

Keep breathing : how to do it, and why a text book and guide to right breathing for speech, singing, and every purpose in life / by M.A. Carlisle Carr.

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KEEP BREATHING

HOW TO DO IT, AND WHY

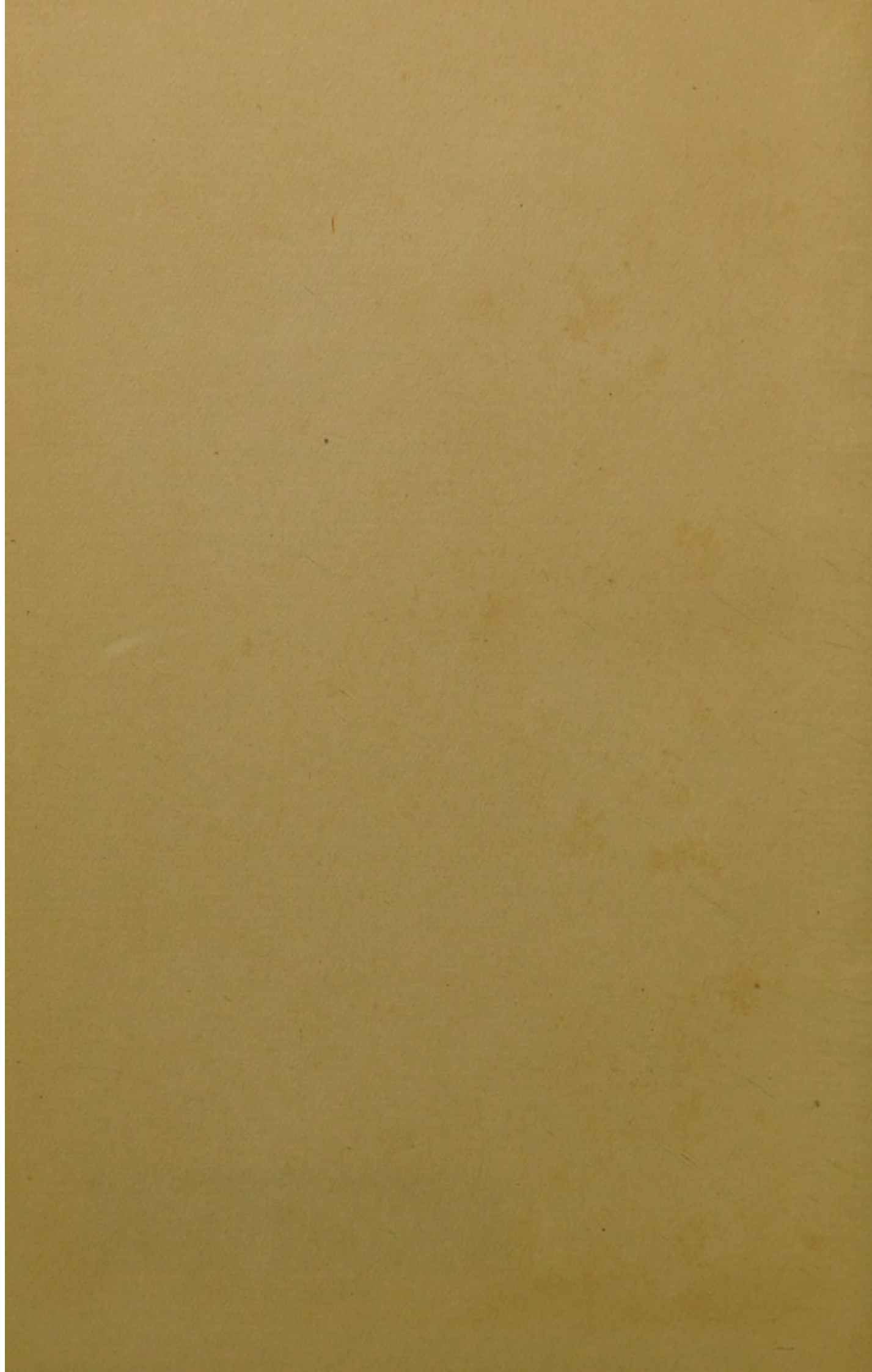
M. A. GARLISLE CARR



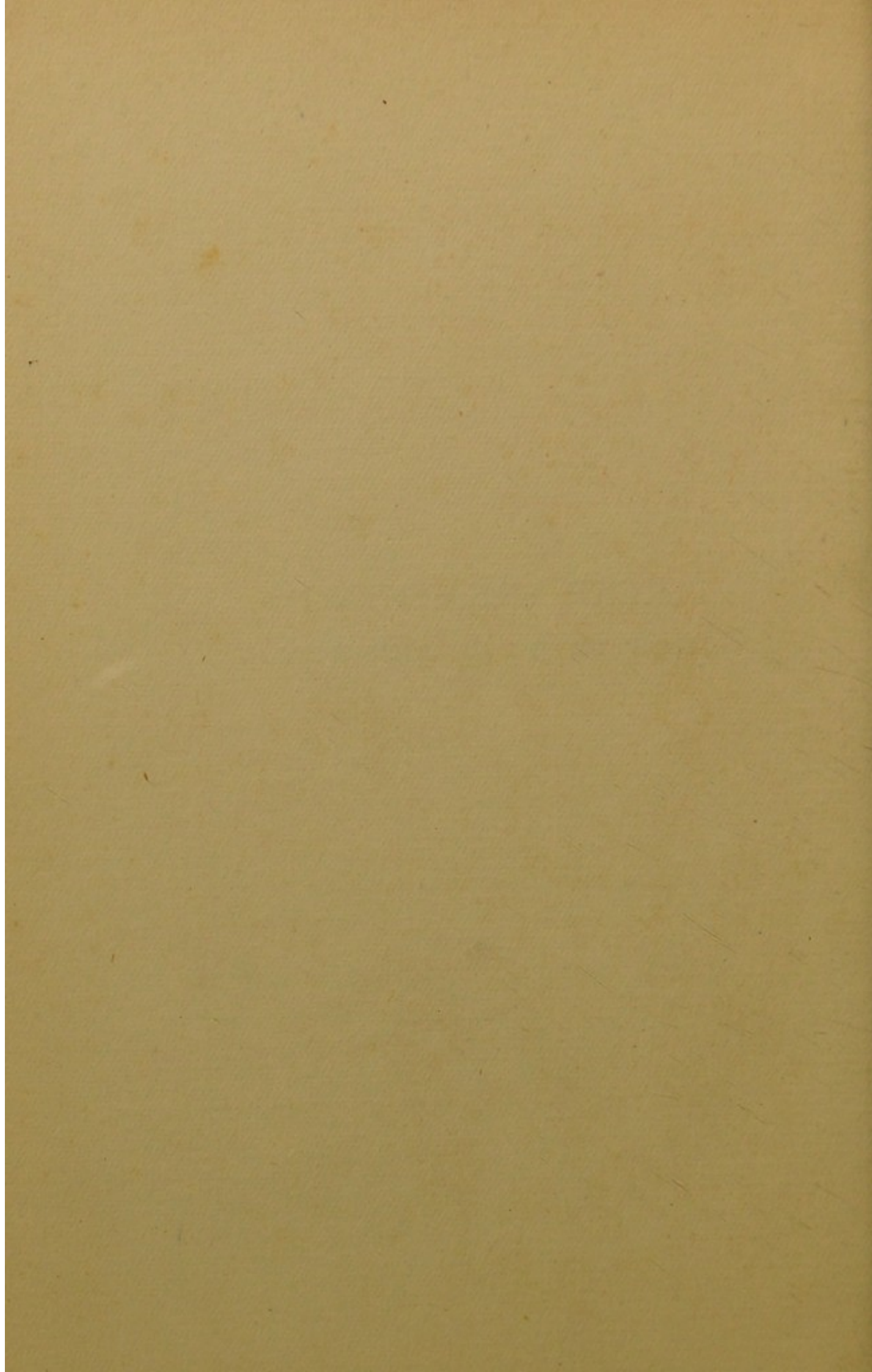
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KEEP BREATHING
HOW TO DO IT, AND WHY



KEEP BREATHING

HOW TO DO IT, AND WHY

A TEXT BOOK AND GUIDE TO RIGHT
BREATHING FOR SPEECH, SINGING, AND
EVERY PURPOSE IN LIFE

BY

MME. M. A. CARLISLE CARR

PROFESSOR OF BREATHING, VOICE PRODUCTION, AND SINGING IN
ALL ITS BRANCHES

A "VOICE"

"The intangible, invisible thing called a 'voice' is of all human possessions the most spiritual and powerful evidence of man's Thought: Beauty of Form and Colour, also Love, Joy, Tenderness, all hang on its cadences.

"A 'Voice,' in its real sense and capacity, may be owned by all. To neglect such a treasure is to lose a valuable servant. It can be used to sway multitudes, even to call back to life—it is a sure weapon of defence, and can, moreover, 'pour oil on troubled waters.'"

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EXPLANATORY

HUMANLY speaking, 'to live is to breathe, and to breathe is to live.' This being so from the standpoint named, breathing should be automatic and as natural as the movement of the limbs becomes, in the transition from infancy to growing childhood.

If the use of a limb becomes impaired by accident or illness, medical skill is sought and applied; and if this rule 'obtained' in the partial loss (or impairing) of automatic deep breathing in infancy, childhood, or manhood, many of the 'ills of life' might not only be greatly ameliorated, but averted.

