2. Providing the best experience for participants, adhering to ethical procedures, and reminding them that they can withdraw at any time or take a break when they need to. 3. The material will be encrypted on a personal laptop and in a Google Drive file, ensuring it is deleted immediately from the iPhone device. Recordings will be deleted as soon as transcripts have been made.

		<i>(this box should expand as you type)</i>		
5	University/institutional risks For example: adverse publicity, financial loss, data protection			
	Risk to the University: 1. Adverse publicity in case a participant becomes distressed or feels uncomfortable 2. Transfer of personal data issues <i>(this box should expand as you type)</i>	How you will mitigate the risk to the University: 1. Providing the best experience for participants. 2. Participants will be informed of their personal data collection, storage details, and risks. A GDPR form (RGPD in Spanish) will be facilitated for signing. The material will be stored on a laptop computer and in a Google Drive file, ensuring that it is deleted immediately from the iPhone device.		
6	Environmental risks For example: accidental spillage of pollutants, damage to local ecosystems			
	Risk to the environment: <i>(this box should expand as you type)</i>	How you will mitigate the risk to environment: <i>(this box should expand as you type)</i>		
Disclosure and Barring Service				
	If the research activity involves children or vulnerable adults, a Disclosure and Barring Service (DBS) certificate must be obtained before any contact with such participants.	YES	NO	N/A
7	Does your research require you to hold a current DBS Certificate?	☐	☒	☐
8	If YES, please give the certificate number. If the certificate number is not available please write "Pending"; in this case any ethical approval will be subject to providing the appropriate certificate number.			

SECTION I: Feedback, Consent and Confidentiality

1	Feedback What de-briefing and feedback will be provided to participants, how will this be done and when?
	➤ If participants request them, recordings of the semi-structured interviews and the list of the twelve main questions will be sent to them. ➤ Transcription and translation of the observations into English to the English-speaking participants. ➤ Final assignment once it is marked, if participants request it. ➤ The participants will be provided an email address in case they wish to send their written feedback. <i>(this box should expand as you type)</i>
2	Informed consent Describe the arrangements to inform potential participants, before providing consent, of what is involved in participating. Describe the arrangements for participants to provide full consent before

	➤ Participants may share medical records related to their voice changes and hormone status if they choose to do so (not required). <i>(this box should expand as you type)</i>
--	---

	Will data from the research activity (collected data, drafts of the thesis, or materials for publication) be stored in any of the following ways?	YES	NO
5	Manual files (i.e. in paper form)?	☒	☐
6	University computers?	☐	☒
7	Private company computers?	☐	☒
8	Home or other personal computers?	☐	☒
9	Laptop computers/ CDs/ Portable disk-drives/ memory sticks?	☒	☐
10	"Cloud" storage or websites?	☒	☐
11	Other – specify:	☐	☒
12	For all stored data, explain the measures in place to ensure the security of the data collected, and data confidentiality, including details of backup procedures, password protection, encryption, anonymisation and pseudonymisation: All data will be stored in personal password-protected cloud storage and will not be shared. Audio and visual data will be transcribed and presented to participants for accuracy verification. iPhone 11 used for data will also be password protected. Each participant will receive a unique identifier to maintain confidentiality, and this identifier list will be securely stored in the password-protected folder. Handwritten manual files (participant diaries and researcher notes) will be digitalised at the earliest possibility and then destroyed appropriately. All recordings will be deleted once transcripts and notes have been created. <i>(this box should expand as you type)</i>		

Data Protection			
	Will the research activity involve any of the following activities:	YES	NO
13	Electronic transfer of data in any form?	☐	☐
14	Sharing of data with others at the University outside of the immediate research team?	☐	☒
15	Sharing of data with other organisations?	☐	☒
16	Export of data outside the UK or importing of data from outside the UK?	☒	☐
17	Use of personal addresses, postcodes, faxes, emails or telephone numbers?	☒	☐
18	Publication of data that might allow identification of individuals?	☐	☒
19	Use of data management system?	☒	☐
20	Data archiving?	☒	☐
21	If YES to any question, please provide full details, explaining how this will be conducted in accordance with the GDPR and Data Protection Act (2018) (and any international equivalents, where appropriate):		

