Appoggio Demystified

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All singers recognize the need for a breathing strategy in order to maximize the potential of their voices in terms of projection, phrase length, range, intonation, quality and comfort. Of course, the "in breath" is the easy part, once one learns not to raise the shoulders, but rather to relax the abdominal muscles while maintaining an open and aligned posture and to allow the breath to fall into the lungs. The real work of breath for singing begins at the moment of vocal onset. This is the moment when the physical apparatus needs to assume its equilibrium, the balance of the muscles of inhalation and exhalation, and to manage the struggle between them that accomplishes what we call breath support.

Let us begin by exploring some of the terms we use in reference to breathing for singing. Semantics are potentially a very awkward stumbling block as singers attempt to harmonize their ideas around breath support. We'll review the names and functions of the principle muscles of breathing. And I'll speak a bit about posture.

The main part of this presentation will address the concept of *appoggio* and will attempt to explain it in terms that will make it less mysterious and more integrated into the holistic technique of cultured singing. No one part of the tripartite function of the singing voice can be isolated without reference to the other two. Respiration, phonation and resonation are the interlocked parts of the singing instrument. Appoggio, although it begins with skilled *breathing*, is not a technique that operates outside of the phonatory and resonatory functions of the instrument, as we shall see.

Finally, the presentation will look at the work of the core muscles as they participate in breath support for singing. In my research in voice studios during my sabbatical last year, and in much of the reading I did, I often came across reference to the core muscles. I guess we all think we know quite well what our core muscles are and have a kind of instinctual idea of how they operate. But when I asked several voice teachers what their specific job was during singing, the response was not usually very precise. We'll see if that question has an answer that can be of some use to us.

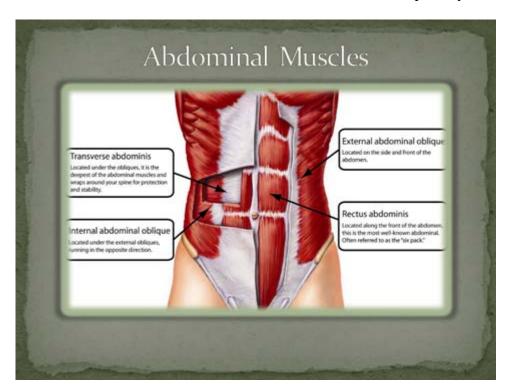
So, to begin, let us define some terms. We'll leave discussion of the term appoggio until a bit later. Let's begin with other terms relating to breathing for singing. The great American vocal pedagogue, Richard Miller, is very precise in defining the difference between breath *control* and breath *support*, saying that support is a respiratory function, whereas control is a phonatory or laryngeal one. (Both are components of appoggio.) Together they comprise a system of breath management that then prepares the sound (no longer merely breath, but now converted to sound waves by the vibrating vocal folds) for the vocal tract to convert into resonant tone.

When singers discuss breath support the word most commonly bandied around is undoubtedly: diaphragm. (Poor old diaphragm – so misunderstood!) The diaphragm is the second largest muscle in the human body. (You're sitting on the largest.) It is important for singers to have a realistic idea of where it is exactly.

The resting position of the front of the diaphragm is slightly above the level of the base of the sternum, or you could say at the level of your bra strap. This parachute-shaped muscle's origins are at the inner surface of the lower six ribs, the upper two or three lumbar vertebrae, and at the lower tip of the sternum. Its insertion is to its own central tendon. So the contraction of the diaphragm increases the volume of the thorax at the same time as the ribcage is opened by the

external intercostal muscles. It's important for singers to understand that the movement observed in the abdomen during inhalation is the outward movement of displaced viscera, which is a <u>result</u> of the downward movement of the diaphragm against relaxed abdominal muscles. The diaphragm does not support vocal tone. It is <u>passive</u> during singing (exhalation). It is an *ins*piratory muscle. It has little proprioception, so we cannot feel or control its action or location consciously. Since we do have conscious control of the rib muscles and the abdominal muscles that attach to the diaphragm, we are thus able to assist its movement and control exhalation. This control can be trained and exquisitely developed.

