policy briefing | music, singing and wellbeing





what music and singing interventions work to improve wellbeing of healthy adults? This briefing looks at all the available evidence to support better policy.





what evidence did we find?

There are three types of evidence:

(合)(合) **strong** - we can be confident that there is an impact in the stated group and context.

(合)(合) **promising** - which we need to investigate further.

(a) initial - there may be an effect, which we need to investigate further.

Below is the evidence of impact on different populations that participated in group singing, listening to music and structured music interventions. Further evidence, with standardised reporting, could help us understand the characteristics of the most successful projects.

healthy adults





Music interventions can enhance healthy adults' sense of purpose in life.

pregnant women





Structured music therapy can reduce the intensity of stress, anxiety and depression in pregnant women

structured music and singing activities have wellbeing benefits for particular groups

young offenders



Music and singing projects for young offenders are valued by participants and have a positive effect on self-esteem. Participatory music making, singing and particularly performing in public, can support prison inmates' perceived wellbeing.

in the workplace



Brief music and non-music interventions can decrease stress and enhanced wellbeing in the workplace.

In partnership with











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what evidence did we find? (cont.)

older people



- (ப்)(ப்)(ப்) Regular group singing can enhance morale and mental health-related quality of life and reduce loneliness, anxiety and depression in older people compared with usual activities.
- Participatory singing can maintain a sense of wellbeing and is perceived as both acceptable and beneficial for older participants.
- Singing can maintain a sense of wellbeing in healthy older people.

group singing has wellbeing benefits, with a lot of evidence available for

older adults

healthy adults



- Group singing can foster happiness as well as provide musical and social benefits
- (a) Being a member of a music ensemble can enhance subjective wellbeing, support the development of musical identity and a sense of purpose.
- Brief group singing can enhance perceived psychological wellbeing.

Wellbeing benefits from group singing can relate to connecting in a community...

- Engagement in music activities can help older people to connect with their life experiences with other people, and be more stimulated.
 - Participants from marginalised groups value the benefits of group singing and the opportunity to learn, build relationships and engage in a meaningful exchange with the wider community
 - (a) Active music making in community choirs and music ensembles may be an effective way to support individuals from marginal communities, enabling them to build a sense of community and share culture and heritage..
 - Older adults are motivated to participate in musical activities to broaden their social networks and to learn.

...and finding identity and expression

- Membership of a choir or musical ensemble can provide a vehicle for identity construction and revision in later life, including people with little or no previous experience of music.
- Performing and sharing their songs with others can be significant and meaningful to participants. Music can help older people to develop self-identity, or connect with other people, expressing spirituality and reminisce.
- Song-writing and performing can contribute to happiness in older people. Performing and sharing their songs with others can be significant and meaningful to them.
 - Learning music may help older adults to realise longheld ambitions and promote spiritual growth.

prisoners



Listening to relaxing music can alleviate anxiety and anger in prison populations.

pregnant women



Listening to relaxing music can enhance wellbeing and mood in pregnant women

listening to music in itself has wellbeing benefits

young adults



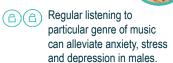
- Listening to music can alleviate anxiety and improve wellbeing in young adults
 - Short duration listening to music can enhance mood in young adults
 - Listening to music during exercise may enhance the positive effects of physical activity on state anxiety in young adults

older people



(a) Listening to music may act as an effective intervention to prevent or reduce depression in older people.,

men



healthy adults



Listening to music can reduce stress, negative mood and state anxiety in healthy adults.

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Music and singing activities can enhance and maintain subjective wellbeing in healthy adults. Wellbeing is important as a goal in itself, for people to feel satisfied with their lives and experience. However, higher levels of wellbeing have also been associated with better health, work performance and social contribution.

Commonly identified priorities for local authorities

Social Isolation and impact on mental health and wider aspects of people's health. Mobilising communities and providing opportunities to improve wellbeing. Enhancing and maintaining wellbeing in communities, at home and work. Supporting maternal wellbeing and reducing anxiety.

Supporting marginalised groups.

Wider health and wellbeing outcomes, in work and in the community.

There is a strong case for local authorities, trusts and foundations to continue supporting of music and singing activities which enhance and maintain subjective wellbeing in adults.

There is a particularly strong case to support participatory music and singing programmes which can help to maintain wellbeing and prevent isolation, depression and mental ill health in older adult age groups.