	All data will be encrypted and stored in password-protected cloud storage (Google Drive) on a personal laptop that is not shared. The iPhone 11 used for data storage and transfer will also be password protected. All data transfers will be secured through encryption and password protection. Each participant will receive a unique identifier to maintain confidentiality, and this list will be securely kept in the password-protected folder. Data will be stored until the project concludes, after which it will be deleted. In line with the Spanish and European <i>Ley Orgánica de Protección de Datos - Ley Orgánica, 15/1999, Protección de Datos de Carácter Personal (LOPD)</i>; with addenda <i>Real Decreto, 1720/2007</i> and <i>Directiva 95/46/CE</i>, participants have the right to request access to their data, which will be deleted immediately upon their request, ensuring that it won't be used in the project. <i>(this box should expand as you type)</i>		
22	List all who will have access to the data generated by the research activity:		
	Lydia Peters, the researcher, and Louisa Morgan, the research supervisor. <i>(this box should expand as you type)</i>		
23	List who will have control of, and act as custodian(s) for, data generated by the research activity:		
	Lydia Peters-the researcher <i>(this box should expand as you type)</i>		
24	Give details of data storage arrangements, including security measures in place to protect the data, where data will be stored, how long for, and in what form. Will data be archived – if so how and if not why not.		
	All data will be encrypted and securely stored in password-protected cloud storage on the researcher's Office 365 system and Google Drive cloud, ensuring it remains confidential. The iPhone 11 utilised for data storage or transfer will also be password-protected and will be reformatted after the project concludes to remove the data. Data will be retained until the project's completion, after which it will be deleted. <i>(this box should expand as you type)</i>		
25	Please indicate if your data will be stored in the UWTSD Research Data Repository (see https://researchdata.uwtsd.ac.uk/). If so please explain. (Most relevant to academic staff)		
	<i>(this box should expand as you type)</i>		
26	Confirm that you have read the UWTSD guidance on data management (see https://www.uwtsd.ac.uk/library/research-data-management/)	YES	☒
27	Confirm that you are aware that you need to keep all data until after your research has completed or the end of your funding	YES	☒

SECTION K: Declaration

The information which I have provided is correct and complete to the best of my knowledge. I have attempted to identify any risks and issues related to the research activity and acknowledge my obligations and the rights of the participants. In submitting this application I hereby confirm that I undertake to ensure that the above named research activity will meet the University's Research Ethics and Integrity Code of Practice which is published on the website: https://www.uwtsd.ac.uk/research/research-ethics/		
1	Signature of applicant:	Lydia Date: 16/02/2025

For STUDENT Submissions:

2	Director of Studies/Supervisor:	Louise Emanuel/Julie Crossman/Debbie Winter	Date:
3	Signature:		

For STAFF Submissions:

4	Academic Director/ Assistant Dean:		Date:
5	Signature:		

Checklist: Please complete the checklist below to ensure that you have completed the form according to the guidelines and attached any required documentation:

☒	I have read the guidance notes supplied before completing the form.
☒	I have completed ALL RELEVANT sections of the form in full.
☒	I confirm that the research activity has received approval in principle
☐	I have attached a copy of final/interim approval from external organisation (where appropriate)
☐	I have attached a full risk assessment (where <u>appropriate</u>) ONLY TICK IF YOU HAVE ATTACHED A FULL RISK ASSESSMENT
☒	I understand that it is my responsibility to ensure that the <u>above named</u> research activity will meet the University's Research Ethics and Integrity Code of Practice.
☒	I understand that before commencing data collection all documents aimed at respondents (including information sheets, consent forms, questionnaires, interview schedules etc.) must be confirmed by the DoS/Supervisor, module tutor or Academic Director.

RESEARCH STUDENTS ONLY

Once complete, submit this form via the **MyTSD Doctoral College Portal** at (<https://mytsd.uwtsd.ac.uk>).

RESEARCH STAFF ONLY

All communications relating to this application during its processing must be in writing and emailed to pqresearch@uwtsd.ac.uk, with the title 'Ethical Approval' followed by your name.



lydia peters

Carrer de Xifré, 73,3-1

08026 Barcelona

00 34 655 912 621

lydia.peters@gmail.com

Dear UWTSD,

RE: Report of women's experiences of changes in their singing and speaking voices linked to hormonal fluctuations in perimenopause and menopause.

I confirm that I approve of the research proposed, titled "What are women's experiences with the changes in singing and speaking voice over the age of forty?", to be carried out by Lydia Peters, voice coach at Espai de la Veu, between April 2025 and July 2025.

Kind Regards,

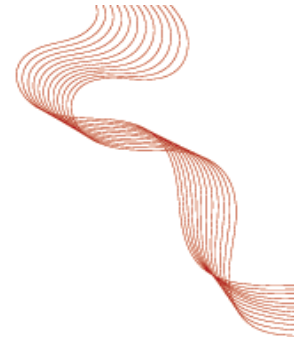
lydia peters
Voice Coach
Espai de la Veu by Lydia Peters
16/02/25

Appendix Five: Participant Information Sheet and Informed Consent (English and original Spanish versions and signed copies)



l'ESPai DE LA VEU - VOICE LAB BY LYDIA PETERS

Vocal Training and Singing Instruction



PARTICIPANT INFORMATION SHEET

STUDY TITLE: A Qualitative Research Study on the Professional and Personal Experiences of Women Over Forty Experiencing Changes in Their Speaking and/or Singing Voices Associated with Perimenopause and Menopause Symptoms.