Accident or illness are liable to impair the complete and perfect automatic filling of the lungs, just as they may impair the use of a limb—indeed, one may truly say they do more than this, when right breathing is affected, for it is deterioration in this particular which starts what is known (and later explained) as the 'wavy line' in children.

And yet, for all this, and for all the 'learning of the learned,' this important matter has been overlooked, or only dimly realized, for centuries by the cultivated races of Western men. Strange to say, the uncultivated savages of Africa, America, and

the East generally, are, and have been, wiser in their generation in this respect.

The reason is not far to seek. Breathing is itself a natural art or law of species; but, unlike most of Nature's laws which have to be retained in the face of strenuous education, it has to be recognized and understood—and this understanding only comes by realizing what it is which 'sets the seal,' so to speak, on the right method, and thereby confirms it.

The child's *first cry* proclaims its breathing capacity—so far breathing is 'generally' recognized—and the reflective 'medico' and nurse are satisfied when this first sound of the 'newly born' is of vigorous quality. But the complete understanding of the 'vocal process' set up has so far been overlooked. In it, however, has been found the 'key' of true voice production and all vocal effort and effect. To the uninitiated, however, 'breathing' merely *begins*, and '*not* breathing' *ends*, what is commonly called 'life.' During the intervening years the fortunate retainer of good automatic deep breathing will probably enjoy more than average good health and length of days. Not so the one whom accident or illness have even temporarily 'laid low,' and thereby have deprived of normal lung capacity.

It is because the responsible authorities have not yet acquainted themselves with the practical issues of the right and natural condition that they

fail to perceive any subsequent loss of these, and to trace the cause.

The order then goes forth, 'Try taking singing lessons,' or, 'Try what the gymnasium will do,' etc.

Now, in some cases benefit may ensue on taking this advice, but in most cases 'the remedy is worse than the disease,' for the simple reason that there is no 'unanimity of opinion' amongst teachers about what 'normal' right breathing *is*. The voice trainer says: 'Of course, physical culture is a fine thing, but it does not help the voice!' (True.) The physical trainer says to one who has vainly tried to benefit by 'voice training': 'Ah, well, you see I teach breathing quite differently. I expand the chest, flatten the abdomen, develop the muscles, add to your height, and, above all, I have invented a "machine" to assist the student,' etc.

The 'difference of opinion' about what right breathing *is* has puzzled, and still puzzles, those who are suffering from the need of it, but cannot find the true teaching.

It seems, therefore, that the time has come for a textbook which will be a teacher and guide, such as is designed by the writer, after having proved the method it inculcates by practical demonstration for thirty years in London, and at the various provincial towns in which she has taught it, to men, women, and children, with unvarying success.

The teaching to be found in the textbook is the result of a *discovery* which entirely restored her own voice, which had been seriously impaired by an operation. For six years she had lost control of it, could not sing in tune, and, besides having a delicate throat, was otherwise enfeebled. On one never-to-be-forgotten day she overheard a remark, in very obscure English, made by a Swedish piano-forte accompanist,* which arrested her attention. It had given her the clue to all her vocal difficulties. She realized that the cause of all the trouble could be traced to loss of breathing capacity and its use.

For a fortnight she worked continually day and night at recovering the deep breathing and its use. She went nightly to the opera, when 'stars' like Patti, Christine Nilsson, and Trebelli, were in their zenith.

In this way she proved the method, realizing what produced in these singers the 'ring' and 'quality' and power with perfect control, which her discovery had revealed; and very soon after this, having thoroughly mastered the method, its 'cause and effect,' she began to teach what she knew.

The *initial* knowledge will be found in this little book, which is now presented in the true spirit of art (the spirit of giving), and sincerity in it, to those who care to profit by it.

M. A. C. C.

* He had been accompanist to the great Italian maestro 'Lemperti.'

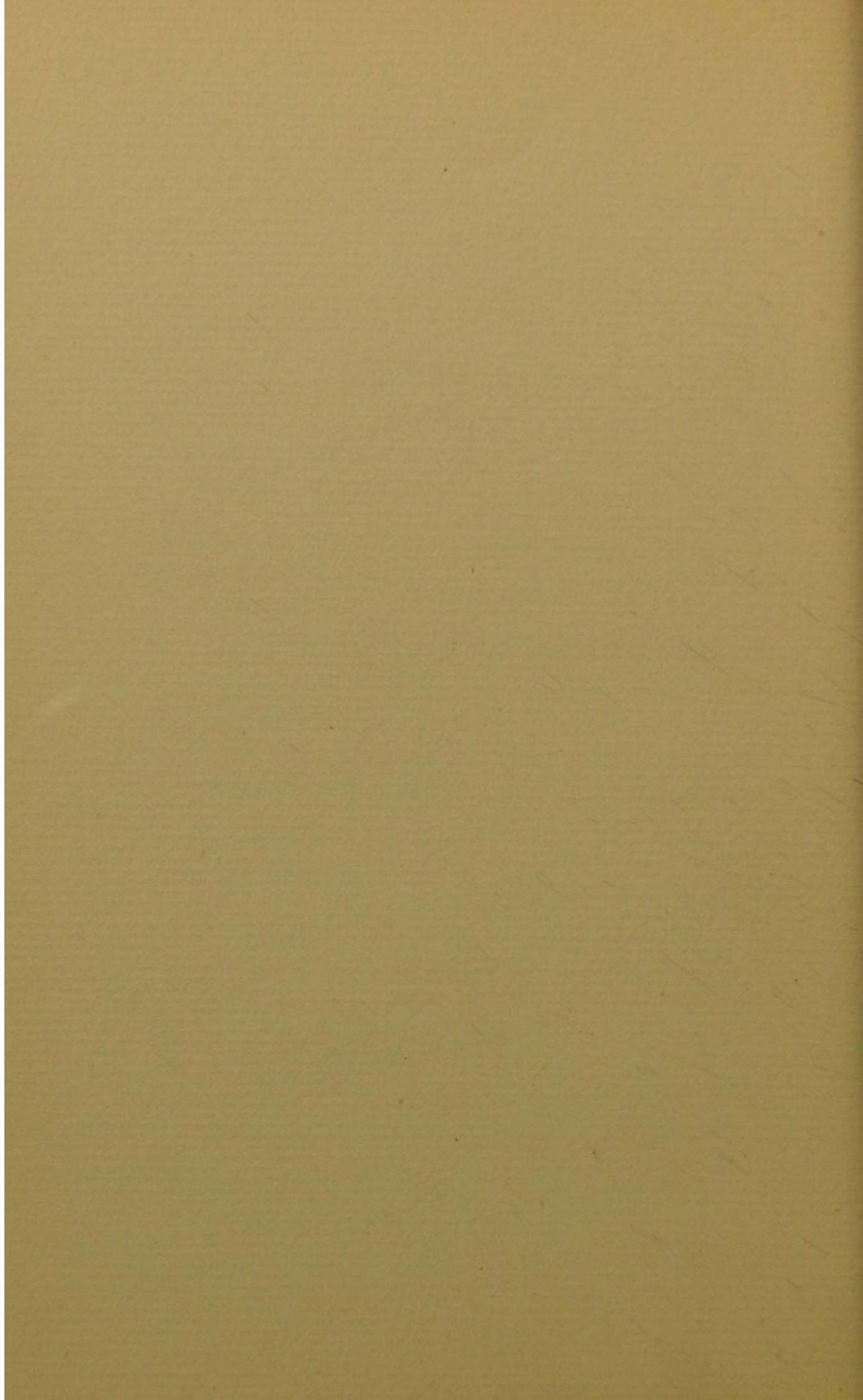
PREFACE

IN order to simplify this somewhat difficult undertaking, the author has elected to impart such information as this book will contain in the form of 'questions' and 'answers.' She thinks that this system will lend itself more easily to the inquirer, who can thus mentally impersonate the questioner, whilst the impersonal textbook will provide the answers. In this way it is hoped that mutual cordiality will be engendered, and many 'short-cuts' discovered, where bits of the road may seem 'rocky.' With the greatest desire to inform, encourage, and interest, she begins her task, and dedicates it to students young and old.

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ABOUT
AUTOMATIC DEEP BREATHING



KEEP BREATHING:

HOW TO DO IT, AND WHY

CHAPTER I

ABOUT AUTOMATIC DEEP BREATHING

Technique and Principle.

Q.—What have you to prove that right breathing should be automatic?

A.—It must be automatic, unless impaired, because it continues when awake or asleep, in varying degrees.

Q.—Why do you say ‘unless impaired’?

A.—Because breathing should be unconscious in a healthy normal condition.

Q.—Granted; but why does ill-health affect it?

A.—Every variety of ill-health affects the breathing capacity. It turns unconscious breathing into conscious breathing. As soon as that happens, difficulties begin.

Q.—Why?

A.—Because the knowledge of what ‘breathing’ is, is not yet understood.

Q.—What physical condition is required for right breathing ?

A.—A condition of 'non-resistance,' or absolute relaxation of surrounding muscles.

Q.—What is meant by 'surrounding muscles' ?

A.—The muscles which, with the ribs and flesh, encase the lungs, etc.

Q.—What about 'physical culture' ?

A.—Much trouble and confusion arises from physical culture in this connection at present.

Q.—Why ?

A.—Because the natural law about breathing is not yet considered or recognized.

Q.—What do you mean ?

