

A Survey of Equipment in the Singing Voice Studio and Its Perceived Effectiveness by Vocologists and Student Singers

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Summary: Objectives. Speech-language pathologists have long used technology for the clinical measurement of the speaking voice, but present research shows that vocal pedagogues and voice students are becoming more accepting of technology in the studio. As a result, the equipment and technology used in singing voice studios by speech-language pathologists and vocal pedagogues are changing. Although guides exist regarding equipment and technology necessary for developing a voice laboratory and private voice studio, there are no data documenting the current implementation of these items and their perceived effectiveness. This study seeks to document current trends in equipment used in voice laboratories and studios.

Methods. Two separate surveys were distributed to 60 vocologists and approximately 300 student singers representative of the general singing student population. The surveys contained questions about the inventory of items found in voice studios and perceived effectiveness of these items. Data were analyzed using descriptive analyses and statistical analyses when applicable.

Results/conclusions. Twenty-six of 60 potential vocologists responded, and 66 student singers responded. The vocologists reported highly uniform inventories and ratings of studio items. There were wide-ranging differences between the inventories reported by the vocologist and student singer groups. Statistically significant differences between ratings of effectiveness of studio items were found for 11 of the 17 items. In all significant cases, vocologists rated usefulness to be higher than student singers. Although the order of rankings of vocologists and student singers was similar, a much higher percentage of vocologists report the items as being efficient and effective than students. The historically typical studio items, including the keyboard and mirror, were ranked as most effective by both vocologists and student singers.

Key Words: Vocologist–Singing voice studio–Technology.

INTRODUCTION

The equipment and technology used in singing voice studios by speech-language pathologists and voice pedagogues are changing. Speech-language pathologists have long used technology for the clinical measurement of voice.^{1–3} Voice teachers increasingly have been using technology in the studio.^{4–8} Although guides exist regarding equipment and technology necessary for developing a voice laboratory and private voice studio, there is no information documenting the equipment and technology currently being used and their perceived effectiveness.^{9–17}

This study examines survey results to determine current trends in equipment and technology used in voice studios and the perceived effectiveness of these items. A survey was distributed to specially trained vocologists (speech-language pathologists and voice pedagogues) working in diverse academic and private settings in the United States. The group comprises attendees of the Specialized Training in Vocal Health symposium (STVH symposium, Salt Lake City, 2013) and prospective members of the Pan-American Vocology Association (PAVA). A second survey was distributed to student singers at various universities in the United States within an educational setting.

This group represents a sample of students who are likely to take voice lessons with more traditional voice teachers, rather than specialized vocologists, and would be expected to have less exposure to technology in the voice studio. These two populations were chosen to specifically assess the differences between the points of view of vocologists and singing students.

We hypothesized that results of this survey would show (1) no significant difference between the inventories of speech-language pathologist and vocal pedagogue vocologists' studios; (2) more diverse and technologically based inventories reported by vocologists than by student singers; and (3) significant discrepancies between perceived effectiveness of equipment used in the voice studio by vocologists and student singers, with vocologists rating equipment as more effective.

METHODS

A vocologist survey was distributed to attendees of the STVH symposium (Salt Lake City, 2013) and prospective members of PAVA ($n = 60$). For the purpose of this study, confining the pool of vocologists to those attendees of the STVH symposium and prospective members of PAVA provides a reasonable amount of control for the level of training of the vocologist sample, both for the vocal pedagogues and speech-language pathologists.¹⁸

A second survey for student singers was distributed to about 300 students at various universities throughout the United States. These students were not the students of the vocologists. Rather, they are representative of the general voice student population at the university level.

Accepted for publication March 20, 2015.

Information contained in this article was originally presented at The Voice Foundation Annual Symposium, 2014, Philadelphia, PA.

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Journal of Voice, Vol. 30, No. 3, pp. 334–339

0892-1997/\$36.00

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<http://dx.doi.org/10.1016/j.jvoice.2015.03.012>

Participants were asked to report whether each of 17 items was present in their studio (for vocologists) or in the studio where they received instruction (for student singers). Student singers were also given the option to indicate that they were not sure of the presence of an item in the studio or that they were not familiar with a particular feature. Participants were then asked to rate the usefulness of each item using a five-point likert scale ranging from strongly disagree to strongly agree.

Data were analyzed using descriptive analyses and statistical analyses when applicable via chi-square test and Fisher exact test for smaller sample sizes with $P > 0.05$. When the power was not high enough to perform statistical analysis on this data, trends toward significance were reported.

RESULTS

Demographics

Vocologist survey. Twenty-six of 60 potential vocologists responded. Refer to [Table 1](#) for complete demographic information. In summary, the respondents' primary work settings were split between medical and educational voice settings. Likewise, their primary roles were generally split between speech-language pathologist and vocal pedagogue/teacher/coach; some reported balancing these two roles equally. Approximately, half of the respondents held a master-level degree in

speech-language pathology, with some also holding a PhD in communication sciences; the other respondents held master-level degrees in music with some holding a Doctor of Musical Arts degree in vocal performance or pedagogy. Most respondents had >10 years of experience practicing as a vocologist. Most reported having access to a voice laboratory for assessment purposes, and almost all reported having a dedicated voice studio for teaching and/treatment purposes.

Student singer survey. Sixty-six of potential 300 student singers responded to the survey. Refer to [Table 2](#) for complete demographic information. Most respondents were women. The level of education reported varied from bachelor to doctoral-level students. Nine total primary genres were reported, with most claiming to be classical singers. Training varied fairly evenly from 1 to >10 years. The large majority of students had no training in technology for the voice studio and no history of treatment for a voice disorder.

Inventory

Results revealed an inventory of items in the studio for vocologists as follows in [Table 3](#). Eleven of the total 17 items (italicized) were reported to be present in the studios by more than 50% of the vocologist respondents.

The items that students reported to be available in the studio where they were receiving instruction are as follows in [Table 4](#).

TABLE 1.
Demographics: Vocologists

Demographic Information	Number of Respondents (of 26 Total)	Percentage of Total Respondents
Primary work setting		
University-based voice center	7	27
Private practice voice center	6	23
Other medical setting	1	4
University/college/conservatory-based Music Department	9	35
Private voice studio	6	23
Primary professional role		
Vocal pedagogue/teacher/coach	12	46
Speech-language pathologist	9	35
Those who reported balancing these two roles equally	5	19
Education		
MS/MA in Speech-language Pathology	12	46
Additional PhD in Communication Sciences	3	12
Additional clinical fellowship in voice	6	23
Master of Music in vocal performance	12	46
Master of Music in vocal pedagogy	3	12
Additional Doctor of Musical Arts in vocal performance or pedagogy	3	12
Organized additional training in voice science/vocology	14	54
At least one graduate-level course dedicated to technology for the voice studio/laboratory	19	73
Years of experience practicing as a vocologist		
0–3	1	4
4–6	0	0
7–10	3	12
>10	18	72
Access to voice laboratory for assessment	19	73
Dedicated studio for teaching/treatment	24	92

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