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Group music participation by adults in middle and older age: wellbeing and impact of social isolation during COVID-19

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Article Info.	Abstract
<p><u>Date Submitted:</u> November 2020</p> <p><u>Date Accepted:</u> May 2021</p> <p><u>Date Published:</u> September 2021</p>	<p>Changing demographics mean that many people in middle and older age pursue leisure activities, including active participation in music. This research explored affordances of group music participation, the impact of disruption of in person activities on wellbeing due to COVID-19 social distancing restrictions and variations in these with age. An online survey and focus groups were conducted with amateur musicians in the UK. Adults over the age of 45 were targeted in the survey. All were active in community group music making, with a mean length of experience of ensemble playing of 30 years. They rated the impact of group membership and of social distancing on social, physical and emotional wellbeing, and described their experiences of using remote methods to meet or rehearse. Older (66+) people reported more benefits from music participation on physical health and musical engagement. Respondents aged 65 or under, and members of self-organised groups were impacted more by being unable to meet, and were more likely to keep in touch by other means. Over 50% of the respondents participated in remote rehearsals or meetings which provided opportunities for social contact, learning, or planning. This study revealed differences in the experiences of people of different age cohorts, and in different music group contexts. These findings have implications for the role of group music in healthy ageing, highlighting music participation benefits in transitioning to later life stages.</p>

1. Introduction

Participation in various leisure activities, including group music making, may serve an important role in supporting psychological and social wellbeing. In this article, we explore these potential contributions to wellbeing of musical participation from the perspective of older participants, and consider how the COVID-19 pandemic has impacted musical participation, and the responses to and coping strategies towards this disruption. We subdivide the group of participants into different age cohorts, including comparison to younger and older groups to differentiate life-stages, and to investigate how resilience changes with age (Office of National Statistics, 2018). This research was conducted with the support of Benslow music, a UK based organisation for amateur music making, and data was collected at a time that lockdown measures were being released in the UK, but music making was still prohibited. This means that in most cases, participants had been without in-person music making opportunities for three months or more.

1.1 Making music in the third age

The third age of life is both a phase of opening and closing opportunities. With family and work demands diminishing as retirement comes, more time becomes available, often coupled with a desire to continue to connect with others and contribute to society in meaningful ways. These ‘third agers’ from their mid-50s to 70s are often active and in good health, distinguished from those who may be entering a more dependent life stage with declining health and independence (in their ‘fourth age’, Laslett, 1989). Music making has been shown to have benefits to people in the third and fourth ages (Creech, Hallam, McQueen & Varvarigou, 2013; Perkins & Williamon, 2014). There is a growing body of literature exploring the relationships between music and wellbeing in the ageing population, and we know that music is a powerful part of many older adults’ lives (Cohen, Bailey, & Nilsson, 2002). Indeed, the UK amateur music making scene is an important opportunity for participation among older people. In one study of choral singing in over-60s, Hillman (2002) found that the majority were women, were active in ways other than singing, and had enjoyed some other form of singing/musical interest before joining. This is supported by research which suggests that previous experience with music predisposes people to musical participation in later life (Pitts & Robinson, 2016). On reaching retirement age, there is both an increase in frequency and consistency of participation (Cohen et al., 2006).

The most relevant previous research that forms the background to the research study can be grouped into three themes, which relate to wellbeing affordances of group music making, changes in occupancy later in life, and health and wellbeing challenges and disruption caused to social life due to COVID-19. We will briefly discuss each of these themes before addressing the details and outcomes of our own research.

1.2 Music and wellbeing

The first prominent theme considers wellbeing affordances of group music making, where affordances are understood as occurring through an interaction between music and the musician (Chemero, 2003). Defining wellbeing in a broad sense combines ideas of happiness (hedonia) and having purpose (eudaimonia) (Henderson & Knight, 2012), and our approach embraces this broad definition. Emotional, social and physical benefits of active participation in group music making have been identified in younger (Kokotsaki & Hallam, 2011) and older adults (Varvarigou et al., 2012). The most striking benefits relate to music making at an age of cognitive decline, in particular related to dementia, where music participation can demonstrably improve cognitive, social and emotional function in both therapeutic and community-based settings (Davidson et al., 2014; Tamplin et al., 2018; Van der Steen et al., 2018). Also among those without symptoms of neurological decline, a review of eleven studies found a correlation between music playing and cognitive benefits for older adults (Schneider et al., 2018). Feelings of loneliness and isolation have been shown to be reduced by participation in creative and social activities, such as structured group music making (Greaves & Farbus, 2006). Furthermore music making is linked to identity and individual profiling. In their study of musical novices, amateurs and professionals between 60-98 years, Hays & Minichiello (2005) found strong connections between music and identity, which was independent of duration and depth of experience, and offered a medium of self-expression and connection to others. A large study by Clift & Hancox (2010) of choir members (mean age 57) identified six ways in which group singing impacts on wellbeing: positive affect, focused concentration, controlled deep breathing, social support, cognitive stimulation and regular commitment. Music, in its multiple forms of participation, affords opportunities for emotional regulation and social coordination (Krueger, 2011). These benefits or wellbeing ‘affordances’ of participatory music making may be subtle but significant: it is one of those activities that people enjoy and that can give a sense of belonging and feeling valued, whilst offering an opportunity for positive emotional and aesthetic experiences (Deci & Ryan, 2001). However, as may be the case with other social activities, it is not without moderate risk; for some people performance anxiety and negative relationships within ensembles can considerably diminish or inhibit positive outcomes (Bonshor, 2016). An area of interest for this research is whether the type of music group has an impact on the experiences of older people. Most evidence-based studies on wellbeing in music groups examine particular groups such as choirs (Clift et al., 2008) or brass bands (Williamson and Bonshor, 2019), offering limited opportunity to examine the impact of the type of group, for example

whether a conductor or director is present, or whether the group is self-organised. We are interested in exploring the role of music making in different types of groups, as an amateur activity, in supporting wellbeing.

