

Wales Institute for Work Based Learning

Module No: BMPF7008

Module Title:
Work Based Learning Project
Level 7
30 credits

Project Title

An exploration of the most commonly experienced vocal issues amongst professional, touring contemporary Musical Theatre performers and the aspects of touring life that are most likely to impact the voice.

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Date: 06/01/2020

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Proposal

An exploration of the most commonly experienced vocal issues amongst professional, touring contemporary Musical Theatre performers and the aspects of touring life that are most likely to impact the voice.

Context

The influence for this project is born from 10 years of performing and 4 years of voice coaching within contemporary Musical theatre and experiencing both the primary and secondary effects of extensive voice use whilst in a touring environment. This project will attempt to discern the most widely reported voice related issues that performers experience whilst undertaking a standard contract within the musical theatre industry and what may be contributory factors to causing them. For the purpose of this project, "Standard" is identified as performing between 6-8 times a week with 1 full day off. Before pursuing a career in vocal coaching, I experienced several voice related issues which I feel developed in part, as a result of the aforementioned standard working contract. As a result of this I am fascinated to investigate if other performers who have experienced voice issues, are of the opinion that a touring environment combined with the increasingly demanding vocal requirements for more recent shows, are conducive of a voice that does not operate to optimum efficiency as perceived by the performer.

Justification for work

Worldwide it is estimated that around one third of all jobs depend on the worker utilising their voice (Vilkman, 2000). Almost one quarter or approximately 37 million people are occupational voice users (Hunter, Titze, 2010). Given the similarities to the United Kingdom and United States in terms of occupational availability it is likely that we have a similar amount of occupational voice users proportionate to our population. Performers are undoubtedly amongst the heaviest occupational voice users due to the intensity of voice use required on a regular basis (Benninger et al, 2013). From personal experience, the rigour of a touring environment often results in multiple external factors negatively impacting the voice. Whilst there is not an abundance of research pertaining specifically to CCM vocals and more specifically contemporary musical theatre; I intend to utilise any existing literature and corroborate it with the primary data I collect from the participants of this project. The

intention is to gain a more substantial insight into the cause and effect of the more prevalently reported issues.

Intended impact

Through conducting this research, I am hoping to achieve the following:

- Ascertain the most commonly reported vocal issues and injuries experience in a touring environment
- Identify the most likely reasons or circumstances that cause said issues
- Discover what precautions were taken by the performer and employer to manage any vocal issue experienced
- Allow participants to discuss their feelings and thoughts regarding any problems experienced and discuss how/if they have recovered both physically and psychologically
- Discuss and learn in further detail the main reasons why vocal health remains a taboo subject within the realm of Musical theatre.
- Establish connections between participants perception of their own vocal health whilst touring and the differences they experienced when not touring.

Methodology

To ensure that my research would be considered both valid and ethical it was essential to discern and establish my personal ontological and epistemological viewpoints, otherwise known as the nature of reality and how we perceive and question the knowledge within it (Morgan, 2007, p. 57; Chilisa & Kawulich, 2012, p. 1).

My personal belief is that one singular reality is improbable and that each individual person's ability to interpret the exact same experience in such different ways is indicative of subjectivity. Subjectivity also lends itself to the qualitative methods of research I am more drawn to, which allows me to evaluate participant's experiences within a natural setting (Kawulich, 2012). It has been said that research by its very nature is an 'inevitably...iterative process' (Trahar, 2009). I plan to utilise bricolage and the multiple other methods it allows me as a researcher to operate within such as "Hermeneutics and phenomenology" and "Action research" to enable any findings within my research to manifest and potentially change as I become better informed. Working under bricolages adaptive nature will allow me to navigate

potentially uncharted areas (Dick, 2009, p.25), whilst also allowing me to interpret “the life world or human experience as it is lived” (Laverty, 2003, p.24)

Ethics and Insider research

Taking into account the ethical guidelines within which I have agreed to work, there is no anticipated risk associated with the research and methods I intend to utilise. I feel fully confident that any participation linked to the project is ethically sound.

Whilst some of the participants I intend to interview (particularly the teachers and voice coaches) are people with who I have no previous connections, it should be noted that some of the professional performers I plan on talking to are clients or people I am familiar with on either a professional or personal level. This use of insider research could prove to be extremely advantageous as it may mean participants feel more comfortable to talk about issues that may be of a more sensitive nature (Costley, 2006). However, there is also the potential drawback of over familiarity between myself and the participant. I will attempt to negate this by ensuring all participants are fully briefed on the subject matter prior to their interview and ensure that both the conversation before and after as well as the actual interviews themselves are kept strictly professional. This formality aims to create a more “work based” setting and will mitigate any idle conversation that could detract from the research. I will also ensure to be rigorous when coding data from transcriptions, as it is possible that subconscious bias could lead me to pay closer attention to the answers given by people I am more familiar with. All participants and pedagogues who participate in the interview process will remain anonymous with only their initials being used for transcript purposes. Their employers and shows that they work on will also be omitted. All teachers and participants will be over the age of 18 and will consent to taking part by signing and returning a form of consent.

All data- regardless of the medium it is gathered, will at no point be shared. All that partake will be made aware that their participation is completely voluntary and that they may withdraw from the study at any time.

Project Timeline

Bearing in mind that the Christmas period is shortly before the deadline date. I will endeavour to have as much of the assignment completed before this so as to allow time to receive and apply feedback for submitted drafts. The below plan allows me enough time to do this.

Project proposal: 20th–30th September 2020

Research and create interview questions: 1st–5th October 2020

Conduct Participant and teacher interviews: 10th–20th October 2020

Data coding: 21st October –5th November 2020

Literature review: 6th–15th November 2020

Results and Conclusion: 16th November– 5th December 2020

Finalise and proof read assignment: 6th–15th December 2020

Submit completed assignment: 16th December 2020

Create presentation: 3rd–13th January 2021

Presentation delivery: 14th January 2021

Personal learning development goals

- To gain a deeper understanding of secondary factors that can impact the voice.
- To thoroughly research areas that I suspect to be key players in causing problems for touring voice users, such as reflux, alignment and MTD and implement them into my literature review.
- To further my existing knowledge on how best to prepare clients prior to them embarking on a touring contract.
- To utilise the information I gather and consolidate it into advice that can be accessed by both performers and their employers alike

- To gain a deeper understanding of how vocal issues and the stigma often attached to them, can impact a performer both in and post recovery.

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Orin Vallely
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Background

Voice problems are an inevitable part of being a professional voice user and maintaining a healthy and fully functional laryngeal mechanism is vital for performers who wish to have a career with longevity (Donahue et al, 2014). Much like sporting athletes who encounter varying issues related to the muscle groups and joints they use most regularly; Vocal Athletes-Particularly those involved in musical theatre can encounter a wide range of problems due to performing in a professional production which requires a high vocal load due to the inherent performance and genre requirements (Phyland et al, 2014).