PRINCIPAL RESEARCHER: Lydia Peters

SUPERVISOR: Louisa Morgan

RESEARCH CENTRE: Voice Study Centre

PARTNER INSTITUTION: University of Wales Trinity Saint David

INTRODUCTION

Dear Student/Colleague,

We wanted to let you know about a research project in which you are invited to participate. This study has received approval from the Research Ethics Committee of the University of Wales Trinity Saint David. This document aims to give you comprehensive and precise information to help you decide whether to participate in this study. We encourage you to read this information sheet thoroughly, and we are available to address any questions you may have.

VOLUNTARY ENGAGEMENT

As a student at l'Espai and/or a singer, actress, or vocalist over the age of 40, we invite you to participate in this project. Your participation is entirely voluntary, and you have the option to decline. Should you choose to participate, you may withdraw your consent at any time without impacting your relationship with the researcher or causing any detriment.

OBJECTIVE OF THE RESEARCH

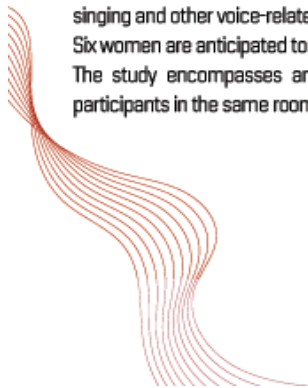
The project aims to document the testimonies of female singers, actresses, and voice professionals concerning the potential changes they have encountered due to perimenopause and menopause. The objective is to promote visibility and dialogue among educators and other voice specialists. Ultimately, future research may explore the development of targeted training on this subject for voice professionals, which could be integrated into their professional practice.

STUDY OVERVIEW

The selection criteria were determined by the participants' age and their personal interest or professional commitment to singing and other voice-related activities.

Six women are anticipated to participate.

The study encompasses an interview with each participant, as well as a face-to-face focus group activity involving all participants in the same room.



Lydia Peters
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08026 Barcelona
T. (00 34) 655 912 621
www.lydiapeters.info

STUDY ACTIVITIES

The study activities are scheduled for May and June 2025, with specific days and times to be determined in consultation with the participants. In-person interviews will be conducted at the studio at l'Espai de la Veu (c/Xifré) and Zestones studio rooms (Passatge Frígola) for the focus group activity.

The personal interviews will last one hour, while the group activity will last one and a half hours.

The study will not include any appointments beyond those specified above, unless the participant desires otherwise.

Both the personal interviews and the focus group sessions will be audio-recorded. Participant confidentiality is assured. The researcher will analyse and present the data in a report, which the supervisor will evaluate. The study's findings will be compiled in a report in July, subject to review by a university committee. The report is anticipated to include the participants' first names, and they may request name changes or use an alias.

Participants will gain access to the report following its evaluation by the committee, along with the researcher's conclusions from the study.

Participants can request recordings of their interviews as well as the group activity.

RISKS AND DISCOMFORTS ASSOCIATED WITH YOUR PARTICIPATION IN THE STUDY

The study presents no risks to physical or mental health; however, participants are advised that discussions will include topics related to the voice and the effects that ageing, perimenopause, and menopause may have on singing and other vocal activities.

PROTECTION OF PERSONAL INFORMATION

The researcher commits to Organic Law 3/2018, dated December 5, concerning Data Protection and the Guarantee of Digital Rights, along with the Royal Decree that enacts it (RD 1720/2007). The data gathered for the study will be anonymised through a coding system, ensuring no identifying information is included. Only the study supervisor and collaborators can associate this data with the participants, thereby safeguarding your identity from disclosure. The processing, communication, and transfer of personal data for all participants will be conducted by the stipulations of this law.

Since May 25, 2018, the new EU legislation on personal data has been entirely in effect, specifically Regulation (EU) 2016/679 of the European Parliament and the Council dated April 27, 2016, concerning General Data Protection (GDPR). Consequently, you need to be aware of the following information: in addition to the rights you are already familiar with (access, modification, objection, and deletion of data), you now also have the right to limit the processing of inaccurate data, request a copy, or request the transfer of the data you have provided for the study to a third party (portability). If you want to exercise your rights, you can contact the study's principal investigator. The data collected for the study will be identified by a code, ensuring that no information that could identify you is included.

CONTACT

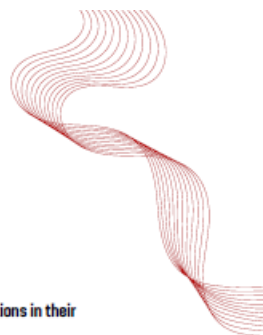
Participants may reach out to the researcher for any inquiries related to the study, both during its and afterwards, at the following email address: lydia.peters@gmail.com.

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T. (00 34) 655 912 621
www.lydiapeters.info



ESPAI DE LA VEU- VOICE LAB BY LYDIA PETERS

Vocal Training and Singing Instruction



A research study examining the professional and personal experiences of women over 40 who encounter alterations in their speaking and/or singing voices linked to the symptoms of perimenopause and menopause.