1.3 Wellbeing and age

The second theme relates to the choice of age group that is considered in this research. As far as we are aware, few studies investigating participation in community group music making have specifically focussed on people in their third age. Life changes and transitions associated with this age group may impact wellbeing. Data from the Office of National Statistics (2018, p. 41) shows a consistent pattern of reduced wellbeing in midlife. Using indicators of life satisfaction, life being worthwhile, happiness and anxiety, wellbeing starts to decline around age 35-39 to its lowest point at age 50-54, after which there is an increase to age 70-74, where wellbeing is at its greatest. These are large scale population indicators, but suggest that the years around middle age (45-65) may often be associated with lower perceived overall quality of life. Life goals in terms of marriage or partnership, raising a family, and building a working career may have been reached, and opportunities for career and personal development may be offered to the next generation. Women go through a physical transition of menopause whilst all genders may experience a reorientation of the self in light of ageing and changes in occupations, including retirement and children living independent lives, whilst ageing parents may require care and support. This reflects changing life goals. Music may contribute to dealing with these changing goals by offering opportunities for socialisation, mood regulation, reminiscence, and activities (North and Hird, 2020). Identities also shift with new stages of life, as people seek to explore their musical 'possible selves', which have been described as 'hoped for', 'reclaimed' or 'lost' musical selves (Higgins & Willingham, 2017). The role of lifelong learning is recognised as contributing to mental wellbeing in older adults (Withnall, 2008), and musical identities are formed and fostered at multiple stages of life (Lamont, 2011).

1.4 Wellbeing and social restrictions of COVID-19

Finally, this research is concerned with the wellbeing challenges raised by the social distancing requirements associated with the COVID-19 pandemic. The pandemic has caused a sudden increase in uncertainties surrounding health and safety, specifically of people at an older age and with underlying health problems, whilst the social distancing measures introduced to control the rate of spread of the virus have directly impacted livelihoods and the ability to socially interact with others. As a consequence, all in-person music making activities stopped during the lockdown period in the UK. The COVID-19 pandemic has been associated with a considerable increase in wellbeing challenges, including increases in mental distress and feelings of isolation (Fancourt, Steptoe, and Bu, 2020). Interestingly, older adults have shown relative resilience with respect to these challenges compared to younger people, despite the greater health risk for older adults (Pierce et al., 2020).

1.4 Aims of this research

Bringing these research themes together provides the aims of this research: investigate wellbeing affordances of group music participation for older adults (45+), the impact of the limitations on in-person music making due to the pandemic, and the resilience of third agers in coping with these restrictions and limitations and how affordances as well as resilience may vary depending on the specific age of participants. To address these aims, a mixed methods study comprising an online survey and focus groups was conducted in the UK during the summer of 2020 when COVID-19 social distancing restrictions prohibited group music making. Participants were mainly older adults of 45 years or more, active in community group music making, and experienced in ensemble playing. They rated the impact of group membership and of social distancing on social, physical and emotional wellbeing, and described their experiences of using remote methods to meet or rehearse. A secondary aim of the study was to investigate variation in responses between members of groups of different types, specifically large, conducted and small, self-organised groups.

2. Methods

This was a mixed methods study combining an online survey and focus groups to capture wellbeing scored on self-assessment scales and participant experiences.

2.1 Participants

From the online survey 137 responses were received. The survey targeted older adults although anyone over the age of 18 could participate. Participants were grouped into age ranges of 45 years and under (16.8%), 46-55 years, (20.4%), 56-65 years (27.7%), 66-75 years (24.8%), and over 76 years (10.2 %). The average length of time playing in ensembles ranged from 1 to 75 years (mean 29.7, S.E. = ± 1 2.5 years), with an average of 11.2 years (S.E. = ± 1.2 years) membership of a single group. The median number of groups which participants were members of was 3. Respondents were asked to describe their main or most regular group type; 65 (47.4 %) were members of conducted groups, and 72 (52.6%) were members of self-organised groups, with no designated conductor or leader.

Two online focus groups were run to explore the experiences of respondents. The survey questionnaire provided an opportunity for volunteers for follow up, and the focus group members were assigned from these volunteers according to whether their regular group type was conducted (see Table 1, Focus Group 1) or self-organised (see Table 2, Focus Group 2).

Table 1. Participants in Focus Group 1 – Conducted and larger groups

ID	Gender	Age range	Group type	Group size	Experience
Piers	M	56-65	Conducted	6-10	5 years
Carole	F	76-85	Conducted	21+	>70 years
Andrea	F	56-65	Conducted	11-20	40 years
Millie	F	46-55	Conducted	21+	19 years

Table 2. Participants in Focus Group 2 – Self-organised groups

ID	Gender	Age	Group type	Group size	Experience
Patrick	M	66-75	Self-organised	3-5	3 years
Saul	M	66-75	Self-organised	21+	55 years
Barbara	F	56-65	Self-organised	6-10	10 years
Martha	F	56-65	Self-organised	3-5	27 years

2.2 Materials

An online questionnaire was created using Google Forms. The survey asked for age (within designated ranges) followed by questions on music group membership, divided in two sections, and questions on music making and wellbeing. The first section ('You and your musical life') asked general questions that focussed on participation in groups (number of years of experience, number of groups, whether respondents attended residential courses, any other interests). The second ("Music group membership") included questions relating to a single group, designated as the most regular or significant group attended (how long they had been a member, the size of this group, how it is organised, frequency of meetings). For the remainder of the questionnaire, respondents were asked to keep this group in mind when answering, in order to be as specific as possible. Respondents were then asked to rate the impact of music group participation on wellbeing and participation dimensions, including their physical health, emotional wellbeing, social contact, frequency of engagement with music, understanding of music, and overall wellbeing. Finally, they were asked to rate the impact of social distancing on music making in their groups, and on the wellbeing and participation dimensions, and to indicate whether or not remote rehearsals had taken place, and whether they had kept in touch with fellow members. For each of the rating questions, a 7-point Likert scale was used, where 1 was extremely negative, 2 negative, 3 slightly

negative, 4 no impact, 5 slightly positive, 6 positive, and 7 was extremely positive. Finally, respondents had the opportunity to reflect on four further questions using free text (see below), and asked to indicate whether they were interested in participating in follow up focus group discussions.

Reflection questions in the survey:

- Overall, what is for you the importance of being part of a musical group(s)? What impact does it have on your quality of life?
- What effect(s) does being part of a musical group have on your social or emotional wellbeing?
- How does being part of a musical group impact your physical health?
- What have you missed about being unable to participate in music making in groups due to social distancing limitations?

The two focus groups were conducted via Zoom. Prior to the session participants were contacted individually and the purpose and format explained. All participants were provided with information sheets and gave consent to participate. The sessions lasted approximately 45 minutes, during which three topics were discussed. Based on the responses and analysis of the survey data, the reflection questions were slightly refined for the focus groups. Both groups were asked to consider the same three questions two times:

Reflection questions in the focus groups:

- Overall, what is for you the importance of being part of a musical group(s)? What impact does it have on your life?
- What is it about the group(s) that you value most?
- What have you missed about being unable to participate in music making in groups due to social distancing limitations?

