What is the relationship between sleep loss, anxiety, and dysphonia in student performers, and what strategies can voice teachers employ to ameliorate the effects of mental health concerns on vocal functioning? A critical evaluation on existing literature.

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INTRODUCTION

In a 2016 study, Kloss et al. wrote that 70% of college students report sleep problems, and students with issues surrounding sleep have greater instances of anxiety and depression (Kloss et al., 2016; Baroni et al., 2018). The rates of sleep health problems in college students have risen dramatically since 1982, and along with that, student stress, anxiety, and depression are also high (Kloss et al., 2016; Baroni et al., 2018; Blyskal, 2022b). While erratic sleep schedules and academic pressure affects students of all majors, student actors and musicians face compounding anxieties due to performance schedules, the physiological needs of their art forms, and the heightened emotions surrounding the material with which they work (Rob and Due, 2017; Czajkowski, Greasley and Allis, 2021; Blyskal, 2022b). Anxiety can cause sleep loss, as well as rumination on negative emotions and low self-esteem, and sleep loss can exacerbate anxiety, which becomes a cyclical problem for these young performers (McGlinchey et al., 2011; Kloss et al., 2016; Zhang et al., 2018; Baroni et al., 2018; Ding et. al., 2020). Adding to this, there are noted connections between mental health problems such as anxiety and depression and functional vocal dysphonia, a condition that can have a significant impact on the training of singers and actors (Willinger, Volkl-Kernstock and Aschauer, 2005). This paper will examine the relationship between sleep loss, anxiety, and the vocal performance of student actors and singers. The sleep and mental health concerns of adolescents and college students of all majors will be addressed through an examination of current literature, alongside the added stressors unique to the performing arts. Additionally, strategies for voice teachers to address concerns about sleep and anxiety in their students will be considered, with a particular focus on sleep hygiene and mindfulness meditation. This examination of research is being undertaken after noticing high instances of sleep deprivation issues in my own work with college students, as well as anxiety symptoms such as emotional outbursts, rumination on mistakes, and low-self esteem.

MENTAL HEALTH AND SLEEP

The connection between mental health issues and erratic sleep schedules has been well documented over the years (McGlinchey et al., 2011; Kloss et al., 2016; Zhang et al., 2018; Baroni et al., 2018). Poor sleep quality is often caused by rumination on negative thoughts, followed by worries about the lack of sleep itself, which in turn can be followed by more negative emotions about the self (Liu et al., 2018; Shallcross et al., 2019). Therefore, anxiety can cause sleep loss, and sleep loss exacerbates anxiety, and in students particularly, high levels of academic stress correlated to poor wellbeing and sleep (Almarzouki et al., 2022). Cognitive

function and memory are affected by poor sleep quality, specifically, as Kloss et. al. (2016) wrote, “sleep loss is associated with impairments in procedural and declarative learning, attention, memory consolidation, problem solving, and critical thinking among college students”. Sleep loss has implications for physical health as well, with studies showing links between poor sleep quality and chronic disease and inflammation (Opp and Krueger, 2015; Kloss et al., 2016).

College students of all majors and demographics report poor sleep habits and quality tied directly to academic stress and pressure (Wristen, 2013; Kloss et al., 2016; Almarzouki et al., 2022). Bamber and Schneider (2015) defined stress as “the perception that a situation or event exceeds coping resources”. High levels of stress are correlated to poor academic performance, and anxiety is the most prevalent mental health condition treated in college students in the United States (Bamber and Schneider, 2016; Bogusch, Fekete and Skinta, 2016). But student performers might experience even higher levels of anxiety and pressure to perform well than the average college student. The constant stress due not only to their class schedules, but the intensity of their coursework, the personal nature of the work they are undertaking, and the volatility of the career field which they are entering (Wristen, 2013; Rob and Due, 2017; Czajkowski, Greasley and Allis, 2021; Blyskal, 2022b). In one study of the psychological well-being of Australian Actors, the lifestyle of professional actors was “described overwhelmingly in a negative way”, with financial instability and fear of disclosing mental health struggles contributing to the negative feeling (Rob, Due and Venning, 2018). For singers, audition and rehearsal schedules combined with travel and the need for multiple jobs due to low financial security do not create an optimal environment for sleep to thrive (Harvey, 2003).