A.—I mean that the confirmation of right breathing, as expressed by a newly born infant, is ignored.

Q.—In what does this confirmation consist ?

A.—The first cry of the infant proclaims life, and the process of breathing and the use of the inhaled air in the lungs by the sound or cry confirms, as nothing else can, the 'truth' of this statement.

Q.—Then there cannot be two opinions about this confirmation ?

A.—There cannot.

Q.—Can you explain automatic deep breathing ?

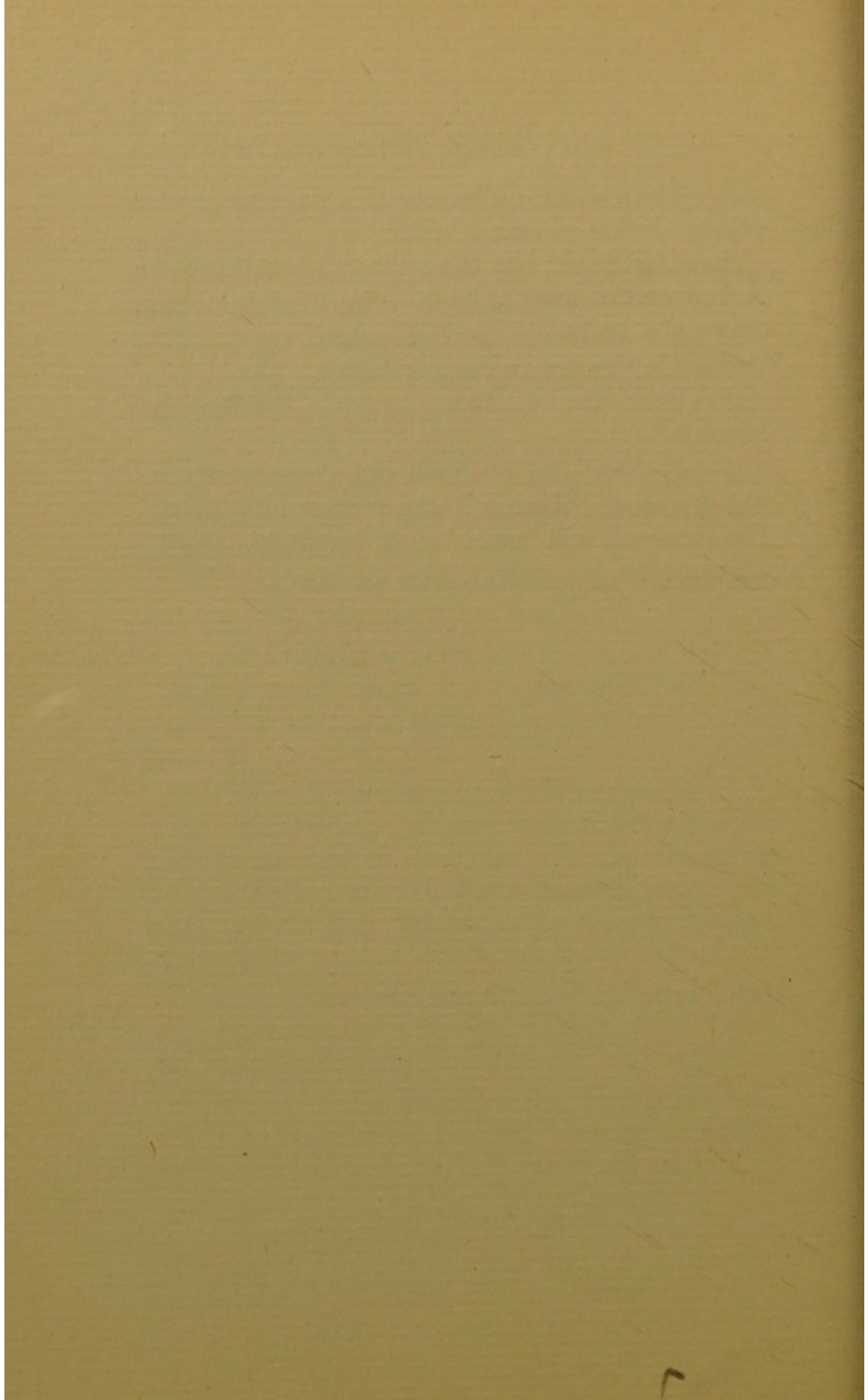
A.—It consists in 'letting yourself breathe,' just as you 'let yourself live,' as an infant.

Q.—You cannot quite lose this natural process without losing so-called ' life ' ?

A.—That is so; but the impaired breathing can be restored to normal by a series of simple exercises on a technical method, which explains the ' principle ' by active demonstration.

Q.—Does the textbook give a preliminary lesson ?

A.—It does; but no book can demonstrate, as you are aware, though it can picture and inform. The textbook will ' start ' right breathing, and its use must be demonstrated by the student.



ABOUT THE LUNGS



CHAPTER II

ABOUT THE LUNGS

Q.—How many lungs have I ?

A.—You have two. Their position and function are very important.

Q.—Can you give me a general idea of their importance ?

A.—They are the containers of a perpetually changing air. On their correct and complete inflation with the ever-present supply all the following effects are borne out: Firstly, the well and entirely filled lungs give an adequate supply of oxygen to the blood, thus sustaining a pure circulation through the arteries. They also maintain the required use of the 'spring muscle,' or diaphragm, which is dome-shaped and extremely elastic, and divides the body (it is also called the 'midriff,' on account of its situation); and it hermetically seals off the so-called 'vital organs' (heart and lungs) from the other organs.

Q.—Then they promote activity in this dividing, dome-shaped muscle ?

A.—If correctly filled, they rest upon or touch the diaphragm, and engender the correct activity.

This preserves and stimulates the digestive faculties, causes true voice production, and induces when desired the power to repose or sleep.

Q.—They seem to be very important. Can you tell me of anything else they can effect ?

A.—Yes. Well-filled lungs are powerful to prevent curvature of the spine, especially in young children; they support and uplift the chest, and are, in fact, the 'greatest actors' in the drama of a human life.

Q.—It would be very careless, then, to breathe wrongly, after knowing this ?

A.—It would be worse than careless; it would be culpable.

Q.—Then children should be kept breathing in the right way ?

A.—They certainly should be carefully watched and instructed.

Q.—You mean that the breathing capacity should be noted as carefully as action of the limbs in childhood ?

A.—That is exactly what should be the duty of nurses and mothers.

Q.—Will people learn this from the textbook ?

A.—That is the hope of the writer.

Q.—What other process is involved with breathing ?

A.—The process of making vocal sounds, which is a 'universal action' following instantaneously

on the respiration or taking in of the air (called 'breathing'), and it includes the downward movement or 'stroke of the glottis.'

Q.—In what does 'universal action' result?

A.—It results in what is known as the 'connection' of the sound-producing organs, or 'organisms,' which make a complete vocal instrument.

Q.—A human instrument?

A.—Yes, a human instrument governed by mind.

Q.—When you say 'governed by mind,' do you mean by 'thought'?

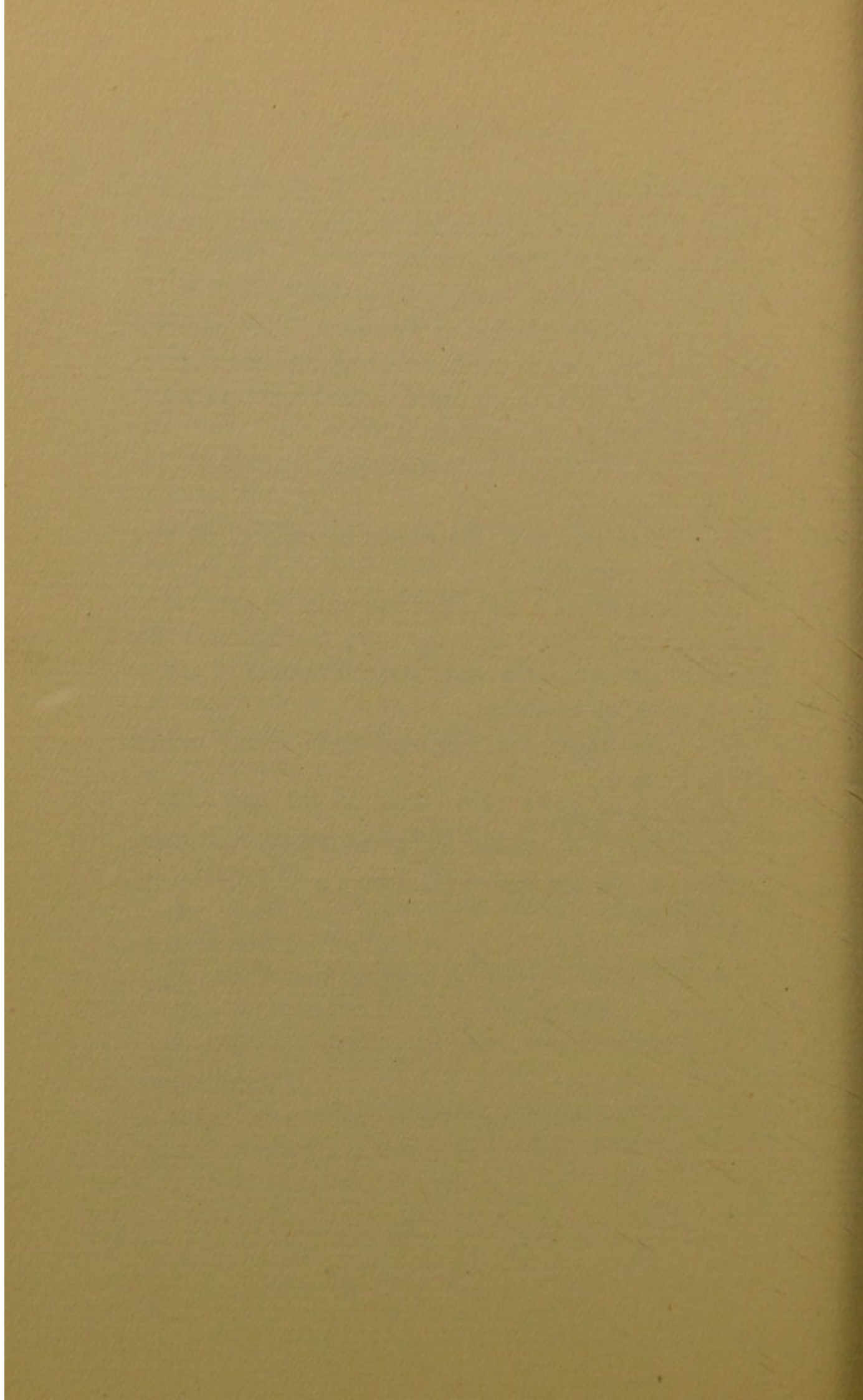
A.—In a sense I do. For instance, if you think you will say 'yes' or 'no,' you realize that the thought you have governs your selection of either word, with its meaning.

