Tenor Passaggio in the repertoire of the American Musical Theatre

Purpose:

The purpose of this research was to further explore the treatment of the tenor\textsuperscript{1} passaggio (F4-F#4)\textsuperscript{2}, specifically as it pertains to the repertoire of the American Musical Theatre\textsuperscript{3} for a college student. According to Richard Miller, tenore robusto (dramatic tenor’s) second passaggio occurs in the region described (F4-F#4)\textsuperscript{4}. I sought to explore the treatment of this passaggio in Younger than Springtime (South Pacific), Later (A Little Night Music), Maria (West Side Story), Giants in the Sky (Into the Woods), and Something’s Coming (West Side Story) with the prospect of performing these pieces with a smooth transition during the second passaggio at the end of the research period.

Methods:

1. Using a Multi-Dimensional Voice Program (MDVP)\textsuperscript{5}, I collected pre, mid, and post research data for my passaggio to detect the effectiveness of any development of the treatment during this research. These data are listed in table I-III.

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<thead>
<tr>
<th>Table I: Pre-research pitch-range assessment</th>
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<td>Sound employed</td>
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<td>Range</td>
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<td>Semitones</td>
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<th>Table II: Mid-point pitch-range assessment</th>
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<tr>
<td>Sound employed</td>
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<th>Table III: Post-research pitch-range assessment</th>
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<tr>
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2. While I was video recording pre, mid, and post performances during the research period, I was able to examine the progress of the performance level. Evidence of the pre, mid, and post performances are included in link I-III.

   Link I-Pre-research recording (06-09-2014): https://www.youtube.com/watch?v=NtU7mltzApY

   Link II-Mid-research recording (06-30-2014): https://www.youtube.com/watch?v=sAyxUJ9oWb4

   Link III-Post-research recording (07-17-2014): https://www.youtube.com/watch?v=qhQJ7xhs6gQ

3. During my 10 lessons with my faculty mentor I audio recorded each lesson to track the progression of my treatment. During these sessions, we were able to track the growth and progression of my sound within the upper tessitura as it pertains to the ease of sound production. We analyzed my sound by listening and discussing about how it feels as a singer while I make the sound.

   For the first 2 weeks I practiced 15 minutes 4 times a week. This, however, changed once a more comprehensive approach to the technique was applied and further results were desired. The next 3 weeks I changed my practice schedule to 60 minutes 5 times a week.

   Upon the mid-research video recording and MDVP screening, significant findings fueled a shift in focus. This shift in focus resulted in the last 3 weeks. The last 3 weeks were modeled after the first, as I practiced 15 minutes 4 times a week.

   Findings:

   Upon visiting the speech clinic and collecting the pre-research data, Dr. Holly Bewlay and I discovered that our initial hypothesis to be proven false. The hypothesis was that the F4-F#4 region of my voice would be a troublesome area and the area on which we would focus the majority of our studies. In conjunction with this hypothesis, the treatment to detect passaggi in the upper tessitura initially employed the vowel “a.” This area, however, was completely undetected during our initial pitch-range screening (See table I). We discovered that there were multiple lower passaggi specifically D4-C4, A#3-F#3, and D#3-C#3 (See table I). We were then able to conclude that the narrowing of these three lower regions would be the key to gaining the freedom in the upper tessitura required for the selected repertoire, shifting the focus of our studies. Contrary to our initial clinic visit, Dr. Holly Bewlay prescribed exercises that utilized the consonant “n” to narrow this region during the remaining portion of our research (See table II & III). Upon our second visit to the speech clinic, and after five weeks of focused practice in these three lower regions, we experienced significant growth and tangible results. The passaggi in the lower tessitura that had previously been recorded had virtually disappeared altogether within the five week period. The data collected from the second pitch-range test produced a smooth graph devoid of the gaps recorded in the first screening (See graph II). This discovery proved the prescribed exercises and vocalizes had strengthened the muscles significantly as the technique that had
settled and ownership of the voice had become apparent. The initial MDVP screening produced an unfavorable graph, shown below (graph I). And while the second screening produced a similar graph initially, the subsequent graph produced a favorable as all of the sound was focused and managed illustrated in the graph. This graph therefore proved that after the five week period the technique explored had settled into ownership and was able to produce a consistent sound that was tangibly manageable. Upon the third clinic visit and after three weeks with a practice model similar to the first two weeks employed, two findings were shown for the pitch range screening. The first focused the sound on the consonant “n” and produced a virtually seamless graph. The second pitch range screening on the vowel “a” however was significantly reduced, as it produced a graph with similar gaps as the pre-research screening had produced.

Additional findings:

The categorization of male repertoire as it pertains to the American Musical Theatre. Upon searching for repertoire to study, Dr. Holly Bewlay and I found that the traditional classification for tenor repertoire was not applied to the categorization of American Musical Theatre. Find a quote or resource to back this up. Rather that both lower and upper voice is interchangeably grouped together, specifically in the Musical Theater Anthology published by Hal Leonard. Repertoire that ascends above an F4 would typically be classified as tenor and repertoire that expanded a range below that point would typically be classified as bass or baritone repertoire. However, in their classification, repertoire that would typically be considered baritone under this provision such as Stephen Sondheim’s *Johanna* was included with tenor repertoire.

We also found that the concept of self-assessment as it pertains to vocal study must rely heavily upon physical sensation. While vocal performance utilizes a combination of physical sensation and auditory perception, physical sensation allows a much more consistent outcome for me. This may be due to the misleading and often inaccurate self-perception of the sound, as the auditory feedback and frequencies may fluctuate with the space.

Graph I: Pre-research MDVP data.  
Graph II:  Mid-research pitch-range screening.
Bibliography


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i According to the Oxford English Dictionary, a Tenor voice is defined as the male voice type intermediate between bass and counter-tenor (or alto) typically ranging from the octave below middle C to the A above it. Although this definition is broad, it provides a clearer understanding of this voice type.

ii The passaggio, as defined by Clifton Ware, is a series of pitches wherein multiple tones may be produced by varying register principals and includes the approximate pitch(es) where the register transition takes place.

iii Hanning defines the American Musical Theatre as a genre that features song and dance numbers stylistically drawn from popular music in theatrical form with either romantic or comedic plots.