Consent to engage in the research

- voluntarily consents to engage in this research study.

I acknowledge that, even if I consent to participate at this moment, I retain the right to withdraw at any time.

I acknowledge that I have the right to decline to answer any questions during the investigation process without facing any repercussions.

The purpose and nature of the study have been communicated to me in writing, and I have been afforded the opportunity to inquire further about it.

I acknowledge that participation entails providing **the initials of my name and family name** or a pseudonym, my occupation, and my age.

I acknowledge that I will not derive any direct benefits from my participation in this research.

I consent to the audio recording of my interview and my participation in the discussion group.

I acknowledge that all information I provide for this study will be handled confidentially.

I acknowledge that the covert excerpts from my interview may be quoted in tutorials with the supervisor and the presentation of the final research report.

I acknowledge that my identity will remain confidential in any reporting regarding the outcomes of this investigation.

This will be accomplished by altering my name and obscuring any details of my interview that could disclose my identity or the identities of the individuals I am discussing.

I acknowledge that if I inform the investigator of any risk of harm to myself or others, they may be obligated to report this to the appropriate authorities.

They will consult with me beforehand, but they may proceed with the report regardless of my consent.

I acknowledge that the signed consent forms and original audio recordings will be stored on Lydia Peters' laptop until the review committee verifies the findings of the investigation.

I acknowledge that a transcript of my interview, with all identifying information omitted, will be preserved for (specific relevant period: for students, this will be two years from the date of the examination meeting).

I acknowledge that, in accordance with the freedom of information law, I possess the right to access the information I have submitted at any time while it is retained as outlined above.

I acknowledge that I am at liberty to contact any individuals involved in the investigation to seek additional clarification and information.

The researchers' names, titles, affiliations, and contact information (and academic supervisors, where relevant) are included.

Signature of the research participant: The participant provides informed consent to engage in this study.

Participant's signature Date

Researcher's signature

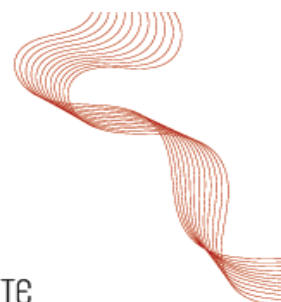
Researcher's signature Date

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ESPai DE LA VEU-VOICE LAB BY LYDIA PETERS

Clases de Canto y Estudio de la Voz



DOCUMENTO DE INFORMACIÓN A LA PARTICIPANTE

TÍTULO DEL ESTUDIO: Estudio de investigación sobre las experiencias profesionales y personales de mujeres mayores de cuarenta años que experimentan cambios en su voz hablada y/o cantada asociados a los síntomas de la perimenopausia y la menopausia.

INVESTIGADORA PRINCIPAL: Lydia Peters

SUPERVISORA: Louisa Morgan

CENTRO DE ESTUDIOS: Voice Study Centre

UNIVERSIDAD ASOCIADA: University of Wales Trinity Saint David

INTRODUCCIÓN

Apreciada alumna/compañera;

nos dirigimos a ti para informarte sobre un proyecto de investigación en el que se te invita a participar. El estudio ha sido aprobado por el Comité de Ética de la Investigación de la University of Wales Trinity Saint David. A través de este documento tenemos la intención de facilitarte la información correcta y suficiente para que puedas decidir si aceptas o no participar en este estudio. Para ello lee por favor esta hoja informativa con atención y te aclararemos las dudas que te puedan surgir.

PARTICIPACIÓN VOLUNTARIA

Como alumna de l'Espai y/o cantante/actriz/profesional de la voz mayor de 40 años, te proponemos participar de este proyecto. Tu participación es voluntaria y puedes decidir NO participar. **Si decides participar, puedes cambiar tu decisión y retirar el consentimiento en cualquier momento**, sin que por ello se altere la relación con la investigadora se vea alterada ni se produzca perjuicio alguno.

OBJETIVO DEL ESTUDIO

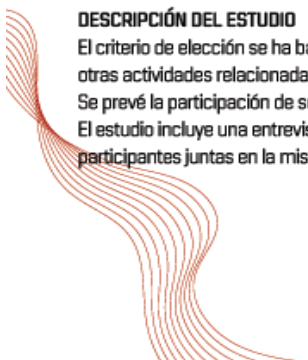
El proyecto se dedicará a documentar los testimonios de mujeres cantantes, actrices y/o profesionales de la voz, en referencia a los potenciales cambios que hayan experimentado debido a la perimenopausia y menopausia, con la esperanza de que la información fomente la visibilidad y el diálogo entre docentes y otros expertos en la voz. En última instancia, en futuras investigaciones se podría considerar una formación específica sobre el tema de estudio para expertos en la voz, que podría diseñarse y aplicarse en su práctica laboral.

DESCRIPCIÓN DEL ESTUDIO

El criterio de elección se ha basado en la edad de las participantes y su interés personal o dedicación profesional por el canto y otras actividades relacionadas con el uso de la voz.

