



The Correction of Vocal and Personality's Problems of Thai Blind Female Singers, Age of 20-35

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Abstract

'Singing' is to create the musical sound by human voices with the vibration of vocal folds (Darling, D., 2012) and the composition of words or phrases as lyrics, including rhythm in various tones. (Falkner, Keith, ed., 1983). A 'singer' is a person who sings with or without musical instruments. Aside from people who are perfectly normal in terms of physiques, there are also those with potentials to be great singers who are not physically like others. For instance, singers who are blind. In Thailand, there are many blind singers nowadays who can perform and convey happiness to the audience. Many of them, however, still have difficulties in singing due to incorrect vocal technic and also inappropriate posture and gesture on stage. The researcher has more than ten years of experience in teaching Thai blind singers. One of them is a well-known singer, Pattanan Arunvijitsakun, who partly inspired the researcher to conduct this research. In regards to giving singing lessons to a blind individual, they require a greater amount of understanding and carefulness than an able bodied student. For example, when explaining or demonstrating a technique to disabled students, teachers are required to do more than explaining verbally. Unfortunately, in Thai culture, a man touching a woman is considered to be inappropriate. Due to this fact, it causes difficulties for Thai male teachers who teach Thai blind female students. This fact was the inspiration for this research in order to assist blind female singers. From previous research and experiences in teaching blind singers, the researcher discovered four vocal problems commonly found in Thai blind female singers: constricted action, vocal folds abduction, difficulties of reaching high notes, and high larynx position. These dysfunctions can be eased through a sequence of vocalizations designed by the researcher.

Keywords: Vocal's Problems, Personality's Problems, Thai Blind Singers;

1. Introduction

The researcher, also a teacher to disable students, has observed and came to conclusion that the most suitable solution to improve their singing capabilities is to provide the clear and deep understanding on vocalization. The knowledge and understanding on this matter includes breathing technique, vocal cords, vocal registers, vocal resonance and vowel modification. For future improvement and to avoid any possible injuries concerning larynx, the pilot study had been conducted more than 1 time and the practice had been implemented with the blind singers by vocalization.

In this research, the research questions are as followed: What are the methods to solve the vocal problems for blind singers? and What are the methods to solve the gesture ligament and stage appearance problems for blind singers?

2. Literature Review

For this particular topic, there are 5 important elements in singing which are breathing techniques, larynx, vocal registers, vocal resonances and vowel modification.

2.1.1 Breathing Technique

Breathing is to inhale the air into the body through nasal and/or oral cavity. The air is then passed to the two lungs. If the person breaths correctly, a diaphragm will move due to the expansion of the lungs. The diaphragm would contract which would pull up the muscles holding ribs to move up. The volume of the lungs would expand, causing the pressure to decrease, which then signifies that the body is taking the air into lungs (Bwc, 2017). This is the resource of the energy that will be used in singing.

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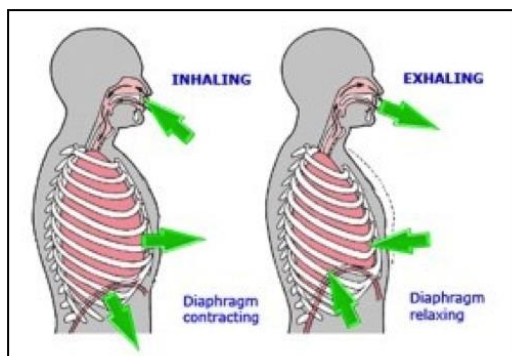


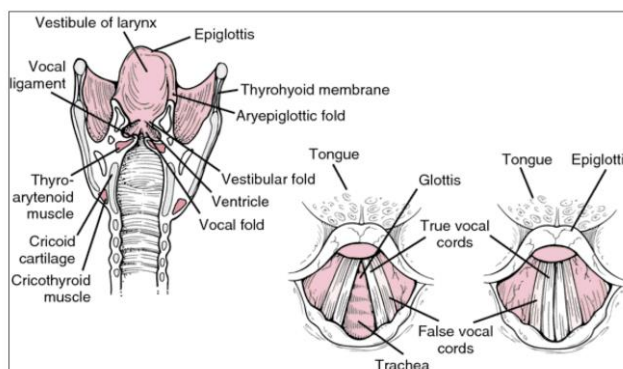
Diagram showing how
inhaling and exhaling occur in humans
(Firstphysioclinics, 2016)

