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Editorial

A chorus of voices: social singing and health promotion

Research on choirs and other forms of group singing has been conducted for several decades. A relatively recent focus on the potential health and well-being benefits, particularly in amateur singers, shows evidence of a range of biopsychosocial and well-being benefits to singers (Livesey et al., 2012; Reagon, 2016). As editors of this special issue, we come to the topic from a wide range of disciplinary backgrounds including music therapy, public health, ritual studies and vocal pedagogy, but a common thread to our varied approaches to singing, health and well-being is the social aspect of singing. Rather than focusing on choir singing (which has cultural and class connotations), we prefer the term social singing as it allows a broader conversation. This special issue emerges in the wake of a challenging time for social and group singing. Lengthy restrictions to curb the spread of coronavirus disease 2019 (COVID-19) greatly impacted group singing practices worldwide. Fears of contagion in group singing settings gave way to online videos of quarantined Italians singing on balconies, families singing together at home, virtual choirs and a host of other examples of people determined to overcome obstacles to join together in song (Jaber et al., 2021; Price et al., 2021). Singing together is an inherently social experience that can be a powerful unifier in the face of uncertainty and isolation. Several special issues on the impact of COVID-19 on music ensembles are underway, notably the International Journal for Community Music and the Nordic Journal of Music Therapy.

Dingle *et al.* (Dingle *et al.*, 2019) note that current research evidence suggests that singing in a choir or group has several health and well-being benefits but highlight several key theoretical and methodological issues. Most published studies on group singing have focused on middle-class amateur or professional singers who are not representative of the general population. More research grounded in the societal, educational and political dimensions of social singing is necessary to broaden our understanding. This special edition on the health and well-being dimensions of social singing includes diverse perspectives of group leaders, facilitators and trainers and gathers valuable insights from the experiences of singing participants from diverse cultural contexts and traditions.

THE IMPETUS FOR THIS SPECIAL ISSUE

The literature on singing and health has grown to such an extent that significant systematic reviews, metaethnographies and even Cochrane reviews, have appeared appraising the quality of the evidence and synthesizing established knowledge (Sun and Buys, 2016; Baker, 2017; Daykin et al., 2018; Liu et al., 2019; Sheppard and Broughton, 2020). Such reviews support the value of group singing for mental and social well-being but have signalled methodological issues and recommended further larger-scale and better-controlled studies. Following a think tank in 2019, two of our special issue editors collaborated in a publication making recommendations for future research on singing and health (Dingle et al., 2019). Recommendations arising from this summit included the need for both experiential, ethnographic research and rigorous, replicable studies. Additionally, Garry et al. (Garry et al., 2020) recommend further investigation of singing and songwriting as methods in arts-based research.

This special issue addresses a need to broaden the discussion on singing and health to diverse communities and cultures. Most research on singing and health is based on Western, choral traditions. It is crucial to widen the discourse and consider how singing can support people living in diverse cultures and communities and how these cultures shape and effect the health benefits singing might achieve (Lorenz, 2014; Phelan, 2017; Raorane and Shetty, 2020). This special issue brings perspectives on singing and health from Irish tradition, The

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Gambia, a community in Australia that enjoys a high percentage of migrant and refugee population and the perspective of family carers of people with dementia.

This issue's research is primarily, but not solely, qualitative in its focus. There is a need to embrace the subjectivity, and lived experience, of music and personcentred care. A mature field of study cannot solely focus on objective evidence, but must also embrace the grey areas of healthcare, including quality of life, well-being at the end of life and flexible person-centred care. The transcendent, social and spiritual aspects of the arts are important aspects of quality care and space needs to be made in mainstream journals for this broader discussion to take place (Moss, 2021).

This special edition grew out of the Singing and Social Inclusion research cluster, an initiative at the Irish World Academy of Music and Dance, University of Limerick (UL), formed by Phelan through an Irish Research Council funded project on social singing and new migrant communities. Several experts have combined energy at the Academy, bringing ethnomusicology, community music, music therapy, ritual chant, vocal pedagogy and traditional Irish singing perspectives to the table. The Arts and Health Research Network, led by Moss, and the PART-IM (Participatory and Arts-Based Methods Involving Migrants in Health Research) cluster, led by Phelan, also gave added impetus to the project.

Some of the issues addressed include the debate between music as an intervention for health improvements versus music as an intrinsically healthy activity. A significant focus of this issue is how singing for health and well-being is context based, particularly in the both precious and precarious contexts involving culturally and linguistically diverse (CALD) populations especially from and in low- and middle-income countries. Mani asks important questions in her review of a project in Australia with refugee pregnant women: Why should we avoid the 'music is a silver bullet' approach to report on music-based health interventions? How can we better value the arts in the health space? As a community of research, we also need to be open to acknowledging when singing does not work and when it is contra-indicated. Understanding diversity and cultural issues is crucial in ensuring that music facilitators do no harm. As well as the positive aspects of singing, it is important to study negative associations with group singing (Kreutz and Brünger, 2012); hate songs (Messner et al., 2007) and aversive music (Peltola and Vuoskoski, 2022).

Health communication has long been recognized as a social process, its effectiveness tied to an understanding of diverse cultures, their histories and belief systems (Kreps, 1988; Hinyard and Kreuter, 2007; Schiavo, 2013). Mani and Stewart *et al.*'s papers demonstrate that when participants are actively engaged the health messaging is better received, and engagement happens naturally when individuals are enabled to access pathways that are creative, such as singing.

This issue presents researchers who have recognized singing as a creative pathway to involve displaced voices in health research (Garry et al., 2020) particularly in the context of post-conflict migration. Lee et al. report an integrative review documenting the role of singing as a music psychosocial intervention for family carers of people living with dementia. It documents how music and singing are perceived as a health and well-being intervention and explore the practicalities of access for family carers of people living with dementia. Family carers are a marginalized group who face barriers to access due to caring commitments, financial inequity and increased health risks associated with family caring (Liu et al., 2020). Mani describes singing and songwriting in a perinatal context involving women from CALD backgrounds and their midwives. She explains the value of artistic processes in health contexts as they can reveal the voices, attitudes, lived experiences and beliefs of those individuals whose health outcomes we are keen to see bettered. Stewart et al. highlight the value of cocreation, cultural embeddedness and partnership building in global health research through an exploration of the CHIME project for perinatal mental health in The Gambia, which worked with local Kanyeleng groups (female fertility societies). Thompson and O'Brien explore the impact of online Irish traditional singing sessions on health and wellbeing during the COVID-19 pandemic. Singing sessions are unique facets of Ireland's music tradition that were forced to move online due to COVID-19 restrictions.

The guest editors of this issue are proud to highlight cultural diversity in the field of singing and health research. We hope this issue raises awareness of the value of singing for health and well-being, as a social prescription, as well as the value of considering cultural context, diversity and inequity of access to arts activities when planning arts programmes in healthcare contexts.

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