Se prevé la participación de seis mujeres.

El estudio incluye una entrevista a cada una de las participantes y una actividad presencial de grupo de debate con las participantes juntas en la misma sala.



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ACTIVIDADES DEL ESTUDIO

Las actividades del estudio se realizarán durante los meses de mayo y junio de 2025, en días y horas a convenir con las participantes. Tendrán lugar en el estudio de l'Espai de la Veu (c/Xifré) en el caso de las entrevistas personales, y en una sala de 2 estones (passatge Frígola) para la actividad de grupo de debate.

Las entrevistas personales tendrán una hora de duración, y la actividad en grupo tendrá una hora y media de duración.

El estudio no conllevará más citas de las arriba expuestas, a no ser que la participante así lo desee.

Tanto las entrevistas personales como la actividad de grupo de debate serán grabadas en nota de voz. Se garantiza la confidencialidad de las participantes. Los datos serán analizados y expuestos en un informe por la investigadora, y evaluados por la supervisora. Las conclusiones del estudio se presentarán en un informe en el mes de julio que será evaluado por un comité de la Universidad. Se prevé que en el informe se nombre por el nombre de pila a las participantes, que pueden solicitar que su nombre se cambie, o utilizar un alias.

Las participantes tendrán acceso al informe una vez haya sido evaluado por el comité, así como a las conclusiones del estudio por parte de la investigadora.

Las participantes podrán solicitar las grabaciones tanto de su entrevista personal, como de la actividad de grupo.

RIESGOS Y MOLESTIAS DERIVADOS DE TU PARTICIPACIÓN EN EL ESTUDIO

El estudio no supone ningún riesgo para la salud física ni mental, no obstante se advierte a las participantes que se tratarán temas relacionados con la voz y los cambios que la edad, la perimenopausia y la menopausia puedan ocasionar en el canto y otras actividades vocales.

PROTECCIÓN DE DATOS PERSONALES

La investigadora se compromete al cumplimiento de la Ley Orgánica 3/2018, de 5 de diciembre, de Protección de Datos y garantía de los derechos digitales y al Real Decreto que la desarrolla (RD 1720/2007). Los datos recogidos para el estudio estarán identificados mediante un código, de manera que no incluya información que pueda identificarte, y sólo la supervisora del estudio/colaboradores podrán relacionar dichos datos con las participantes. Por lo tanto, tu identidad no será revelada a persona alguna. El tratamiento, la comunicación y la cesión de los datos de carácter personal de todos los participantes se ajustarán a lo dispuesto en esta ley.

Desde el pasado 25 de mayo de 2018 es de plena aplicación la nueva legislación en la UE sobre datos personales, en concreto el Reglamento (UE) 2016/679 del Parlamento europeo y del Consejo de 27 de abril de 2016 de Protección de Datos (RGPD). Por ello, es importante que conozcas la siguiente información: además de los derechos que ya conoces (acceso, modificación, oposición y cancelación de datos) ahora también puedes limitar el tratamiento de datos que sean incorrectos, solicitar una copia o que se trasladen a un tercero (portabilidad) los datos que usted ha facilitado para el estudio. Para ejercitar tus derechos, puedes dirigirte al investigador principal del estudio. Los datos recogidos para el estudio estarán identificados mediante un código, de manera que no se incluya información que pueda identificarte.

CONTACTO

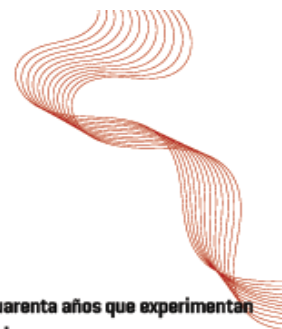
Las participantes pueden contactar con la investigadora para resolver cualquier duda referente al estudio y durante la realización del mismo y después al correo: lydia.peters@gmail.com

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ESPAI DE LA VEU-VOICE LAB BY LYDIA PETERS

Clases de Canto y Estudio de la Voz



Estudio de investigación sobre las experiencias profesionales y personales de mujeres mayores de cuarenta años que experimentan cambios en su voz hablada y/o cantada asociados a los síntomas de la perimenopausia y la menopausia.