So let's look now at those abdominal muscles which are all expiratory muscles.



These are those wonderful core muscles we hear so much about these days. Working from outermost to innermost, they are the external obliques, internal obliques and the transverse abdominis. Without going into too much detail, it is important to note that the origins and insertions of these muscles coincide with the locations of the origins of the diaphragm and that some of the fibers are actually interlocked with those of the diaphragm. Therefore they can influence the movement of the diaphragm. The innermost abdominal muscle, the transverse, where it arises from the lower six ribs actually interdigitates with the diaphragm. The transverse is an interior girdle wrapping the torso, and an important muscle in the control of exhalation, i. e. a core support muscle. You see there also the rectus abdominis muscle group (the famous 6-pack). Its importance for breathing lies mainly in the need for it to release on inhalation.

The final term to address in this section is posture, which we all know is essential to good singing. Richard Miller speaks of the noble posture, the hallmark of which is the raised sternum. This keeps the ribcage raised and the ribs and sternum are to remain raised during both inhalation and exhalation. With the sternum raised, one must be careful not to shorten the back and stiffen the neck, arch backward or lock the knees. In newer texts and in vocal studios one now hears the advice to soften the sternal area, allowing the back to open and lengthen. The lovely book, *What*

Every Singer Needs to Know about the Body (Malde, Allen and Zeller, 2009) suggests that singing stance must be balanced, buoyant and springy. We must understand our skeletal and muscular structure, the curves of our spines, the places in the body where we balance. I think we can agree with Richard Miller that appropriate posture for singing is one that will permit interplay among the muscles of the torso and the abdominal wall. Properly aligned posture is not just so that we can look good. It is required in order that our muscles can accomplish that exquisite control of breathing for singing.





My half sabbatical last year was dedicated to the study of the pedagogy of breathing for singing. I sat in voice studios and observed the teaching of some wonderful teachers and I read. So, appoggio is all about the control of breath compression, the compression that is present once a breath has been taken and the vocal folds closed. I was very curious to find out the origin of the term, appoggio, and so far have been unsuccessful. Richard Miller uses it liberally and refers to its belonging to the "historic Italian School" as well as to its having "dominated serious 20th century vocalism."

Let's think about the idea of leaning. The term is appoggio, Italian for: I lean. The idea can be interpreted as either active or passive. If I lean on something, it is supporting me. I am actively leaning but I am passively being supported. Both are consistent with the idea of breath support. The word 'support' can be contentious, since it implies a rigidity that can be antithetical to a free sound. Melissa Malde (2009), a co-author of *What Every Singer Needs to Know about the Body*, explains breath support in terms of balancing *breath flow* and *breath resistance*. Neither is sufficient without the balance of the other. So when we are 'resisting' we are *leaning* against the rising diaphragm, and when we allow 'flow', we are allowing the abdominal musculature to *lean* against the diaphragm to assist its rise (albeit in a very controlled or measured way.) Most

people, Malde believes, "overdo the resistance, spending so much energy controlling the breath that they become locked and can't use the breath they have." (p. 70) She told me that her students usually find the necessary balance to achieve breath support when they learn to achieve a physical balance that centres in the hip joints.

Wendy Nielsen, our great Canadian soprano, now teaching at the University of Toronto, insists that the breath supply is governed by 'uptake' by the sound at the level of the vocal folds, not by what she refers to as 'pushing air' which might create a breathy sound or even sharp intonation. To achieve breath support she advocates resisting collapse *constantly* "from note to note to note...Every journey in every phrase should involve keeping the body open.'

So Ms. Nielsen's appoggio involves an opening or widening of the body rather than a pressing or pulling down approach. This contrasts to the advice in another studio in which I observed where maintaining downward pressure was the objective for all students. But what I observed from my vantage point of the side view of the students, was that their sternums inevitably fell before the conclusion of the phrases and the tone was rather stiff.

Back to Wendy Nielsen's studio: "Support is boring! It's the same thing over and over. You can't phrase with your support. Support doesn't get emotional. Your job is just to keep providing access for the vocal folds to pressurized breath, by east-west resistance of the ribcage and diaphragm. There is motion actively resisting collapse."

