

# SING AND BREATHE ACADEMY PILOT PROJECT FINAL REPORT

**SINGING, STORIES  
AND CRAFTS FOR  
FAMILIES LIVING  
WITH CHILDHOOD  
ASTHMA**

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London, Wiltshire and online



# SING AND BREATHE ACADEMY PILOT PROJECT FINAL REPORT

## WHAT IS SINGING FOR LUNG HEALTH (SFLH)?

Singing for lung health was pioneered by Phoebe Cave and is a “group based arts in health intervention with the goal of improving the quality of life of people with a chronic lung condition, as well as providing tools for the self-management of breathlessness” (see <https://www.themusicalbreath.com/singing-for-lung-health/>)

## SOUNDS BETTER CIC AND SINGING FOR LUNG HEALTH

Sounds Better CIC (formerly Music for Wellbeing) have been delivering singing for lung health in the Salisbury and South Wiltshire area since 2017 after receiving training from the British Lung Foundation and Phoebe Cave. We have a regular weekly group, the Salisbury Breathless Singers and we have responded to the needs of people with lung conditions by offering simultaneous online and ‘face to face’ sessions, as well as 6-week introductory courses. We also work with people who are experiencing breathlessness post-covid, or who are living with long covid.



## SFLH SNAPSHOT

2017

Singing for Lung Health established in Salisbury & South Wiltshire

11

Sing and Breathe introductory courses delivered since 2018

200

People supported to manage breathlessness, both online and face to face

# SING AND BREATHE ACADEMY PILOT PROJECT FINAL REPORT

## WHAT IS SING AND BREATHE ACADEMY?

Sing and Breathe Academy is a pilot project, working with two Salisbury-based schools to support children and families living with childhood asthma. We used singing, stories and crafts to support asthma awareness and education with children, families and schools, as well as enabling children to share their experiences of healthcare through creative means. Sing and Breathe Academy was made possible through funding from Healthwatch Wiltshire, Wiltshire Music Connect and The Ragdoll Foundation. We are also indebted to Heather Henry and BreathChamps, who provided initial training and ideas for the programme.

## OUR PARTNERS

We are indebted to Woodlands Primary School and Wilton CE Primary School for being part of the project, and to Rose Maylin, the Parish Nurse in Salisbury and Grace Church for their continued support. Nurse Rose provided asthma information and support to the families, as well as sharing her expertise with the teaching staff through CPD sessions. We are extremely grateful to be able to work with Rose. More information about parish nursing can be found at <https://parishnursing.org.uk>



## PROJECT SNAPSHOT

16

16 sessions delivered across two schools

17

17 children participating in the project

8

8 parents/carers reached directly

# AIMS OF SING AND BREATHE ACADEMY

There were several overarching aims for Sing and Breathe Academy, recognising the multiple funding streams that supported the project:

- To work with 12-20 children and families across 2 schools (Woodlands and Wilton Primaries)
- To explore existing repertoire and create new music resources to support better breathing in children with asthma
- Children will increase their musical and social support strategies in managing their asthma
- Children and families will increase their knowledge of asthma and how to manage their condition effectively
- To gather feedback from children and families about health and social care services in the geographical area, particularly relating to asthma



# SING AND BREATHE ACADEMY PILOT PROJECT FINAL REPORT

## WHAT DID WE DO IN SING AND BREATHE ACADEMY?

### Overview

We worked across two schools in the Salisbury area, inviting children and their families to participate in the pilot.

We wanted to work with the whole family to increase impact, but recognise the challenges if the project takes place during the school day (e.g. parents/carers may be at work or have other caring duties). We worked with up to 8 parents/carers, but 4 on a regular basis.

We applied the learning from the first pilot school site, and decided to work with all children with asthma known to the school, regardless of whether the parents/carers could attend the project or not. The option of children not to attend the project was offered to parents, but there were no objections to participation.