My own interest in voice problems, particularly those that manifest as a result of a touring environment came from personal experience as a professional musical theatre performer. I have worked on both in house and touring productions multiple times and noticed that there appeared to be a disproportionate number of problems amongst vocalists when touring, as opposed to when performing in the same venue for an extended tenure. The problems I experienced and witnessed whilst touring were diverse in both their nature and impact and have lead me to research further into the potential causes of these voice issues as well as what preventative measures can be implicated prior to embarking on a professional tour.

“Working music theatre singers (MTS) typically have a heavy vocal load and little is known about their perception of vocal function” (Phyland et al, 2014, p.100). The above statement implies that Musical theatre performers, despite often being professionally trained can vary in their knowledge of their own vocal apparatus and its functionality and it has been acknowledged that “Students seem to have a very low awareness of the vocal demands in their future professions” (Ohlsson et al, 2012, p.629). In my experience, singers are more interested in how to achieve their own personal goals as a vocalist and are less concerned with the specificities that occur within the body and laryngeal mechanism to achieve this. This lack of interest/education could play a key part in why singers can sometimes succumb to voice issues that could be avoided if they possessed a better knowledge of their instrument and how to care for it. As many Musical theatre performers train at conservatoires or drama schools before embarking on a professional career, it would seem that this would be a key area to start teaching and implementing a basic education in vocal health and hygiene. Now more than ever, Musical Theatre performers are expected to demonstrate a high level of proficiency in multiple styles

(Green, Freeman, Edwards, & Meyer, 2013, p. 327) (Alt, 2004), so it seems prudent that along with this expectation an accompanying degree of voice function and anatomy could also be of great use.

My main goal in undertaking this research is to consolidate my findings in such a way that I am able to offer advice and mentoring to clients who see me for coaching prior to embarking on a contract. In the long-term, I also hope to collaborate with other voice coaches and speech language therapists to create a short, reader digestible booklet for performers and employers to have access to before undertaking a new contract.

Literature review

Attempting to establish key points within a literature review for this assignment has proved to be something of a challenge due to the lack of research that directly relates to the project title. Because of this, I have chosen to review and explore two areas that I feel are most closely linked to voice issues when touring from my own personal experiences and from what I have witnessed of other vocalists in a similar environment. It is possible that my research findings will unearth an entirely different set of experiences and problems that performers face, but I think it likely that some of the following areas will be prominent within these findings.

Posture and alignment

“The necessity for proper posture has been recognised by singing teachers for centuries” (Rubin et al, 2004, P. 271). This statement has been largely advocated for throughout history and pedagogues have focused and documented the importance of posture for centuries. Even when researching much earlier thoughts and teachings, it is clear that the general consensus is similar now as it was then, and the importance of a natural, relaxed physical alignment for efficient voice use is unanimously agreed upon (Mancini, 19212; Lamperti, 1905; Tosi 1743). However, it is clear that just like today, there are vastly varying perceptions of what pedagogues consider to be “correct posture” and this is reflected throughout literature, maybe even more so recently with there being some disagreement in relation to correct

posture being a set “position” (Miller, 1986) or a dynamic, active direction. (Bunch Dayme, 2005; Heirich 2005; Williams 2013. I personally am of the opinion that singing requires motion and that holding patterns of any kind can be potentially debilitating to the voice and this is reflected in disciplines like the Feldenkrais method, which seek to focus on reconnection with the body to enable greater movement efficiency and create “a new era of body-mind awareness” (Nelson & Blades-Zeller, 2002, 12).

The below Diagram and postural subcategory titles are taken from my Summative Assignment-Which was a detailed study of posture and its impact on the voice. Whilst It is not my intention to recycle previous work, it seems prudent to utilise, adapt and expand upon the more commonly found postures, as in this instance they have applicability to the research topic I am conducting and could potentially forge links between voice issues and posture depending on what results my research findings yield.

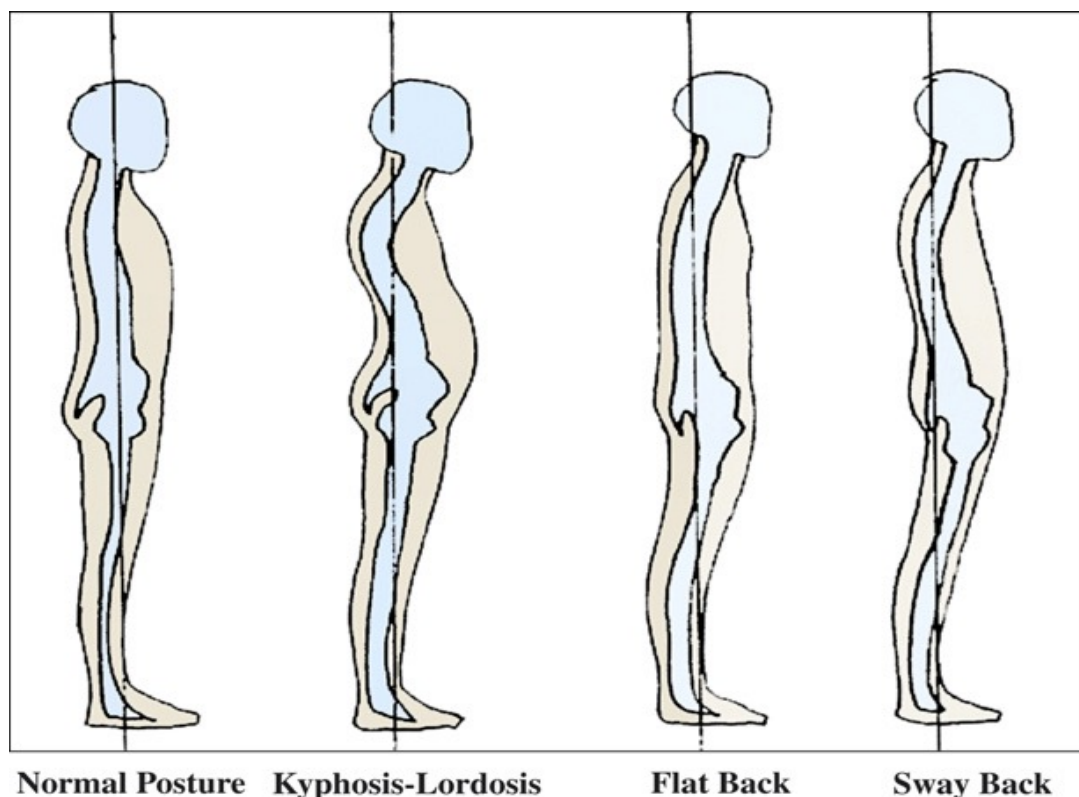


Figure 2. From Wilson Arboleda and Frederick, 2006, p.93

Normal posture– No part of the musculoskeletal system appears compromised or jutting. Providing there are no injuries which are resulting in any muscular

compromise, this should allow for ease of movement and airflow and is considered an ideal posture. Maintaining this posture whilst in a touring environment could prove difficult due to long periods of time spend travelling in a hunched, seated position which causes the stomach to compress and the pelvis to tilt (Rubin et al, 2004, P. 271). From experience, unless the performer is a high-profile artist, it is likely they will be travelling in economy class which could result in greater discomfort and exacerbation of misalignment due to lack of space.

