

SINGING AND TEACHING SINGING

A Holistic Approach to Classical Voice

Third Edition

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FOREWORD TO THE FIRST EDITION

*J*anice Chapman is not only a highly successful singing teacher but, more importantly, an international role model for interdisciplinary open mindedness in vocal pedagogy. Throughout her career, she has combined a solid knowledge of traditional voice teaching with an active commitment to deepen her understanding of the voice. Over the last few decades, as physicians, scientists, speech-language pathologists, singing teachers, and acting teachers have collaborated in the evaluation of voice medicine and voice science as new specialties, our goal has always been to improve the care and training of our patients and students. Just as medicine has developed by integrating understanding and concepts from the voice studio, voice pedagogy has advanced by incorporating medical facts, scientific methodologies, and analytical rigor into traditional studio approaches. This book offers the insights of one experienced and successful teacher of singing and teacher of teachers. It is a fine example of progression from 18th century teaching tradition to pedagogical enlightenment of the 21st century. This process is defined by intellectual curiosity and interdisciplinary insights superimposed on classical excellence and a willingness to change; it represents the best of the present state of voice education and the hope of the future for teaching and learning.

—Robert T. Sataloff, MD, DMA
Chairman, Board of Directors,
The Voice Foundation

PREFACE TO THE THIRD EDITION

*V*oice science is an exciting and burgeoning field and since the second edition, we the authors have been able to refine and update much of the information proposed in the first and second editions.

Pamela Davis (Voice and the Brain) and John Rubin (Vocal and Respiratory Anatomy and Physiology) bring their chapters up to date, Ron Morris further clarifies the use of the Accent Method of breathing as a highly effective remedial and training technique and further updates his chapter on Articulation. My own work based on the core of the teaching model stands firm, and there are some further changes and refinements to the chapters on Breathing and Support, Phonation, and Resonance. Marilyn McCarthy has conducted research and rewritten her two chapters on Teaching and Learning in the light of advances in brain science and educational theory and practice. Chapter 16 is new, taking the form of an interview with the voice specialist osteopath Jacob Lieberman on the subject of Manual Therapy and Voice.

—Janice L. Chapman

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TO THE FIRST AND SECOND EDITIONS

Grateful thanks to Ron Morris who inspired, propelled, and assisted the writing of this book and contributed to a number of chapters; my valued co-authors, Pamela Davis, Adrian Fourcin, Marilyn McCarthy, and John Rubin for their generosity and expertise; my chief illustrator Richard Webber for his wonderful anatomical drawings and cartoonist Simon Pearsall whose work speaks for itself; production assistance on the whole manuscript from Malte Ebach, Sam Grimmer, and Tony Gray; editorial expertise and encouragement from Noel McPherson, Angie Singh, Sandy Doyle, Lauren Duffy, and the team at Plural; general encouragement, reading, and commenting by John Chapman, Gordon Stewart, Linnhe Robertson, Kristine Carroll-Porczynski, Linda Hutchison, Ingrid Rugheimer, and Stephanie Martin; Ingrid and the late Gunnar Rugheimer for their long-term fostering of multidisciplinary voice work in the United Kingdom; to Colin McGee, Jacob Lieberman, and Meribeth Bunch Dayme for personal and professional input prior to writing; my students who took part in the surveys for Chapters 10 and 11; and to all my clients from whom I continue to learn.

TO THE THIRD EDITION

Further thanks to my co-writer, Dr. Ron Morris, and my grateful appreciation to my son, Dr. Rod Chapman, for invaluable help in the final preparation of the work. Thanks to Angie Singh, Valerie Johns, and Kalie Koscielak at Plural Publishing for their continuing enthusiasm and hard work, and to Sam Grimmer for his work on the new cover.

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MULTIMEDIA LIST

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Video 2. Primal Sound

Video 3. Abdominal Support

Video 4. Basic In-Breath

Video 5. Dial-a-Vowel

INTRODUCTION

*S*ome years back, while visiting Australia on a research project for Opera Australia and the University of Sydney, I met up with some of the singing teachers who had studied with me in the United Kingdom and in Australia over the past years, some in private tuition and some during workshops and training courses. A number of these teachers were achieving considerable success with their pupils and took the trouble to tell me that I was, in fact, the “vocal grandmother” of their students. As a real grandmother myself, I was delighted with the concept, in spite of feeling a bit ancient. This caucus of singing teachers were also asking me to write down my pedagogy—something I had sworn never to do. (“Yet another book on teaching singing!”) But after much soul-searching I had to admit that, if only for them, it was important to explain, clarify, and in many ways, iterate what I had been doing and learning in the studio for more than 25 years. I also had to acknowledge that my long experience in the introduction and development of the multidisciplinary approach to voice in the United Kingdom had given me a different perspective from that of many of my singing teacher colleagues. Also, I was often being asked to write by other members of the vocal professions such as speech and language therapists and physicians.

