

Essai

**Support: birthing the voice**

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## Support: birthing the voice

This *essai* considers the potential for rethinking antenatal teaching methods and the labouring voice as training material for artistic modes of vocal performance. It refers specifically to my development of *Support* (2012-2017), a scored performance for male voices responding to the vocalisations of women in labour as recalled by their birthing partners, and my adaptation of antenatal techniques for rehearsing the piece. Both the rehearsal process and the performance itself were heavily informed by my experience of the voice work developed by active birthing teacher Jessica James in preparing women and their partners for childbirth. The following discussion draws simultaneously on these two performative and pedagogical practices, emphasising the similarities between them with the intention of opening up antenatal techniques and the labouring voice to further reinterpretation. Combining reflections on the serial iterations of *Support* with insights into the significance of the labouring voice offered by James during an unstructured interview given to me in October 2018, I show how the voice functioned in both instances as social ‘scaffolding’, connecting the vocalist with bodily processes and experiences beyond their immediate comprehension. Taking this point of intersection as a provocation to explore different models of voice training, I ask: to what extent might training methods associated with the labouring voice be a vehicle for enabling performers to imagine and transcend embodied forms of knowledge?

**Fig. 1.** Leah Lovett, *Support*, performance for SMASH LAB, London, 2014. Performers: Brian Ferguson, Alyn Gwundaf, Toby Peach, Joe Presley, Nick Ryan, Tassos Stevens.

James’s group classes emphasise deep, belly breathing and low, resonant, sustained vocalisations as a practical method of conditioning the body for labour by opening up the pelvic area and also as a non-verbal mode of expression that can help the labouring woman convey and manage the pain of childbirth. Though not directly informed by actor training techniques, the exercises James has developed over nearly thirty years working with pregnant women and couples share certain commonalities with current pedagogies that emphasise a body-centred approach to vocal conditioning. I am thinking particularly of Kristin Linklater’s (1976, pp. 78-80) ‘pool of vibrations’, as a practically applied metaphor to locate the pelvic area as the resonant source of vocalisation, and also the Integrative Performance Practice and Theory of Experience Bryon (2014), which synthesises disparate performance and vocal training techniques. Another reference point here is voice artist Anna-Helena McLean, who has extended the body-centred approach developed by theatre company Gardzienice to explore the convergences between actor training and fertility for her recent performance *Inanna* (2019).

This area of productive overlap between antenatal and artistic voice training techniques has also been explored in the recent literature by self-identified actor mothers Kris Danford and Jenny Mercein (2018), who describe how the voice work they had done in their theatre training served them especially well in childbirth. Highlighting the similarities between hypnobirthing techniques aligned to James's methods and voice training for actors, particularly Linklater's work, they point to the use of visualisation and belly breathing as common to both, though they note:

in Linklater work, the primary visualisation is an upward motion: imaging the well of breath and vibration originating in the belly and lower pelvis moving up through an open channel and releasing through the mouth. In hypnobirthing, the image is in reverse: the relaxation also begins in the lower belly and pelvis, but the visualisation encourages you to see the breath moving in a downward motion, guiding the baby out the birth canal. (Danford and Mercein 2018, p. 40)

My discussion extends this comparison through exploring the implications of transmuting the labouring voice into the rehearsal room in pursuit of new modes of performance. What can exercises used to prepare the body for childbirth precisely by putting the voice first reveal about the potential for vocal training as a means for relating to other bodies (including our own)?

An early iteration of *Support* emerged in the weeks following my first labour in 2012, with an invitation to actors who had recently become fathers to re-enact the unvoiced breaths, utterances and vocalisations they remembered their partners making in childbirth, beginning with my own husband. In labour, there had been moments when it seemed to me that my voice no longer belonged to me, that I was powerless to control it (notwithstanding the training I had received). This sensation of relinquishing control of one's own labouring voice finds succinct expression in the interviews with actor mothers conducted by Danford and Mercein:

Suddenly, the sounds that I was making started to change into a growl... In the next contraction, I consciously tried to adjust to a smoother, 'calmer' vocalisation, and it felt so wrong. I felt like I was being crushed again. So I let myself roar. (Danford and Mercein 2018, p. 44)

An initial impulse for *Support* was a desire to hear my estranged voice echoed back to me by someone else who had been there, in part so that I might connect with my labour from another, different position.

Setting up my tripod and digital video camera in an otherwise empty studio, I left the men alone for as long as they needed to find their partner's labouring voice. Playing the resulting documentation back, I was struck by how far removed their performances were from the depictions

of childbirth as a farcical rush of shrieks, pants and screams more often encountered on screen, in film and television. At no point did any of the actors engage the falsetto register of the pantomime dame. The sounds they produced were variously deep, powerful, resonant, guttural, breathy, agonised, broken, full, forceful—but never shrill. These were not men attempting to mimic a woman’s voice; theirs were unambiguously male voices, in labour.

