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FEATURES OF THE VOCAL VOICE IN CHILDHOOD AND ADOLESCENCE

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Abstract

This article explores the developmental characteristics of children's voices from early childhood through adolescence, emphasizing the physiological and emotional changes that influence singing ability. Special attention is given to vocal hygiene, tessitura considerations, and the importance of individual vocal monitoring during choir instruction. The role of consistent, age-appropriate training is highlighted as essential in preserving vocal health and developing expressive performance skills. The article also provides practical guidance for teachers to support both boys and girls during voice transition periods.

Keywords: child voice development, vocal mutation, tessitura, choir training, adolescent singing, vocal range, voice pedagogy

Introduction

The range of children's voices varies, and their performance and fatigue during singing depend on their age. It should be noted that younger children have lower working capacity than middle-aged children, and the vocal tract gets tired quickly. The interests of the children also vary. What interests younger children may not interest older children. In general, the children's voice is distinguished primarily by its lightness and restraint, sonority and subtlety of sounds. According to their properties, they are divided into descant and alto. The Descant is the highest child's voice. Some of them have a range from the note Do of 1 st octave to the note Sol of 2 nd octaves.

Research method

The development of childrens voice consists of several stages. Each of these stages belongs to a specific age group. When accepting a child for singing, every teacher should make sure that he knows his vocal talents well, all the features peculiar to each individual child, and also know the features peculiar to the child's age group.

Both boys and girls between the ages of 7 and 10 will have a very different voice from older children. Singing in primary school children, body parts and organs that are actively working while singing, occurs as a result of ligament tension. A thin voice acquires the character of a clear expression. A large group of auxiliary muscles is involved in the process of sound production. At this time, the necessary level of energy in the nervous networks

begins to accumulate in the throat of children. This condition itself affects his behavior. Because breathing, protection, and sound occur through the nervous system. Thus, a child's singing skills are laid at the age of 7–10 years. This skill will be developed in the future. During this period, the development of the vocal organs (lungs, bronchi, trachea, oral cavity, nasal cavity) occurs gradually. Larynx and mutation – develops very slowly and unevenly before puberty. The period from 7 to 10 years of age in children is considered an important stage in the development of the voice.

In the next decade, the physical development of children becomes more noticeable. Such a case places a special responsibility on the teacher who teaches singing. They will need to try to hear the voice of each child who joins the team individually, and then constantly monitor them during class. Physically, early maturation also leads to faster formation of the vocal apparatus. There are also cases when in an experiment, children at the age of 11 began a period of mutation.

The sound quality also depends on the nature of the sounds. School-aged children are characterized by light, flying, gentle and sonorous voices. Such voices give their sound a special charm. Children aged 7-10 years differ in their abilities from children aged 11 years. If sopranos and violas can be distinguished in the voice of young children, then children aged 10-11 have characteristic voices indicating a low-high level of voice. Children aged 10-11 (especially boys) have a certain number of voices coming from the chest register. They sing in a somewhat loud and bright voice. However, children should avoid using the chest register and sound tension. For the falsetto (loudest) sound produced by the vibration of the marginal ligaments in the throat, there are natural barriers that plan for a dynamic increase in volume. Slightly older children immediately feel the pleasant sound. This is especially noticeable if the song is spoken in a calm state, without tension. However, the voice of children aged 7-10 has a lot in common and there are no fundamentally opposite differences. The voices of boys and girls belong to the same type, and almost all of them are descant, soprano and alto (a thin child's voice). It can only be conditionally divided into the first and second votes.

The emotional richness of children's performance makes the performance more expressive and enhances expressiveness. Better sound quality can cause strain in the lower parts of the overall sound range and cause significant damage. Slow pronunciation is also necessary in a high note. From the point of view of tessitura, it is easy and comfortable for singers to sing at the average width of the total vocal range. But such a tessitura causes inconvenience to the singer if the lower sounds of the sound range often return in the musical composition or, conversely, the upper notes are constantly repeated (in the first case -low, in the second-high).