The Australian speech and language therapist Ron Morris, who is a singer, had studied with me in London for a short period. He also undertook Accent Method training and was keen to return regularly to the United Kingdom for further tuition. I found out later that he had agreed to be “sent” by other Australian teachers to help me get started. We began an exploratory journey of working together to get the information out of my head and onto paper. We were able to meet for short, dedicated periods of time, spread over about three years. His enthusiasm, optimism, patience, and fortitude has made it possible for me, a reluctant writer, to begin this difficult and daunting task.

The way singing has been taught in past centuries has been passed down by word of mouth and in writings of the time. Much study has gone into the analysis of those writings in relation to what we now call Western Classical singing via the *bel canto* school of the Italians of the 16th, 17th, and 18th centuries, culminating in the work of Manuel Garcia whose early research and development of the mirror laryngoscope in the mid-19th century has paved the way for modern understanding of the vocal arts.

This empirical school of teaching voice has been highly successful, but it also has probably been relatively wasteful too. It has worked well for the few and badly for the many, and I believe this is still true today. Who are “these few”? Perhaps they are those whose natural gifts are brought to the fore and developed by excellent teaching or perhaps they are the highly gifted, intuitively talented ones who sing well regardless of the teaching they may be getting. These few represent only the very top of the vocal pyramid. But what about all those singers who make up its body? What about those of lesser natural talent who have much to offer as performers, or those who just want to be able to sing decently and pleurably for a hobby, or those who love the voice as a musical instrument and wish to sing and to teach well? Even more importantly, what about those whose talents and gifts have been blocked or damaged? Have they not a right to a very good singing tuition?

Until the time of Manuel Garcia, the voice could not be “viewed” in situ and working. Not only was it invisible, but there are no nerve ends in the vocal folds themselves to give proprioceptive feedback. This has meant that vocal health at the level of the vibratory mechanism could only be monitored in other ways. Often the health of the actual vocal folds is only reflected in

- the sounds the singer is making,
- the range they are able to comfortably sustain,
- the lack of pain or discomfort in the suspensory muscles that lie in the neck, and
- the ease with which they sing.

One of my American colleagues at a recent symposium put it well: “If you can sing higher, lower, louder, softer, and longer then you probably have it right.”

Until very recently, vocal instruction was based on a limited understanding of how the voice worked, conveyed through imagery that could be misleading, with the teacher often demonstrating and the student copying to the best of his or her ability. It was the way I was taught from the 1950s through to the 1980s, and the way I initially worked with my students when I began teaching in the mid-1970s. One of the main problems with this system, I believe, is with the singer’s own aural perception of his or her sound. The conservatorium-type teaching model from the early days of classical tuition until the 19th century involved the student singer having daily tuition and not being permitted to practice alone. In this model, the power lay with the master teacher and not with the student. In many ways, until very recently, we have maintained this style of teaching singing but have lost one of its most important concepts: namely, that the teacher supervises all practice. I think that this method



"A little louder please—Yes, your vibrato is healthy!" Copyright 2005 by Simon Pearsall.

in effect involved the training of the singer's ear to recognize and accept those sounds that the teacher preferred rather than the ones that the singers themselves would find aurally acceptable. It also was a time for building trust between the teacher and the student, and ensuring a solid technique based on the structured vocalise systems of the period. Social and economic factors have long since precluded this teaching model. There also have been great changes in general educational thinking, where it is now expected that students take more responsibility for their own learning. The master teacher/apprentice model has had to be replaced with something akin to a weekly (one hour) session with the teacher, followed by individual unsupervised practice on a daily basis. Students do not have the opportunity and time to develop an understanding and acceptance of their own aural mismatch (see Chapter 13, Hearing and Singing). This leads to a number of common faults in singing that might be laid at the door of current methods.