Q.—This understanding applies to every action of the body?

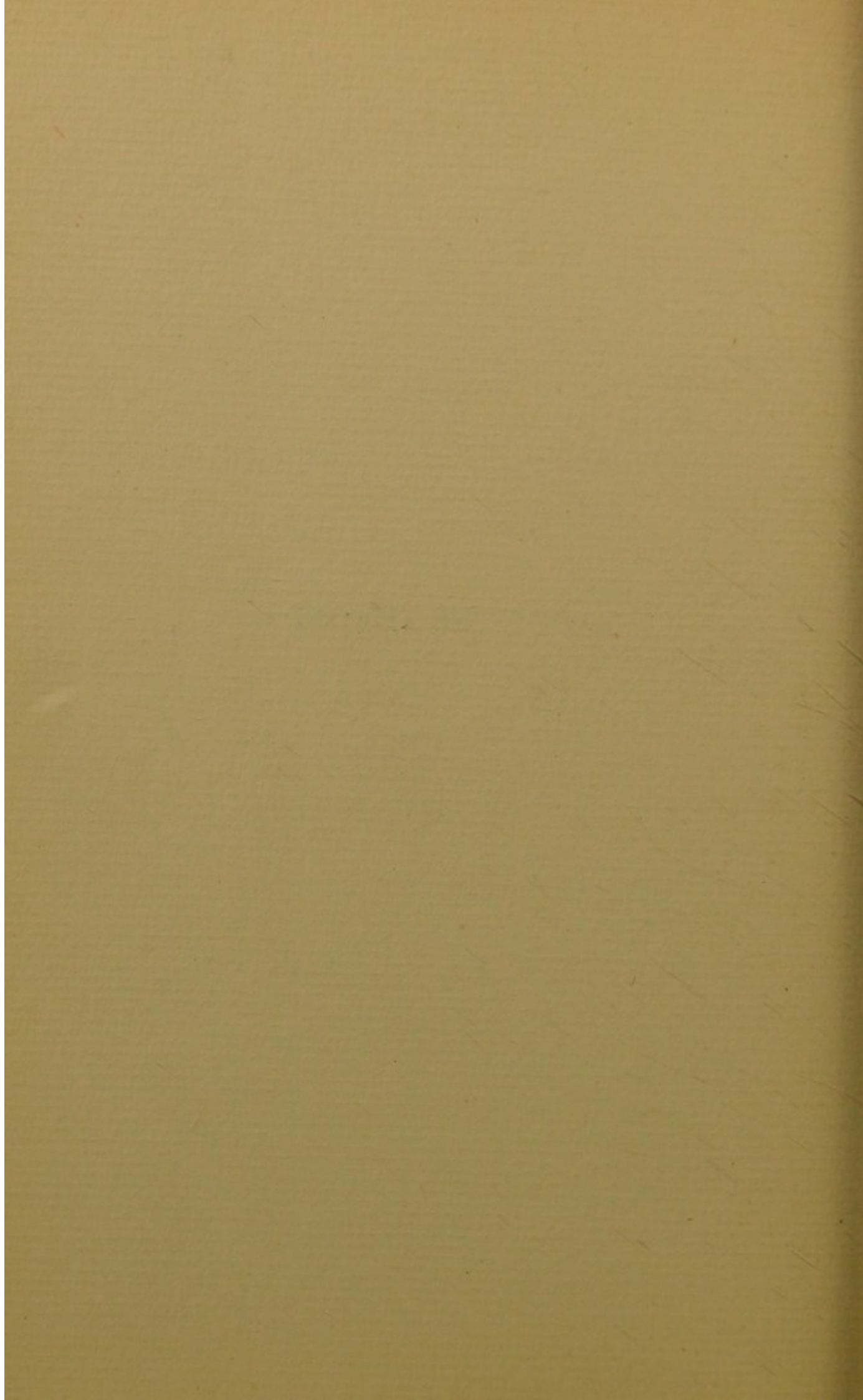
A.—Clearly so.

Q.—Then you wish as a textbook to direct 'thought' to the use of the lungs?

A.—Yes.



ABOUT THE THROAT



CHAPTER III

ABOUT THE THROAT

Q.—How does the air get into my lungs ?

A.—Through the throat and windpipe. The act of inspiration of the air, called in one word 'breathing,' should be automatic and correct from the beginning.

Q.—What is the direct influence of this 'act' on the throat ?

A.—It has the effect of automatic development of all the parts concerned, and is further enhanced by the act of yawning, a frequent habit in infancy. The use of the 'vocalizing' muscles as in crying, laughing, and later in speaking and singing, causes the entire mechanism to still further develop the whole human apparatus, if right breathing is maintained.

Q.—Otherwise does the throat suffer ?

A.—Yes, almost invariably; and if deep breathing is discontinued, throats become delicate. On the other hand, right breathing maintained will keep the throat strong and 'fit.'

Q.—Have speakers and singers proved this ?

A.—They have. Speakers and singers who enjoy full automatic deep breathing, and all its attendant conditions of muscular activity, seldom if ever, have throat troubles.

Q.—Then the recovery of deep breathing and its use would cure nearly all such troubles ?

A.—One may safely say 'yes' to that, apart from conditions of disease.

Q.—Is it the simple unforced 'connection,' or completion of the instrument, which renders the process so beneficial to the throat ?

A.—That is exactly what it is—it is the 'unforced connection' which is 'cause and effect' all along the line.

Q.—Experts in voice usage, then, are those who automatically control their wind power ?

A.—Yes; and the very use of the 'wind' in the correct manner when speaking or vocalizing causes its detention in the lungs.

Q.—Can you explain this ?

A.—To make true sound, the vocal ligaments become tightly closed together, thus shutting off escape of breath, and it is their pressure on the breath which sets up sound.

Q.—Do you breathe through the vocal ligaments ?

A.—Certainly ; they open automatically to breathe *in*, and shut and keep closed to speak or sing (*i.e.*, give *out*).