Breathing can be classified into 2 major approaches which are breathing via nasal cavity and breathing through oral cavity. There is no specific indication on which approach is more appropriate in terms of 'breathing'. But when singing, most often it can be found that singers chose to breath via oral cavity more than nasal cavity (Nation TV, 2013)

Breathing via oral cavity is known less common to commoners. But for singers, this breathing approach is an effective way to fill in the air into the lungs faster. The airway is also the same path when being opened to sing. So the body does not get confused when performing to sing. This approach enables easier practice to control how to breathe. In conclusion, singers should have a good practice on breathing through the mouth in order to control their singings and vocal cords.

2.1.2 Larynx and Vocal Cords

One of the significant organs that generates sounds is Larynx. It comprises of unpaired cartilages, three pairs of smaller cartilages and hyoid bone. The muscle that enables human to produce sound is called vocal folds. (Doscher, 1994)



Biological elements of Larynx and vocal cords (Dorland's Medical Dictionary, 1965)

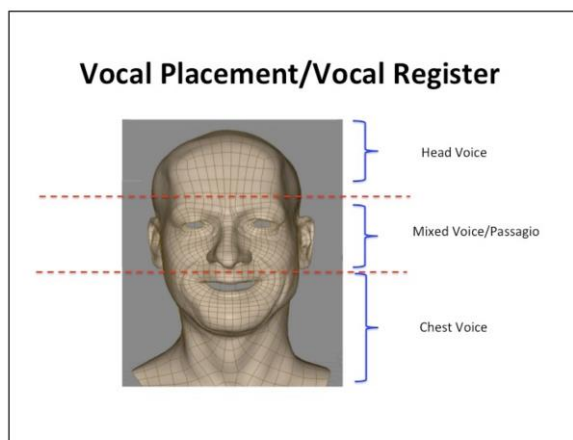
Professor Emeritus Dr. Puangthong Kraipiboon has explained that vocal cords is a tissue of larynx that has a shape of linear. It comprises of 2 lines connected together in the center of the larynx. When inhaling, the vocal cords are opened. They are closed when vise versa. Talking will encourage the vibration of the vocal cords.

Vocal cords have a few blood vessels. In which each vessel has a length between 12-24 millimeters and the thickness of 3-5 millimeters. In men, the vocal cords are longer than women's, which is why there is a difference in the sounds of both genders. The vocal cords are fully developed when human reaches the age of 17.



2.1.3 Vocal Register

When singing, it is very important to be able to locate the level of singing so the singers can consider which level of the sound is most suitable. The feelings of the singers is also another factor that would indicate the position or level of singing (Doscher, 1994)



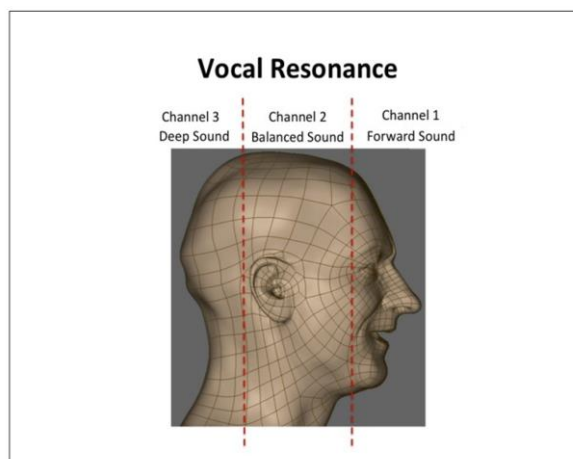
Vocal Register (Pathnitharn, 2015)

The positions of the sound can be classified into 3 levels which are chest voice, mixed voice and head voice.

From the experience of the researcher, generally the sound range of female, the chest voice would start up to G#4. The mixed voice comprises of A4 A#4 B4 and C5. Therefore, after C#5 would consider being the head voice. However, the higher note can be created by controlling the vocal cords, opening the opportunity for singers to develop to sing better.