The aural mismatch problems in part can be addressed by the use of high-quality recording of lessons and practice. Provided the teacher is working correctly, students can build their own memory bank of sensations allied to their sounds rather than relying on their own ears during the actual singing. They then can take home the recording of

their session and begin to take responsibility for this part of their vocal development. Regular lessons are essential, however, as nothing remains static. Goalposts shift regularly but not always predictably.

Teachers in the Garcian style also had control of the development of a basic vocal technique, using highly structured exercises and vocalise. I think that this may well be the component missing from a great many vocal studios today. Student singers, especially those within the tertiary/conservatoire system of training, are confronted with the demands of a college curriculum: classes, exams, scheduling, and pressure to learn masses of repertoire. At the undergraduate level, daily practice of vocalise can be very valuable and, although I do employ them occasionally, especially for singers whose voice/mind/body synchronization is not well developed, over time I have evolved a different way of working that is tailored to suit my students' needs and life styles. This pedagogy is the main subject of the book.

I firmly believe that building a sound basic vocal technique should be utmost in the singing teacher's mind, especially when dealing with young adult singers. The current tertiary system (music college, university, conservatoire) can work against this unless the teacher is particularly vigilant and actively prioritizes vocal development, helping students **build their instrument while simultaneously learning to play it.**

While valuing the methods of the past and respecting their validity, I have instinctively and deliberately adopted a more interventionist approach. For example, breathing and support, which would have developed over years using the supervised vocalise and exercises is, in fact, fast tracked (see Chapter 4, Breathing and Support). Just as Garcia did, I firmly believe that the singer's body is as much his or her instrument as the larynx and pharynx, but we do not have the luxury of training only a few from the top of the pyramid for many hours a week each. We have to teach many more students and have had to find a methodology that can successfully be applied to them all. The myths and the imagery that were a central teaching technique for the old empirical way demand respect but need translation and validation for current times and for the future.

The teaching of singing has changed significantly in the past 30 years as information from science, medicine, therapy, and other disciplines enables us to develop another methodology that can successfully teach what the old masters taught over many years to "the few." My own personal multidisciplinary education has been a central plank in my development as a teacher and in planning this book. I felt privileged to be able to invite authors from other disciplines in the voice world to contribute chapters. Dr. Ron Morris (speech and language therapist/audiologist, singer, researcher and Accent Method teacher) has contributed greatly to the whole book, particularly to the chapters on Breathing and Support (Chapter 4) and Articulation (Chapter 7). John Rubin (consultant, otolaryngologist/ENT surgeon, and renowned physician to

the singing profession) has written Chapter 12, Vocal and Respiratory Anatomy and Physiology. Pamela Davis (neuroscientist/speech and language therapist) contributed Chapter 9, Voice and the Brain, making important connections between the emotional motor system and voice, and Adrian Fourcin (Emeritus Professor of Speech Sciences, University College, London) writes about Hearing and Singing (Chapter 13), which sheds much needed light on this topic. The teaching and learning partnership is the subject of Chapters 10 and 11 by the educational consultant/singer, Marilyn McCarthy. Chapter 16 is new. It is on the subject of manual therapy and voice and written by Jacob Lieberman, a voice specialist osteopath of international reputation.

The language of the singing profession, in the past, has been creatively evolving but not always based on any physiological reality. Words to describe sound and its production have been passed on like a Chinese whisper: understood/misunderstood, passed on further, written down, reinterpreted, understood/misunderstood, and so on. With the scientific, anatomical, and multidisciplinary knowledge now at our disposal, I hope that the singing/teaching profession can agree to explore and use more common language so that our multidisciplinary colleagues can interact with us better in the future. There is still a great deal of confusion around singing and its science coming from different disciplines. The art of singing involves far more than just the craft, and this is an area where quantitative research and science may be limited. We need both accurate science and information as well as a holistic appreciation of the art of singing and its practitioners.

Just as my teaching has evolved and changed continually over many years based on what I have been able to learn, borrow, appropriate, or rediscover, I also would expect other teachers to take, use, and modify creatively any ideas presented to them. This book aims to lay down the principles of my methodology as it stands at this point in time.

My own story (text in italics) is an integral part of the journey to my current philosophy and methodology, and is woven into the text from time to time. We also are making use of case studies (text in shaded boxes) throughout the book (disguised for the protection of identity, and used with permission).

Singing is about making connections—the whole person and the voice, the singer and the audience, the audience and the singer, the singer and his or her musical colleagues, the singing world to the multidisciplinary voice world and vice versa—and, in a wider sense, singing has the capacity to join people and groups of people under the umbrella of shared musical and emotional experience. It's special indeed!