Kyphosis-lordosis-Excessive amounts of travel time with little to do, Long waits for a stage strike up/down and carrying heavy bags and suitcases are all potential catalyst for Kyphosis-Lordosis (more commonly known as forward head posture. This particular misalignment can be encountered when there is a noted "increase in all the natural curves of the spine" (Wilson Arboleda & Frederick 2006, P.93) and is something that I find to be prevalent amongst touring artists who are undertaking extensive contracts that last longer expanses of duration. If an increased thoracic lordosis is coupled with stooped or rounded shoulders the resulting misalignment is referred to as "upper crossed syndrome" (Wilson Arboleda & Frederick 2006), a condition caused by the deformed muscles putting strain on the surrounding joints, bones, muscles and tendons which can result in the following symptoms:

- neck pain
- headache
- weakness in the front of the neck
- strain in the back of the neck
- pain in the upper back and shoulders
- tightness and pain in the chest
- Jaw pain
- fatigue
- lower back pain
- restricted movement in the neck and shoulders
- pain and reduced movement in the ribs
- pain, numbness and tingling in the upper arms

Looking at these symptoms, it is clear that allowing upper crossed syndrome to manifest as a result of forward head posture could happen all too easily. This could be due to the aforementioned environmental/lifestyle factors and could prove to be debilitating for the performer.

Flat and sway back posture– These misalignments tend to be a result of the thoracic and lumbar curves decreasing or increasing in conjunction with the pelvis tilting forward. It often results in a weakening of the scapular muscles owing to them having stretched to accommodate for sensations of constrictions within the transverse abdominis (TVA) and pectorals. The tightening of these muscles can often lead to problems, such as voice projection issues and excessive vocal fatigue (Wilson Arboleda & Frederick 2006), whilst simultaneously compromising the surrounding muscles of the laryngeal mechanism such as the Longus Coli. As a result of the muscular compromises being undertaken, muscles such as the trapezius must undertake a dual role to provide support to the suspensory mechanism of muscles the larynx resides within. (Dimon, 2012; Rubin et al, 2004).

It is apparent that touring performers, who in my experience regularly exhibit postures similar to those listed above, are on constant contention with their body's natural tendency to misalign as a result of their environment, which as a result of this causes their larynx to be "in the centre of a constant battleground between the deep extensor and flexor groups of muscles of the neck and upper back" (Rubin et al, 2004, 271). The resulting vocal and muscular fatigue induced by misalignment is likely to have a profound impact on voice ergonomics when performing and if left unaddressed could cause the performer to be unable to fulfil their contractual obligations, which in turn may lead to a loss of work, financial security and carry long term implications for their vocal health and employability moving forward.

If during my research findings it becomes apparent that misalignment and the issues it causes are commonly reported, then I intend to further develop the exercises I have previously created (listed in the appendices) so as to optimise the assistance they provide for performers who may not have access to this help whilst in a touring environment.

Laryngopharyngeal Reflux

Laryngopharyngeal reflux (LPR) or “Acid reflux” as it is more commonly known, “is an inflammatory disease associated with the development of voice disorder and vocal fold lesions” (Lechien et al, 2019, P.29). Despite it being a commonly reported issue amongst both professional and non-professional voice users alike and accounting for the development or cause of up to an estimated 50% of United States voice centre patients, there is still no official standard by which to give an LPR diagnosis (Lechien et al, 2019). This is mainly due to symptoms being non-specific and the sensory endings of the laryngeal mechanism being up regulated by inflammation in nearby areas (Hanson et al, 1995).

LPR is the backflow of the stomach contents through the oesophagus where it comes into contact with the upper vocal tract (Kouffman, 1991). It is particularly problematic for singers due to the inherent throat clearing and voice hoarseness it can cause (Weber et al, 2014), which can significantly affect the performers voice if the singer can feel the acid rising to the back of the pharynx (Harris D & Chalfin D, 2018). In this instance, it is highly likely that performers who are experiencing the above sensation will actively engage the muscles within the vocal tract in an attempt to stop acid travelling further up the oesophagus (Jones et al., 1990). The tightening of muscles, particularly those surrounding the larynx could prove to be extremely problematic for the voice user, particularly if this occurs whilst mid performance, as constricting the muscles surrounding the laryngeal mechanism is likely to have an adverse effect on voice production as constriction in these areas can cause the larynx to become higher in the neck and the pharynx to become tighter and narrower, thus changing the vocal tracts shape and creating discrepancies with resonance and pitch (Heman Ackah 2005, Rubin et al 2004, Wilson Arboleda & Frederick 2006,).

In addition to reflux being generally more problematic for professional voice users than non-professionals; professional singers and public speakers also tend to be at higher risk of experiencing LPR due to the intense use of abdominal pressure created by engaging the abdominal muscles (Lechien et al, 2019; Sataloff, 2006).

Most voice users who have received formal training are taught regularly about the importance of abdominal engagement to aid breath support. Having now discovered the potential for the increased risk of LPR amongst professional voice users owing to abdominal engagement, it may be prudent for me to utilise this information within my own practice and to bear this in mind when working with a

trained voice user experiencing LPR. I will endeavour to highlight the importance of them being able recognise and assimilate LPR with potential symptoms such as dysphonia, globus sensation and vocal fatigue (Weber et al, 2014), whilst actively making them aware of anything that could further agitate their gastric contents, such as Citrus products, dairy and alcohol (Harris D & Chalfin D, 2018).

Being in a touring environment often means that there is rarely a set routine by which you are able to eat, sleep and exercise at similar times, on a daily basis. As such, it is of greater importance that those who are prone to suffering with LPR are as familiar as possible with the condition and that a coping strategy is created so that performers are able to best manage the condition whilst in an environment that could possibly not have immediate medical help available and may not be the most conducive to a healthy, regular diet.

As previously mentioned, there is little subject specific research which truly relates to the area I intend to investigate. There were however countless options of areas that I could have chosen to explore regarding voice issues and why they may be more prominent whilst touring. My literature review has concluded that endeavouring to research the many facets relating to voice issues to any degree of competency would be a lifetime endeavour. It is my intention however, to further my knowledge by researching the areas my findings unearth in far more depth, so as to allow my practice to become better informed and provide me with the resources and expertise to better equip my clients for any issues they may happen to encounter.

Ontological perspective

Ontology refers to the nature of reality (Morgan, 2007, p. 57) and what it means to exist (Chilisa & Kawulich, 2012, p. 13). The way in which we perceive reality will influence what we believe we can really 'know' about it.