## PROJECT VALUES

### EMBEDDED

Both the musician and nurse live and work in the area and can offer ongoing support and signposting where appropriate

### ADAPTIV

Project activities and approaches changed to suit needs of participants

### INVITATIONAL

Participants offered places, with no expectation or requirement to attend

# SING AND BREATHE ACADEMY PILOT PROJECT FINAL REPORT

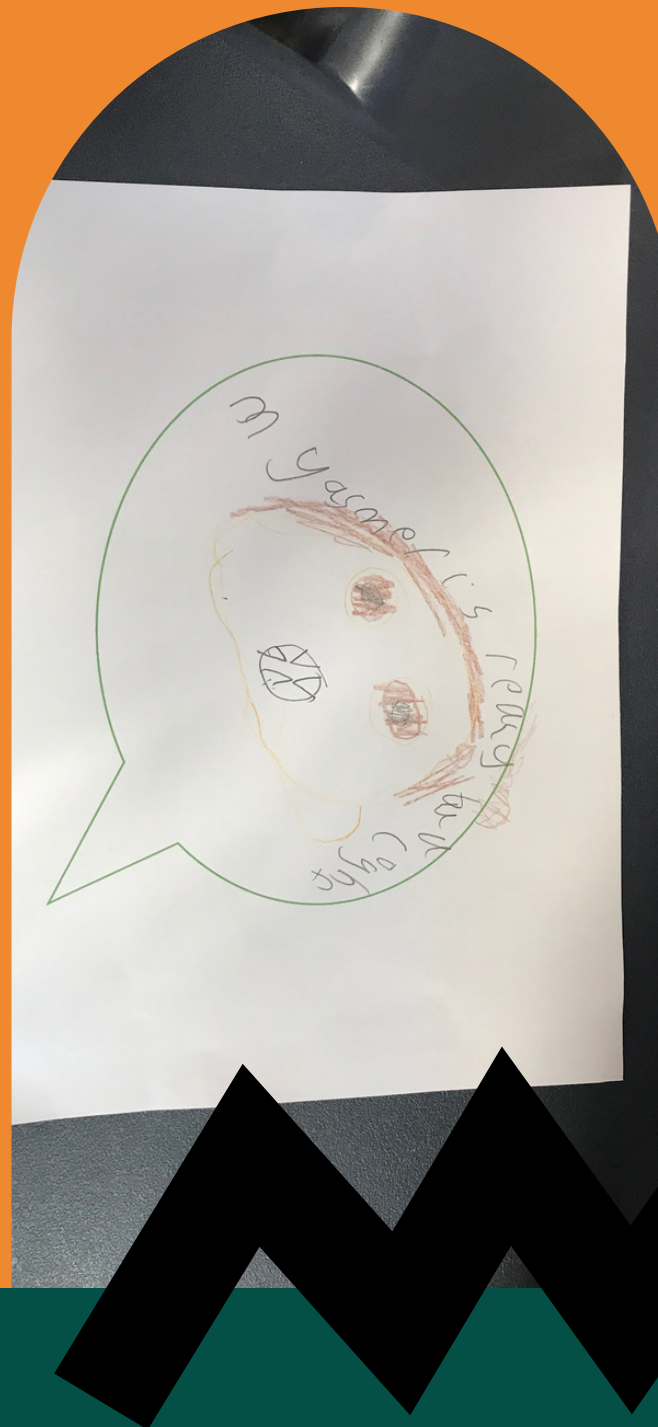
## WHAT DID WE DO IN SING AND BREATHE ACADEMY?

### Project activities

Sessions followed a broadly similar structure to the adult singing for lung health format, but adapted to the specific individuals in the groups and utilised age-appropriate repertoire and activities.

Activities included relaxation, breathing exercises, rhythm and pitch games, singing songs, lyric creation and general vocalisation. We used craft and stories to underpin learning objectives, and aspects of asthma education; for example, balloon modelling of the lungs, a craft model of a typical airway and an airway experiencing an asthma flare-up; we also created our own comic strips to document our experience of a health care appointment.

We also used stories to illustrate aspects of asthma education, such as inhaler technique and recognising an asthma attack (see resources section for signposting to these).