*To my late husband John,
sons Andy and Rod,
and singers and teachers everywhere.*

Chapter 1

PEDAGOGICAL PHILOSOPHY

Janice L. Chapman

*Everyone suddenly burst out singing;
And I was filled with such delight
As prisoned birds must find in freedom,
Winging wildly across the white
Orchards and dark-green fields; on-on-and out of sight.*

*Everyone's voice was suddenly lifted;
And beauty came like the setting sun:
My heart was shaken with tears; and horror
Drifted away . . . O, but Everyone
Was a bird; and the song was wordless; the singing
singing will never be done.*

—Siegfried Sassoon, “Everyone Sang,” *Picture Show*, 1919

ABOUT SINGING

What is singing? Simply put, it is emotional musical vocalization with or without text. At best singing comes from feelings which communicate to other people's feelings. It has many forms and styles throughout the different cultures of the world.

People sing spontaneously as part of a group, for example, at football matches, in religious meetings, and in pubs. Singing is and should be

a natural part of everyday life. It is an emotional expression of feelings, which has the power to alter the mood of both the singer and the listener. Everyone is in essence a singer, but in modern society we suffer from overcrowding, noise pollution, and emotional constipation. Instead of enjoying our own sounds, we are filling our ears with recorded music to try and blot out the surroundings. Up until 50 years ago people were still singing in the workplace, the rhythmic impetus of the singing assisting the repetitive labour.

Babies sing before they speak. Their vocal mechanism is well-developed and active in the womb and ready for making sound immediately after birth. The infant's early vocalization demanding food or attention is very soon extended into a range of sounds like cooing and babbling and eventually copies the intonation patterns of the mother and immediate family. These vocal patterns are the precursor of singing, and some babies can sing recognizable tune fragments at a very early age (long before the development of language).

Singing is "primal," part of the fundamental heritage of the animal kingdom. Birds, primates, and sea mammals sing. Charles Darwin suggested that vocal communication evolved in humans from the need to attract a mate (see Chapter 9). Throughout the history of mankind, singing has been an integral part of all cultures. More recently, however, in western cultures it has sometimes become an elitist activity—for the "talented" rather than for the community. The tragic loss of much of the school-based singing during the past three decades has served to distance children from this vocal heritage.

I was in a supermarket the other day and a little boy of about three sang nonstop for the duration of his mother's shopping expedition. He went through his entire repertoire of nursery rhymes then extemporized further into a sort of vocal rhapsody. I was aware of his lovely little voice coming from different parts of the shop and I believe that this changed the atmosphere in the whole building for the duration of his concert. People seemed to be smiling more.

Many education systems have had to cut or downgrade music and singing from their curricula. Teacher training includes little or no singing and sometimes produces teachers who are too self-conscious to sing—even with children. The joy of making vocal sound for its own sake is in danger of becoming lost. We are *walking musical instruments* and singing is part of our birthright.

This book is about voice as used in a very strange and wonderful way—for the expression of classical music and opera, a field in which I have been involved for nearly all my life as a performer and for the past 35 years as a teacher and researcher.

PHILOSOPHY OF TEACHING

All good teaching has a philosophy that underpins its practice. This may be either conscious and systematic or unconscious and intuitive. Many teachers use an unconscious philosophy initially but over time, with experience, this develops into a conscious and systematic method of working. This method is not static but ever developing and refining, so teachers themselves need to be ongoing learners.

After more than 35 years of teaching I am able to share my current philosophy. My approach can be described under three main headings:

- Holistic
- Physiological
- Incremental

Because of the way in which this model developed over time and my experiences with different types of voice users, the model has proved appropriate for remedial work, the developing singer, and the ongoing development and maintenance of the technically able professional singer.

1. Holistic

The *American Heritage Dictionary* defines “holistic” as “emphasizing the importance of the whole and the interdependence of its parts.” Alternatively, it is defined as “emphasizing the organic or functional relation between parts and the whole.”

I use the term holistic to mean that the act of singing involves the whole person (i.e., body, mind, spirit, emotion, and voice). Holistic singing has the potential to become great singing.

Great singing, regardless of the cultural or musical style, reaches out to the audience on many levels. In some cultures singing can even take the singers and listeners into “out of body” or trance-like states.

