

Sidney De Haan 
Research Centre for Arts and Health

***The Silver Song
Club Project:***

Summary of a Formative Evaluation

Hilary Bungay and Ann Skingley



Canterbury
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Sidney De Haan Research Centre for Arts and Health

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Hilary Bungay and Ann Skingley

with Stephen Clift, Grenville Hancox and Alistair Bamford





Background

The growth of the older population in the UK over the last 50 years (Department for Work and Pensions, 2005) has brought with it a change in the nature of health issues. In later life the number of people reporting a long term illness increases and this represents a considerable use of health and social care services by this age group (Department of Health, 2001). More recently there has been growing interest in the potential value of the arts in addressing health and social issues (Clift and Vella-Burrows, 2003), and particularly in contributing to the wellbeing of older people (Greaves and Farbus, 2006). Two research studies focusing specifically on the impact of participative group singing for older people have found positive outcomes in a number of health and wellbeing measures (Houston et al., 1998; Cohen et al., 2006, 2007).

However, overall, the amount and quality of research in this area is limited. A number of questions remain, including the generalizability of the work that exists and what particular 'ingredients' of a singing programme for older people are considered to be important. These are questions which are addressed in this evaluation.

The Silver Song Club Project was established in 2005 by Sing For Your Life Ltd. (SFYL), a charitable organisation working in collaboration with Making Music South East. A model has been developed in which song clubs for older people (60 plus years) take place in community settings with an experienced facilitator and accompanist and volunteer support from a local choral society or singing group. The purpose of the Song Clubs is to provide regular opportunities for older people to come together to make music and sing.

The aims of the evaluation were: to reflect on the practical development work already achieved in making Silver Song Clubs a reality; to make a preliminary assessment of the experiences and benefits gained by participants, and to assist Sing for Your Life in assuring quality of delivery and supporting the further expansion of the Project.

Our objectives were:

- 1) To describe the development and operation of the Silver Song Club (SSC) Project.
- 2) To note any variation in individual Song Clubs, examining the styles adopted by those leading the clubs (facilitators), the role of volunteers, the levels of engagement by participants, and general issues of organisation and management of sessions.
- 3) To determine the successes and challenges of running a club, and possible improvements that could be introduced, including issues pertaining to training and resources
- 4) To gain participants', volunteers' and facilitators' perspectives on their experiences of a SSC, and what they feel they gain from participating in sessions. A major focus was the identification of any impact, particularly relating to wellbeing and health, that participants experienced through SSC attendance.

Methods

Three principal forms of data gathering were employed: observation of Silver Song Club sessions using a structured guide; interviews based on semi-structured topic guides with directors and trustees of SFYL, facilitators, managers of centres and participants; focus group discussions with volunteers based on a semi-structured topic guide. Because of available resources it was not possible to study all the existing clubs (then numbering 12) and therefore six Silver Song Clubs were selected on the basis of location and how long they had been running, three having commenced in the first year of the project and the others during the second year. (Details of current Silver Song Clubs may be found on the SFYL website: www.singforyourlife.org.uk)

Key Findings

What are Silver Song Clubs and how do they operate?

The Silver Song Club Project commenced in 2005, with three clubs. There are, at the time of report writing, 36 clubs in operation across the South East of England.

The Silver Song Clubs involved in the evaluation varied in profile but tended to be situated in areas displaying higher than average levels of health and / or socioeconomic need.

The Song Clubs usually took place monthly in Age Concern Centres or similar community venues, which varied in layout. The optimum venue provided space for the Song Club circle with clear vision of the lead facilitator and alternative accommodation for individuals who did not want to take part.



There was a divergence of opinion regarding the optimum frequency of club sessions. While a number of respondents would have appreciated more regular meetings, involvement in other activities was the main reason cited for not wanting them more frequently. This applied to volunteers and participants alike.