2.1.4 Vocal Resonance

Vocal resonance has been known to singing industry, but none can specifically identify the location of the organs or tissues in the body that generate the vocal resonance.



Vocal Resonances (Sreeiams, 2015)

The vocal resonance can be identified into 3 categories which are forward sound, balanced sound and deep sound. These 3 types provide the different sounds and also different approaches for individual singer to incur the sounds.

Forward sound is often found in contemporary classical music pertaining the characteristics of the sound to be in high notes. Usually the sounds occur as nasality sound. For balanced sound, it is often found in singing contest in Thailand and also some classical singing that does not use the deep sound. For deep sound, it is the usage of the sound incurred from the deepest part and most often used in singing classical music.



The method on evaluating which type of vocal resonance can be conducted as followed:

Forward sound; perform 'humming' and gradually change to 'e' sound

Balanced sound; perform 'humming' and gradually change to 'ah' sound

Deep sound; start to do 'e' sound and gradually change to 'ah' sound, observe the vibration that occurs closely, the feelings would be similar to when yawning. Another approach is to start with 'humming' and gradually change to 'more' sound (Pamelia, 2013)

2.1.5 Vowel Modification

This is a very important subtopic especially to Thai songs which has the characteristics to be flat, comparing to international singing. In overall, vowel modification can be applied in both singing styles. From 'the Functional Unity of the Singing Voice' by Barbara M. Doscher states that vowel modification creates more sound frequency. The audience would feel that the sound produced with this technique or practice creates more impression when hearing. The vowel modification would create the resonance in the oral cavity which can be changed in according to oral configuration. (Doscher, 1994) From the research on the topic of 'Applying Classical Voice Techniques in Thai Selected Pop Song: Ma Ya Chee Wit and Ter Phu Mai Phae' shows that there are problems occur in several Thai words when being sung if the singers do not practice the suitable method on oral configuration. For instances, the words of 'Prung nee', 'Wan nee' and several more that end with 'nee' require the suitable oral configuration to provide the correct pronunciation when singing which is similar to smiling when talking. It also creates some hardship to sing. In order to solve this dilemma, instead of generating the sound of 'nee', a singer can add the oral configuration of 'eu' and control the configuration of the mouth to be smaller. If this solution can be practiced, it can also reduce the constriction of the strap muscle which then enabling the singer to convey the message in the lyrics to be better.

3. Methodology

Participants in this research are the professional blind singers who are member in the blind music association (N=10). Age of the participants is between 20-35 years old, female singers with variety of vocal types and vocal ranges. They have to join 1 hour of vocal class per week for 8 weeks and practice at home for 4 hours a week. They also have to send the recording of their homework.

4. Research Tools

The data collection is from the true experimental research design. The researcher checked thier vocal problem by using the specific scale. After knowing the exact problem, the researcher applied two treatments to each students. The first treatment is using the vocalization to fix their vocal problems and also using the correct and appropriate body gesture. And the second treatment is not to use any vocalization and any correction of body gesture.

4.1 Vocalization

First step, the researcher checked thier vocal problems by using the specific scale, Five-Tone "Ah". Second step after knowing the exact problems, the researcher solve their vocal problem by suitable vocal exercises for each blind singers.

4.2 Body Gesture

The researcher observed their body gesture problems while they performed in the lessons. The body gesture exercises are used on their personal problems.

5. Conclusion

The researcher distinguished the blind singers vocal problems into 4 areas and 4 exercises to solve their problems as the following.

1. Constricted action – Using "Wee" exercise and also move their mouth in narrowing shape.
2. Vocal cord abduction – Using "Nye" exercise or "Ae" by putting the tongue out.
3. Difficulty of reaching the high notes – Using "Mask Position" exercise by let them do the Humming.
4. High larynx position – Using "Mum" exercise or "Gig/Gag" exercise with low larynx position.



The researcher distinguished the blind singers body gesture problems into 2 areas and 2 exercises to solve their problems as the following.

1. Blending their neck too much – Using the researcher's hands to fix the right position of their neck, also let them touch the neck and head of the researcher to feel the correct alignment of the body.
2. Incorrect mouth position – Letting them touch the researcher's mouth. Most of participants did too much broad vowels (open too much mouth in the horizontal line)

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