How can people who sing in the shower entertain a tiny but receptive listener? Like me, they can volunteer in the neonatal and pediatric units of major hospitals.

I sing, sometimes off-key, to infants and toddlers. Having crooned to hundreds of small children one-on-one since the late 1980s, I know that many youngsters would benefit from live music. The volunteer’s target audience includes patients hospitalized for months whose parents seldom visit. These minors could use someone to dispense music, along with cheer. Therefore, I propose that more people offer to serenade the little ones and that hospitals welcome such volunteers.

The demands of this charitable activity are not great. A hospital unit requires neither full command of the lyrics nor a beautiful voice. (I am the proof!) Normally the baby or toddler never heard the song before. Thus, the performer could forget words and miss high notes for all his audience would know.

However, there is one harsh requirement. After growing fond of a youngster, the singer may arrive one week to hear that the child died. The volunteer must accept that not every patient survives.

In my experience, toddlers and babies, including “preemies,” who should still be in the womb, respond positively to many genres of music. They particularly appreciate upbeat, bouncy tunes sung softly and repeated many times. The performer should avoid sad songs and inappropriate lyrics for these listeners.

I suggest three tests for judging a hospital recital for children. If the performer, handed a howling baby, satisfies one of the three, the concert is a success.

The first test is snoozing. Particularly prized in a hospital is the singer who puts his audience to sleep! My best performance under this test took place in a crowded ward. That day a baby and I were assigned a small space between two mothers breast-feeding their infants. When my recital ended, all three babies and one of the two mothers were sound asleep!

The second test is relaxing. A performer for infants tries to send the child into the alpha state. Under this test, the baby, though awake, is so mellow and “boneless” after the concert that he appears to have turned into Jell-O.

The third test, the medical improvement test, requires some sign, even small or temporary, of an improvement in the child’s physical condition. Numerous patients are attached to oxygen, tubes, and wires. Often their monitors show wild swings in their vital signs. Frequently I have seen the swings lessen or the...
baby’s breathing become more regular when I have been singing. This improvement cannot be solely attributable to hugging because sometimes the child was lying in a crib.

Another common area for medical improvement involves food. Many newborns need to gain weight to be discharged. With music, I have often coaxed underweight infants to drink more baby formula than usual. I first realized the connection between music and food intake in the early 1990s. That day, after feeding and serenading every infant in the pediatric department, I overheard a nurse say, “I don’t know what’s going on today! All of the babies are eating incredible amounts!”

Singing can have a positive nutritional - and medicinal - impact even on infants being tube fed. Based on my observations, a concert can sometimes prevent a child from spitting up food and the medication provided with it.

A baby born addicted to cocaine and heroin starred in one of my better performances under the medical improvement test. Like other infants experiencing withdrawal, she was agitated and jittery. After I held and crooned to her awhile, she was calm. (I have had similar experiences with other infant addicts.) Intrigued, her nurse decided to administer a test while having me sing and cuddle the child. Despite the girl’s poor showing of 50%, the nurse was delighted because it was the highest the baby had ever scored!

Indeed, the women over the centuries who sang to their children and grandchildren were wise. Based on my experience and that of professional music therapists, many young patients would benefit physically and emotionally from a private concert. For all these youngsters, I hope there is somebody willing to sing to them.

In fact, music therapy is a recognized profession. The therapist meets with clients (who may have physical, mental, or emotional problems) in a hospital, prison, office, or elsewhere. Unfortunately, a hospital may, for cost reasons, assign the professional only a few chil-

“Singing can have a positive nutritional - and medicinal - impact. . .”

Amateur recitals present a “win-win” opportunity for volunteers and their audience. The singers expand their song repertoire, gain the satisfaction of helping youngsters, and have fun in the process. Their listeners profit from the cheery break.