SLEEP LOSS, ANXIETY, AND DYSPHONIA

While sleep loss and anxiety may impact general wellbeing, the specific link between sleep loss, anxiety, and vocal dysphonia has been noted and can have consequences for these students who use their voices as part of their livelihood (Bagnall, Dorrian and Fletcher, 2011; Searl, Dargin and Bailey, 2021; Carrillo-Gonzalez, Camargo-Mendoza and Cantor-Cutiva, 2021; Searl et al., 2022). Individuals with higher levels of mental illness, such as anxiety and depression, were more likely to report a voice disorder and vice versa (Willinger, Volkl-Kernstock and Aschauer, 2005; Anand, Bottalico and Gray, 2021). A study of the relationship between sleep quality and stress with voice functioning in college professors noted “teachers who reported stress at work were more than twice as likely to report voice disorders” and “teachers who reported having slept less than 6 hours per day were almost twice as likely to report voice disorders” (Carrillo-Gonzalez, Camargo-Mendoza and Cantor-Cutiva, 2021). It is not clear how

many of these teachers experienced both, but using what we know about sleep and stress and the cyclical nature of them both, it is not out of the realm of possibility to expect a certain amount of overlap between those experiencing stress at work, and those with sleep problems.

Also what is of interest is the lack of research into sleep hygiene for student actors and singers, even when other lifestyle factors are considered. In several studies, warm-up habits, alcohol usage, and other lifestyle questions are quantifiably tracked to discover if there is an effect on vocal function, but sleep is not mentioned at all, despite the effect on voice use mentioned above (Harvey, 2003; Searl, Dargin and Bailey, 2021; Santa Maria et al., 2021; Searl et al., 2022). Fatigue has been noted in higher levels in patients with functional dysphonia (O'Hara et al., 2011; Cho et al., 2017) and even one night without sleep has been noted to affect a speaker's articulation and range, with a considerable "dampening" on vocal expression and pitch range (Harrison and Horne, 1997; Bagnall, Dorrian and Fletcher, 2011). One study did track the sleep of student actors and SLPs, and several of these students noted that sleep did affect their voice use, though they were unspecific in what regards (Searl and Bailey, 2014). What is also interesting in this study is they noted the general inconsistencies in voice anatomy and hygiene education among student actors, correctly pointing out that voice training in acting programs is often varied from program to program and each technique taught places different emphasis on vocal anatomy and vocal health (Searl and Bailey, 2014). These inconsistencies do not create a fertile ground for understanding the mind, body, voice connection and how sleep can affect all three.

THE STIGMA OF REST AND VOCAL INJURY

What is noted in several studies of the voice and lifestyle habits of singers and actors is the pressure felt to be at peak vocal performance, and indicators that vocal functioning itself can create anxiety in these performers (Searl, Dargin and Bailey, 2021; Searl et al., 2022; Estes et al., 2023). When the voice is the main source of artistic expression and livelihood, vocal injury or fatigue can cause a loss of work and income (Bagnall, Dorrian and Fletcher, 2011; Estes et al., 2023). Additionally, there is pressure from outside forces to continually be working and rest carries stigma, with fear of retaliation or being viewed as "lazy" (Harvey, 2003; Rob, Due and Venning, 2018). This resistance to allowing rest is not isolated to the performing arts, but is culturally most prevalent in countries such as the United States, the United Kingdom, and Canada, while Italy, Spain, China, Japan, and more encourage and promote napping and rest during the day to help workers maintain productivity (Alger, Brager and Capaldi, 2019).

Tied to this conversation about the stigmatization of rest, and perhaps of most importance to voice teachers, is the immense amount of anxiety student performers feel about sharing concerns of vocal injuries due to judgment and fear of losing work. 60% of undergraduate students who were dealing with vocal injuries during their undergraduate years felt stigmatized by their programs, regardless of the fact those same faculty are often their very first source of vocal health information (Estes et al., 2023). Despite research showing favorable outcomes for performers who treat vocal injuries early and thoroughly, these conditions are still often falsely seen as career-ending and perpetuate high levels of anxiety in performers when it comes to seeking treatment (Estes et al., 2023). As Estes et. al wrote,

> "Several studies have indicated that when encountering vocal problems, performers frequently rely on voice teachers as their principal sources of education and assistance, regardless of whether they already have an established relationship or wish to engage with a new voice teacher to address their vocal symptoms" (Estes et al., 2023).