Consentimiento para participar en la investigación

- acepta voluntariamente participar en este estudio de investigación.
- Entiendo que, aunque acepte participar ahora, puedo retirarme en cualquier momento.
- Comprendo que puedo negarme a responder a cualquier pregunta durante el proceso de investigación sin consecuencias de ningún tipo.
- Me han explicado por escrito el propósito y la naturaleza del estudio y he tenido la oportunidad de hacer preguntas sobre el mismo.
- Entiendo que la participación implica el uso de mi nombre de pila (o seudónimo), mi edad, y mi ocupación principal.
- Entiendo que no me beneficiaré directamente de participar en esta investigación.
- Acepto que se grabe en audio mi entrevista y mi intervención en el grupo de debate.
- Entiendo que toda la información que facilite para este estudio será tratada de forma confidencial.
- Entiendo que en cualquier informe sobre los resultados de esta investigación mi identidad permanecerá anónima.
- Esto se hará cambiando mi nombre y ocultando cualquier detalle de mi entrevista que pueda revelar mi identidad o la identidad de las personas de las que hablo.
- Entiendo que los extractos encubiertos de mi entrevista pueden citarse en tutorías con la supervisora y la presentación del informe final de la investigación.
- Entiendo que si informo al investigador de que yo mismo u otra persona corre riesgo de sufrir daños, es posible que tengan que informar de ello a las autoridades pertinentes; lo hablarán conmigo primero, pero es posible que tengan que informar con o sin mi permiso.
- Entiendo que los formularios de consentimiento firmados y las grabaciones de audio originales se conservarán en el ordenador portátil de Lydia Peters hasta que la comisión examinadora confirme los resultados de la investigación.
- Entiendo que se conservará una transcripción de mi entrevista en la que se hayan eliminado todos los datos identificativos durante (periodo específico pertinente: en el caso de los estudiantes será de dos años a partir de la fecha de la junta examinadora).
- Entiendo que, en virtud de la legalización de la libertad de información, tengo derecho a acceder a la información que he facilitado en cualquier momento mientras esté almacenada según lo especificado anteriormente.
- Entiendo que soy libre de ponerme en contacto con cualquiera de las personas implicadas en la investigación para solicitar más aclaraciones e información.

Nombres, títulos, afiliaciones y datos de contacto de los investigadores (y supervisores académicos cuando proceda).

Firma del participante en la investigación: la participante da su consentimiento informado para participar en este estudio

Firma del participante

Fecha

Firma del investigador

Firma del investigador

Fecha

Lydia Peters
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08026 Barcelona
T. (00 34) 655 912 621
www.lydiapeters.info

Please find the last page from the signed copies of the six participants, which includes their names (kept private) and their signatures.



ESPAI DE LA VEU-VOICE LAB BY LYDIA PETERS

Clases de Canto y Estudio de la Voz

Estudio de investigación sobre las experiencias profesionales y personales de mujeres mayores de cuarenta años que experimentan cambios en su voz hablada y/o cantada asociados a los síntomas de la perimenopausia y la menopausia.

Consentimiento para participar en la investigación

[Redacted] acepta voluntariamente participar en este estudio de investigación.

- Entiendo que, aunque acepte participar ahora, puedo retirarme en cualquier momento.
- Comprendo que puedo negarme a responder a cualquier pregunta durante el proceso de investigación sin consecuencias de ningún tipo.
- Me han explicado por escrito el propósito y la naturaleza del estudio y he tenido la oportunidad de hacer preguntas sobre el mismo.
- Entiendo que la participación implica el uso de mi nombre de pila (o seudónimo), mi edad, y mi ocupación principal.
- Entiendo que no me beneficiaré directamente de participar en esta investigación.
- Acepto que se grabe en audio mi entrevista y mi intervención en el grupo de debate.
- Entiendo que toda la información que facilite para este estudio será tratada de forma confidencial.
- Entiendo que en cualquier informe sobre los resultados de esta investigación mi identidad permanecerá anónima.
- Esto se hará cambiando mi nombre y ocultando cualquier detalle de mi entrevista que pueda revelar mi identidad o la identidad de las personas de las que hablo.
- Entiendo que los extractos encubiertos de mi entrevista pueden citarse en tutorías con la supervisora y la presentación del informe final de la investigación.
- Entiendo que si informo al investigador de que yo mismo u otra persona corre riesgo de sufrir daños, es posible que tengan que informar de ello a las autoridades pertinentes; lo hablarán conmigo primero, pero es posible que tengan que informar con o sin mi permiso.
- Entiendo que los formularios de consentimiento firmados y las grabaciones de audio originales se conservarán en el ordenador portátil de Lydia Peters hasta que la comisión examinadora confirme los resultados de la investigación.
- Entiendo que se conservará una transcripción de mi entrevista en la que se hayan eliminado todos los datos identificativos durante (periodo específico pertinente: en el caso de los estudiantes será de dos años a partir de la fecha de la junta examinadora).
- Entiendo que, en virtud de la legalización de la libertad de información, tengo derecho a acceder a la información que he facilitado en cualquier momento mientras esté almacenada según lo especificado anteriormente.
- Entiendo que soy libre de ponerme en contacto con cualquiera de las personas implicadas en la investigación para solicitar más aclaraciones e información.

Nombres, títulos, afiliaciones y datos de contacto de los investigadores (y supervisores académicos cuando proceda).

Firma del participante en la investigación: la participante da su consentimiento informado para participar en este estudio

Firma del participante

Fecha

18/5/25

Firma del investigador

Firma del investigador

Fecha

18/5/25

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Clases de Canto y Estudio de la Voz



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Consentimiento para participar en la investigación

 acepta voluntariamente participar en este estudio de investigación.