Listening to music has been shown to alleviate anxiety in young adults, who have to date been relatively neglected in debates and programme development around music, arts and wellbeing,

Strong evidence supports using structured music therapy to reduce the intensity of stress, anxiety and depression for males.

There is promising evidence that music sessions can alleviate anxiety in young adults and young offenders, and reduce the intensity of stress, anxiety and depression for pregnant women and males.

Local authorities, trusts and foundations can continue to explore these options, to make sure we understand what works.

Trusts and foundations, or any organisation funding music and singing projects, can play an important role in developing the evidence base.

This can be done by supporting and evaluating activities where there is initial evidence (for example, projects for young offenders or marginalised groups) to better understand the impact.

But what works best? How does this compare to other activities? We still need to find out more.

What type of music and singing intervention is most effective, in which format, for which group – and why? How can these be designed to have the greatest impact? How long do the impacts last for? How does a singing intervention compare to other group activities?

Funders play an essential role in answering these questions, by supporting projects to evaluate what matters, using standardised frameworks.

The what works centre for wellbeing are developing a set of tools for practitioners and community groups.

The evidence teams are reviewing the evidence on cost effectiveness over the coming months, to help groups and funders compare across activities and provide an idea where money may best be spent.



case study: Keep Singing,
Keepsake Project

This project, run by MusicZone Plymouth, supports older people living in residential facilities who are at risk from isolation.

It aims to strengthen social ties and improve participants' emotional wellbeing through weekly singing group.

Participants reported that the music helped them to relax, express their feelings, experience happiness, celebrate survival and share emotions.

The project also found that these benefits are sustained.

However, participation is challenging for some people, such as those with physical impairments. The support of care staff in facilitating participation in residential settings is an essential component of successful music projects.

Full case study:

whatworkswellbeing.org

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how did we gather this evidence?

This briefing is based on a systematic review. This uses empirical research to assess the relationship between non-clinical music and singing interventions with subjective wellbeing published between 1996 and 2016.

Types of studies

We included reports that assessed the relationship between music and singing interventions with subjective wellbeing. This included empirical research: either quantitative, qualitative or mixed methods outcomes or process evaluations, published from 1996 to June 2016.

We also included systematic reviews published between 2010 and 2016.

Grey literature and practice reports published from 2013 were included. Discussion articles, commentaries or opinion pieces not presenting empirical or theoretical research were excluded.

The review includes data from over 2500 participants from many countries. A third of the studies included older people Studies encompassed a wide range of groups including young adults, working age adults, mixed age members of community ensembles, pregnant women, people in justice settings, homeless people and drug users.

Types of participants

We included general adult populations, worldwide, healthy or living with diagnosed conditions. This includes any group or individual taking part in listening or performing but not as paid professionals and not in clinical music therapy. We

included studies from countries economically similar to the UK.

Types of outcome measure

In order to be included, studies needed to measure subjective wellbeing using any recognised method or measure. For the health-economic component, key outcomes are the outputs from cost, cost-utility, cost-effectiveness, cost-benefit and cost-consequence analyses.

Types of interventions

We focused on participatory music or singing interventions including listening and performing. This includes music therapy offered to enhance wellbeing but excludes clinical treatment. We excluded evidence relating to paid professional musicians, clinical music therapy, and clinical procedures such as surgery, medical tests and diagnostics.

Assessment of quality of included studies

We used the quality checklists for quantitative and qualitative studies detailed in the What Works Centre for Wellbeing methods guide, and for economic evaluations (The Drummond Checklist, 1996) to assess the methodological quality of the included studies.

fill the evidence gaps



Do you have an evaluation of a project focusing on music, singing and wellbeing? We are interested to hear about it, whether the project was successful or not.

Email <u>evidence@</u> <u>whatworkswellbeing.org</u>

read more from this series



This briefing note is part of a suite of publications looking at the impacts of music and singing interventions on different populations.

- Music and singing for wellbeing in:

 healthy adults
 adults with illnesses
 adults with dementia systematic reviews and case study
- Supporting analysis of datasets
- Grey literature review: music, singing and wellbeing

whatworkswellbeing.org



We are an independent organisation set up to produce robust, relevant and accessible evidence on wellbeing. We work with individuals, communities, businesses and government, to enable them to use this evidence make decisions and take action to improve wellbeing.

The Centre is supported by the ESRC and partners to produce evidence on wellbeing in four areas: work and learning; culture and sport; community; and cross-cutting capabilities in definitions, evaluation, determinants and effects.



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