If students fear going to their faculty and teachers to address vocal concerns due to stigmatization, health issues may compound. Additionally, it is not out of the realm of possibility to suggest that the high levels of anxiety experienced by students dealing with voice injuries might affect sleep, and lack of sleep could exacerbate these fears. One study suggests that up to 50% of first year graduate acting students could present with laryngeal abnormalities, and some had more than one, which means voice teachers may encounter a student with such a condition, diagnosed or not (Amir et al., 2013).

PERFECTIONISM AND THE ARTIST

As we can see based on the above research, sleep loss can cause both anxiety and dysphonia, and those with dysphonia also have higher levels of anxiety and poor sleep (Willinger, Volkl-Kernstock and Aschauer, 2005; McGlinchey et al., 2011; Cho et al., 2017; Carrillo-Gonzalez, Camargo-Mendoza and Cantor-Cutiva, 2021). For professional and student singers and actors, dysphonia and other voice injuries lead to even higher levels of stress and anxiety in their work and personal lives due to the need for good vocal functioning in order to work (Bagnall, Dorrian and Fletcher, 2011; Estes et al., 2023). Complicating this connection even further are the high levels of perfectionism found in most elite performing artists (Hall and Hill, 2012; Rob, Due and Venning, 2018). In a study about the connection between dysphonia and perfectionism, O'Hara et. al. (2011) separated perfectionism into two categories: "healthy

perfectionism, a reasonable investment in doing things well; and unhealthy perfectionism, a preoccupation with self-doubt, self-criticism, and dissatisfaction with personal performance." Hall and Hill (2012), however, do not believe perfectionism can ever be a positive trait, especially in performers, as "its more insidious qualities undermine adaptive achievement striving, impair psychological well-being and prevent aspiring performers from fulfilling their potential". Why this fixation on perfectionism should be brought to the attention of voice teachers is not only due to the connection to the mental health state of their students, but also because of the connections between increased levels of perfectionism and fatigue in patients exhibiting functional dysphonia (O'Hara et al., 2011).

MENTAL HEALTH AND THE VOICE TEACHER

A voice teacher is not a mental health professional, but since so much anxiety for student actors begins in the classroom or the studio, how can a voice teacher best support not only their students' voices, but their overall well-being as people and performers? The first step, one that all teachers can take regardless of what they teach or where, is to create an environment where students feel comfortable being honest about the state of their voice, mental, and physical health. Student singers and actors, as noted above, feel increased pressure to be at their best all the time, with internal and external pressure to succeed (Rob and Due, 2017). Professional actors have said they fear sharing any mental health struggles due to fear of losing future opportunities or being seen as "difficult" (Rob, Due and Venning, 2018). Singers fear the loss of contracts and "career ruining" stigma (Estes et al., 2023). Voice teachers can take responsibility for self-education on vocal injuries and health, and as educators are expected to "make reasonable effort to protect the student from conditions harmful to learning or to health and safety", which would include educating their students on the same. (Rob and Due, 2017; National Education Association, 2020; Estes et al., 2023). If voice teachers are the "first line of defense" on voice injuries so to speak, as Estes et. al. state above, that responsibility should come with an awareness not only of vocal technique, but of the facts of vocal health, hygiene, and injury as to better inform their students without stigmatization or fear-mongering.

As noted above, sleep is an integral part of overall physical and mental health, with sleep loss increasing instances of anxiety and dysphonia (Cho et al., 2017; Baroni et al., 2018). Voice teachers can include education on this to their students, and those who teach at a University or Conservatory level can bring awareness of this to the structuring of classes and

courses for their students, as many performing arts student note the intensity of their workload as a major source of stress (Rob and Due, 2017; Blyskal, 2022b). If voice teachers know that the workload is untenable, or could put students at risk of worsening mental health, and with it, increased chance of vocal issues tied to that anxiety, voice teachers should consider prioritizing time to rest in addition to technique. What this sort of support and guidance looks like will vary from teacher to teacher, depending on the teaching environment, resources available, and relationship history with the student, but beginning to be a resource for students, or at least a safe space for the student to express with honesty their vocal and mental health concerns relating to their performance major, would be a valuable first step in maintaining voice health.