- Entiendo que, aunque acepte participar ahora, puedo retirarme en cualquier momento.
- Comprendo que puedo negarme a responder a cualquier pregunta durante el proceso de investigación sin consecuencias de ningún tipo.
- Me han explicado por escrito el propósito y la naturaleza del estudio y he tenido la oportunidad de hacer preguntas sobre el mismo.
- Entiendo que la participación implica el uso de mi nombre de pila (o seudónimo), mi edad, y mi ocupación principal.
- Entiendo que no me beneficiaré directamente de participar en esta investigación.
- Acepto que se grabe en audio mi entrevista y mi intervención en el grupo de debate.
- Entiendo que toda la información que facilite para este estudio será tratada de forma confidencial.
- Entiendo que en cualquier informe sobre los resultados de esta investigación mi identidad permanecerá anónima.
- Esto se hará cambiando mi nombre y ocultando cualquier detalle de mi entrevista que pueda revelar mi identidad o la identidad de las personas de las que hablo.
- Entiendo que los extractos encubiertos de mi entrevista pueden citarse en tutorías con la supervisora y la presentación del informe final de la investigación.
- Entiendo que si informo al investigador de que yo mismo u otra persona corre riesgo de sufrir daños, es posible que tengan que informar de ello a las autoridades pertinentes; lo hablarán conmigo primero, pero es posible que tengan que informar con o sin mi permiso.
- Entiendo que los formularios de consentimiento firmados y las grabaciones de audio originales se conservarán en el ordenador portátil de Lydia Peters hasta que la comisión examinadora confirme los resultados de la investigación.
- Entiendo que se conservará una transcripción de mi entrevista en la que se hayan eliminado todos los datos identificativos durante (período específico pertinente: en el caso de los estudiantes será de dos años a partir de la fecha de la junta examinadora).
- Entiendo que, en virtud de la legalización de la libertad de información, tengo derecho a acceder a la información que he facilitado en cualquier momento mientras esté almacenada según lo especificado anteriormente.
- Entiendo que soy libre de ponerme en contacto con cualquiera de las personas implicadas en la investigación para solicitar más aclaraciones e información.

Nombres, títulos, afiliaciones y datos de contacto de los investigadores (y supervisores académicos cuando proceda).

Firma del participante en la investigación: la participante da su consentimiento informado para participar en este estudio

 22 de mayo 25
Firma del participante Fecha

Firma del investigador

 22-5-2025
Firma del investigador Fecha

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Consentimiento para participar en la investigación

-  acepta voluntariamente participar en este estudio de investigación.
- Entiendo que, aunque acepto participar ahora, puedo retirarme en cualquier momento.
 - Comprendo que puedo negarme a responder a cualquier pregunta durante el proceso de investigación sin consecuencias de ningún tipo.
 - Me han explicado por escrito el propósito y la naturaleza del estudio y he tenido la oportunidad de hacer preguntas sobre el mismo.
 - Entiendo que la participación implica el uso de mi nombre de pila (o seudónimo), mi edad, y mi ocupación principal.
 - Entiendo que no me beneficiaré directamente de participar en esta investigación.
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 - Esto se hará cambiando mi nombre y ocultando cualquier detalle de mi entrevista que pueda revelar mi identidad o la identidad de las personas de las que hablo.
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 - Entiendo que los formularios de consentimiento firmados y las grabaciones de audio originales se conservarán en el ordenador portátil de Lydia Peters hasta que la comisión examinadora confirme los resultados de la investigación.
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Nombres, títulos, afiliaciones y datos de contacto de los investigadores (y supervisores académicos cuando proceda).

Firma del participante en la investigación: la participante da su consentimiento informado para participar en este estudio


Firma del participante Fecha


Firma del investigador 26 Mayo 2015
Firma del investigador Fecha

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Consentimiento para participar en la investigación

[Redacted] acepta voluntariamente participar en este estudio de investigación.

- Entiendo que, aunque acepte participar ahora, puedo retirarme en cualquier momento.
- Comprendo que puedo negarme a responder a cualquier pregunta durante el proceso de investigación sin consecuencias de ningún tipo.
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- Entiendo que no me beneficiaré directamente de participar en esta investigación.
- Acepto que se grabe en audio mi entrevista y mi intervención en el grupo de debate.
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Firma del participante en la investigación: la participante da su consentimiento informado para participar en este estudio

Raquel 30 de mayo de 2025
Firma del participante Fecha

Lydia Peters 30/05/25
Firma del investigador Fecha

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[Redacted area] acepta voluntariamente participar en este estudio de investigación.