It is my opinion that there is no definitive answer as to whether reality is objective, multi-faceted, or non-existent. The regularity in which I witness clients perceive direction, situations and concepts in such contrasting ways forces me to acknowledge that there could be multiple realities and that realities are entirely perceptual depending on the persons own ontological and epistemological views.

When looking toward the research I intend to undertake, I feel it would be counterproductive to then try and categorise participants perceptions and answers into an objective viewpoint. In 2007, Morgan mentions that four of the most basic

versions of the paradigm concept all operate on a “shared belief system” (Morgan, 2007, p. 57). Belief, by its very nature is subject to human error and leads me to believe that placing focus on presenting solid research, grounded in a sound rationale is more important than focusing on the objectivity and subjectivity of the author. Morgan also gives credence to my election to operate within the pragmatic paradigm, by acknowledging the freedom to utilise both qualitative and quantitative research along with a range of methods which, by extension creates far more possibility and opportunity for the research (Morgan, 2007, p. 60). The freedom that the pragmatic paradigm allows for a more open-minded approach and doesn’t incite the ‘forced choice dichotomy between postpositivism and constructivism’ (Creswell & Plano Clark, 2007, p. 27). In addition to this, not conforming strictly to a fixed methodology will allow me to adapt the research as it grows in the hope of creating “socially useful knowledge” (Feilzer, 2010, p.

Methodology

Deciding upon a methodology and being aware of the constraints they sometimes bring. I have selected ‘**bricolage**’ as it enables me to utilise an abundance of different methodologies and ontological perspectives, it brings “rigor, breadth, complexity, richness, and depth to any inquiry” (Denzin & Lincoln, 2011, p. 4). Bricolage also allows me to be influenced by other methodologies, which I feel will give a more multi-faceted approach to my research (Kincheloe, 2004, p. 1).

Due to the freedom to draw from other methodologies that bricolage brings. I also plan on utilising elements of the following:

1. Hermeneutics & Phenomenology.

Hermeneutics is most commonly utilised within the hermeneutic circle (Heidegger (1927) in Laverty, 2003). As a methodology it combines well with pragmatism as it allows for self-reflection and recognition of my own belief system. Also known as the Hermeneutic spiral, this refers to researcher’s need to investigate different areas and aspects of their proposed topic and utilises the knowledge what they gain throughout their “theory and practice of interpretation” (Paterson & Higgs, 2005, p. 342).

2. Action research

Action research allows those who employ it to create a well-structured, explorative approach and apply it to their own practices (Frabutt et al., 2008). It is similar to hermeneutics and phenomenology in its ability to be ever evolving and adaptable (Dick, 2009). It also allows for discoveries to be made through a combination of action and reflection (Reason & and Bradbury, 2001, p. 1). Action research will undoubtedly prove to be pivotal to research I intend to carry out as it is participatory by nature and naturally leads towards pragmatism and insider research.

I feel that combining my choice of pragmatism along with my elected methodologies helped to inform my literature review and how I decided to pursue it. With the area I have chosen to research currently being so subjective, it was essential that I operated under a methodological umbrella that allowed for fluidity and adaptability when undertaking my literature review. The freedom these choices grant, enabled me to figuratively scratch the surface of this vast area whilst also providing me the opportunity to delve into much greater detail in some areas.

Sampling

Participants will be selected through convenience sampling (Berg, 2001, P.32) and will consist of previous and existing clients who I teach and colleagues from my former performance contracts. Due to the current COVID-19 pandemic, sourcing clients may be a more difficult than usual due to many performers seeking work elsewhere, impacting their normal schedule. It is difficult to predict how many participants will take part in the study and more difficult still to predict how many participants constitute an appropriate samples size (Baker & Edwards, 2012). Ideally, I am hoping to have between 6-10 participants. If interest is low, I may utilise snowball sampling (Berg, 2001, p. 33), which involves participants that have committed to the project suggesting others within their social/professional circles who may wish to take part.

The teachers who I select to interview will also be a convenience sample. I am hoping for a minimum of three participants to give more validity to areas where there is agreement.

Methods

Methods pertain to the “systematic modes, procedures or tools used for collection and analysis of data” (MacKenzie & Knipe, 2006, p. 5). The purpose of my chosen methods will be to gather data that allows me to create a more concise picture of exactly what issues participants experienced. I am confident the following methods will gather the most succinct data.

Performer Semi-structured interview

Due to the deeply personal nature of the topic I am researching, I feel interviews, particularly when not strictly structured, will prove one of the most valuable tools at my disposal due to the specificity they allow when discussing individual cases. I intend to allow between 20-35 minutes per participant. This will provide time for the participant to feel fully relaxed and provide fluidity in our exchange of question and answers. Utilising a Semi-structured interview method is I feel, essential to my research area as it permits me to observe any social cues the participant may give, in particular body language and tone of voice (Opdenakker, R. 2006).

Teacher Semi-structured interview

Participants self-perception will undoubtedly prove to be vital in collecting data, but it is likely they will view their own experiences in a very different light with a more internal focus. I hope that by interviewing pedagogues who regularly work to coach and rehabilitate singers experiencing voice problems, I will be able to triangulate my data and forge connections between the answers given by teacher and participants.

Triangulation

To achieve data triangulation, I have also undertaken a literature review. As the area I am exploring is somewhat lacking in research, I have analysed literature that links to the areas which I currently believe to have the most impact on the touring performers voice. I will be interested to see if my findings are in concurrent with my literature review.

Findings

Once I had gathered and transcribed my data it quickly became apparent that managing it would be difficult owing to the lack of guidelines and the inherent subjectivity that coincides with qualitative data handling. Choosing a method of coding also proved to be somewhat challenging as there were multiple kinds available which all held appeal. As my information has been gathered primarily through interviews, I decided that In Vivo coding was the best method to employ as it aligns well with the subjectivity that pragmatism allows for in addition to placing a magnifying glass directly over the dialogue of the all the participants (Saldaña, 2016).

Once data coding had taken place, I found that the data I gathered became a lot easier to manage, however I was surprised at the number of subcategories I had managed to create and I had to be ruthless when considering which areas to pursue and carry forward for the purposes of this project, as so many potential rabbit holes had opened up within the research that I was keen to explore. Whilst I intend to elaborate on some of these areas in future research, I have decided to focus on the following findings for this project as they allow for the most freedom for further analysis:

Quotes taken from performers interviewed will be highlighted in RED

Quotes taken from teachers interviewed will be highlighted in BLUE

Vocal issues

- Vocal fatigue was the most prominently reported vocal issue whilst touring by both the teachers and performers, with every single person interviewed mentioning it.
- Laryngopharyngeal reflux was mentioned often by performers who felt it was responsible for further issues they encountered. Teachers on the hand did not mention any instances of this as a commonly reported issue by their clients.
- Despite me expecting these injuries to be common, more serious pathologies such as Vocal cord nodules, polyps and haemorrhages were rarely experienced by the performers, and teachers mentioned that these are far more rarely reported than the issues mentioned above- PA: you can get the odd erm bilateral, erm, polyp nodule, other things going on
- All performers that I interviewed had previously sought out diagnosis from a medical professional such as a GP or ENT, as opposed to a voice coach or voice rehabilitation coach
- In complete contrast, all voice coaches that I interviewed mentioned that their clients came to them hoping for diagnosis before seeking a medical professional.
- Performers felt that there is not enough succinct, easily accessible advice relating to vocal health and how-to best care for their voices out there- AS:There just isn't enough accurate advice and I think, unless you do pay a lot of money to go to a singing instructor or ...a vocal instructor, you... and having that money, sometimes is, especially in the times at the moment, is really hard to come by
- Teachers feel that there is plentiful advice available to performers but generally conceded that it may not be as easily accessible or reader friendly as it could be.