**Fig. 2.** Leah Lovett, *Hardcore*, digital video still, 2013.

Several of the actors who participated in this stage of the project reported feeling overwhelmed with emotion in the moment of vocalisation, with one of them describing the exercise as a ‘release’ from the traumatic event of their baby’s birth, as a trauma experienced differently by both parents. German Jewish voice teacher Alfred Wolfsohn (1896-1962) famously rehearsed the vocalisations he had heard wounded and dying soldiers make during World War One as a way of releasing himself from the auditory hallucinations that were a symptom of his shell shock (see George 2013, Newham 1993). As well as having a therapeutic effect, this approach led him to develop an extended-range singing technique with a lasting impact on the embodied voice training methods in theatre, particularly through the work of Roy Hart (1926-1975). The unexpected and affective vocalisations of the male performers in *Hardcore* led me to revisit Wolfsohn and Hart’s model of voice training as a response to the death cries of war. James notes that transition—that is, the point of labour when the woman is on ‘the cusp of birth’—also ‘feels like potential death’. It was here, in this liminal space, ‘near the edge’, that I experienced a loss of vocal control. While the implicit link I am making here between vocalisations in battle and labour is beyond the scope of this *essai*, the comparison perhaps gestures to the therapeutic and creative potential in seeking to relate to maternal experiences of childbirth through the voice.

**Fig. 3.** Leah Lovett, Score for *Support* (detail), ink on paper, 2014.

In the disquieting early months of motherhood, as interrupted nights rolled into days, I worked with the series of video documents, cutting and layering sections to create a rhythmic chorus of labouring male voices. Titled *Hardcore* (2013), this edit formed the basis of the graphic score for *Support*, a linear visualisation of the filmic soundtrack first performed for SMASH LAB, London (2014), and more recently as part of *Oxytocin: Birthing the World* at the Royal College of Art, London (2017).

Unlike the actors on screen, whose performances to camera testified to their raw experiences of childbirth, the majority of my collaborators in the live iterations of the work had never attended a woman in labour. This presented me with a peculiar problem in terms of how to vocally prepare

them for the performance; this is related to the challenge that James faces in helping pregnant women who have not previously given birth prepare for that unpredictable event. Both circumstances raise intriguing questions about the training methods available for enabling the subject to imagine and act beyond the limits of their own physiological, vocal and affective experience.

For James, the collective voice has a crucial role to play in preparing women and their partners for childbirth and their identity as parents. During our interview, she explained how group vocalisations operate as ‘scaffolding’, creating a social structure for the new and shifting relationships that a baby brings:

[The voice work] is a group phenomenon. It’s about finding a connection with others through the sound—so finding your own sound, but also finding it through making sounds with others. The sounds are a way of managing something that’s going to be challenging, difficult, painful. If you can find a way of expressing it, you can get it out, and others can understand what you’re going through. It’s also a way of empathising with the baby you’re going to give birth to, when their only form of expression is through the voice.

The training techniques that James uses involve guided breathing and active listening, with participants encouraged to respond through their own vocalisations to the sounds of the other voices in the room. While these sounds may be ‘moany-groany or cheerful-lyrical’, she suggests, they are always ‘baby-like’ to the extent they convey a state of mutual dependency. For example, one exercise involves sitting back to back with a partner—either another pregnant woman or the birth partner—and leaning into their body while noticing the vibrations of both voices at the points of contact. This voice contact technique gives pregnant women an opportunity to attend to the strangeness of their own body in pregnancy and invites new modes of sociability and connection through the resonant voice. Any social awkwardness that may be felt on first encounter with these techniques is mitigated through an overlap between subsequent antenatal groups, meaning that those who are more familiar with James’s methods take the lead, making it easier for newcomers to join in.

While participants in James’s classes rehearse these vocal exercises over the weeks and months leading up to their labours, such that they become practised, the actors and I had only a few hours together in which to rehearse *Support* prior to its performance for an audience. In transporting James’ methods into the rehearsal room, my aims were three-fold: firstly, to enable the performers to quickly establish a connection based in listening amongst themselves; secondly, to dispel received ideas about what the labouring voice sounds like, in part through exercises that James devised to ‘get away from the head’; and linked to this, thirdly, to help the actors discover a range and repertoire of vocalisations that they might call upon in interpreting the graphic score. In

beginning with the actors' own voices and antenatal exercises rather than *Hardcore* as a primary training tool, I hoped to release the actors from any obligation to reproduce the vocalisations to camera by allowing the space for them to realise *Support* as an iterative performance on their own terms. The score's overlapping vocal lines and free tempo, combined with the short rehearsal time, moreover required the performers to improvise and in so doing to remain attentive to one another's vocalisations. As with labour, the voice training techniques introduced in the rehearsal room therefore anticipated and gave way to the unpredictability of the vocal performance.

For my collaborators, of course, the act of labour remains a physical impossibility. However, I want to part here with the suggestion that responding to the sounds of women in labour and antenatal vocal exercises as training materials can open up an alternate space of becoming through the voice. In reflecting on my experience of both performance and rehearsal methods, I have tried to indicate some productive areas of overlap between them. The ways in which both antenatal and actor training techniques seek to strengthen the connection between breath, voice and the body, for example, and the apparent therapeutic effects of this connection, explored here through Wolfsohn and Hart, suggest possible entry points for further practical and theoretical investigation. For my part, though, the more intriguing question arises with the implication of James's characterisation of antenatal voice training techniques as social scaffolding for the empathetic imagining of the physiology of the (self as) other. How might the contact voice techniques developed by James be taken in this way to articulate the relationship between the voice and the body as both affective and inherently social?

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