## PROJECT ACTIVITIES

### SINGING

This incorporated existing repertoire, co-created repertoire and songs written for the project

### STORIES

Stories were already written and either published in books or adapted from existing fairy tales

### CRAFTS

To reinforce elements of asthma education e.g. models of the lungs & airways

# SING AND BREATHE ACADEMY PILOT PROJECT FINAL REPORT

## WHAT DID WE DO IN SING AND BREATHE ACADEMY?

We ran 8 sessions for each school site (16 in total), plus 2 short CPD sessions for teaching and teaching assistant staff at one school.

We also produced a resource booklet for participants and schools, which includes asthma information, links to videos of some of the songs, relaxations and activities used over the course of the project, plus signposting to further resources.



## HEADLINE DEMOGRAPHICS

# 41%

Of participating children in support of Pupil Premium

29%

Of participating children  
on SEN/D register

59%

Of participating children  
were female

# 41%

Of participating children  
were male

# FEEDBACK AND IMPACT OF SING AND BREATHE ACADEMY

One of the challenges of the project was to gain meaningful feedback from participants about a) the project and b) local asthma services. This was due to a number of factors, including age of cohort, length of sessions, and limited reach in terms of numbers of parents/carers face to face. We developed an online feedback form for parents to complete during our second pilot site, which did have some, albeit limited, engagement.

We encouraged people to respond to questions in a way that suited them, from pictures and writing to just telling us directly.



## CHILDREN'S FEEDBACK ON THE PROJECT

Many children participating suggested they particularly enjoyed the singing aspect of the project, with some also responding very positively to the craft activities. The use of pre-written stories was less successful in this format; some suggested this was 'not as fun' (which may reflect the subject matter as opposed to the format) but it was challenging to interpret the exact meaning, given the age of the children. However, there was more engagement in storytelling when children created their own comic strips and told their own stories - possibly because they were engaged in an individual activity. The storytelling aspect does have strong potential, particularly if linked to songwriting, but more consideration is needed in terms of how it is presented in the sessions. Finally, the children whose parent/carers attended the project really valued the time with them, and made a point of saying this in their feedback.

## PARENT/CARER FEEDBACK ON THE PROJECT

Many of the parents attending regularly used words such as 'fun' and 'informative' to describe the project, and they enjoyed the varied activities throughout the sessions. They valued the opportunity to discuss health-related issues with the Parish Nurse, and appreciated the time spent individually to do this.

Additionally, many noted how their children had improved their breathing and inhaler techniques, as well as the project having an impact on their own breathing (as many of the parents also lived with asthma).



## IMPACT OF SING AND BREATHE ACADEMY

We can only report on the immediate impact of the project, using what was observed throughout the project and the words and actions of the participants themselves.

We explored different methods of gathering feedback, with the most effective being discussions with both parents and children, followed by visual methods (drawing/comic strips), then questionnaires.

There was an improvement in breathing and inhaler technique, as well as increased knowledge of asthma for the children, and how to respond if they have an asthma attack.

The impact can be summarised by one particular quote from a child, which was volunteered completely unprompted: "We have learned new songs, made new friends, [referring to his Lego model of a dragon, who had asthma], learned how to do his 'asthma thing' [another child added "inhaler"], learned what makes him cough, and had a good time"

# EXPERIENCES OF LOCAL HEALTH CARE SERVICES

Feedback collection varied in effectiveness and depth regarding healthcare services. At the first pilot site, parent feedback was very useful, but we found it challenging to gain insightful feedback from the children participating. In the second pilot site, the situation was reversed.

However, we ensured we were as flexible as possible within the timeframe of the project to try and meet the needs of the participants, to navigate the resources available to us as well as the varying levels of enthusiasm of participants to share their experiences directly with

us.



## CHILDREN'S EXPERIENCES OF LOCAL HEALTH CARE SERVICES

We applied our learning from the first cohort and made more time in sessions to obtain feedback from children regarding their experience of health care services. We encouraged them to create a comic strip specifically recalling a time they remembered using services. These ranged from hospital visits and routine opticians appointments through to receiving the covid vaccine.