VOICE AND SLEEP HYGIENE EDUCATION

Additionally, beyond being an advocate for mental health resources for students, voice teachers should be proactive in education regarding sleep hygiene and its importance on overall vocal hygiene. As we noted earlier in this paper, there is little consistency regarding vocal hygiene and anatomy information in actor training programs (Searl and Bailey, 2014) and voice teachers are one of the first places students turn to when faced with vocal issues (Estes et al., 2023). Education around sleep hygiene, such as limiting screens and blue light before bed and keeping a consistent waking and sleep time, has been shown to improve beliefs and attitudes around sleep, particularly in college students, and can lower pre-sleep arousal that might otherwise cause sleep problems (Kloss et al., 2016; McAlpine, Mullan and Clarke, 2023).

MINDFULNESS FOR STUDENT PERFORMERS

There are several strategies studied in terms of reducing anxiety, and specifically, performance related anxiety, in performers. But as voice teachers are not clinical mental health professionals, the strategies offered should remain in the realm of non-medical or psychological intervention. One of these strategies is mindfulness. In the past half-century, mindfulness as a way to cope with anxiety, as well as increasing concentration and cognitive focus, has emerged and been accepted by the wider Western psychological and medical community (Czajkowski, Greasley and Allis, 2021; Blyskal, 2022a). Bamber & Schneider give an overview of mindfulness in their article “Mindfulness-based Meditation to Decrease Stress and Anxiety in College Students: A Narrative Synthesis of the Research”:

> “Mindfulness meditation (MM) originated from Buddhist Vipassana meditation and was introducted to western society by Thich Nhat Hanh (Kang et al., 2009). In 1979, Jon

Kabat-Zinn developed the first mindfulness-based stress intervention called mindfulness-based stress reduction (Center for Mindfulness in Medicine, Health Care, and Society, 2014). Mindfulness-based interventions focus on awareness of the present moment, mind-body connection, control of attention, non-judgmental thoughts, and bodily sensations. These interventions use mindfulness meditation (MM) techniques, such as body scan and diaphragmatic breathing, to bring awareness to unconscious thoughts, feelings, and behaviors" (Bamber and Schneider, 2016).

Mindfulness practices have been shown to benefit those with anxiety disorders, and as music and performance students tend to be more stressed than other majors, a consistent mindful routine may benefit them particularly (Czajkowski, Greasley and Allis, 2021). Mindfulness interventions positively affect emotional regulation, and higher mindfulness levels can lead to fewer negative emotions and lower anxiety (Ding et al., 2020). From a biological standpoint, mindfulness can activate the parasympathetic nervous system, and reduce that "fight or flight" feeling, which has benefits to performers who might experience MPA or stage fright (Blyskal, 2022a). High levels of mindfulness also can lead to improved focus and concentration on vocal technique and greater creativity and enjoyment of rehearsal and performance (Blyskal, 2022b; Czajkowski, Greasley and Allis, 2022) as well as bring awareness to instances of physical tension and moving beyond "muscle memory" patterns and breath awareness (Czajkowski, Greasley and Allis, 2021; Blyskal, 2022a; Czajkowski, Greasley and Allis, 2022). Examples of mindfulness exercises are outlined in Appendix A.

MINDFULNESS AND SLEEP

Mindfulness practices have also been shown to improve sleep quality through these same emotional regulation techniques (Bogusch, Fekete and Skinta, 2016). College students who display higher traits of mindfulness have fewer negative emotions than their less mindful counterparts, which is connected to better sleep (Ding et al., 2020). While more research needs to be done into the specific practices of mindfulness, and who may benefit most from it as a treatment option for sleep disorders as opposed to other therapies, there is substantial evidence that more mindful behavior in waking hours can lead to greater outcomes in sleep performance (Liu et al., 2018; Ding et al., 2020; Ong and Moore, 2020). This information about sleep improvement, combined with what we mentioned above about improved focus and reduction of negative emotions, would back up the assertion that mindfulness, even if in its most basic forms, has great value for the voice teacher in addressing vocal technique and hygiene.