2.3 Procedure

To reach musicians in the target demographic (mainly 45+) the survey was publicised through the members of Benslow Music Trust¹, and via social media. The survey was distributed in June 2020 in the UK and active for three weeks. At this time the UK was just emerging from a total lockdown of seven weeks, which began on 23rd March 2020 to combat the COVID-19 pandemic. By June some people had started to return to work and other restrictions slightly eased. However, no group music making was permitted, and the participants in this study were unable to meet fellow group members. The focus groups took place in August 2020. Whilst some restrictions in social mixing had been lifted in wider society, for example, shops were open and schools preparing to return, at this time amateur music making (which reflected the majority of respondents) was still heavily restricted. None of the participants in the focus groups had been able to meet in-person with their fellow music ensemble members. The study was approved by the Department of Music of the University of Sheffield ethics committee.

2.4 Analysis

From the survey data, frequencies and cross tabulations were used to describe the population and general findings. Likert scale data was analysed as percentages for each area of impact and presented graphically to indicate a gradient from very negative to neutral to very positive scores.

¹ Benslow Music Trust runs courses for amateur musicians and singers in the UK, for a wide range of instruments, voices and combinations (www.benslow.org).

The approach to qualitative analysis followed that of Gioia, Corley & Hamilton (2013), in order to show the connections between the first-hand experiences of participants and the researcher analysis. A data structure was created to show first-order responses (from participants) and second-order themes (researcher-derived), grouped into aggregated and top-level themes. Both authors independently coded the data, using an ‘open coding’ approach to create first-order concepts, based on the voices of the participants (Strauss & Corbin, 1998). The concepts were compared, and their relationships and meanings were interpreted to create second-order emergent themes. These were then aggregated to form the basis of conceptual themes, which were compared to the literature.

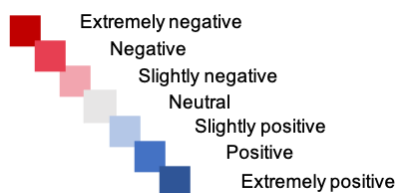
3. Results of quantitative measures

Firstly, we will present the results of the quantitative measures. Analysis of the open-ended responses will be presented in the next section. The quantitative results are split in two parts - those related to the pre-COVID situation (Section 3.1 and 3.2) and those related to the time during the pandemic (Section 3.3 and 3.4).

3.1 Impact of group music making on wellbeing

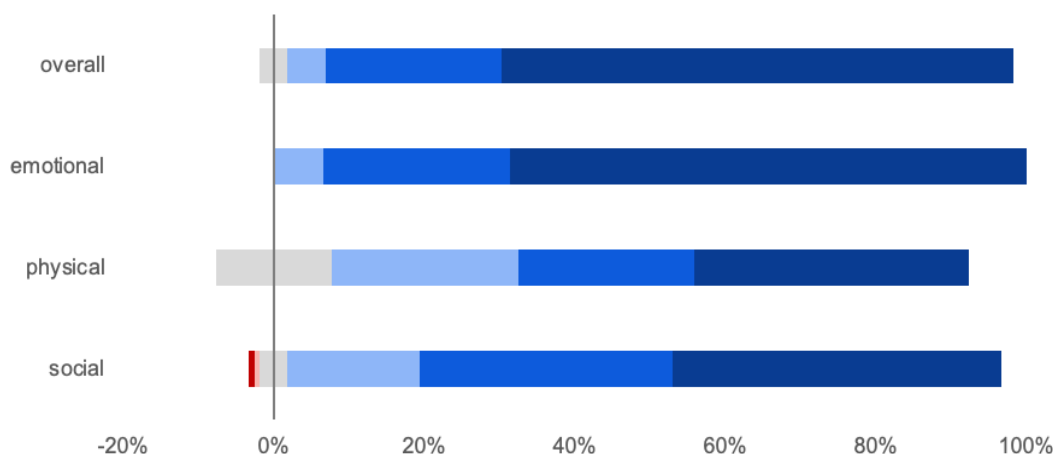
The impact of group music participation was reported as positive in all dimensions explored. Most notably, 92 % of participants rated either ‘positive’ or ‘extremely positive’ impacts of music group participation on both overall and emotional wellbeing. Fewer (60%) rated the impact as ‘positive’ or ‘extremely positive’ on physical wellbeing, with 15% reporting neither positive nor negative impacts. While a large majority (77%) rated social impacts as either ‘positive’ or ‘extremely positive’, one person reported a ‘negative’ impact on their social interaction, and 6 participants (4.5%) neither positive nor negative (see Figure 1). In each case the ratings are indicated in the scale as follows, and are shown distributed around the midpoint of zero.

Scale:



One-sample *t*-tests were conducted to statistically examine the differences of the ratings from the midpoint (4 on a scale from 1-7). All four measures had mean ratings that were significantly above this midpoint ($t(136) > 1.8, p < .001$).

Fig 1. Impact of group music participation on wellbeing, all participants (%)



3.2 Impact of group music making by age group

Each of these four dimensions – overall wellbeing, social life, physical health, and emotional or mental wellbeing – were explored by age group. All age groups reported a positive impact of music making on their overall wellbeing. (Figure 2a). However, the oldest age group (76+) included more neutral responses, and overall a lower percentage of positive responses than other age groups. However, there was a strongly positive response to impact on emotional wellbeing across all age groups (Figure 2b). All age groups reported positive or neutral benefits on physical health (Figure 2c). Those in the oldest age group (76+) presented the most mixed picture, with 57% indicating that group music making had an extremely positive impact on their physical health, whilst 29% reported neither a positive or negative impact. The impact on social life was also generally positive (Figure 2d), with little difference apparent in age groups. However, the most positive benefits were reported by those in the oldest age group (76+) and in those in midlife (46-55 and 56-65). In the 66-75 years category and under-45s, a small number of people reported negative or extremely negative impacts of group music membership on their social lives. A repeated measures ANOVA with dimension as within-participant variable and age group as covariate indicated a significant main effect of dimension ($F(3, 405) = 10.673, p < .001, \eta^2 = .073$), but no significant effect of age ($p = .972$) or significant interaction between dimension and age ($p = .104$, including Greenhouse-Geisser corrections for violations of sphericity). Posthoc pairwise comparisons using Bonferroni corrections for multiple testing indicated that each of the measures were reliably different from each other ($p < .02$), except evaluations of emotional wellbeing and overall wellbeing. Pairwise Spearman's correlations between age group and each self-report dimension confirmed that none of the dimensions had a statistically significant relationship with age group ($-.148 < r < .106, p > .084$). These results indicate that irrespective of age group music making was evaluated as having a positive impact on each of the four dimensions and mostly so on emotional and overall wellbeing, and relatively less on physical health.

