Engaging with the Voice

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Components of Vocal Engagement

- Mental
- Physiological
- Emotional
- Vocalization
- Singing
Vocal Engagement: Physiological Components

Posture

• Be aware of whether you are slumped over while singing, or having to sit or stand awkwardly due to the size or space of room.

• Make sure your positioning with any accompaniment instrument (e.g., piano, guitar, djembe, ukelele) supports your singing instead of inhibiting it. For example, if accompanying on guitar, bring the guitar to you, not the other way around.
Vocal Engagement: Physiological Components

• Breath:
One exercise to help with centering breath is to “imagine your inbreath beginning at the base of the spine and going to the top of the head. Imagine your breath beginning at the top of the head, traveling down the front of the spine, and finishing at the base of the spine” (Dayme & Vaughn, 2014, p. 271).
Vocal Engagement: Physiological Components

BREATHT involves the entire body!

- Try stretching or engaging your entire body first before you start to sing. This helps bring awareness to your core and can assist in feeling grounded while taking low breaths.

- Shallow breaths will not support your vocal sound. For example, take a quick breath only from mid-chest up and try singing the first line of your favorite song. Now, take a lower, slower breath. Imagine you are filling up a tub of water, expanding your entire torso and then try singing the same line of the song. Feel differently?

- In addition to how you breathe in and how much air you are taking in, you need to consider how you use that breath while singing. Try that low, slow breath again and start singing that favorite line (don't hold your breath after you breathe in!). Imagine the air is spinning like a pinwheel as you sing. It should feel easy, not forced, to sing.
Vocal Engagement: Mental Components

Using characteristics of music, vocal adjustments might be easy to overlook, but can make the difference between agitating a person and providing support. As the music therapist, in addition to noticing this person’s environment and overall affect, you need to be aware of this person’s breathing and ready to integrate it into your work.

• Are you able to vocalize using the tempo of this person’s breathing rate?

• Are you able to provide a sense of pulse (if needed) in the way you accent certain sounds?

• If you are singing a song with words, can you sing it at a lower dynamic level while still being heard?

(American Music Therapy Association, 2014)
Vocal Engagement: Emotional Components

- Our ability to regulate breath to support our singing can be impacted by our emotional and mental state, not just by our physical posture.

- If you are feeling upset or are distracted, you will be less able to relax into your body and allow the breath to support the sound when speaking or singing.
Vocal Engagement: Emotional Components

• Not only do we need to become physically comfortable singing and assuring our physical bodies are fully engaged and relaxed in the process, but we also need to attend to our emotional and psychological selves to assure we can express our authentic, unrestricted voices.

• Take time before working with clients to check in with your own feelings. Taking a few good breaths, focusing your thoughts, and even acknowledging time later to process something can be helpful.
Vocal Engagement:
Emotional Components

• Not everyone feels comfortable singing in front of others, even our clients (Chong, 2010). If we are self-conscious about singing or using our voice, we may sing too quietly or with too much breathiness when we need to sing with a clear, resonant tone.

• By developing this overall awareness of our relationship with singing, we will be able to achieve greater vocal competence, and be aware of how our thoughts and feelings might be impacting our clients (also known as countertransference). We will then be more able to vocally meet the varied needs of our clients.
Use of Vocalization in Engagement

• A music therapist may also use vocal sounds other than singing to reflect or guide a client’s vocalizations. Being able to respond in these moments requires vocal flexibility and an openness to being vulnerable.

• Being able to spontaneously vocalize as a music therapist can promote sound connections with another person, who may be in a vulnerable state.
Conclusion

• Physical engagement with breath and body are essential, in order to vocalize and sing as needed in music therapy sessions.

• Mental focus and awareness of self, environment and client(s) are necessary to be effective in singing or vocalizing in music therapy sessions.

• Emotional awareness of self and others (clients, family, staff, etc.) is key in being able to recognize vulnerability in ourselves and in others - and this all contributes to our ability to empathize and support with our voice as needed.
Conclusion

• Our musical selves draw from our own musical histories and identity, and our voice is a fundamental part of that journey. By engaging with our voice on many levels, and exploring it - developing a comfort with it and an acceptance of it - we can then bring our authentic voice to our clients in the role of therapist and as another musical human.
References