Phycological and emotional impact of voice issues in a working environment

- All performers used extremely powerful, negative and emotional language when asked to articulate how they felt when dealing with their voice issue. Their body language also became visibly more guarded when doing so.
- Teachers, whilst also using strong and often emotionally driven language, generally had a far more hopeful and forward-thinking approach when asked about how their clients felt about their voice issue-JR:active, because they've come to see you to work on it. Hopeful, because they wanna work through it, and committed.

- As well as general feelings of hopelessness, prominent amongst the worry's performers experienced were financial concerns and the fear of being unemployable in the future if their voice issue were to become common knowledge amongst potential future employers, this led to some performers attempting to push through their vocal injury which inevitably worsened their condition.
- Teachers commented on some of the stresses clients have when dealing with a voice injury are linked to the financial ramifications that the recovery process can entail, particularly if needing results in a timely fashion which tends to necessitate costly private healthcare options- **VE: So it was still difficult because obviously financial reasons I couldn't just have 8 weeks off.**

Rehearsal process prior to contract commencement

- Performers on the whole commented that most of their rehearsal experiences have had a profoundly negative impact on their voices, due to long hours of being expected to sing at full capacity, singing over loud music without suitable amplification, lack of rest days or consistent breaks, being expected to dance whilst singing in addition to the pressure of learning multiple shows in a condensed amount of time- **VS: No, I feel like rehearsals is the worst time, I feel like that's... it just gets neglected completely. Its all about taking on information, like getting things learnt and... yeh the vocal health is just total... takes a back seat really**
- Teachers generally agreed with the above but there were noticeable contrasts with regards to the differences between rehearsals for a Musical theatre show or tour, and a touring recording artist, comments here suggested that touring artists seemingly having a far more relaxed and less vocally taxing rehearsal period prior to their tour.
- Teachers and performers alike agreed that vocal health is rarely taken into consideration as any part of strategy undertaken by management or employers within musical theatre and that musical directors (often with no formal vocal training) are responsible for vocal direction whilst in rehearsals.
- Teachers commented on their being additional stress for musical theatre performers whilst in the rehearsal process due to them feeling replaceable.

High profile touring artists do not have this stress whilst rehearsing owing to them being the focus of their tour. It should be noted however that artists arguably have a more stressful time whilst on tour due to their irreplaceability- JR: I think there's a difference though as well, I think in the musical theatre context or the cruise context, you've been cast, and you got that role out of how many other people and there's always gonna be someone there to take it. Whereas in the pop world, if you're the artist, you're the artist.

Literature review expansion

Whilst I expected to uncover an abundance of information regarding specific vocal issues and the associated problems caused by the rehearsal process. I was surprised to discover the regularity with which performers and teachers reported psychological problems. The long lasting impact these had, particularly pertaining to music performance anxiety (MPA) which is "the experience of marked and persistent anxious apprehension related to musical performance that has arisen through underlying biological and/or psychological vulnerabilities and/or specific anxiety-conditioning experiences" (Kenny D. T., 2011). In hindsight I should have taken this into much further consideration prior to conducting my literature review but I was unaware of how prevalently these issues would be mentioned. I have decided to expand on MPA in a little more detail below as I feel it is now a key factor of the findings I have made and that better understanding of it, will allow me to work more holistically when required.

Music Performance Anxiety (MPA)

Much like vocal injury, performance anxiety is likely to present itself at some point throughout a professional voice users' career (Hunnicuttt & Winter, 2011). Better known as stage fright, performance anxiety can "impair quality of performance, and/or

impair enjoyment of performing” (Harris, 1986, P.24) when experiencing MPA, the voice user’s performance can be impacted by our bodies fight or flight response, which releases a surplus of adrenaline throughout the body and can cause varying symptoms which range from butterflies in the stomach all the way to heart palpitations and headaches (Hunnicutt & Winter, 2011). Whilst I am focusing on MPA as a secondary effect caused by prior voice issues, it should be acknowledged that MPA is often a primary cause of the psychological issues voice users can experience and it can be so severe that it can potentially end a performers career (Arneson, 2010) Whilst not all performers experience such debilitating symptoms and many performers are able to push through what they are experiencing it should be noted that Performance anxiety is not something that can be completely forgot about or made to disappear (Kruger, 1993), and that it’s prevalence is such that it “must be acknowledged” (Arneson, 2010, P.537). Taking the above into account, it becomes apparent that MPA caused by vocal issues could be having just as much of an adverse impact on the performers as the issue itself and that enquiring about a client’s feelings and thoughts before and whilst on stage is something that I should implement into my practice going forward, along with potential strategies that could help negate the feelings being experienced. Dr. Marie Asner’s paper on “overcoming performance anxiety’ has some interesting points worth consideration such as the impact of caffeine prior to performing as it can cause excessive nerves and jitteriness (Asner, 1987). Asner also notes that many strategies that teachers may try “depend on the student” (Asner, 187, P.40), it is reassuring to see that this mantra is still widely understood and utilised, and I will be sure to reaffirm this within my practice to ensure all clients are treated as individuals.

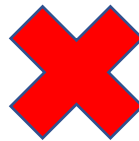
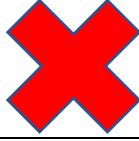
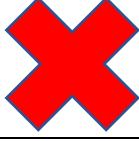
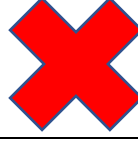
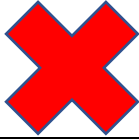
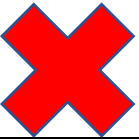
Analysis

Within this exploration of the aforementioned findings, I intend to begin investigating differences whilst simultaneously forging links between answers given by the voice coaches and performers. As with quotations in my findings, Any quotes or extracts taken from performers interviews will coded in red, whilst quotes from voice coaches will be in blue.

Voice Issues experienced on tour

Before any explanation into potential reasons why voice issues take place in a touring environment, my first priority when designing the interview was to ascertain exactly what were the most commonly reported issues by the performers. Whilst there is a vast array of potential problems that voice users can experience, interestingly all participants regardless of whether a performer or teacher, reported problems that all fall under the areas listed in the tables below.