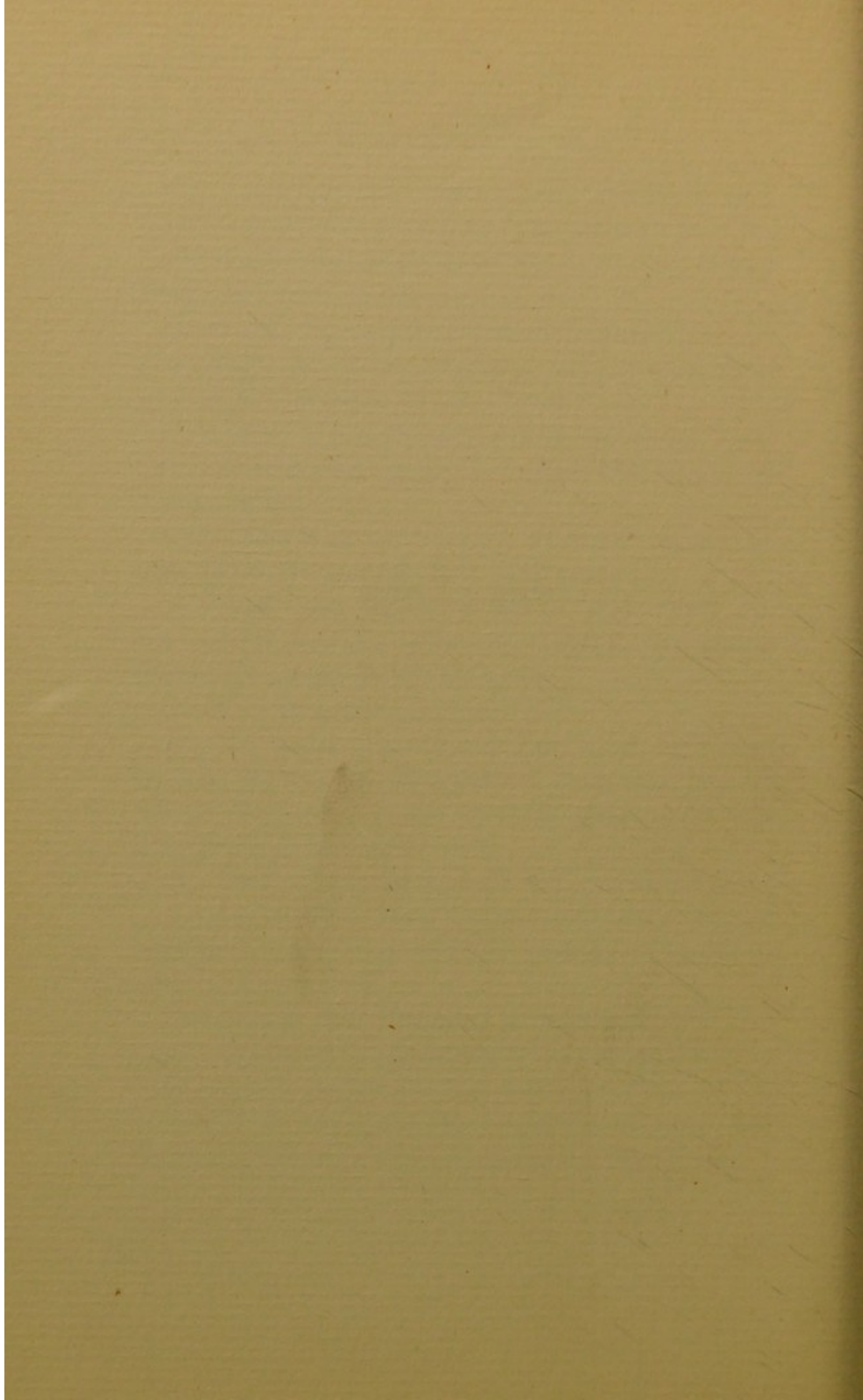
Q.—How is the 'breathed-in' air used up ?

A.—By the blood drawing off the oxygen from it.

Q.—What happens to the actual remains ?

A.—It is automatically expelled through the throat by all the enclosing muscles of the lungs.

THE LESSON



CHAPTER IV

THE LESSON

Q.—Am I to sit down? Why may I not stand?

A.—Because you can more easily relax all the muscles of your body in a sitting position.

Q.—What! Am I to ‘flop’ down?

A.—Yes, sit rather ‘floppily’! Don’t stiffen your arms or rest on your elbows; let your hands lie loosely on your knees.

Q.—What next, please?

A.—Close your mouth quite softly; do not compress or stiffen your lips. Keep your teeth apart, and let your tongue lie ‘flaccidly’ down—spread, as it were, in the cavity of the lower jaw, with the tip well forward and just touching your lower front teeth. Now inhale a long, deep breath through your nostrils, letting them be soft and loose, and opening a little more than usual to assist the breathing. Having done this, suddenly desist, and let the breath be expelled.

Q.—Is that all?

A.—No; it is just what we will call the ‘beginning.’ Now please place your hands lightly on

your 'waist'-line on either side, and repeat the 'beginning.' You will feel a movement against your hands.

Q. What causes this movement which I can feel quite plainly?

A.—Your lungs are filling at their base, and are pressing on the 'spring muscle.'

Q.—You mean the diaphragm?

A.—Yes. Now place your hands, one on your back at 'waist'-line, one in front at 'waist'-line, and repeat the 'beginning.' This will prove a universal movement extending all round the 'waist'-line.

Q.—Having realized so much sitting down, may I now stand up and try it that way?

A.—That is exactly what I wish.

Q.—Ought I to feel larger?—for I do.

A.—Yes, you should feel larger and taller. Please repeat as in the 'beginning,' and continue to breathe in more air until you feel your shoulders lifted. To assist this movement and gain the full benefit, throw your shoulders back with a loose jerk, and let your chest expand and widen. On no account use muscular effort of any kind. The lungs have to do all the work; they are your natural supports.

Q.—Does the use of the lungs train the surrounding muscles?

A.—Yes. You may picture the lungs mentally as inflated 'wind bags' or 'balloons,' which if

properly filled, and ever refilling, are able to support and fill in your framework of bones and muscles; it is, in fact, one of their functions.

Q.—To what is this exercise leading me ?

A.—It leads you to the recovery of the natural art of automatic deep breathing, as in infancy.

Q.—Isn't the confirmation still lacking ?

A.—Quite right, it is.

Q.—How do I get it ?

A.—Exclaim suddenly ' Oh ! ' as if you had been severely pinched.

Q.—Was it right to feel, as I did, that I touched my spring muscle all round my waist when I exclaimed ' Oh ! ' ?

A.—Yes; that gives the perfect confirmation of right breathing.

Q.—Do you find this interests speakers and singers ?

A.—I find it solves all their difficulties, for they only have to apply this technical principle to recover the automatic use of the wind or breath for all vocal and health purposes.

Q.—Am I always to breathe through my nose ?

A.—No; only when practising silent deep breathing, or sleeping; but when speaking or singing, let the breath pass in through your mouth, and escape through it the instant you stop speaking or singing.

Q.—Then I am to clearly understand it is correct

to breathe through the nostrils when silent, through the mouth when using the voice ?

A.—This is a fixed rule of the textbook, and one which all true artists know and follow.

Q.—Is there a difference of opinion on this point ?

A.—The wrong way is taught by some, and is most difficult to unlearn.

Q.—The nose must be flaccid, and not in any way pinched, I suppose ?

A.—Yes; the nose is an important part of the high resonator, and must be kept loose and open for resonating purposes.

Q.—Is the use of the resonators gone into in this breathing lesson ?

A.—It is purposely postponed to the next chapter.

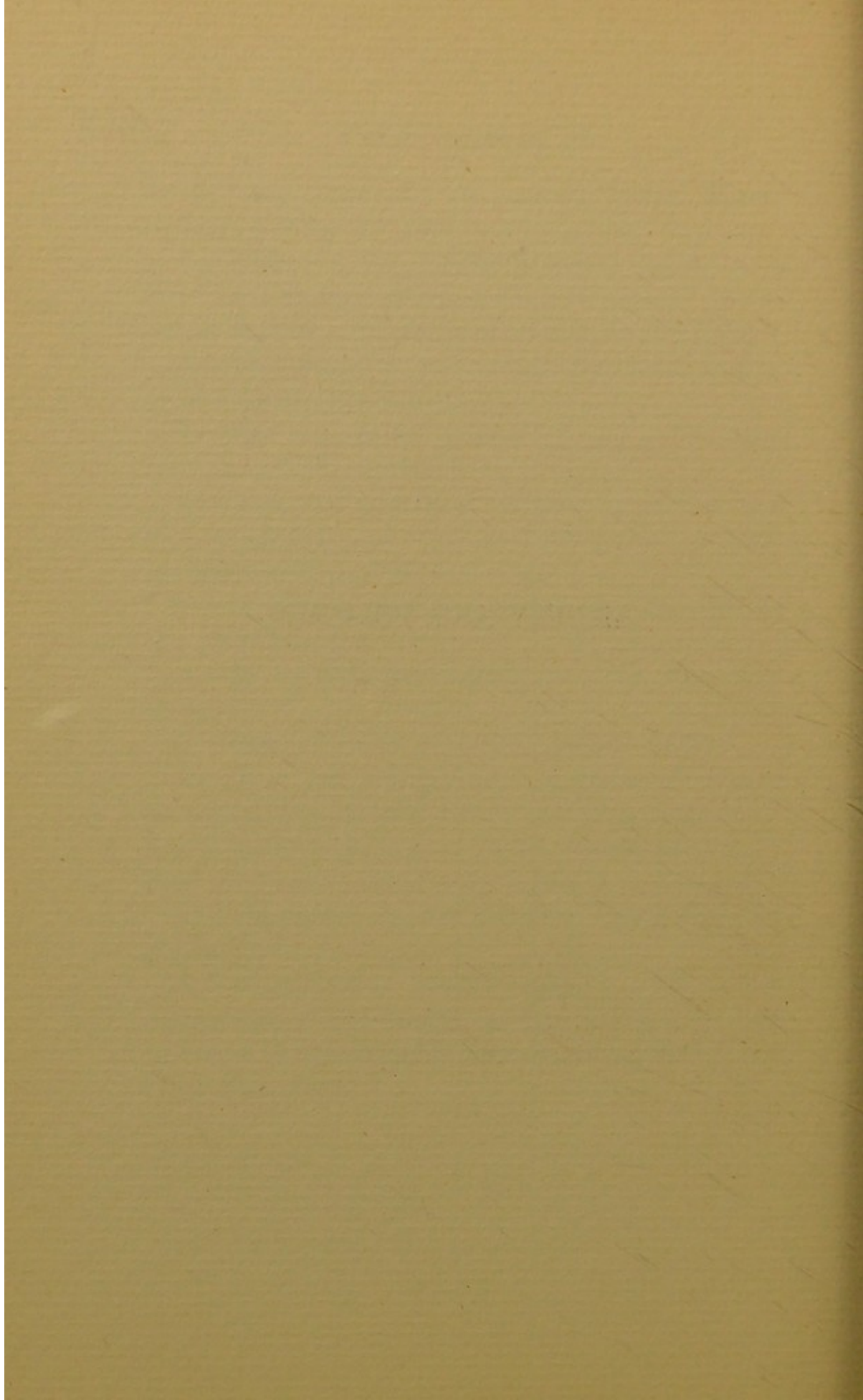
Q.—Ought I to practise the ' lesson ' daily ?

