

**Taking pains:
Addressing issues of musicians' health in tertiary music students.**

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In these pages and in numerous other forums, praises have been sung about the tangible and intangible benefits of music. It is no small irony, then, that the people most intensely involved with making music suffer from major risks to their health, because of it. Whether practising, teaching, rehearsing, or performing, the hours each day professional musicians and tertiary music students typically spend at their instrument are not always happy spells of creative inspiration, or even tormented bouts of genius. They can also be painful, in the most literal sense.

While statistics on the incidence of injury vary wildly from study to study (depending mostly on the criteria for 'pain' or 'injury'), researchers are unanimous that injury among tertiary music students - both within Australia and abroad - is a matter of some concern (e.g. Spahn et al, 2002; Zaza, 1998). The figures are often alarming. Early last year, for example, as a part of preliminary research for a doctorate at Queensland Conservatorium Griffith University, 23 first-year string students were asked whether they had ever experienced playing-related pain or discomfort. Twenty-two of them responded in the affirmative (Waters, 2007).

A browse through dissertations and papers written by current or former tertiary music students confirms that the behind the statistics, real people are struggling with the impact of injury on their lives and careers (e.g. Milanovic, 1997; Yang, 2001; Grant, 2007). In 1996, six months into my own tertiary music studies, I sustained a playing-related injury that eventually led to my withdrawal from university, and put an end to any hopes I had of a career as a performing musician. Along the way, it

also involved the loss of my physical and mental health, a couple of jobs, a tertiary scholarship, a circle of friends, and a fair deal of self-worth. Perhaps worst of all, I lost the joy that came with playing my instrument, which had been a daily part of my life since I was three years old.

Given that over two decades have now passed since Fry's 1987 pioneer study in the field, the ongoing lack of effective and across-the-board mechanisms to prevent and manage injury within Australian tertiary music institutions is striking. It seems improbable that the situation is due to ignorance (despite one pain-ridden tertiary student being advised by a mentor that the solution to her troubles was to "sit up straight"; M. Waters, 2008): both within and outside of the tertiary music environment, musicians' health issues are now profiled more than ever.

On a practical level, vocal departments in particular are well aware of the role of the body in making music, and most now offer classes in body awareness, vocal health, Alexander Technique, or the like. Interest among postgraduate research students in the topic remains strong. A keynote lecture at the 2007 Australasian Piano Pedagogy Conference focussed on playing-related disorders in tertiary (and professional) pianists; and in December last year, the newly-founded Australian Society for Performing Arts Healthcare held its inaugural AGM. The topic of musicians' health is even beginning to infiltrate the public realm, with two articles pertaining to the subject recently featuring in the Higher Education section of *The Australian* (September 12, 2007; February 27, 2008).

Rather than ignorance, then, the persisting need for an effective strategy to address issues of musicians' health in Australian tertiary institutions may plausibly be an ugly by-product of the culture of silence surrounding injury, noted by several students and academics (e.g. Bragge, Bialocerkowski, & McMeeken, 2006; Fry, 1987; Yang, 2001). When I returned to the

conservatorium environment at the start of 2007, I found the silence as heavy as it had been eleven years earlier, when I was forced to terminate my studies due to injury.

Reasons for the taboo are not difficult to surmise. Students may believe (or be led to believe) that talking about their injury could negatively impact on their teacher, or lead to loss of their own career status. Indeed, one conservatorium student was advised by a teacher not to talk openly about her injury since “it could be regarded as a pianistic deficiency” (Yang, 2001, p. 13), and Fry suspected that the reported incidence of injury in tertiary music schools was lower than actual incidence, due to the probability that “some students did not wish to be ‘uncovered’ or they may have been afraid of losing the goodwill of their teacher” (1987, p. 36). Teachers may be fearful of losing students, their job, or their reputation. Even the institutions themselves may fear loss of repute – or, in this sue-happy society, liability.

So with music being no doubt of great benefit to us, our children, our communities, and our very health and well-being, the irony of injury prevalence in our music students is a little bitter. Whether the lack of an effective national health promotion strategy across Australia’s tertiary music institutions is representative of indifference, ignorance, or just a particularly egregious instance of turning a blind eye, it’s time to begin addressing the issues.

Developing a strategy

In June last year, at the conference of the National Council for Tertiary Music Schools (NACTMUS), I delivered a paper that gave an account of my own experiences as a former tertiary music student with a playing-related injury (Grant, 2007). From this personal perspective, the paper proposed to member institutions possible ways of providing support to students who sustained an injury during their

studies. It also noted the lack of a national strategy to address the incidence of injury in tertiary music students, and the need for preventative mechanisms.

On the final day of the conference, as a follow-up to the paper, Queensland Conservatorium Research Centre (QCRC) recommended to the NACTMUS Executive the implementation of four concrete initiatives that aimed to address some of the most urgent issues of musicians' health in Australian tertiary institutions. The proposal was approved, and QCRC committed to playing an active role in compiling the necessary information, and to making it available to NACTMUS free of charge. The four initiatives were as follows:

- 1. By the first week of the first semester of 2008, make available a two-page document describing the realities of playing-related injuries for distribution to first-year students (particularly in high-risk areas such as voice, piano, strings and flute) as well as possible pathways towards prevention, treatment, and post-occurrence guidance and support.*
- 2. Mobilise commitment amongst all NACTMUS members to have **all** incoming students receive succinct information as above by the first week of the first semester of 2009.*
- 3. Before 1 January 2009, develop a link on the NACTMUS website to a dedicated area dealing with playing- and singing-related injuries [and issues of musicians' health], which will enable students and staff to discretely research this phenomenon, which is often not openly discussed in the current climate in Australian tertiary music education.*
- 4. Stimulate NACTMUS members to put in place a protocol for the awareness, detection, treatment (or referral) and care for students with playing- and singing-related injuries.*

Following the corroboration of the proposal, Queensland Conservatorium Research Centre compiled the document *Advice for first year students*, alerting commencing tertiary music students to the risk of playing- and singing-related injury (including hearing loss). The document outlines injury prevention measures, guides students to more detailed information on musicians' health issues, and suggests an appropriate course of action if the student experiences pain or discomfort while playing or singing. A list of practical tips on optimal health for instrumentalists and singers from the British Association for Performing Arts Medicine was appended.