Performers vocal issue whilst on tour

	JS	VE	VS	AS	NP
Vocal Fatigue					
LPR					
Other (ie. Laryngitis, Voice loss etc.)					
Cyst/Polyp/Nodule/haemorrhage					
Was Diagnosis given by a Medical professional					

Vocal coaches most commonly reported issues by touring clients

	KC	JR	SWO	AC	PA
Vocal Fatigue					
LPR					
Other (ie. Laryngitis voice loss etc.)					
Cyst/Polyp/Nodule/haemorrhage					
Do clients usually seek diagnosis from a Medical professional prior to lessons					

From looking at the above charts, it becomes apparent that whilst there were undoubtedly varying vocal issues experienced by the performers and reported to the teachers, the one area that seems to be unanimously agreed upon by both performers and teachers alike is vocal fatigue. I found the fact that every single participant that I interviewed mentioned fatigue to be both surprising and concerning, as whilst vocal fatigue can be considered a broad field, it regularly manifests and develops into a plethora of other problems usually under the umbrella of Muscle Tension Dysphonia. This is the most commonly reported disorder reported

in voice clinics (Sielska Badurek, 2016; Kempster et al, 2009) and is usually used to describe excessive tension in the laryngeal and pharyngeal muscles. This can then leads to instability in the voice (Van Houtte et al, 2011), something that some of the voice coaches who were interviewed appeared to agree with.

“PA: that could manifest as muscles tension dysphonia usually”

“AC: There’s a sub one, and that’s that often, it will be what we would probably address first dibs as muscle tension.

Upon asking my first question as to what issues were most commonly experienced, I expected; maybe due to unconscious thought, that injuries like Nodules and vocal cord haemorrhage would be first and foremost amongst those mentioned. Upon further reflection and despite having met and worked with thousands of singers, I can recall only a handful of occasions where I have come across more serious injuries like this. Whilst these voice issues are undoubtedly out there and prevalently so, I think that they have in some part, become vocal injury “Buzz words” due to the increasingly common media attention they have received over recent years, with several high-profile singers having postponed or cancelled performances owing to the afore-mentioned injuries. This ‘buzz word’ theory was also echoed by teacher participants and further confirmed that the household name like nature of these injuries, causes singers to self-diagnose, when usually the reality is less serious.

“PA: they presume its nodules. So, they walk into your room as say I’ve got nodules...”

“SWO: I mean quite often people will worry about if they’ve got a pathology and they haven’t they’ve got muscle tension”

Interestingly, Laryngopharyngeal reflux (LPR) was not mentioned by any voice coaches but was mentioned numerous times by the performers and was in their opinion, a catalyst for further problems experienced.

“AS: So for me it was more to do with.. er acid reflux if I was up all night with acid reflux- I was starting to lose the tops, the very tops of my range if id had a bad night of it. I would start to talk differently. I could feel in the day, id be so conscious about it that I started talking in an incorrect way, so I had to go to speech therapy”

“JS: Er, so my main concern with my voice is acid reflux. I feel like it kinda weakened my... erm strengths with my voice”

I am unsure whether my relatively small sample size is the reason for the difference in teachers and performers reporting incidences of LPR, or that perhaps performers do not consider this to be something they would address with a voice coach due to it being a digestive disorder. As mentioned in my literature review, LPR is extremely common, particularly amongst professional voice users and whilst some are undoubtedly more susceptible than others to experiencing it, something that both teachers and performers agreed on is the likelihood of environmental and lifestyle factors that are largely responsible for exacerbating LPR symptoms.

‘JS: To be completely honest it would be the alcohol: And it would be eating late at night as well after having a heavy meal, and then laying on your stomach.’

“JR: The, often eating late at night either after the show or shortly before can have an impact”

Despite the small sample size with which I worked with for this assignment, it appears that the reported causes and symptoms of LPR coincide with what was mentioned in my literature review and has reaffirmed for me that the further investigation which I undertook into that area is relevant to recent pedagogy and my practice moving forward.

Another discrepancy I detected between the performers and teachers I interviewed was that all the performers in this instance had sought medical help instead of seeing a voice coach/voice rehabilitation specialist (VRC). In contrast, all the teachers interviewed seemed to be the first point of call for their clients before they then referred them onwards. This again, could be purely coincidental, but it could also point towards the fact that performers experiencing problems whilst in a touring environment, may have a heightened sense of urgency/worry and so seek out what they perceive to be a higher authority pertaining to voice health. Whilst seeking out a medical professional is undoubtedly a sensible course of action, ensuring that professional voice users are aware of specialist voice clinics in their vicinity is also something that should be considered to ensure the most reliable results are given. ENT’s operating from within a non-specialist clinic may not always yield results with the same consistency, clarity and precision as an ENT working within a multi-disciplinary voice clinic.

“VE: Yeh, it was chronic laryngitis with muscles dysphonia and that was diagnosed from the ENT”

“Me: Fantastic, and did you receive more than one ENT for that?”

“VE: Yeh that was the third ENT that got that.”

As a result of hearing about misdiagnosis being made, I intend to ensure that my clients in the future are aware of the best course of action to take when experiencing what they suspect to be a voice issue and to recommend that they familiarise themselves with specialist voice clinics in their locality, both when touring and at home.

I believe that knowing the best course of action to pursue as a performer is something of a grey area at present, with no obvious right or wrong pathway to follow. From answers that I received regarding how easily accessible material regarding vocal health is, performers seemed to be of the opinion that there wasn't a great deal of it, whereas teachers were of the opinion that whilst the resources are out there, they might not be the most easily accessible or reader friendly to the average performer.

The fact that fatigue and by extension; varying degrees of MTD—which is relatively avoidable with the right vocal hygiene routine—were reported with such frequency made it apparent to me that there is a missing link somewhere along the line with regards to education, training, professional work rehearsal schedules or perhaps a combination of the three. It has forced me to look at what more can be done prior to commencement of a contract to ensure that performers are as well-equipped as possible to deal with the rigours of touring life. Having attended and more recently worked within a number of conservatoires, it is my opinion that whilst the training many of them offer is comprehensive with regards to teaching performance arts, little focus is placed on vocal health as an area of study and that by implementing basic vocal health education, they could make a significant difference to a professional voice users career longevity. Having said this, conservatoires and institutes are already hard pressed to condense the materials they are required to teach into a 1–3 year course, so it could be argued that employers should accept some responsibility in ensuring their performers are as prepared as possible before embarking on a contract under their company or name.

Emotional and psychological impact

Perhaps the most interesting yet emotive finding within this research was the impact that sustaining a voice issue whilst working can have on a performer. The combination of negative language and alterations in vocal tone and body language

The teachers that I interviewed were asked the same question with regards to the words they would use to explain how performers feel upon their first visit . Interestingly, interspersed within the similar words and phrases used by the performers had used, was language that was more positive, forward thinking and hopeful:



- Hopeful
- Committed
- Looking for change
- Active

As they provided the most significant and positive differences in comparison to language used by the performers.