A.—Yes; you would find it a great advantage to regain the simple deep breathing, with confirmation, by uttering the vowel sounds, as already explained, and a great help to health and singing.

Q.—I suppose you call this the ' root principle ' of singing ?

A.—It really is so, and getting this ' clue ' to the correct use of the breath restores youth and tone to voices in a wonderful manner, and prolongs the ' life ' of a voice.

'VELVET AND VOLUME'



CHAPTER V

'VELVET AND VOLUME'

Q.—To what does the title of this chapter refer ?

A.—To the principal qualities in a voice.

Q.—You mean a good singing voice ?

A.—Yes; though good quality in the speaking voice is a thing greatly to be desired also.

Q.—Do the same rules apply to all voice usage ?

A.—In a great measure; but as singing is an 'exaggeration' of speaking 'all the time,' in the sense of vocal sounds being prolonged, enlarged, and identified with the consonants, it is easier to produce the 'velvet effect,' and the 'volume' when singing, than when speaking.

Q.—Can you explain how these qualities can be cultivated ?

A.—So much detailed and individual instruction is involved in a thorough explanation, that a textbook designed for many can only give a résumé in 'brief' of what it means. You have already read in the preceding chapter that it is the connection of the 'wind' and 'reed' parts of the 'human vocal instrument' which produces sound when pressure or the 'stroke of the glottis'

is given to them, on the 'midriff' or 'diaphragm.' The tendency of this natural pressure is to increase and develop the elastic properties of the throat muscles, which, through use, give more 'way,' and so enlarge the vocal passage. It is this cultivated action, in which the root of the tongue is an active principle, that finally engenders the two special qualities called 'velvet' and 'volume.'

Q.—Then the enlarged 'way' gives volume, and the action of using the elasticity promoted gives the 'velvet.' Is that right?

A.—Yes, that is what actually happens. It is quite a thrilling experience to students when they first realize what the action means.

Q.—Is there any system used which appears to be in direct conflict with what the textbook describes?

A.—There is. It results in the construction of what may be termed an 'artificial platform.'

Q.—How do you mean?

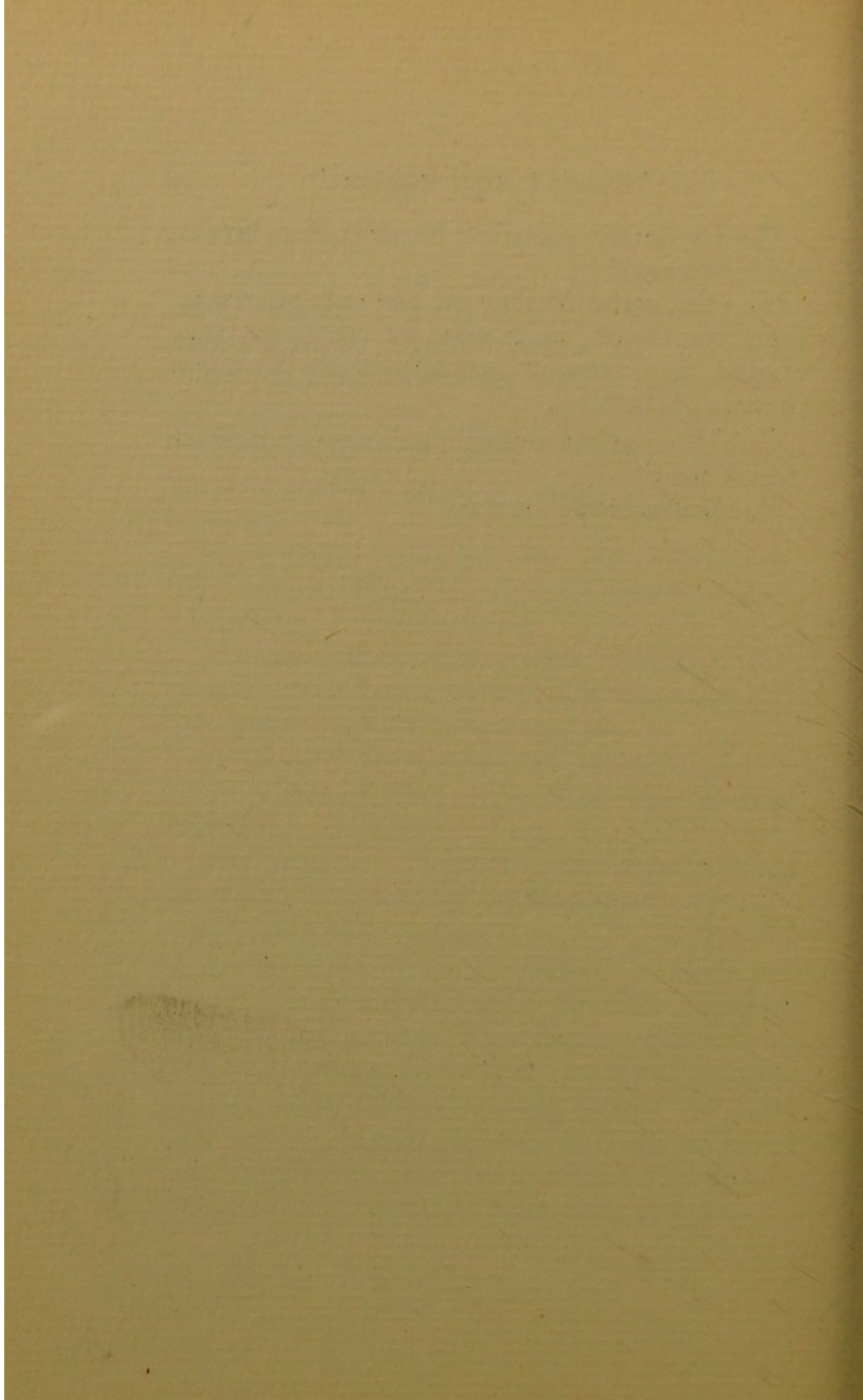
A.—By using 'lung gymnastics,' a lateral and upward filling of the lungs (to the entire neglect of their base), resulting in a pressure against the ribs, thus setting up a rigid 'platform' to work against, instead of the 'spring muscle' or 'midriff.' This produces the hard metallic or piping voice, with little power of expression. This method or system is difficult and exhausting to learn.

Q.—Do the ribs come into use when deep breathing is employed ?

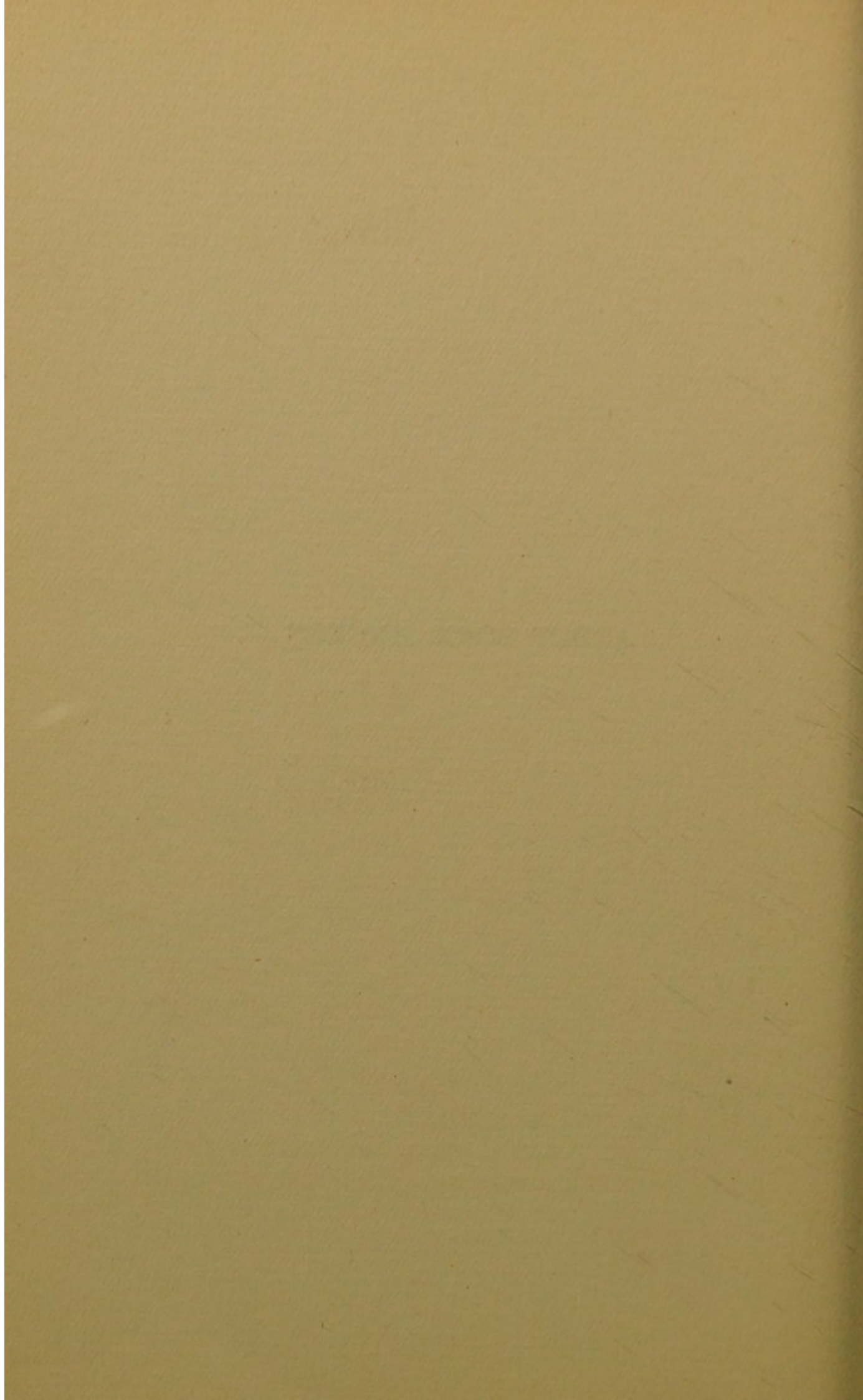
A.—Yes, certainly they do, but only relatively; being the sheath, as it were, of the lungs, they expand, and respond sympathetically to every pressure of the lungs.

