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Drawing development of hearing and voice, recovery methods of hearing and intonation impairments

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Abstract

The human voice is the most complete, complex and expressive communication instrument of musical language. The artistic qualities of the human voice can be affected by hearing and intonation dysfunctions that have a negative effect on musical intelligibility and expressivity. Hearing and voice training is a component of the musical education, as the didactic mission of music teachers does not only address gifted students, but all, to the extent of their ability for musical communication. The methods used for correcting false singing pursue an improvement in sound production, in perception and memory.

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1. Introduction

Correct musical intonation is conditioned by three determining factors: hearing (good functioning of the nerve system), sound emission (intonation) and musical memory.

The conclusions of this synopsis are based on analysing the phenomenon and successfully experimenting vocal recovery methods within the following types of groups where I worked as a music teacher: middle school pupils in the general culture education system and middle and high school pupils in the vocational education system.

The first ascertainment highlighted the fact that all pupils who have had a practical musical experience in their family, church, school or various artistic groups (choirs, vocal groups ...) manifest obvious musical skills, as parents, educators from pre-school education, primary school teachers and music teachers play a decisive part in the activity

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of rendering children more musical. By contrast, pupils who did not benefit from musical education in their family, church or school became unformed, timid, and unable to use their own voice (Oarcea, I., 2010).

2. Factors determining hearing, intonation and rhythm impairments

A non-musical individual, defined as tone deaf, is a person deprived of voice, deprived of the possibility to accurately sing a tune. The wording is partly correct, because any individual who has intonation inflexions in the spoken voice towards high or low has a voice, but due to physiological vocal impairments and due to the existing neurological and psychological dysfunctions, the individual does not have the ability to complexly model and align the spoken towards the singing voice. Awareness and understanding of the causes of physiological, neurological and psychological dysfunctions of the child represent the starting point in the recovery from singing out of tune, which can be determined by hereditary, medical or educational factors. From a medical point of view, we can encounter innate hereditary anomalies, such as deformations of the larynx, mouth or throat, which affect the respiratory system and which can be observed in the sound of the voice, whereas the neurological anomalies cause dysfunctions in the area of perception and artistic expression, of the neuro-psychology of music.

Out of tune singing at children can be caused by dysfunctions of the intonation and hearing due to inhibition, cancellation or lateness of mental processes, which affect the creativity of singing. It can be caused by psychological factors (shyness, fear, constraint) and temperament structure (hyperactive or calm child, with intense speaking, or hypotonic with a dead voice, without timbre), which can determine the lack of attention and focusing regarding the height of the sound, lack of motivation and interest to sing, to make music.

Accuracy of intonation, with implications on the health of the vocal chords, can be affected by inadequate breathing and faulty impostation. As a biological process, breathing has beneficial effects on the blood circulation and on the nervous system. In vocal singing, the musical sound is produced with the help of the air column, and correct breathing offers the performer the possibility to support the music phrase (Lamboley, D., 2001). By impostation we understand the position of the mouth during singing that is how the lips, teeth, palate, tongue and larynx act together for the sound sonority to have expressiveness and homogeneity. There is a clear difference between the mouth's breathing and position in current speech and breathing and impostation during vocal singing (Cegolea, G., 1995).

Concerning the melodic flow, non-musical individuals – without a musical sense – lack the ability to differentiate between the musical height; they are aware of the ascendant or descendant flow of sounds, but imprecisely so; their ambitus is restricted and they have the tendency to sing in the same register as the spoken voice. This dysfunction can be of temperamental nature, and passive children make the most mistakes in differentiating height. The sense of rhythm is a movement factor. Singing with rhythm implies the flow of sound pulsations in a measured sequence of impulses (Daniélou, A., 1978). The sounds are more easily imprinted in memory if they have rhythm, because the sense of rhythm is tributary to physiological and dynamic laws, as well as to those of tempo (of agogics).

The lack of rhythmical synchronisation, unequalisation of durations as well as the growth or acceleration of the tempo can have several causes: inaccurate knowledge of the part, incomplete memorising of certain fragments, the dense structure of the rhythm and distances of the melodic line, the prosodic structure of the text, a difficult melodic texture, extended dimension of the musical phrases, insufficient physical and vocal preparation for singing, the acoustics of the hall, etc. The inability to sing accurately can be determined by the lack of a proper environment and of a musical practice within the family, by an erroneous academic education, by an improper education system, or by lack of teaching experience. From this point of view, one of the frequent errors of the present musical education is to employ parts from the repertory of adults while working with children, with insurmountable difficulties of melody and rhythm and with a theme which exceeds the understanding ability of their age. Sometimes, exotic repertories are favoured, avoiding parts accessible to their age from the community cultural heritage. The difficult, approximate intonation in an ambitus that is inaccessible for the age causes the deformation of intonation with effects on audio acuity. The phenomenon is sometimes worsened by the non-musical vocal pattern of the trainer.

Noise constitutes the main disruptive factor of the auditory and vocal ability, alongside viral infections, chemical pollution, and the humidity of the environment, continuous speaking or everyday stress.

This is the percentage graph of the factors that determined dysfunctions of hearing, intonation and rhythm in middle school pupils from four middle schools in Braşov and Săcele (11 – 14 years): genetic and congenital

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