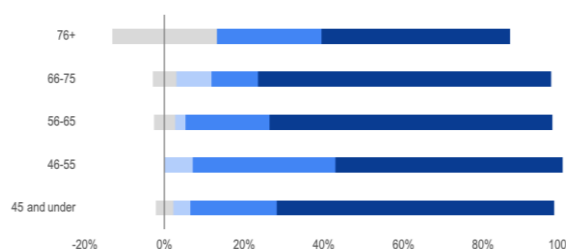


Fig 2a. Impact of music group membership on overall wellbeing by age (%)

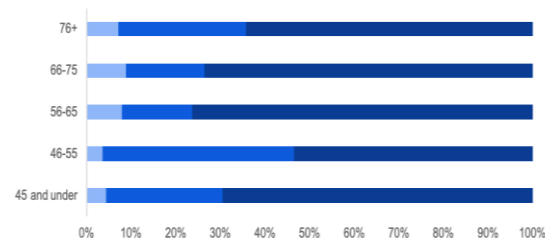


Fig 2b. Impact of music group membership on emotional wellbeing by age (%)

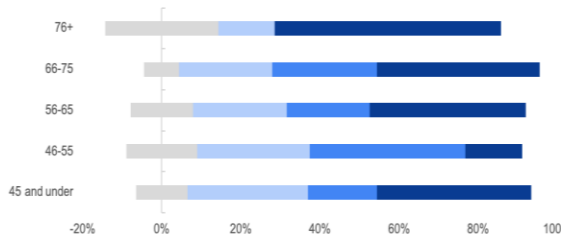


Fig 2c. Impact of music group membership on physical health by age (%)

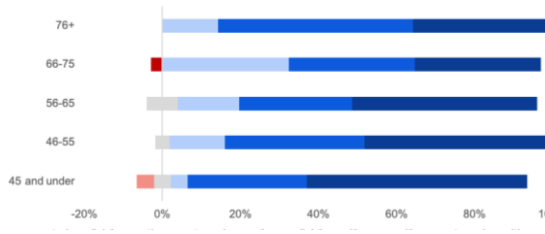
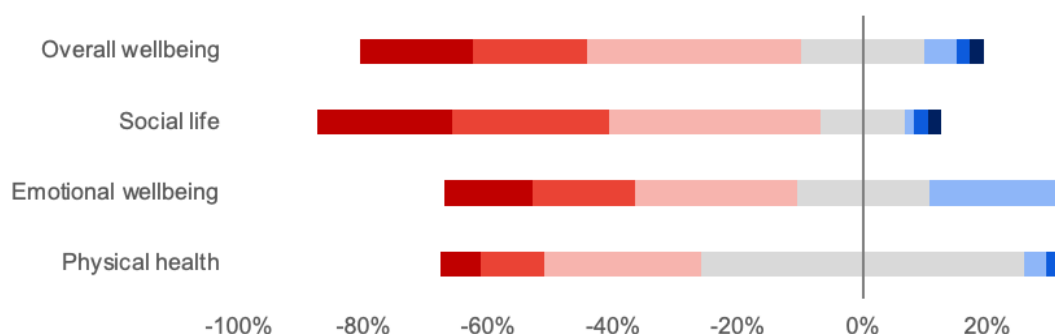


Fig 2d. Impact of music group membership on social life by age (%)

3.3 Impact on wellbeing of loss of opportunity to participate due to pandemic

The second set of quantitative measures asked participants to evaluate the impact on wellbeing of being unable to participate in person in their regular groups due to social distancing. Wellbeing was evaluated using the same four measures as the first set of questions. This produced a more nuanced picture. Overall, the loss of opportunity had negative effects on all dimensions investigated, and overall wellbeing and social life were most impacted. Nevertheless, all four elements had a mixed response, with some people experiencing no negative or even positive benefits from lack of participation (see Figure 3). One-sample *t*-tests confirmed significantly reliable differences between average ratings on each of the four dimensions and the midpoint of the scale ($t(136) < -6.892, p < .001$). In all instances, the average rating was reliably below the midpoint with means ranging from 2.57 for social wellbeing to 2.87 and 2.91 for emotional and overall wellbeing, to 3.41 for physical health.

Figure 3. Impact of inability to participate on overall wellbeing, social life, emotional wellbeing and physical health (% all participants)



3.4 Impact on loss of participation by age group

Comparing the impact of loss of participation on wellbeing across age groups, there was evidence that those in younger age groups were more adversely affected than those who were older. This was strongly the case for reports on emotional wellbeing (Figure 4b) and reflected in evaluations of overall wellbeing (see Figure 4a). The earlier observed positive benefits of lack of participation were reported by older adults. Impacts on social life were primarily reported to be negative irrespective of age group, although more strongly so for younger participants (see Figure 4c). Negative impacts on physical health were reported by participants in all groups, including the youngest group (Figure 4d.) This was balanced by an equally sized group of participants who responded neutral to this question. As for the pre-COVID measures, a repeated measures ANOVA was conducted with dimension as within-participant variable and age as covariate. This analysis confirmed a statistically significant main effect of dimension on ratings ($F(3, 405) = 15.522, p < .001, \eta^2 = .103$), a main effect of age group ($F(1, 135) = 12.260, p < .001, \eta^2 = .083$), and a significant interaction between age group and dimension ($F(3, 405) = 8.403, p < .001, \eta^2 = .059$). To investigate the interaction effect between age and dimension, pairwise Spearman's correlations were run for each dimension with age. This confirmed a significant relationship between age and wellbeing measure (in decreasing order) for emotional wellbeing, overall wellbeing and social wellbeing ($.183 < r_s < .391, p < .05$), but not for physical health ($p = .651$).