In October, head of NACTMUS Professor Peter Roennfeldt sent *Advice for first year students* to the 27 member institutions Australia-wide, encouraging its distribution to all incoming students from Semester 1 2008. At Queensland Conservatorium Griffith University, the document was uploaded as a permanent e-attachment to *Learning@Griffith*, a high-traffic Griffith University online learning and teaching platform accessible by all conservatorium students, and commencing students were issued a hard copy as they received their Student ID card. Further, prior to the start of semester, the “Health and Safety Information” in all Queensland Conservatorium course outlines was amended to include basic information on playing- and singing-related injury. It directs students to the information posted on *Learning@Griffith*.

QCRC also compiled an information sheet designed specifically for those students unfortunate enough to experience playing- or singing-related discomfort or pain during their studies. Adapted from information issued by the Dutch RSI Association (2008), *Your health as a musician: What to do when you're not 100%* gives students general counsel on managing the initial stages of playing- or singing-related pain or hearing loss. It also informs them how to access appropriate treatment, resources, and support both within Griffith University and externally, and outlines relevant administrative protocol within Queensland Conservatorium, such as deferment of exams.

As director of Queensland Conservatorium, in the first week of first semester 2008 Professor Roennfeldt circulated copies of this four-page document to all program convenors and major study (instrumental and vocal) teachers, with the request to pass on the document to any students who refer during the year with concerns relating to their health as musicians. Like *Advice for first year*

students, this document was also uploaded to *Learning@Griffith*. It is planned to make the document available as a template to all NACTMUS member institutions.

Anecdotally, the process of disseminating this information to students appears to be working. A couple of weeks after the circulation to teachers of *Your health as a musician*, I was engaged in a corridor conversation at the conservatorium with a string student. She mentioned in passing that she had had to cancel her lesson earlier that day due to playing-related pain. When I prodded as to her teacher's reaction, she told me that as well as expressing concern, he had provided her with a copy of the document, suggesting that she follow its guidance.

At Queensland Conservatorium, recent acquisitions at the conservatorium library ensure that students have ready (and gratis) access to readable and current resources on musicians' health (e.g. RSI and Overuse Injury Association, 2007; Rosset i Llobet & Odam, 2007). Contact has also been made with the Australian Medical Association with the aim of assembling a directory of local health care practitioners with expertise in musicians' health, for reference by conservatorium students and staff.

As noted by the Health Promotion in Schools of Music project in the USA, however, "in order to be effective, Prevention Education must go beyond simply 'delivering' instruction or 'disseminating' information and must address issues that affect music students' values, beliefs, and motivations" (Chesky et al, 2006). While the measures outlined above may serve towards breaking the taboo on injury in the tertiary music environment and driving change on a national level, the efficacy of purely text-based information is clearly limited. Eventually, such initiatives need to be supported by more hands-on strategies.

Future directions

At the time of writing this article (mid March), Queensland Conservatorium Research Centre is in the process of making a bid to access Griffith University funds for the purpose of optimising first-year students' health as musicians, and promoting injury awareness, prevention, and management within the Conservatorium environment. A series of general first-year student seminars, subsequent instrument- (and voice-) specific workshops, and smaller follow-up group sessions are proposed, all delivered or facilitated by health care professionals with expertise in a diversity of fields such as Alexander Technique, nutrition, ergonomics, physiology, and psychology. If the bid is successful, these ventures may feasibly be implemented from 2009.

Queensland Conservatorium Research Centre remains dedicated to fulfilling the four initial recommendations proposed to the NACTMUS executive last July, including the development of the web-based discussion forum on musicians' health. Following the initiatives being piloted this year at Queensland Conservatorium, it continues to encourage NACTMUS to keep mobilising commitment among Australian institutions to embrace the strategy on a national level from 2009.

On a larger scale still, initial contact has been made with the CEO of the European Association of Conservatoires (AEC) Mr Martin Prchal, encouraging AEC to stimulate *its* member institutions to address musicians' health issues via the implementation of a similar strategy. A network of professional music training institutions comprising around 240 member institutions across 55 countries, AEC's sanction of such a strategy would represent a considerable step forward in addressing on a more global scale the pressing concerns relating to musicians' health in tertiary music institutions.

However large-scale the strategy, though, tackling issues of musicians' health means more than just perfunctorily attending to an occupational health problem. We might do well to keep in mind that it is individual students, such as that string-player in pain I encountered in the corridor a few weeks back, who are most adversely affected by a lack of health promotion in tertiary music institutions, or who will most benefit from effective initiatives. It's for them that these matters count.

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QCRC welcomes feedback or enquiries on these initiatives. The documents on musicians' health mentioned in this article are available free of charge. Contact qcrc@griffith.edu.au.

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This article is partially derived from a paper delivered at the 2007 National Conference of NACTMUS (Grant, 2007).