This significant difference in the overall feelings towards vocal injury between performers and pedagogues has confirmed my belief that having a competent vocal coach with a positive and reassuring attitude really is an essential part of the recovery process for performers and that a multidisciplinary team that combines diagnosis and assistance from a medical professional with regular vocal coaching sessions can allow for a more efficient recovery with minimal long lasting and negative repercussions

Rehearsal Processes

The final area for analysis and in my opinion the one I found to be most eye opening are the descriptions of the rehearsal process that were given and how it impacted upon performers vocal health.

Generally speaking, both teachers and performers alike feel that the rehearsal process, particularly within musical theatre productions are extremely detrimental to the performer's vocal health. This feeling was unanimous throughout the performers interviewed but differed slightly between vocal coaches I interviewed dependent on whether they predominantly coached Musical theatre performers or touring solo artists, with the latter again being granted an inherently less demanding rehearsal schedule whilst dealing with greater pressure if they become unwell.

The main rehearsal issues that performers and teachers alike mentioned and the potential ways I believe they could be resolved were:

Singing over loud music:

Whilst music has to be at a certain level to allow dancers and other performers to rehearse, singers that are expected to sing at a level that meets or exceeds the music should be provided with suitable amplification or allowed to “mark” the song vocally unless in an official technical rehearsal or dress run. This should minimise vocal loading and allow voice users to feel vocally warm, as opposed to fatigued prior to a full show run.

Musical Director/Vocal coach collaboration:

A musical director is rightly considered an essential part of any music-based production and in addition to being responsible for sometimes dozens of other musicians—they are, in my experience, regularly expected to take charge of the vocal direction, warmups and general voice use expected from vocalists within a show, irrespective of their own experience and qualifications within vocal pedagogy. It is my belief that having a vocal coach who is solely responsible for ensuring and aiding good vocal practice throughout the rehearsals, would not only lessen the immense workload that many MD’s experience but also provide the vocalists and show directors with an intermediary point of call were any issues being experienced. Teachers who regularly work with touring musical theatre clients agreed that this could be a great preventative measure for vocal issues and expressed frustration that many shows and companies, regardless of their status and presumably larger budgets, still do not consider doing this. Whilst I understand that resources and budgets can be extremely limited, particularly when establishing a new show, I would argue that a great deal of time and resources could be saved with having a voice coach on staff. Employing a field professional to establish any and all voice related issues swiftly could lead to less cases of injury and subsequently eliminate the potential cast replacement or time off needed to accommodate the indisposed case member.

Both teachers and performers specialising in musical theatre agreed that the sheer amount of voice use expected on a daily basis is not conducive to maintaining a healthy voice and that no amount of good technique, warming up and general vocal hygiene can counteract the gruelling schedule put in place by many companies during rehearsals. I was interested to learn that even high-profile contracts with exceedingly larger budgets were still lacking in the support they provide to voice users during rehearsals and that the performers felt there was sometimes an unfair priority of aftercare given to dancers within the production as they had access to a

physiotherapist throughout their rehearsals/contract, but singers were expected to seek help themselves. It should be noted that this practice was mentioned several times by the performers and is something I believe needs to be addressed so that there is equal support available for all cast members.

This particular area is so vast that I intend to investigate it further within my practice and future research. I really do believe that there could be significant waves made in the maintenance of optimum vocal health alongside a decrease in the sheer amount of vocal problems experienced. To facilitate this, companies should invest time and resources into ensuring their performers are engaging in safe vocal practice, as well as informing them on how best to care for their voices for the duration of what will hopefully be a long career.

Reflection

Upon completion of this project, I find myself pleased at having procured useful information and a deeper understanding of the issues faced by performers when in a touring environment. However, I also feel that I have now opened up more questions than I managed to answer and that I perhaps did not fully appreciate the enormity of the topic I chose to pursue.

My methodology generally worked extremely well and allowed for the adaptability needed to conduct my literature review and interviews effectively. The methods which I chose to undertake were extremely useful tools and I still believe that conducting interviews was the best way to gather the type of data which I needed to draw any kind of conclusions as it allowed me the autonomy to evolve my questions as I went, as opposed to being stuck with questions that may no longer have been useful or needed. Despite this and having reflected further on the specifics of my interviews, I feel that I may have tried to steer conversation to fit a narrative that I wanted to create and perhaps adapted my questions a little too much in an attempt to illicit a response that I might have deemed more useful to the project. I will endeavour to ensure that my questions are more specific in the future, with less room for interpretation. I believe this could yield more concise results that need less deducing when data coding. I also feel that I could have been more selective when recruiting teacher participants as I found that the more the research developed, the more I was drawn to musical theatre performers and the specific problems they face. This resulted in some of the data which was gathered from teachers who don't specialise in musical theatre not being utilised and therefore decreased the overall amount of data available to me to form an analysis. I will ensure going forward, that

my research topic is slightly more defined in its intention which should better inform my choice of sample.

Conclusion

I have utilised Driscoll's adaption of Borton's three-tiered summary tool "what?" "So what?" and "now what"? (Driscoll, 2007) in previous assignments and feel drawn to it once more owing to it allowing me to be concise in my conclusion of this research.

What?

There are a multitude of issues that can plague touring performers with even more causes that stem from a variety of secondary and tertiary factors.

So what?

When working with clients, I will endeavour to create a more comprehensive line of enquiry in relation to ascertain causes of problems being experienced. In particular any past or present situations that might not relate directly to performing that could be causing issues both physically and psychologically. I will also ensure that all of my clients are aware of the help available to them and how best to access it.

Now What?

As previously mentioned, I am now faced with more questions and thoughts as to how vocal health can be improved amongst touring performers and I intend to place particular focus on further exploration of the rehearsal process within musical theatre productions. The long-term aim is to gather enough information to potentially approach companies and productions and advocate for greater focus and attention to be on maintaining the vocal health of their employees. Over time, I hope this investigatory process and potential subsequent solutions will have a profound impact on lowering the cases of reported vocal injury and issues in these specific settings.

Appendices

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Performer Interviews Transcripts

<https://drive.google.com/file/d/1lxxdYSvWWzqWPhCpcy59YaOHgvgeIiAa/view?usp=sharing>

Teacher interviews Transcripts

<https://drive.google.com/file/d/1CxrseHQPYZBDY0T30m3ewLC9023t28t/view?usp=sharing>

PowerPoint Draft slides

<https://drive.google.com/file/d/1ht6KbjBISWCch5Zq3fpknGXykPpOyVSo/view?usp=sharing>

Signed Ethics and Consent forms

Participant signature:



Date: 23/11/2020

Researcher signature:

Date: 19/11/2020



Project Title: An exploration of the most commonly experienced vocal issues amongst professional, touring contemporary Musical Theatre/CCM performers and the aspects of touring life that are most likely to impact the voice.