Q.—Then 'velvet and volume' in voices indicate correct training ?

A.—Undoubtedly they do.



ABOUT BORN SINGERS



CHAPTER VI

ABOUT BORN SINGERS

Q.—What about 'born singers'?

A.—The 'born singer' is one who has retained the natural automatic deep breathing and its unconscious use.

Q.—Are they aware of it?

A.—Sometimes they are.

Q.—Why don't they teach it?

A.—Because to know a thing vaguely—that is, without 'diagnosis'—would deprive the owner of the desire to impart a knowledge which is usually regarded as a 'personal possession,' not transferable in any way.

Q.—I see that; and the absence of the reason 'why' sometimes causes 'born singers' to 'break down'?

A.—You have answered the question; it is because they have not understood their own gift.

Q.—Can you name instances?

A.—Many could be named, but it is no part of the textbook to give names.

Q.—Do you think if they saw the textbook they would detect the cause of their breakdown?

A.—It is highly probable they would.

Q.—Will the textbook be able to show how to use the wind, or air, in the same natural way that 'born singers' use it?

A.—That is the object it has in view.

Q.—Is there a direct principle involved?

A.—There is a genuine technique and direct principle in the teaching.

Q.—What is it?

A.—It is this: that, having thoroughly acquired the sense of deep breathing, it becomes as automatic to use the breath in speech and singing or any other vocal effort, as it is to breathe deeply.

Q.—How do you mean?

A.—Just this: that the fact of right or deep breathing having been re-established, the physical adjustment of the other accessories of the 'vocal instrument,' and the practice of their use, is as natural as the cry of an infant in its earliest stages.

Q.—Do you mean that it is a matter only of development on natural laws which proves this technique?

A.—That is so.

Q.—Then the use of the 'spring muscle,' or diaphragm, is not the only proof of technique?

A.—By no means. The law governing voice production for speakers and singers, etc., has important details connected with the use of the throat,

surrounding muscles, the tongue movement, and use of resonators.

Q.—What are the resonators ?

A.—They are the sound boxes or cavities in both head (masque of the face) and chest, which can be effectively used with understanding, and which are effectively used without understanding, before self-consciousness (personal sense) invades the kingdom of 'happy childhood.'

Q.—Then the resonators are in automatic use to begin with ?

A.—Yes, they are.

Q.—Do you call this the 'fundamental idea' in breathing and voice production ?

A.—Yes, I do. The textbook insists that the use of the diaphragm (the dome-shaped muscle through the body), 'waist'-line, so to speak, proves the technical and fundamental truth of automatic deep breathing, and sets going by its use all other technical operations in connection with voice usage.

Q.—In what way does it do this ?

A.—It proves that to produce sounds you do not consciously have to 'take breath' or to 'make sounds' as sounds; the breath takes itself, the sounds produce themselves.

Q.—Can you explain what you mean ?

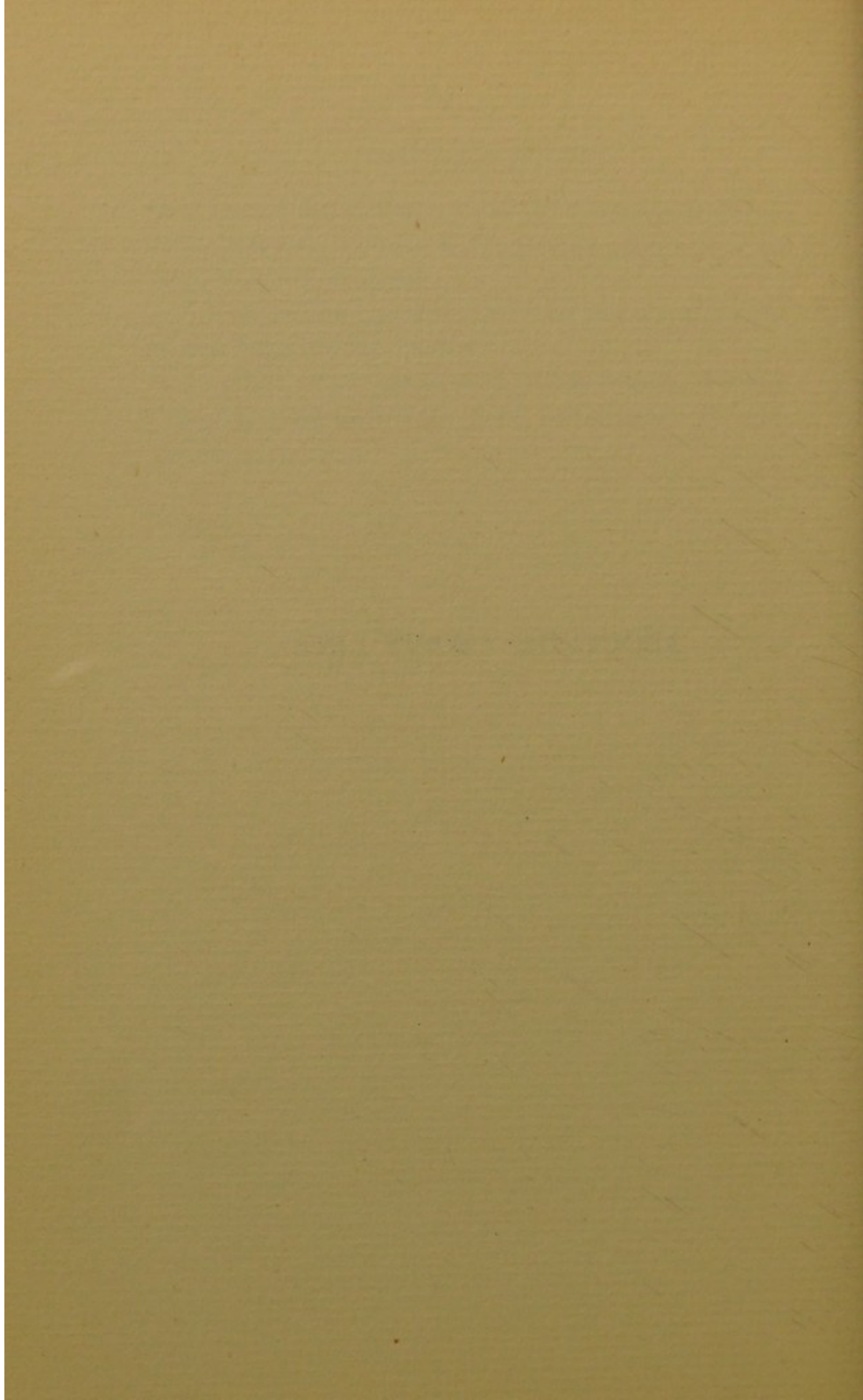
A.—I mean that it is all summed up in this sentence: 'You have to let yourself breathe.' After

you have fully realized your true breathing capacity, you can dismiss it from your mind, just as you do *how* you speak.

Q.—Does the reacquirement of the natural processes improve the health ?

A.—The resumption and preservation of right breathing undoubtedly acts beneficially on the health.

ABOUT THE 'WAVY LINE'



CHAPTER VII

ABOUT THE ' WAVY LINE '

Q.—Have people heard of the ' wavy line ' before ?

A.—Possibly, under another name.

Q.—Does the textbook want specially to draw attention to it ?

A.—Yes, because wrong or defective breathing is the principal cause of its development.

Q.—Will you explain exactly what is meant by the ' wavy line ' ?

A.—To be brief, the ' wavy line ' means that the individual who develops it has ' dropped away from the perpendicular.'

Q.—Does it happen to little boys and girls ?

A.—Yes, sometimes to quite ' tiny tots,' but more frequently to children of four or five years of age. It may follow quickly on an attack of bronchitis, the symptoms of which seem to preclude deep breathing. The natural habit is quite easily lost, strange to say.

Q.—What would be likely to happen in the case of a young child if this loss occurred ?

A.—Probably the cessation of outward pressure given automatically by the lungs in good order would cause the spine to drop inwards, causing what is known as ‘curvature of the spine.’ The soft vertebræ, unsustained by the deep breathing, would possibly bend inwards and sideways, and be called a double curvature.

Q.—Are no steps taken to restore lung power in such a case ?