CONCLUSION

Again, while the voice teacher is not a mental health professional, they are often the first source of information a young student may encounter, and often the most consistent resource available to them, not only for vocal technique but for all health relating to performance. The performing arts require the mental, emotional, and physical to be in alignment (Blyskal, 2022a). Managing mental health concerns such as anxiety as well as addressing the physical, such as sleep loss, cannot be untied from each other, nor from the voice itself (Willinger, Volkl-Kernstock and Aschauer, 2005; Bogusch, Fekete and Skinta, 2016; Cho et al., 2017). A voice teacher can be a resource for the student in terms of providing support incorporated with technique, as well as simply creating a non-judgemental environment for a student to bring their entire self–voice, body, and mind–to the very stressful and very emotional work they are creating (Blyskal, 2022a).

CRITICAL REFLECTION

This critical evaluation of literature was a building on of the ideas I explored in the formative assignment, but with a narrower lens and a more specific focus on the mental health impacts of sleep loss on vocal function in students. I did expand my circle of concentration from just student actors to student performers, as I was interested overall in the student experience, more so than the actor experience. During the formative, I was unsurprised that mental health concerns such as anxiety and depression were tied to sleep loss (Zhang et al., 2018), but the link to dysphonia, and research around the mental state of patients suffering from functional dysphonia (Willinger, Volkl-Kernstock and Aschauer, 2003) was a new discovery to me. Considering the immense amount of students reporting mental health concerns and the link to sleep loss (Kloss et al., 2016), I decided that focusing on student performers and particularly anxiety as it affects the voice would be the route to take, as anxiety is the most reported mental health condition in college students (Bogusch, Fekete and Skinta, 2016).

Before beginning, I was concerned that there would not be enough literature to review such a specific research question, as I knew from the formative assignment that research about sleep habits of student performers isn't documented as thoroughly as their warm-up practices or other lifestyle factors (Searl, Dargin and Bailey, 2021; Searl et al., 2022). However, I was surprised to find a great deal of literature regarding one of the strategies I outlined, mindfulness, that had a lot of information regarding the stress levels of student performers in particular, and the compounding stresses of being in college and the early career lifestyle of a full-time performer (Czajkowski, Greasley and Allis, 2021; Blyskal 2022a; Blyskal 2022b; Czajkowski, Greasley and Allis, 2022). This actually led to a lot of thought about my own sleep and stress management habits, as a student balancing full time work, taking voice lessons, and continuing graduate school. It inspired me to take a step back from a few commitments as I worked on a deadline to complete this paper, giving it the full weight of concentration I needed to stay organized. The conversation around stigmatization of rest was at the front of my mind (Alger, Brager and Capaldi, 2019; Estes et al., 2023).

Some things that I think went well through this process is the discovery of a trove of literature regarding performance and mindfulness. When looking for real, concrete advice for voice teachers regarding the mental health of their students, it is a tricky balance of remembering we are not mental health professionals, but also being supportive knowing that we are often the first line of defense in treatment of voice injury. Mindfulness being such a literature backed strategy to reduce anxiety, including performance anxiety, gives me a place to go further into developing a plan for voice teachers to incorporate those teachings into the studio.

However, I was frustrated with the lack of specific exercises and examples of which mindfulness strategies had positive outcomes for students and performers. It seemed that trait mindfulness was often espoused as being beneficial to sleep and mental health, but specific exercises were not examined, or how to develop actual strategies for incorporating mindfulness into performance and daily life. I also would like to go further into the connection between generalized anxiety and music performance anxiety overlap, and the effect of sleep on MPA in particular, as I ran out of space to do so in this current assignment.

I think research into specific mindfulness exercise examples will require research outside of what I am doing at the current moment–looking into resources that might not fall into the peer-reviewed, scientific based article publishing and into some books and more theoretical spaces. I have found that, being newer to academia, I am hesitate to wade into the waters of gray literature and resources, though I know that with more metaphysical and “spiritual” matters, as mindfulness is often categorized despite the heavily prevalence of peer-reviewed literature backing it up, I will have to go there next to find specific exercises and activities. However, I do think there is strength in the argument I am building around sleep health and hygiene education, anxiety, and the links to dysphonia specifically because right now, all of my resources are purely peer-reviewed articles from reputable sources.

To conclude, I am overall fairly pleased with how the research process went for this assignment, though I continue to battle my own doubts of personal research ability, as demonstrated by my worries over quality sources, and fear that my research question will not be substantial enough. I am, however, growing more and more interested in this topic the more I get into it. The mental health crisis in adolescents and college students is staggering (Kloss et al., 2016; Baroni et. al, 2018), and as I primarily work with young performers in my own work, it is of utmost importance to address in arts education. The connection between sleep loss and vocal functioning issues not being mentioned in most literature about the lifestyle habits of performers is astounding to me as I continue to see the research backed connections between mental health and dysphonia (Willinger, Volkl-Kernstock and Aschauer, 2003; Cho et. al, 2017). I am interested in furthering this line of questioning.