Predominantly, children had a positive experience of healthcare professionals, saying they were 'very nice', 'caring' and 'friendly', but occasionally a small minority of health professionals could be 'grumpy' (but it must be stressed this was not often). There was a theme emerging that unusual/emergency reasons to attend a health care appointment was actually quite scary for the children (particularly if an ambulance is involved), and they did not enjoy waiting for long periods of time at appointments. The children enjoyed receiving things such as stickers for attending an appointment, and told us the experience is always made better if there are activities to do such as colouring or toys (but recognising the challenges of this through Covid).

## EXPERIENCES OF PARENT/CARERS NAVIGATING ASTHMA SERVICES FOR THEIR CHILDREN

Parent/carer feedback was largely positive towards the care and treatment that their children have received locally, with many parents saying health services act quickly when there is more urgency with their child's condition. But there were also instances that were less satisfactory for families. Some parents relayed that it took a long time to get a diagnosis, or it was challenging due to the age of the child. Many parents/carers also highlighted they do not think their child is reviewed as often as they should be.

It is interesting to note that two families with the same GP practice had quite differing experiences of asthma care: one is phoned on a monthly basis, and perceives their treatment and care to be excellent, whilst another family revealed that they do not have much ongoing support (for either the children or adults) for living with and managing breathlessness and asthma.



## TO WHAT EXTENT WERE THE AIMS OF THE PROJECT MET?

In terms of the aims, the project did achieve them either fully or partially. It is recognised that although this pilot was a good start to singing and childhood asthma, more questions have arisen and it is clear that even with the deep and prolonged experience in singing for lung health that Sounds Better have, to work in this way with children, families and schools needs more piloting!

However, it is clear that the educational messages were taken on board by parents/carers and children, the children enjoyed the singing aspect and will hopefully continue with singing to support their breathing, through use of the resource pack.

The project collected children's & families' experiences of healthcare relatively successfully, but it is evident that more work needs to be done to include better representation from all ages.

Additionally, Sounds Better CIC have deepened our relationship with the Parish Nurse (who has communicated our findings to other nursing colleagues locally). Through the project, the Parish Nurse has been able to advocate for families and encourage having an Asthma Action Plan readily available as well as encouraging families to attend regular asthma check-ups.

# RESOURCES AND LEGACY OF SING AND BREATHE ACADEMY

We created a legacy resource of a handbook with a selection of the music, activities and relaxation exercises for the participants (including schools). This handbook also included links to further resources such as books/stories, websites and asthma-specific education and support that would enable people to explore the subject at their own leisure. Email [hello@soundsbettercic.org](mailto:hello@soundsbettercic.org) for more details of this resource.

The short CPD sessions helped to highlight the need for children to have an Asthma Action Plan in place, and encourage schools to ensure their asthma policy and knowledge is up to date.

We would also like to acknowledge the generous support of Asthma & Lung UK in providing us with resources to pass onto parents and families (information leaflets, wallcharts and stickers).



## WHAT HAPPENS NEXT?

Project development to expand the core activities and training of Sing and Breathe Academy. It is recommended that children should be divided into Key Stages when taking part in the project for the majority of learning, but could come together for singing once repertoire was secure.

Sing and Breathe Academy could be expanded to be a whole-school project to support asthma awareness amongst peers, and could work in a cross-curricular format to link to other subjects such as music, drama, science, and PSHE. There is also scope for the project to link with the Asthma Friendly Schools Initiative and link in with asthma clinics in other healthcare settings.

Sounds Better CIC will be developing the programme and CPD offer over the coming years to support schools, health and care professionals, and families and children living with or supporting someone with childhood asthma.

# SING AND BREATHE ACADEMY PILOT PROJECT FINAL REPORT

**A MASSIVE THANK  
YOU TO OUR  
FUNDERS AND  
SUPPORTERS**

*This could not have happened without you*

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