Holistic singing can be achieved when the performer is able to attain a state of unself-conscious focus. A number of complex factors can contribute to this “zone” but many performers have found it by accident. In this zone, performers and listeners have a reciprocal empathy: wonderful moments in the concert hall, village hall, opera house, church, club, or indeed anywhere. Time stands still, critical faculties are suspended, and the experience imprints on the memory of those lucky enough to be there. Singers and audience are drawn into a web of shared concentration that is greater than any of its individual parts.

Early on in my professional life I managed to lose my ability to sing in this way, and I do believe that a deep yearning to reawaken this

experience drove me to try and discover its nature. This has directed my journey for the past 35 years—a journey which I now recognize as being lifelong.

When very young, a connection between the audience and me seemed to exist through which I became a conduit for the music and drama to flow through me, the instrument, out into the environment. This occurred without much intellectual awareness, vocal technique, musical sophistication, or advanced training. There was much singing in my family, choral singing every week, music making at social gatherings, and I became an easy soloist with a voice of beauty and power. I later realized that I had instinctively been “connected up” by the joy and the continuity of this experience. Later in my journey, I intuited that singing had to be innate, primitive, imaginative, or emotional in essence. In the 1980s I was thinking around this subject and, while attending a music education conference with my husband in Innsbruck, heard a choir from Kenya. They sang and moved and, although the music itself was unmemorable, the experience of seeing and hearing them became seminal. What came to me at that time was that the communication was primal and reached the audience of tired and grumpy music educators in a way which transcended all other factors. The singing was holistic, natural, earthed, emotionally connected, and intensely moving. The effect in the hall was riveting—a sort of umbrella of mass concentration and emotional response. This experience became pivotal in the direction my future vocal journey took.

At present I like to describe it in this way. Singing can be holistic and stem from a wellspring of complex interactions between body, mind, spirit, and imagination while in essence being deceptively simple. A singer is a walking musical instrument with all the complexities that that implies.

I wrote a paper entitled, “Primal Singing—Making Connections” (Chapman, 1990), in which I argued that the singing voice emanates from a connection with the need to survive. This sound is called primal and cannot be achieved without the natural interaction of body, mind, and spirit. Oren Brown (1998) in *Discover Your Voice* said:

When I hear great singing, it is as though I were listening to a marvellous animal. I believe this is why audiences are so deeply moved by great singing. At a subconscious level, empathy takes place when a singer shares his or her primal sound. (p. 4)

My Story

My own primal sound connections were strong enough to see me through my early years of development as a singer. I loved to sing, won competi-

tions, and sang in the public arena with great pride and gusto most of the time. This was rather like a child prodigy who can do anything until he or she hits puberty and self-consciousness kicks in. For me this self-doubt occurred and appeared to be provoked by my early years in the opera profession in the United Kingdom. I was in the fast track at the age of 26 (singing Donna Anna for Scottish Opera and The Countess for Sadler's Wells Opera), naively Australian and psychologically out of my depth. It seemed that suddenly, instead of praise and encouragement from the critics, managements, audiences, and my colleagues, I began to get negative criticism. My confidence trickled away along with my intuitive vocal technique despite continuing to have regular singing lessons with an eminent teacher. With hindsight, I needed a much slower career path than the one I was on and a better psychological basis for my singing. I would also have benefited from a different style of vocal tuition, one which was probably not available at that time. I will spare readers the sordid details, but my singing "heaven" turned to singing "hell." The first thing to collapse was my breathing and support, which until that time had been adequate even though I did not know how it all worked. From this followed all sorts of vocal manifestations, including some psychosomatic ones like having a sore throat three days before every performance. This particular problem was cured after a conversation that went something like this: Janice: "Oh God! I'm getting a sore throat and I've got a show in three days time." John (my husband): "Yes dear, you always get a sore throat three days before a show!"

After the first two years of professional life at the age of 28, my husband and I decided to start a family. I was thrilled to find myself pregnant and given a chance to escape temporarily from the pressures of the life I was leading into something more normal. I found motherhood enormously fulfilling and John and I had our second child a couple of years later. I sang professionally throughout this period, including my second pregnancy at which time my body rediscovered its support. The soprano solos in the "Verdi Requiem," while eight months pregnant, was the clincher I think.

My career continued to lurch along for some years. Some of my work was good and some must have been fairly bad. I was in a state of confusion about my singing and in retrospect think that I may have been somewhat depressed. Being a wife and the mother of two small boys, however, meant that I had many other aspects of my life to enjoy while continuing to sing professionally and have singing lessons and vocal repertoire coaching.