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Appendix A:

These exercises are taken directly from an article written by Savannah Byers titled “Seven Mindfulness Techniques for College Students” for the Southern Utah University Website in 2021. I chose to feature these three specific exercises as they can be applied easily in a classroom or rehearsal studio.

STOP Practice
STOP is a four step mindfulness technique that can be done virtually anytime and anywhere when you are feeling overwhelmed. Here are the steps:

S: Stop
Stop what you are doing. Stop what you are thinking. Take a moment to dedicate yourself to mindfulness.

T: Take a breath
Take a deep breath in and out. Find a method that works for you and slows you down. You might count up or down, close your eyes, breathe in through your nose and out through your mouth, etc. See the breathing exercises later in this post for more ideas.

O: Observe
Take a moment to observe how you feel physically and mentally. Try to identify your feelings. Alternatively, take a moment to observe your surroundings. Focus on the details and how they make you feel.

P: Proceed
Proceed intentionally with the task at hand. If you need to slow down, slow down. If you need to set a time limit, set a timer. If you need to drink some water, grab some water. Practice being in tune with yourself and proceed with your day in a way that makes sense for you.

5-4-3-2-1 Practice
5-4-3-2-1 is a great mindfulness exercise that can be done anywhere and it doesn’t take long to do. Tapping into the 5 senses, this exercise encourages you to focus on your surroundings and your body. Here are the steps for 5-4-3-2-1:

What are 5 things you hear?
What are 4 things you see?
What are 3 things you can touch?
What are 2 things you can smell?
What is 1 thing you can taste?

Anchoring Phrase

If you need something quick and calming to stay grounded, try repeating an anchoring phrase. Your anchoring phrase can be the same every time (a motivating quote or word) or it can be about something in the moment. Repeat whatever is comforting to you. An anchoring phrase for the moment can follow a format similar to this:

“My name is… Today is… Right now I feel…”

Personal Development Plan

Vocal Technique Education

1. Activity: Linklater Designation
   Objective: Improve my knowledge of Linklater Voice Technique and become a designated teacher
   Action: Continue private lessons with Andrea Haring, complete Designation 1 workshop by 2027
   Timescale: Designation workshops are not guaranteed every year, goal to complete the first workshop by summer 2027

2. Activity: Explore Knight-Thompson Speechwork
   Objective: Learn more about speechwork techniques in addition to vocal production work
   Action: Read “Experiencing Speech” book
   Timescale: August 2024

3. Activity: Learn more about voice pedagogy
   Objective: Get a solid grounding in voice pedagogy basics
   Action: Take certificate in voice pedagogy short course in VSC library and read history of voice pedagogy books.
   Timescale: August 2024

Develop Teaching Skills

1. Activity: Teach Linklater Warm-ups
   Objective: Practice teaching the basics of Linklater Voice technique to different levels of students
   Action: Lead a monthly Linklater warmup via zoom to interested participants of all backgrounds
   Timescale: Begin zooms summer 2024

Mindfulness, Sleep Hygiene, & Mental Health

1. Activity: Create mindfulness practice
   Objective: Begin incorporating mindfulness practices outlined in Appendix A into daily life and voice work to improve focus
   Action: Research different mindfulness techniques and begin a daily practice to improve focus in work and school
   Timescale: Ongoing

2. Activity: Bring attention to sleep hygiene and quality
   Objective: Engage with sleep hygiene practices to improve sleep, reduce anxiety, and improve vocal function
   Activity: Keep a sleep diary, go to sleep earlier, and no blue light screens 1 hour before bed

Timescale: Ongoing

3. Activity: Learn more about MPA
   Objective: Understand MPA and how it affects the voice
   Action: Watch Dr. Juncos short courses in the video library, including “ACT for MPA” and “Compassion Focused Training”
   Timescale: By end of year 2024

Develop Scholarly Skills

1. Activity: Improve language skills
   Objective: Obtain conversational fluency in Italian
   Action: Practice Italian for half an hour every day
   Timescale: Ongoing