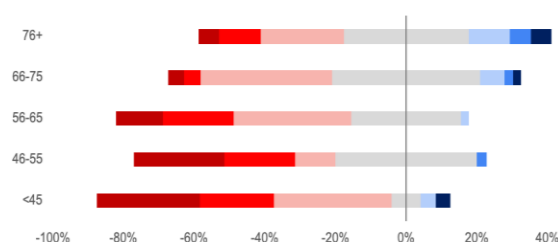


Fig 4a. Impact of loss of participation on overall wellbeing by age (%)

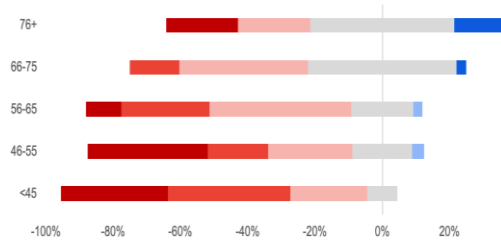


Fig 4b. Impact of loss of participation on emotional wellbeing by age (%)

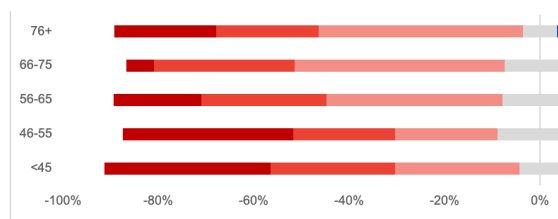


Fig 4c. Impact of loss of participation on social life by age (%)

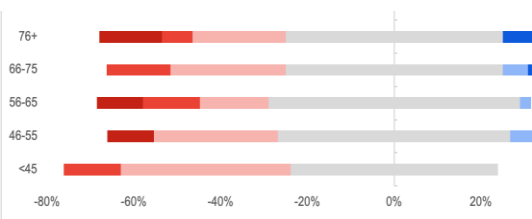


Fig 4d. Impact of loss of participation on physical health by age (%)

3.5 Impact on loss of participation by group type

Participants were asked to indicate the main or most regular group type they were a member of, and in particular whether the group had a conductor or was self-organised. Whilst group membership overall conferred benefits in all aspects considered, there were some differences when each was explored separately. In terms of overall wellbeing, those in self-organised groups seemed overall less severely impacted than those in conducted groups. (Figure. 5a). A similar trend was observed for emotional wellbeing (Figure 5b) and physical health (Figure 5d). For social wellbeing, the trend seemed to be reversed, although the difference between the groups is very subtle (Figure 5c).

A multivariate ANOVA was run to test the effect of group (self-organised or conducted) on the four wellbeing measures. This confirmed a multivariate main effect of group membership ($F(4, 132) = 2.898, p = .024, \eta^2 = .081$). Univariate tests indicated in contrast that only the difference between groups was significant for the evaluation of physical health ($F(1, 135) = 6.605, p = .011, \eta^2 = .047$).

To explore the variations in relationships with age depending on group membership, pairwise Spearman's correlations were run between age and each wellbeing measure for each of the groups separately. This analysis indicated that the relationship between age and wellbeing measures were significant for members of the self-organised ensembles for (in decreasing order) emotional wellbeing, overall wellbeing and social wellbeing ($.275 < r_s > .518, p < .02$), but not for members of the conducted groups ($r_s < .196, p > .124$).

These quantitative findings in relation to wellbeing affordances and group variations will be discussed together with the qualitative data in the general discussion and conclusion.

4. Results of qualitative data

The qualitative data (from free responses in the survey and focus group discussions) are reported in relation to perceptions of group music making on wellbeing and the impact of its loss during the COVID-19 pandemic.

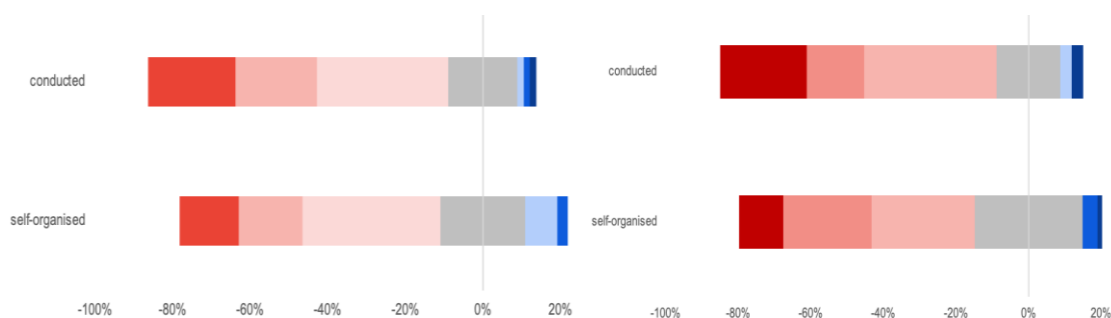


Fig 5a. Impact on overall wellbeing of being unable to meet: self-organised and conducted groups

Fig 5b. Impact on emotional wellbeing of being unable to meet: self-organised and conducted groups

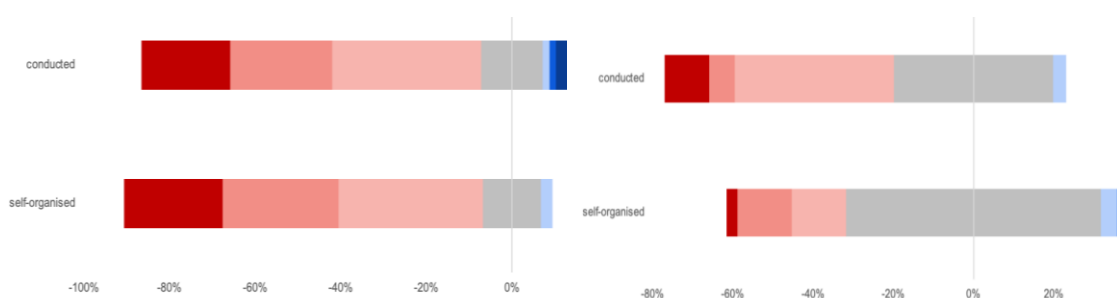


Fig 5c. Impact on social life of being unable to meet: self-organised and conducted groups

Fig 5d. Impact on physical health of being unable to meet: self-organised and conducted groups

4.1 Participant perceptions of wellbeing benefits of group membership

For older adults the benefits of membership encompassed the provision of a ready-made support network, a reason to leave the house, providing ways to keep mentally active, offering a distraction from day-to-day worries, and providing a social network. Music making also brings particular challenges of ‘getting it right’, which were welcomed by many as a reason to practice and improve. Physical health was both negatively as well as positively impacted by group membership.

First, answers given in response to the question “Overall, what is for you the importance of being part of a musical group in your quality of life?” were analysed and grouped into main themes and sub-themes. Secondly, additional themes were identified emerging for the question “What have you missed most about being unable to participate in music making in groups?”

With respect to the first question of the importance of musical group participation, five themes were identified as contributors to quality of life related to social interaction, mental and physical activity, learning, identity, and positive emotional states.