Research analysis: Large anatomical and physiological changes occur in the body of adolescents aged 11–18 years, affecting their entire vital activity. Complex processes also take place in their sound system. The shape of the vocal apparatus is associated with the growth of individual organs in the childrens body. This is especially noticeable in boys. Their vocal cords expand in length, but they usually do not change in width. The throat is growing rapidly. Meanwhile, cases of underdevelopment of the area under the adam's apple are not uncommon. The occurrence of such cases is associated with impaired functioning of the respiratory system and throat.

Similar phenomena can be observed in girls, but not in such a pronounced form as in boys. The rapid growth of the throat, calculated from the characteristic aspects of the mutation period, is considered a somewhat difficult and dangerous moment in the development of the voice. The voice box is slowly forming between the ages of 15 and 18. At the age of 19, his development mostly stops. The entire period from 11 to 18 years can be divided into three stages:

- 1. 11–13 years old-approaching puberty, there are no serious changes in the vocal apparatus.
- 2. 13–15 years-the period of mutation (the beginning of puberty)
- 3. 15–18 years is the period of puberty, when the throat and the entire vocal apparatus develop and form.

The mutation period in boys lasts from 6–9 months to 2–3 years. In girls, it can recur at 15–16 years of age or begin for the first time at this age, although it does not last long.

Practicing regular singing on the eve of a mutation allows you to achieve some smooth, steady voice changes and continue singing even during the mutation. If suddenly the mutation becomes acute, you have to stop classes altogether until a certain period. During the mutation period, it is very important to consult a phonator. If boys regularly practice singing on the eve of a mutation, the mutation can proceed smoothly and unnoticeably. They can fully control their voice, choose the sounds that are convenient for them and sing. Usually at this time, the treble turns into the alt part. Although the growth of the vocal cords is uneven during regular workouts, care should be taken when expanding the range. The range of adolescent children is as follows: the first voice (soprano, treble) expands from notes up to the first octave to notes in Fa-Sol of the second octave, the second voice (violas) expands from notes in Lya-Si of the small octave to notes up to the second octave. The range of some children's voices may be somewhat large (in the first voice, up to the note of Lya of the second octave, and in the second, up to the note of Sol of a small octave). Of course, extraneous range sounds are inconvenient for singing, and their use can sometimes also have negative consequences. For the first voices, a slightly more convenient part of the range from the note Sol in the first octave to the note Mi in the second octave is preferable, and for the second voices, the part from the note Re in the first octave to the note Si is preferable.

In adolescence, the difference in the mechanism of sound is clearly known for both boys and girls. In girls, the central register makes up the bulk of the range. By its nature, this

register is adapted to reproduce mixed sound. The clear chest and high-pitched sound can only be heard on the edge notes. However, in boys, the mixed sound is performed artificially. Even because of this, many of them will have a limited range because they use more of the chest register while singing. Only after they learn how to extract sound from the major and mixed registers, they will expand their range and move on to the first sound row.

The girls' voice will have a central (middle) register by its nature. This case allows all notes of the vocal range to sound evenly. It is somewhat more difficult for boys to sing in this register. With the help of various sound exercises specific to this, boys can also develop skills in this register.

Conclusion

Understanding the physiological and emotional development of children's voices is crucial for guiding them through each stage of vocal growth. From early training between the ages of 7 and 10 to managing the complexities of mutation during adolescence, vocal instruction must be personalized, age-appropriate, and informed by anatomical realities. Teachers play a vital role in preserving the health of young voices by adapting techniques, monitoring tessitura, and preventing strain. Encouraging consistent yet moderate vocal practice during the mutation period helps maintain coordination in the vocal system and ensures a smoother transition into adult vocal registers. Ultimately, fostering a nurturing and informed environment enables children to develop their singing abilities confidently and safely.

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