Participants were broadly satisfied with the time of day and week of their own club:

A couple of times I've thought it would be nice if it was once a fortnight, but then I'm involved in other things, perhaps once a month is OK. (Participant 3, SSC 2)

The Song Clubs were based on a model of group singing through the use of a standard song book. The facilitators usually started sessions with familiar non-demanding songs and, as the session progressed, introduced new material, to challenge the participants. Use was made of percussion instruments and chime bars as well as vocal techniques and chair-based (i.e. seated) physical activities.

Even if it's a very simple song, it's finding how you can layer it, how you can present it as a new challenge, how can you get people to do things differently, how can you make them think differently, how can you make them think a bit more? So you may have something very familiar but you can actually extend it to make it more challenging for people. (Facilitator 2)

The model permitted a certain degree of flexibility on the part of the facilitator, and allowed variation in the programme content in response to the nature and wishes of the participants. For example, frailer individuals often found the more ambitious activities too demanding, so these were simplified as necessary.



Some facilitators worked only with one club, others worked across two or more. There were differences of opinion among participants about whether they preferred having the consistency of a regular facilitator or the variety provided by different ones. Again, most preferred the practice of their own club. Volunteers had firm ideas about what made a good facilitator:

We've had four different facilitators I think, to compare them, and it's very important that they're not just musically clever, they have got to know how to deal with a group of people who perhaps half of them don't hear very well anyway, and we soon lose people if they can't hear what you are saying.
(Volunteer group, SSC 3)

There was a varying element of choice throughout sessions which was apparent in participants' opinions regarding the wearing of 'name labels', their ability to 'opt out' of a session, the opportunity to request particular items within the programme and in some cases where to sit and the ability to move around.

Volunteers were generally female, though there was a feeling that greater male representation would be beneficial. Few had been involved in anything similar before but most had attended training days provided by SFYL. For some this instilled a sense of confidence, though others felt such days to be too academic and overlong. They suggested alternative models for training.



The volunteers served to encourage and enhance the group singing, both directly through joining in the singing and indirectly through enabling and supporting participants to join in.

Participants were also predominantly female and of varying degrees of fitness. Levels of engagement varied, with some individuals preferring to listen only, some joining in after a time and others opting out completely.

Many of those interviewed had musical backgrounds and conservative musical taste and

both participants and volunteers held pre-existing opinions about the value of music in general and its contribution to health in particular.

It's an innate part of mankind, the music from cavemen on ... I can't imagine life without music ... it's something that friendship just goes across... it pulls people together
(Volunteer group, SSC 1).

If I get into a depression, which I sometimes do, and I go and switch on my machine and I'll sing along ... I find that keeps me going, it really does. When I start getting shaky ... I will sit down here and I get the operatic music on and that calms me down. I really couldn't be without music. I find that the music is the most important thing for me to keep fit.
(Participant 1, SSC 6)



What do people get out of attending Silver Song Clubs?

'Enjoyment', 'enjoy', 'enjoyable' were the most frequently used words in the interviews and this impact was also immediately evident during the observation of the song clubs.

So that's basically why I go ... because I enjoy it. (Participant 1, SSC 5)

They all love it. They enjoy it so much.
(Volunteer group, SSC 2)

Improved wellbeing and mental health was expressed in terms of feeling better and uplifted, counteracting depressed mood and helping to forget one's problems.



You feel brighter for it, yes you do, your spirits are lightened ... you just feel better. (Participant 2, SSC 2)

The opportunity to interact with others through the SSC was thought to offer a greater benefit than either singing alone or merely participating in a social activity. While some participants came principally for the social aspect, others placed greater value on the singing with like-minded people. Singing was seen to have an equalizing effect and to inspire confidence and to reduce isolation.

You're all on the same level sort of thing, even if you're not so well it brings people together. (Participant 4, SSC 2)

You could end up being very lonely. I mean as you get older ... you can't do what you did before, so when you go up there and there are people in the group, you're chatting, you're having a cup of tea and I think it makes a difference. (Participant 2, SSC 5)

Physical improvement was not a major focus of participants or volunteers, but singing was felt to improve respiratory function, body movement, coordination and relaxation and to help forget aches and pains.