- Social interactions – a sense of common purpose, belonging, social connection and the group experience
- Mental and physical activities – providing stimulation, structure and focus
- Learning – individually and with others, developing skills, performance
- Identity – gives a sense of meaning to life, feelings of contribution, and purpose
- Positive emotions – feelings of fun and joy, appreciation of beauty, combating negative emotions

4.1.1 Social interactions

Music group membership was indicated to give the opportunity to meet people with the same interests and from which friendships and chances to meet others naturally arose, and in a way which reduced some social pressures that may be present in other contexts.

It is not always easy for older people to make new friends/social contacts from a wide range of ages and backgrounds. Music has done this for me. Our original meeting place was the local amateur orchestra which is very much a 'mixed ability' outfit in which most of us still play. (Age 76-86, survey respondent)

As well as the natural sense of community that arises from the shared interests, there was a sense in which music had an intrinsic value as a way for these connections to happen without the need to be outwardly sociable, for example in cases where individuals felt they didn't have the skills or inclination to talk freely to others.

I have always found it easier to communicate with people about or through music. I feel I come alive when playing music in a small group, especially a string quartet where you have a clear role in a small team. I feel appreciated and free to express my opinions. (Age 46-55 years, survey respondent)

It's like a brilliant party where you don't have to be sociable (Age 76-85, focus group member)

4.1.2 Mental and physical activity

As well as being an engaging physical and mental activity relating to playing an instrument or singing, group music making as an 'activity' contributed in broader ways to quality of life. Specifically, group membership was seen as providing structure to the week, routine, and motivation and focus for practice. Shared performances further offered, for some, an elevated version of these activities, serving to intensify practice and mental preparation, and provide a sense of personal satisfaction and achievement.

Regular rehearsals ensure that I practice beforehand, look up scores to arrange and read some of the background and theory about the pieces we are playing. (Age 56-65, survey respondent)

As a retired person music is a huge part of my life. The week revolves around the various musical activities. It is uplifting. (Age 66-75)

In response to groups being suspended, many people reported that they had reduced or stopped playing, because of a lack of focus or reason to practice. The absence of activity was also reported as a contributor to a decline in motor and cognitive function in some.

...loss of technique, especially in my shifts, reading slower, loss of confidence and stiffness in my fingers (Age 76-85, focus group member)

I'm missing the feeling of group music making, I'm missing the total mental release and absorption that comes from rehearsing difficult music, and I'm missing the thrill of live performance. I'm also missing the physical aspect of singing because I can't bring myself to do it on my own at home when there's no prospect of rehearsals resuming. Even listening to choral music makes me a bit too emotional (Age 46-55, survey respondent)

4.1.3 Learning

Developing new skills and encountering new musical works were valued aspects of group music making, as well as learning new ways of interacting through being part of a group. Some described the process of learning as inextricably linked to the group experience:

Being with my musical friends, working together on tackling part of a quartet in great detail, enjoying the learning process (Age 46-55 years, survey respondent)

Others described it as a chance to 'test out' aspects of personal preparation that can be tried in the context of the group, that can't be achieved so well when practising alone.

Having had lessons and practised it's a chance to see how it's worked out and to try again if it's not gone so well. (Age 66-65, survey respondent)

4.1.4 Identity

A number of respondents in the 56-65 age group described how music played a part in transitioning to retirement, providing a new sense of purpose and belonging. As one described it:

I think it makes me feel valued, especially since retirement when I no longer have the label (age 56-65, survey respondent).

Having the time and means to organise music in the home was described by one respondent as 'the core' of their retirement life, and how they can use this opportunity to 'maximise the variety of experiences with the forces available' (age 56-65, survey respondent).

For others, a musical persona may be more fundamental, particularly for those who are participating regularly. One older respondent, a member of choirs and cellist in a string quartet, described it as 'Part of who I am', (Age 76-85, survey respondent). Another lifelong choir member described it as 'an essential part of my life, it's where my identity comes from' (Age 46-55, survey respondent), and another, involved in regular choirs and chamber consorts, as 'I have made music with others for a large part of my life. It is an essential part of what I do' (age 66-75, survey respondent).

I am a musician. Music is indispensable for me. (Age 56-65, survey respondent)

4.1.5 Positive emotions

Many expressed the feelings of the joy of making music together as having a profound impact on their quality of life, during and after the experience.

Brings a real sense of joy and purpose, something that I / we are doing for the sake of doing it. Very positive and uplifting...I feel relaxed and happy after playing'. (Age 56-65, survey respondent)

The joy of making music together in the same space, a tangible thing, making the air vibrate in the room. (Age 66-75, survey respondent)

It's achieving a dream. Hearing all the harmonies blend together is so uplifting and knowing you were a little part of it improves my quality of life (Age 56-65, survey respondent)

A further theme emerged around how music making in groups helped people to tackle negative emotions, such as combating depression, by providing an outlet to express emotions nonverbally.

Playing small-group music was one of the main things that kept me going during a period of depression. The depression had one positive effect of making me experience music much more

directly and emotionally, as if it was sharing my feelings, rather than just as an academic or a pleasant thing to do. (Age 66-75, survey respondent)

4.2 Experiences of loss of opportunity of group membership

The main themes arising from the analysis of the qualitative data are summarised in Figure 6. There were many references to the impact of non-participation on overall quality of life, some of which conveyed emotional distress. One participant described it as ‘like a bereavement’, another as ‘my heart is broken’. Many expressed a sense of loss expressing sadness of wasted time; ‘I feel as though my last musically productive years are being spent in a world without string quartets’. This loss was clearly felt strongly. As one participant expressed it, ‘a hugely important part of my life is missing’ (age 66-75), and another, ‘without music I am emotionally fragile’ (age 56-65). One respondent (age 46-55) highlighted the way that lack of structured activity can impact family life, with implications for the mental health and wellbeing of all family members.

....the loss of my daughter’s group music making has left her without her major sustaining activities. She has lost all her most important social times, she has lost her sense of independence from going to musical activities and residential without us, she is desperately bored from the loss of her most significant engaging activities which are all group music focused. Her mental health and behaviour have been impacted significantly with major impact on family relationships and consequently our mental health and wellbeing as parents. (Age 46-55, survey respondent)

Miss having an audience, the live setting the feeling of connecting with peers and audience, can’t recreate that (Age 56-65, focus group)

As well as these broad reflections on the impact on life quality, there were two main themes that emerged from the analysis on the characteristics of music group participation. In response to the question, ‘What have you missed most about being unable to participate in music making in groups?’, the two additional themes that emerged were related to ‘immersion’ and to ‘togetherness’. These were aspects that were keenly missed, but had not been prominent in the responses to the first set of questions about wellbeing affordances of group music making in general. Social distancing restrictions threw the underlying motivations for group membership into sharp relief, allowing participants to reflect more deeply on their motivations and benefits.