Eventually I had to face my problems and take responsibility for my own vocal condition. This moment in time is imprinted on my memory. I had taken on a few students and discovered that I was going to enjoy teaching. Being responsible for other people's vocal welfare meant that

I had to deal with the vocal mysteries that I had not sorted out for myself. Once I started this dual process of teaching others to sing and singing myself, I had to ask myself the question: “Why on earth not apply myself properly to my own vocal welfare?” I had always hoped someone else would sort me out. The acceptance that I could and indeed must do it myself was the turning point. From the moment of this acceptance of taking responsibility, doors to knowledge seemed to open miraculously!

As a wounded singer, I was intuitively drawn toward trying to help singers who were experiencing vocal difficulties. At the time I commenced teaching there was an explosion in the information available from voice science and medicine, triggered in the main by the development of the fiberoptic endoscope and stroboscopic light source, which allowed the vocal tract and vocal folds to be viewed as though in real time. Through my involvement with the organization of the early multidisciplinary work in the United Kingdom, I was exposed to a broad range of information which made me aware that my teaching was being subtly influenced by my increasing ability to visualize the vocal machinery. This visualization became closely linked with auditory perception and tied into my own vocalization.

In the mid-1990s, I was fortunate enough to take part, both as a subject and as an investigator, in a research project on respiration in singing at the National Voice Centre, The University of Sydney, entitled “Patterns of Breath Support in Projection of the Singing Voice,” (Thorpe et al., 2001). This experience enhanced my ability to visualize the physiological functions of breathing and support which were affecting the singing voice and influenced both my singing and teaching. I learned a great deal including the fact that I really did not know very much, which paved the way for further learning.

I undertook an excellent vocal anatomy course run by Meribeth Bunch and also had access to some anatomy wet-lab study days in Sydney and Melbourne. The handling of real body parts was enormously educative for me, particularly in respect to weight, mass, and density.

Underpinning my work in the studio now, with singers of all levels, was a visualization of the way in which the machinery works in the torso and the organs of phonation, articulation, and resonance.

To illustrate this, it is valuable to look at a typical singer in crisis. When a singer’s voice is not functioning well the person is often unhappy as a result. This state can spiral into a vocal decline. A dysfunctional voice leads to stress, which leads to extra effort especially in an inappropriate part of the vocal mechanism, which leads to less efficient vocalization, which leads to more dysfunction and more unhappiness—a vicious spiral that can continue to repeat itself and undermine the singer totally.

Barry: A Case Study

A 31-year-old professional baritone who had been singing principal roles with major companies for six years attended for a consultation. He had an exceptionally good voice, was a fine musician, had an engaging personality, and was a highly motivated achiever. After studying at one of the country's major music institutions he was taken on by a big agency and offered engagements both in opera and concert repertoire at a very high level even though he was relatively inexperienced. The fact that he was very talented and a fine musician and linguist meant that he coped. After about five years, things started to go wrong. He was being criticized by conductors and répétiteurs and, as can often happen in these circumstances, the criticism was given in front of other singers and musicians. He found this very difficult to handle. His singing deteriorated and his confidence drained away. His agency sacked him suddenly—without any preparation or care—just told him that he was not performing up to standard and that he should seek another management.

Another agent who had seen his potential agreed to take him onto his books and he brought him to my studio for a consultation. I had seen him in an operatic role a couple of years earlier and had been impressed with his talent at that time, which was a good thing because what presented when he sang to me was not recognizable. The voice production was wild, a mass of problems including a large unruly wobble and intonation variance. Not surprisingly he was a desperately unhappy and demoralized person.

When I checked him over, I discovered that his breathing, posture, and in particular, support of his voice were at the root of the problem. We worked immediately in a technical manner to correct this. He had no engagements in the next few months, which gave us time to work technically. The training he had received, in my opinion, had made it almost inevitable that he would have come to grief at some stage. He had never been given any real insight into how to integrate his body under this wonderful big voice, and he himself admitted that he never knew what was going to come out of his mouth at any given time.

His vocal rehabilitation improved after about 18 months, but psychological and career damage can take longer to redress. It can be more like three to four years before a singer regains the position on the career ladder from which he or she has tumbled. Managements for whom he had worked before and during his crisis were understandably reluctant to take him back on until his vocal credibility was fully reestablished and during that time he had to endure “confidence knocks” and live with them.