The Sidney De Haan Research Centre for Arts and Health, Canterbury Christ Church University was established in 2005 with a particular focus on undertaking research on the possible benefits of regular group singing for health and wellbeing (Clift, 2011, 2012). The Centre was conceived as an interdisciplinary collaboration between the Faculties of Arts and Humanities and Health and Social Care within the University, under the leadership of Stephen Clift, Professor of Health Education and Grenville Hancox, Head of the Department of Music. The Centre has undertaken studies of singers already members of established choral societies, choirs and singing groups but has also specifically established and evaluated singing projects for people affected by a range of different health conditions, most of whom with little if any previous experience of participating in singing.

Established choirs and choral societies

Clift and Hancox (2001) undertook one of the first studies ever undertaken explicitly to explore the health and wellbeing dimensions of choral singing. In 1999, they invited members of the University Choral Society, which Grenville Hancox then directed, to participate in an exploratory survey to gather views on the benefits of singing. The feedback from choir members was then used to devise a structured questionnaire to more systematically explore po-
tential dimensions of benefits through the use of Principal Components Analysis. The study identified a number of specific dimensions, but the key finding was a dominant factor that clearly related to experiences of wellbeing associated with singing. In general there was a high level of agreement regarding experienced benefits for mental and social wellbeing but there were variations with some people experiencing these benefits more intensely than others. In particular there was evidence that the perceived wellbeing benefits of singing were more strongly expressed by women than by men.

With the establishment of the Centre and the securing of funding to engage in further studies, a major international survey of singers in existing choirs and choral societies in Australia, England and Germany was undertaken (Clift, Hancox, Morrison, Hess, Kreutz and Stewart, 2010). This substantially confirmed the findings from the earlier pilot study on a single choir including the finding that women express the wellbeing benefits of singing more strongly than men (Clift, Morrison and Hancox, 2013). A key innovation in the cross-national study was the use of the short form of the World Health Organisation Quality of Life Scale (WHOQoL Bref). This scale was chosen as validated versions were available for use with participants in Australia, Germany (with an official WHO translation) and the UK and it allowed comparable data on four dimensions of wellbeing (physical, mental, social and environmental) to be gathered from the three national groups and compared with their experiences of group singing. A key issue focused on was the dimension of psychological wellbeing, and comparisons were made between sub-groups that were high and low in expressed psychological wellbeing of the qualitative accounts they gave of their health and the value they ascribed to singing. Analysis of the narratives provided identified four particular sub-groups of participants in choirs experiencing challenges to their mental wellbeing: those with a history or current mental health problems; those coping with partners with mental or physical health problems; participants who were coping with serious physical illness, and those who were recently bereaved. People with lower mental wellbeing as measured by the WHOQoL Bref and in these groups, were particularly likely to express significant appreciation of the value of singing in helping them to cope with life challenges (Clift and Hancox, 2010). A more detailed qualitative analysis of comments given by those high and low in psychological wellbeing confirmed these conclusions (Livesey, Morrison, Clift and Camic, 2012), and a further independent study of choir participants with a history of significant personal trauma explored the ways in which they used singing as part of their mechanisms of coping (Von Lob, Camic and Clift, 2010). In addition, a careful thematic analysis of the views of singers in the cross-national survey on the benefits of singing for physical health revealed
that the most common benefit identified was for breathing and lung function. Interestingly, participants did vary in their degree of certainty or tentativeness is their views on the physical health benefits of singing, with those people who had experienced problems with their physical health (e.g. respiratory illness) being more confident that singing had helped them (Clift, Hancox, Morrison, Hess, Kreutz and Stewart, 2009).

Recently, the Centre has conducted a further substantial survey of singers in a large network of choirs for women connected with the British Armed Forces, managed by the Military Wives Choirs Foundation (Clift, Daykin, Page and Peasgood, 2015). As with the earlier studies, participants clearly expressed the value of singing for their mental, social and physical wellbeing, especially in the context of the demands placed on wives and partners of men in the military. In addition, however, the study revealed some of the tensions and difficulties that can arise in choirs due to internal politics, personality clashes and the demands placed on members by performance expectations and schedules. While singing in a choir can be an uplifting, enjoyable, and socially supportive experience, there are also aspects of the group dynamics that, for some members at least, can undermine these sources of wellbeing.