4.2.1 Immersion

Musical participation was associated with being together in space and time, with a sense of total immersion when making music with others. This was described by one respondent as the ‘face to face contact and creating those magical moments when the music just flows’ (Age 56-65, survey respondent), and by another as ‘the contact in the same space with other humans and the interactions that promotes.’ (Age 66-75, survey respondent). In these descriptions there is an emphasis on the face-to-face nature of the experience, and what one improvising musician described as the ‘liveness’ of it, for which ‘there is no substitute, especially for improvisation.’ (Age 56-65, survey respondent). We have called this theme ‘immersion’ to reflect the in the moment, immersive and multimodal experience. Clear parallels exist as well with descriptions of ‘flow’, which are commonly associated with music making, including in groups (Gaggioli et al., 2017).

The excitement of creating beautiful music together, sparking off each other, commune in great music in a more visceral way than just listening and talking. (Age 56-65, survey respondent)

Playing jazz is an almost Zen-like experience where a small group of individuals responding to each other can produce something original and interconnected. It is a totally immersive experience (Age 76-85, survey respondent)

The beauty, thrill and sometimes awe of being surrounded by sound and being immersed in and part of it. (Age 46-55, survey respondent)

4.2.2 Togetherness

Music facilitated connections on many levels, fostering a sense of becoming one, and synchronising with others. This sense of togetherness was described in relation to fellow members, with audiences and with a wider community. The loss of this connection was experienced in many ways, including the loss of informal socialisation, connecting with audiences through performances, and on a deeply personal level as the ‘sheer magic’ of playing music with others, and experiencing the connections formed:

Talking to people. Laughing. Support. Being close to others. Feeling their energy (Age 46-55, survey respondent).

The sense of joy and wellbeing gained from being a contributing part of a satisfying musical collaboration (Age 46-55, survey respondent)

Different groups fostered different types of togetherness. One respondent was a member of both an orchestra and a choir, and reflected on the different types of connections they were forming with each:

I miss the orchestra a lot because each month I join with colleagues who understand and revel in free improvisation, which doesn't have much standing in most of the rest of the world. I miss the choir because I'm fairly new to this particular choir and I'm gradually getting to know people and to feel as if I might belong (Age 66-75, survey respondent).

In summary, these strong themes fall into a category of ‘valuable music experiences’ (see Figure 6), and highlight some of the intrinsic qualities of music group membership, including precise levels of synchronisation and ‘togetherness’, which may not be easily replicated through online means, or by participating in other types of group activities.

4.3 Experiences of remote rehearsals

Approximately half of the participants (49.3%) reported that their groups had run online rehearsals. These were on the whole regarded positively, and as a welcome chance to keep in touch. In fact, some remarked on their value over and above face to face rehearsals in extending the number of people they could connect with.

Because it has been harder to play together the social aspect has actually been better in lockdown, and through Zoom meetings we have got to know each other better within each of the groups I belong to. (Age 56-65)

I miss the real time collaboration. On the other hand, the remote collaborations have brought to light several new ideas and pushed us to explore new territory. (Age 56-65)

Others found the musical experience frustrating and disappointing, and encountered barriers arising from lack of access to technology which prevented them participating fully in rehearsals or recording individual parts for shared performances. This added to feelings of isolation, for example where individuals felt excluded due to their lack of equipment and knowledge:

I could record my part, but I had no idea how to submit it. I felt so stupid. Anyway, they did it without me. (Age 76-85, focus group member)

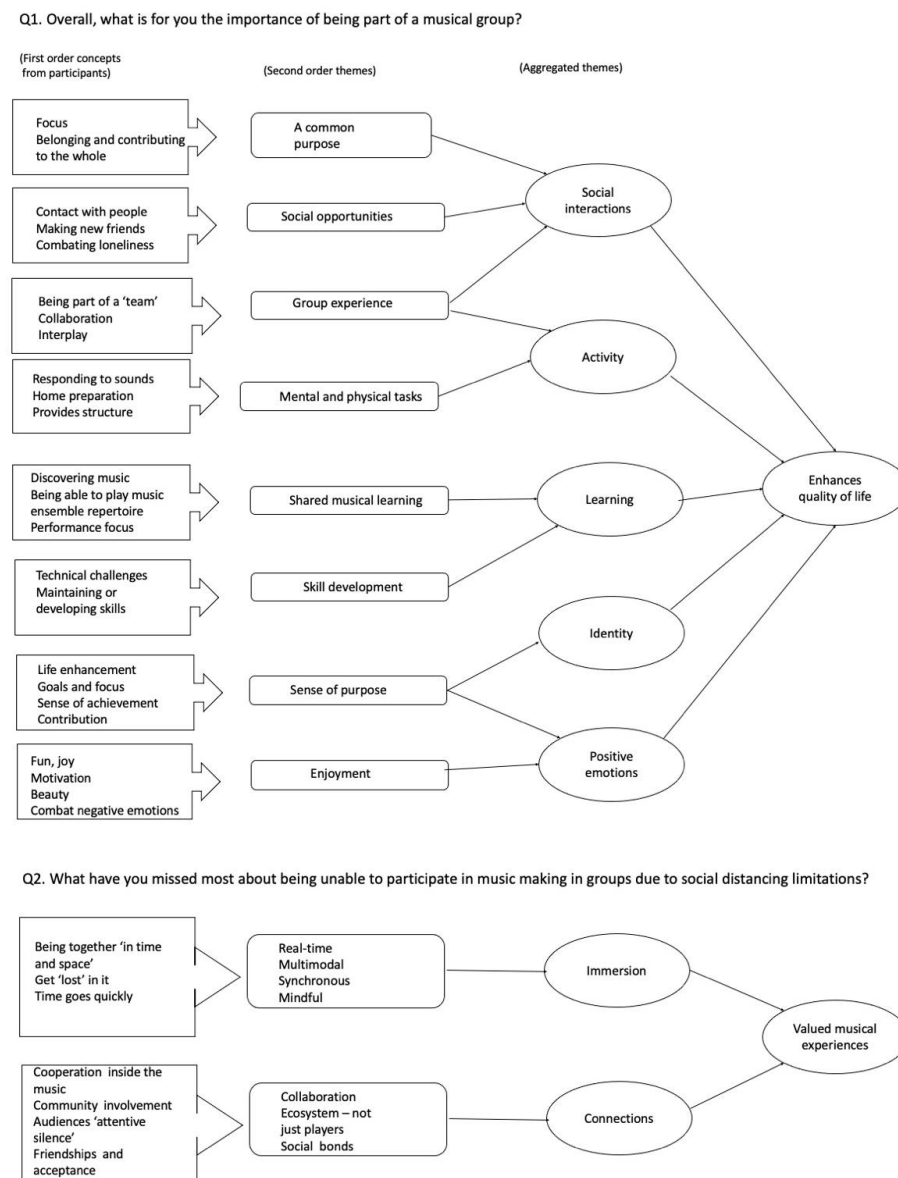
4.4 Group variations between conducted and self-organised groups