My own teacher, Diane Forlano, believes completely in demand governing supply. We create appropriate demand by speaking our text with non-stop speech and legato line from beat to beat, reiterating vowels constantly throughout runs or sustained notes until there is a silence. This demand requires consistent and effective breath supply. Create the demand and supply will follow. The supply is controlled breath pressure, or, if you prefer, appoggio.

The American teacher and mezzo-soprano, Laura Brooks Rice, who teaches at Westminster Choir College, speaks a good deal about core muscles and their importance in establishing a necessary balance in the body even before the inhale. This active core, elongated and energized, is the engine of the singing instrument. In speaking of support, she says: support the journey, not the destination, pitch to pitch, moment to moment. She uses the term 'energetic breath flow' and says 'send, don't press.'

Laura's teaching does not advocate any outward pressure, but rather a navel to spine *controlled* movement of abdominal musculature to regulate pressure on the diaphragm and thus breath pressure at the vocal folds. She uses numerous teaching aids to assist in this pedagogy. Increasing breath pressure is coordinated with pharyngeal release for appropriate resonatory space for the pitch, vowel and intensity desired. So Laura's appoggio technique is not about insisting on the continued gesture of inhalation, but rather about a controlled release of that gesture. I think that she would define appoggio as the argument between the muscles of inspiration and expiration – and she would add that although we give it a good argument, expiration always wins.

Core Muscles

Yoga and Pliates are ubiquitous in our times and with them has come a very common reference to the term "core muscles" and the term is bandied about in voice studios too. So when we ask our students to "engage the core", what exactly do we mean by that? I suggest that it's another way of saying "apply appoggio. "So what is the connection between appoggio and core muscles? In what way are core muscles able to effect appoggio?

If the main task of appoggio is to delay the rise of the diaphragm, muscular contraction must be brought to bear to oppose that natural recoil of the lungs and the diaphragm. Happily, the expiratory muscles, the transverse and both sets of obliques all share attachments with those of the inspiratory muscles, that is the diaphragm and rib muscles. Thus, it is within our conscious ability to control the rate of the contraction of these *expiratory*, *core* muscles in allowing the release of the diaphragm and its rise to resting position. The "exquisite" control of which I spoke earlier is gradually developed and learned and refined, but that is the primary technical pursuit of classical singing. Mastery of respiratory technique will not, on its own, make you a great singer. Laryngeal coordination with the breath as well as appropriate resonating spaces for the most economical use of that breath are also essential components of the bigger picture of appoggio and of beautiful singing.

Conclusion

Have I demystified appoggio, at least a little bit? I so wish that I had been able to track down the first reference to appoggio as a technical term in the Italian school of singing! My thought is that it is not exactly a *technical* term. It's really a term invented to *simplify* the difficult concepts related to the physiology of breathing and the muscular coordination of breath management. It is, after all, a *figurative* image, of leaning on something. The point is that it was meant to *simplify* the singer's understanding of what is required, and today it has almost become yet another mystifying technical term rather than a simplifying image.

The late, great American voice teacher, Shirlee Emmons advocated the use of imagery for the teaching of singing but insisted that imagery can only be effective once the singer has experienced the desired objective. The singer must then devise his or her own imagery by describing the physical feeling, a visual image of what is actually happening, and a sound image of what that procedure produced. So: what does it feel like, look like and sound like to the individual singer? That is the image to use. For many singers over many generations, the feeling of *leaning* on air pressure must be a common one for the term, *the imagery*, of appoggio to have persisted and made itself so pervasive in the literature of vocal pedagogy.

The virtue of the word, appoggio, is that it has become common to singers and clarity across the discipline is a very good thing. Delaying the rise of the diaphragm to accomplish the control of pressurized breath for singing is our common goal. It seems to me that knowledge of the geography of the musculature gives us some *truth* from which to begin to think about how it works. And then the images we use to bring about that muscular control for ourselves, though they may differ from each other's, should bring about a healthy and functional result.

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