Singing for health groups

In addition to researching the experiences and benefits of singing for members of established choirs, the Sidney De Haan Centre has also established singing groups for people with little or no experience of group singing for research purposes. A particular focus of the Centre’s work has been on the benefits of singing for older people, particularly those with long-term disabling health conditions and also for adults affected by enduring problems with their mental health.

The Centre formed a valuable working relationship with the charity Sing for Your Life which provides opportunities for older people, including those affected by dementia and their partners, to join singing groups meeting on a regular basis. The groups run by Sing for Your Life came to be known as Silver Song Clubs, and the Centre initially focused on evaluating these groups and the benefits experienced by their members (Bungay, Clift and Skingley, 2010; Skingley and Bungay, 2010). On the basis of this initial work, the Centre collaborated with Sing for Your Life, and a local National Health Service trust to undertake the first ever pragmatic randomised controlled trial on singing for older people aged 60+ living independently in their community (Skingley, Clift, Coulton and Rodriguez, 2011; Skingley, Bungay, Clift and Warden, 2013; Coulton, Clift, Skingley and Rodriguez, 2015; Singley, Martin and Clift, 2015).
This study demonstrated that three months of weekly singing resulted in measurable improvements in mental well-being and reductions in anxiety and depression and that the increases in mental health were maintained after a further three months when the singing groups did not take place. The key findings from the SF12 mental health scale are represented in the figure below:

Changes in SF12 Mental Health scale over the course of the trial and three months follow-up

Singing and mental health

The participants in the controlled trial were older people living independently in their local community and were not a clinically defined group. The Centre has also conducted two studies with participants who have a history of enduring mental health challenges (Clift and Morrison, 2011; Clift, Manship and Stephens, 2015). The earlier study conducted in East Kent involved setting up six weekly singing groups which were monitored over eight months using a clinical measure of mental distress known as CORE (Clinical Outcomes in Routine Evaluation). This study revealed that significant reductions occurred in mental distress over the period of participation. A further smaller-scale replication was also undertaken in West Kent and Medway employing both a positive measure of mental wellbeing (the Warwick Edinburgh Mental Wellbeing Scale) and a short form of the CORE questionnaire (CORE10). In line with the earlier study, significant reductions were found in mental distress, together with significant improvements in mental wellbeing. Films documenting both of these studies are available in which participants describe the benefits they
have experienced (see the Sidney De Haan Centre Youtube channel for these films). See also Clift, Morrison, Vella-Burrows et al (2011), for an account of three singing for mental health projects in the UK.

Singing and COPD

The Centre has also explored the potential value of regular group singing for people affected by the respiratory condition Chronic Obstructive Pulmonary Disease (COPD) (Morrison, Clift, Page et al., 2013; Skingley, Page, Clift et al. 2014). Six singing groups for people with COPD of varying severity were established in East Kent and ran for a year. Careful assessment of lung function was undertaken at the start and end of the programme of singing and participants also completed the St. Georges Respiratory Questionnaire (SGRQ), a widely used standardised questionnaire to assess the impact of respiratory illness. This study revealed significant improvements in health status assessed by the SGRQ, and also showed improvements in lung function and management of breathing. A film of this project is also available on the De Haan Youtube channel, which includes testimonials from participants in the project. A further replication of this study is in progress currently in South London and details including two short films can be viewed on the project website: www.s4bb.org.uk.

Current work of the Centre

The Centre is currently pursuing its research programme on singing and respiratory illness to build upon previous studies and the ongoing project in South London. Work is in progress to design a community-based randomised controlled trial on singing and COPD in collaboration with Medway Healthcare NHS; and to explore the value of singing for people with asthma in association with Guys and St. Thomas’ Hospital in London.

In addition, we are a research partner in a project exploring the potential for promoting singing in all care settings in the UK: A Choir in Every Care Home, managed by Live Music Now – see: https://achoirineverycarehome.wordpress.com/.

Finally, the Centre is in the process of revising its singing for health guides on mental health, COPD, Parkinson’s and Dementia to take account of the growth of research and practical initiatives in the field of singing for health (see details below).
References


**Singing for Health Guides**