The two focus groups comprised people who were regularly part of large groups (FG 1), and smaller, self-organised (FG 2). Both shared a sense of belonging, and expressed a strong sense of loss due to lack

of chances to meet. Whilst there was a degree of overlap, in that most participants had experience of both types of group membership, there was a different sense between members of larger and smaller groups in approach to performance and audiences. Members of the larger groups talked more about missing the chance to prepare for a performance, whilst the focus for self-organised group members was more on the music making itself. As one orchestra member described it,

I miss having an audience, the live setting, the feeling of connecting with peers and the audience, you can't recreate that. (Orchestra member).

Fig. 6. Data structure showing the main themes from the qualitative data analysis



By contrast, a member of FG 2 observed that:

I can see what there is in performing for others, but for me it is enough to make the music, it doesn't matter if there's an audience, it's not terribly sociable, we do socialise

but it's more like a religious experience, we are communing together with the music.
(Chamber group member)

A second difference emerged in the degree of demand placed on the individual. For orchestra or large choir members (FG 1), the chance to 'blend in' and not have too much responsibility was seen as a positive; for example, there were comments such as, 'you can sit at the back of the section', and 'with a big orchestra can miss one or two people.' By contrast, being a member of a small group brings more focus on the individual, requiring members to 'be all things, leader and follower, take personal responsibility, be involved, and read each other' (FG 2).

5. Discussion and conclusion

The qualitative responses in this study offer an enriching perspective on what the quantitative data indicates: participation in group music making offers considerable emotional and social affordances, which contribute to overall wellbeing and to a degree to physical health. Indeed, the loss of in-person participation opportunities is experienced as a real loss that negatively impacts social wellbeing but also emotional and overall wellbeing, and to a degree physical health. The qualitative responses offer insight into what these emotional and social wellbeing factors consist of: they contribute to a sense of quality of life through enabling learning and development, by supporting identity, by offering a goal and structured as well as structuring activity, and, importantly, by offering a regular context for social interactions with people with similar interests and motivations, through which friendships can develop, and a sense of purpose is shared. Social distancing has radically interfered with the possibility of live music making, and many expressed to experience this interruption as a strong sense of loss. Whilst it may be difficult to disentangle the negative emotions associated with the lockdown period and the various factors that contribute to this, the data indicate the many pathways to wellbeing enhancement that group music making may offer, and how its interruption cuts off these routes of access. The qualitative data illustrate the strong reliance on regular music making of participants as an activity that offers structure, enjoyment, social connection, enrichment, and a way to achieve important goals. These findings bring together many of the observations also found in previous research with respect to musical participation (Creech et al., 2013; Perkins & Williamon, 2014), and highlight the hedonic as well as eudaimonic rewards of group music making (Henderson & Knight, 2012).

The contribution of this research is then specifically related to its focus on people in their midlife as well as older adults, and observations related to changes of experiences with age. First of all, the whole group can be seen as (mostly) representing third agers, and the results exemplify some of the challenges that this age group encounters as well as ways in which group music making can be used to cope with, counter, or transform these challenges. For the participants in this research, the context of group music was widely regarded as being an easy context to socialise and bond. This supports previous findings that music has a particular role for those who are transitioning from a focus on work, raising a family, or caring for others, to a more individual focus and finding pleasure in local community activities (Saarikallio, 2010). It provides a way to find like-minded individuals, to learn and develop, and to have fun, be inspired, be creative and fully alive.

Evidence for a development across the age groups examined in this study came specifically from the analysis of the responses to the loss of participation opportunities. For emotional, social and overall wellbeing, it was found that with increasing age responses became less negative, indicating that participants were more able to deal with the disruption and were less negatively impacted by it. This resilience with older age is a notable finding, and parallels other research that suggests age is a negative predictor of mental distress due to Covid-19 (Fancourt et al., 2020) and a positive indicator of being able to use various activities, including music listening to support wellbeing during lockdown (Granot et al., 2021). We believe that some of this resilience with older age may be related to the transition that adults go through in their third age, and the refocus of life-concerns.

At a detailed level, there were a number of noteworthy additional findings. For example, for some of the oldest participants, music making was seen as ‘extremely positive’ for physical health. Interestingly, a positive impact on physical health was indicated by participants across all age groups, although not by everyone. Furthermore, online continuation of music groups were seen as beneficial, specifically at a social level, which may relate to the finding that some participants evaluated the lack of in-person participation as contributing in positive ways to wellbeing. Differences in evaluations of impact of loss of participation depending on group membership: members of conducted groups indicated on average to be more negatively impacted than members of self-organised groups, although this difference was only statistically significant for evaluations of impact on physical health. We interpret these observed variations as related to the specific participants who may be part of self-organised or conducted groups, where conducted groups are often organised on a more structured basis, whilst on the other hand people in self-organised groups may be relatively more self-sufficient. We did not examine variation in qualitative responses with age or group membership, as a larger scale study is needed for that. It would however be of interest to develop further the insights into what different types of groups afford participants, and how this interacts with age.

To conclude, this study corroborated the many positive rewards that in-person music making affords to participants, including at a social, emotional, and physical level. The disruption of music making opportunities due to social distancing measures was accordingly experienced as overwhelmingly negative, and impacting quality of life. Interestingly, greater resilience to this disruption was observed for older age groups, who belong to the higher risk group for this pandemic, which may also play a role in their acceptance of the situation. Not being able to participate in in-person music making also highlighted further some of the essential experiences that were missed, which can be described as immersive, in the moment, multimodal, and synchronous in time with others. In other words, aspects of the specific musical experience are intrinsic to what it delivers.

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