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- Comprendo que puedo negarme a responder a cualquier pregunta durante el proceso de investigación sin consecuencias de ningún tipo.
- Me han explicado por escrito el propósito y la naturaleza del estudio y he tenido la oportunidad de hacer preguntas sobre el mismo.
- Entiendo que la participación implica... (describa brevemente y en términos sencillos lo que implicará la participación en su investigación).
- Entiendo que no me beneficiaré directamente de participar en esta investigación.
- Acepto que se grabe en audio mi entrevista y mi intervención en el grupo de debate.
- Entiendo que toda la información que facilite para este estudio será tratada de forma confidencial.
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Firma del participante en la investigación: la participante da su consentimiento informado para participar en este estudio

Firma del participante Fecha

Firma del investigador

Firma del investigador

Firma del investigador Fecha

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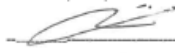
Consentimiento para participar en la investigación

[Redacted] acepta voluntariamente participar en este estudio de investigación.

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- Comprendo que puedo negarme a responder a cualquier pregunta durante el proceso de investigación sin consecuencias de ningún tipo.
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Nombres, títulos, afiliaciones y datos de contacto de los investigadores (y supervisores académicos cuando proceda).

Firma del participante en la investigación: la participante da su consentimiento informado para participar en este estudio

 12/06/2025

Firma del participante

Fecha

Firma del investigador

 12/6/25

Firma del investigador

Fecha

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Appendix Six: The Six Steps of Reflexive Thematic Analysis

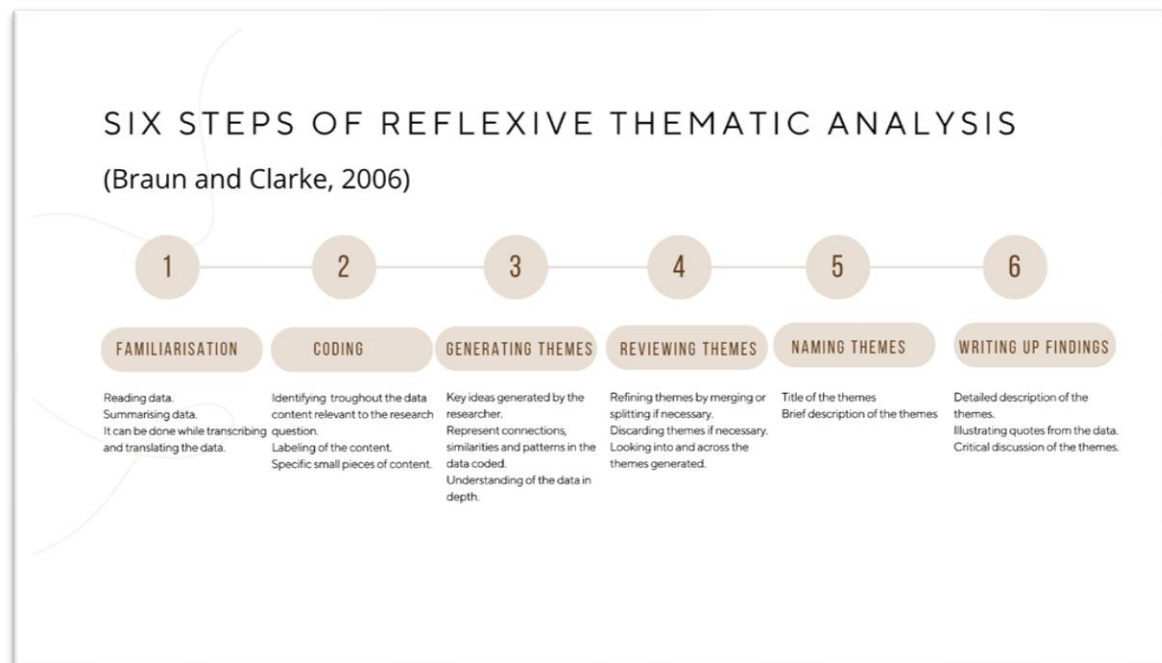


Fig.8: Six Steps of Reflexive Thematic Analysis by Braun and Clarke (2006) with a brief description of the six phases (Yardley, 2024).

The figure above summarises the six steps of Reflexive Thematic Analysis (RTA) by Braun and Clarke (2006). When I started this research project, I read the most prominent papers by these authors, including their interview with Nikki Hayfield (Braun, Clarke, and Hayfield, 2022), as I understood RTA was the best framework to work with for my data analysis. However, those readings were not enough for me, probably because I had never conducted a research project before, and the research world was alien to me. The truth is, at times, I have been feeling incapable of processing the amount of information I was reading about conducting a research project, let alone the information I was gathering from my participants on the topic I had chosen. I felt overwhelmed, lost, and naïve (I did my coding handwriting, analogically, on a notebook with Post-its). That is why I decided to search for help on YouTube videos with step-by-step instructions and explanations on each phase of the RTA. I found Dr. Elizabeth Yardley's channel, @DegreeDoctor (listed on my References). This is not how I thought I would start my path in the research world, relying on Internet 'tutorials', but it has helped a lot.

I hope to revisit the topic of this research with the skills I have acquired and the experience I have gained, which I hope will continue to increase.

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