Name of Researcher: Orin Vallely, Student ID: 1911117 (Voice Workshop/ University of Wales Trinity St David). This research has had ethical clearance from Voice Workshops/ University of Wales Trinity St David

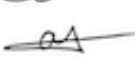
I agree to participate in the above research, and consent to my interview data being gathered and used for research purposes:

1. I have had sufficient information about this project and have had the opportunity to ask any questions I may have regarding the project and my participation in it. My participation is entirely voluntary.
2. I understand that the nature of the research may bring up personal or emotional subjects; I can choose not to answer any question if I feel uncomfortable; and have the right to stop the interview mid-process and withdraw participation at any stage.
3. I understand I have the right to withdraw consent to the use of my interview at any time.
4. I have been assured that my anonymity will be protected. No real names, training establishments, workplaces or other identifying information will be included in the research.
5. I have been made aware that my personal data is confidential and will not be shared. The interview will be video and audio recorded and stored securely until it has been transcribed, at which time it will be deleted.

VERBAL CONSENT WAS GIVEN BEFORE EACH INTERVIEW AND IS EVIDENCED ON ARCHIVED AUDIO RECORDINGS

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VERBAL CONSENT WAS GIVEN BEFORE EACH INTERVIEW AND IS EVIDENCED ON ARCHIVED AUDIO RECORDINGS

Participant signature:



Date:

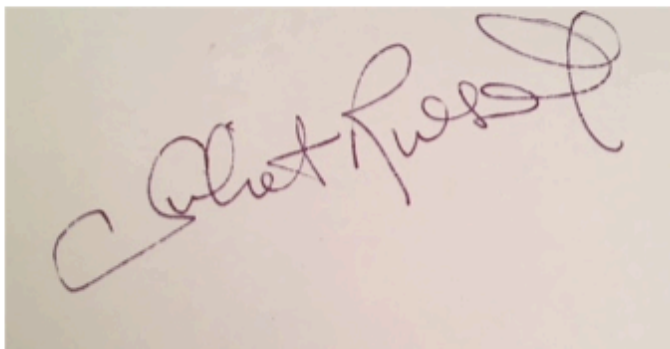
22/11/2020

Researcher signature:



Date: 19/11/2020

Participant signature:

A handwritten signature in blue ink, appearing to read 'C. A. F. 1988', written diagonally across the page.

Date: 17th December 2020

Researcher signature:

A handwritten signature in black ink, appearing to be 'AA', written horizontally.

Date: 19/11/2020

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](#)

Signature of applicant: 	Date: 05.08.2020
--	-------------------------

For students:

Director of Studies/Supervisor:	Christine Davis
Signature:	
Date:	05.08.2020

For staff:

Head of School/Assistant Dean:	
Signature:	
Date:	

4. I have been assured that my anonymity will be protected. No real names, training establishments, workplaces or other identifying information will be included in the research.

5. I have been made aware that my personal data is confidential and will not be shared. The interview will be video and audio recorded and stored securely until it has been transcribed, at which time it will be deleted.

***VERBAL CONSENT WAS GIVEN BEFORE EACH INTERVIEW AND IS EVIDENCED ON
ARCHIVED AUDIO RECORDINGS***

Participant signature: P. Anderson

Date: 22.11.20

Researcher signature: 

Date: 19/11/2020

2. I understand that the nature of the research may bring up personal or emotional subjects; I can choose not to answer any question if I feel uncomfortable; and have the right to stop the interview mid-process and withdraw participation at any stage.

3. I understand I have the right to withdraw consent to the use of my interview at any time.

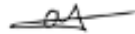
4. I have been assured that my anonymity will be protected. No real names, training establishments, workplaces or other identifying information will be included in the research.

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***VERBAL CONSENT WAS GIVEN BEFORE EACH INTERVIEW AND IS EVIDENCED ON
ARCHIVED AUDIO RECORDINGS***

Participant signature: Victoria Stoakley

Date: 22/11/2020



Researcher signature:

Date: 19/11/2020

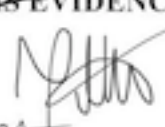
Project Title: An exploration of the most commonly experienced vocal issues amongst professional, touring contemporary Musical Theatre/CCM performers and the aspects of touring life that are most likely to impact the voice.

Name of Researcher: Orin Vallely, Student ID: 1911117 (Voice Workshop/ University of Wales Trinity St David). This research has had ethical clearance from Voice Workshops/ University of Wales Trinity St David

I agree to participate in the above research, and consent to my interview data being gathered and used for research purposes:

1. I have had sufficient information about this project and have had the opportunity to ask any questions I may have regarding the project and my participation in it. My participation is entirely voluntary.
2. I understand that the nature of the research may bring up personal or emotional subjects; I can choose not to answer any question if I feel uncomfortable; and have the right to stop the interview mid-process and withdraw participation at any stage.
3. I understand I have the right to withdraw consent to the use of my interview at any time.
4. I have been assured that my anonymity will be protected. No real names, training establishments, workplaces or other identifying information will be included in the research.
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VERBAL CONSENT WAS GIVEN BEFORE EACH INTERVIEW AND IS EVIDENCED ON ARCHIVED AUDIO RECORDINGS

Participant signature: 

Date: 25/11/20

Researcher signature: 

Date: 19/11/2020

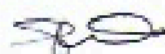
Project Title: An exploration of the most commonly experienced vocal issues amongst professional, touring contemporary Musical Theatre/CCM performers and the aspects of their life that are most likely to impact the voice.

Name of Researcher: Orin Vallely, Student ID: 1911117 (Voice Workshop/ University of Wales Trinity St David). This research has had ethical clearance from Voice Workshops/ University of Wales Trinity St David

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VERBAL CONSENT WAS GIVEN BEFORE EACH INTERVIEW AND IS EVIDENCED ON ARCHIVED AUDIO RECORDINGS

Participant signature: 

Date: 18th Nov. 2020

Researcher signature: 

Date: 19/11/2020

Project Title: An exploration of the most commonly experienced vocal issues amongst professional, touring contemporary Musical Theatre/CCM performers and the aspects of touring life that are most likely to impact the voice.

Name of Researcher: Orin Vallely, Student ID: 1911117 (Voice Workshop/ University of Wales Trinity St David). This research has had ethical clearance from Voice Workshops/ University of Wales Trinity St David

I agree to participate in the above research, and consent to my interview data being gathered and used for research purposes:

1. I have had sufficient information about this project and have had the opportunity to ask any questions I may have regarding the project and my participation in it. My participation is entirely voluntary.
2. I understand that the nature of the research may bring up personal or emotional subjects; I can choose not to answer any question if I feel uncomfortable; and have the right to stop the interview mid-process and withdraw participation at any stage.
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VERBAL CONSENT WAS GIVEN BEFORE EACH INTERVIEW AND IS EVIDENCED ON ARCHIVED AUDIO RECORDINGS

Participant signature: 
Researcher signature: 

Date: 24.11.2020
Date: 19/11/2020