I think it's very therapeutic and it's quite important for me because I have asthma and emphysema, so I have breathing difficulties, so ... I really like coming here, I feel physically more confident and it expands my lungs. (Participant 3, SSC 2)

Memory and recall was emphasized more by directors, facilitators and volunteers than by participants, but was an implicit part of the SSC experience, through the inclusion, often in the opening songs, of familiar and popular, often undemanding, songs, thus contributing to enjoyment, cognitive stimulation and occasionally to sad or negative emotions.

They have met together and sung all these old songs since they were quite young, at school and then it's continued and that is, I think what brings back all their old memories and things they've done and it's a joyous thing to do. (Volunteer group, SSC 2)

Cognitive stimulation and learning were seen as potential benefits of SSCs by those providing the service, particularly for individuals with dementia, but also resulting from concentration on the musical activities.

I have seen some of our clients getting enormous benefit from it, particularly those who have dementia. One of the senses, if you like, that people still retain is their remembrance of music and what is associated with it. (Manager, SSC 3)

Change over time emerged as a theme from a number of interviews and discussions as it applied at both individual and group level, thus reflecting the dynamic nature of the clubs.

A new couple that started, at the beginning they used to sit, but now if there's a song you can see them singing along with it and that's good, yes, because then you become part of a group. (Participant 2, SSC 5)

Most of the findings supported conclusions from previous research and may, therefore, contribute to the further development of theory in this area.

Conclusions

The objectives of the evaluation were both descriptive (detailing the development, characteristics and operation of the Song Clubs) and evaluative (detailing the successes and challenges of the clubs and their impact on participants and others). The evidence collected has identified variations between clubs in terms of context, venue, timing, facilitator and participant characteristics, along with individual and group preferences. This has led to the development of some recommendations for future SSC operation (see below). At the same time, a basic model operated which had at its heart a programme of songs and activities which progressed from the familiar to the challenging. The degree of engagement on the part of participants varied within and between clubs, though all emphasized the individual's freedom of choice to 'opt out' of all, or part, of the session.

In evaluative terms, respondents reported benefits in a number of ways. These included enjoyment, mental wellbeing, being with others and socializing, physical improvement (such as breathing), improvement in memory and concentration. These findings support previous research and therefore serve to build up the evidence base in this area.



Recommendations

- Ideal venues would have a separate room where the SSCs take place. This allows those attending Age Concern Centres to 'opt in' to the session.
- Wearing name badges would help people to get to know each other, however people should be given the choice as to whether they want to wear badges. It would assist facilitators if volunteers wore name badges.
- It would be useful for volunteers and facilitators to take some time to discuss the session at the end, as the volunteers may have useful feedback as to how the participants responded to the different activities.
- Volunteers are generally very busy and do not all perceive a need for training days as they currently exist. However the idea of information being cascaded through the volunteer group would be one method of informing and developing volunteers.
- When introducing new activities, such as part singing or use of instruments, care should be taken to use well known songs as participants find it hard to hold song books and use instruments at the same time.

Further work

The identification of the various components of a Silver Song Club has enabled the Centre researchers, facilitated by a value consultant, to develop a theoretical model, linking these components to the outcomes or benefits. This will enable the development of a framework to guide a more controlled evaluation of the SSC model, which will compare people who participate in the clubs with those who don't. This will provide a clearer picture of how many people benefit from the clubs and how much they benefit. It will also facilitate an estimate of the cost-effectiveness of Silver Song Clubs as a health intervention.

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The research team

Hilary Bungay

Ann Skingley

Stephen Clift

Grenville Hancox

Alistair Bamford

Sidney De Haan Research Centre for Arts and Health,
Canterbury Christ Church University,
University Centre Folkestone,
Mill Bay,
Folkestone CT20 1JG

Further information

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For further information:

The Administrator
Sidney De Haan Research Centre
for Arts and Health

***E-mail: sdhcentre@canterbury.ac.uk
Tel: 01303 220870***

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