A.—On the contrary, a child is usually made to lie on a flat board, or may be encased in ‘plaster of Paris’; both these treatments would hinder right breathing, and would retard the recovery of deep breathing.

Q.—Is this generally understood ?

A.—Of course not.

Q.—Can you describe the ‘wavy line’ ?

A.—Why, certainly. It generally begins at the back of the neck, a slight ridge appearing, and the head dropping face forwards slightly, the shoulders lose their flat appearance, and a deep dent is seen between them, the chest falling in, showing that the lungs are failing to support it as required. The curve begun between the shoulders, which gives the blades a curious winglike appearance, may continue to the ‘waist’-line, perhaps developing in its course a lateral curve midway. To balance this curve, the legs of the child will then begin to bend slightly at the knees, so that the legs,

having this bend or curve, all the true ' perpendicular ' is upset.

Q.—Does this condition shorten a child ?

A.—Undoubtedly; but that is the least harmful effect of a spinal curvature or ' wavy line.'

Q.—What are the more serious results ?

A.—As the healthy, robust child has a straight spine (relatively speaking), a flat back or shoulders, a distended chest and straight legs, it becomes unhealthy when the victim of the ' wavy line.' The blood is starved for want of oxygen, the muscles of the body becomes enfeebled, and joy goes out of living.

Q.—Then all this sad condition of the ' wavy line ' is caused, to a great extent, by the loss of automatic deep breathing ?

A.—That is so.

Q.—Do other nations suffer as much from the wavy line tendency as we do ?

A.—They do not. Language, temperament, climate, and many other conditions in the rearing of children seem to maintain better functional breathing in so-called foreign nations.

Q.—Do sport and games help men to keep ' fit ' ?

A.—Without doubt they do. But compare the multitudes who gaze at sports and games with the number engaged in them, and you will see where the need comes in.

Q.—Are not great educational reforms taking place now ?

A.—Yes, they are; but it has not yet been discovered by those in authority how to make the recipients and intended beneficiaries of the ' reforms ' *fit* to benefit by them.

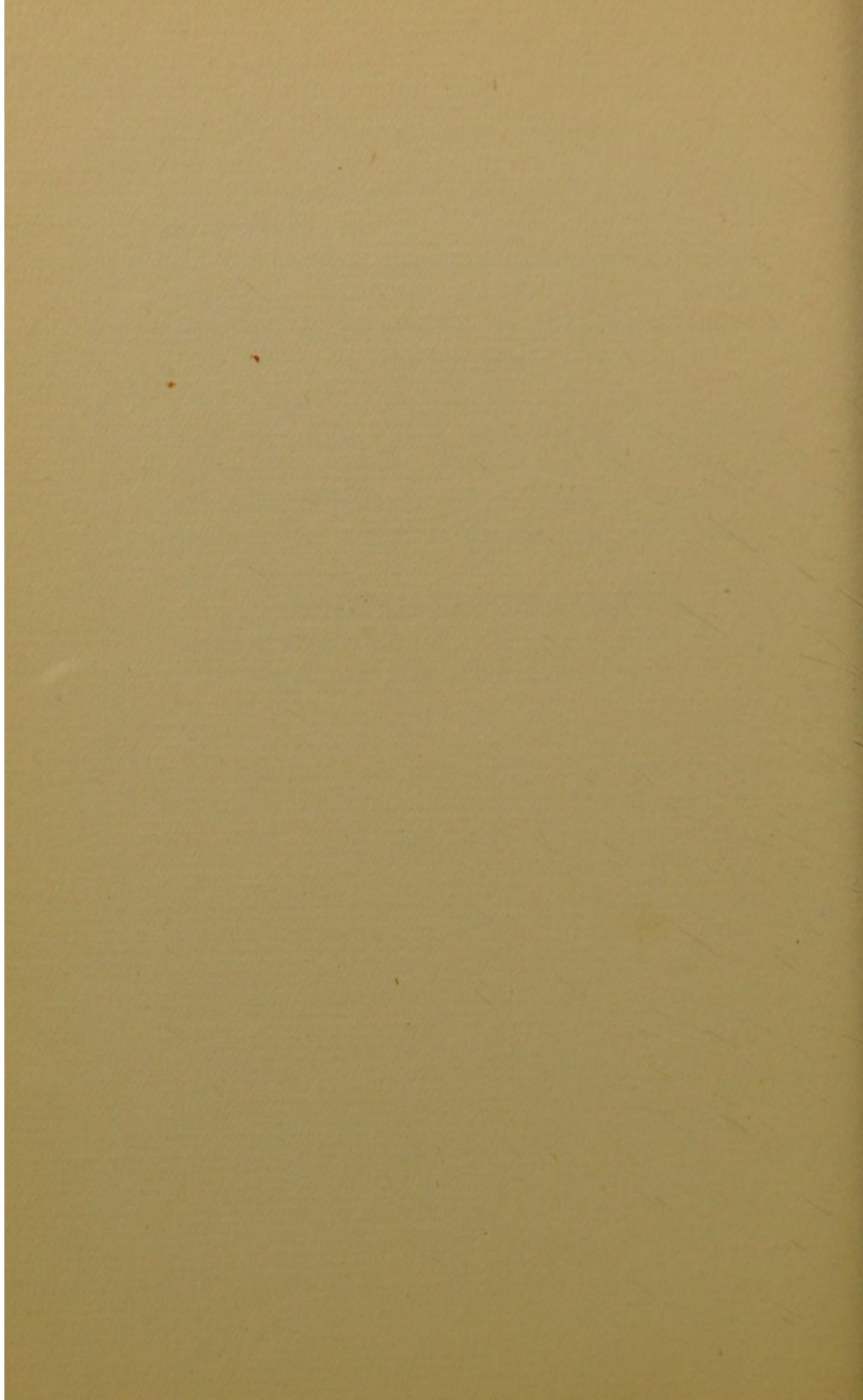
Q.—How do you mean ?

A.—I mean, unless men, women, and children think they are well, they are unfit to receive educational advantages. Correct deep breathing restores the sense of health and strength in a remarkable manner.

Q.—Then the textbook has a good deal of important work to do ?

A.—It hopes to do a lot of good work.

ABOUT A GREAT REFORM



CHAPTER VIII

ABOUT A GREAT REFORM

Q.—Do you think right breathing will improve the physical condition of children ?

A.—It will be a great help. It will at least call attention to the need for care and cultivation of lung power.

Q.—And do you think a textbook can be a 'guide' ?

A.—Undoubtedly it will be a guide in the sense that a 'fingerpost' is a guide to a direction, for it will direct 'thought.'

Q.—Do you dedicate this book to any particular class ?

A.—No; I dedicate it to students and teachers of both sexes and all classes.

Q.—Then women want the real true breathing as much as men ?

A.—They want it quite as much, and from the standpoint of motherhood it is extremely important.

Q.—Do I understand that you think 'experience' the best equipment for a teacher of teachers ?

A.—Reason answers Yes, for a genuine teacher is always learning more, and how to teach better. The art of teaching is in itself a special gift, which no money can purchase, and it includes the love of imparting useful knowledge, with exercise of great patience and skill.

Q.—Then you suggest that everyone can learn this first simple technical truth about breathing, and teach it to others, if they try ?

A.—I think that would bring about a 'great reform.'

Q.—What do you suggest as a means to starting this reform ?

A.—Reading the textbook will, it is hoped, induce many to put its teaching to the test.

Q.—You mean first by testing themselves, I suppose ?

A.—Yes, that is what is intended.

Q.—The 'lesson' chapter provides the testing proof ?

A.—That is the idea, and those who try to follow its simple rules will soon find out what they teach, with results following.

Q.—What about small children ?

A.—Breathing should be taught verbally and by demonstration, according to rules given to the 'little ones,' by those who have proved the practical value of the textbook instruction.

Q.—Will a demonstration confirm the 'lesson' ?

A.—Exactly. The textbook lesson is so simplified that the quite young may learn from it, and cultivated voice users—singers, reciters, etc.—will quickly profit by the ‘light’ the lesson throws on their work, if they happen to be conscious of a shortcoming in their performance.

Q.—Right breathing and its use restored is the only true foundation of good voice production?

A.—Yes. Understood and practised—that is, applied—it is found to be the basis or principle of the tone, pitch, and resonance of the voice.

Q.—Why does the title of the textbook say ‘for every purpose in life’?

A.—Because only right breathing is right for all purposes, and its recovery has restored the voices of clergymen, speakers, and singers in a remarkable and rapid way, besides having an immediately good effect on the general health of young and old.

Q.—The principle involved is that of perfect automatic ‘connection’ of the composite human vocal apparatus?

A.—Yes, it is the ‘connection’ which is the great thing.

Q.—Having got back the ‘connection,’ is it advisable to maintain it by daily practice?

A.—Yes; at first daily practice and realization of the method is necessary, but the ‘automatic coupling’ of the ‘wind and reed’ elements in the

voice soon becomes a matter of habit, for it is the resumption of a natural law.

Q.—The textbook, then, is meant to guide one back to Nature ?

A.—Yes; its object is to restore, and its method is to prove by logic and demonstration that what is right for one is right for all, and for all purposes.

Q.—Does the textbook declare that defective 'voice production' is merely a temporary loss of a natural law of sound production ?

A.—Yes; and its motive and endeavour is to make clear the seeming mystery of 'sound'—mystery caused by divergency of opinion about breathing. The textbook explains away all mystery of 'sound' in animate being, and indicates the true method with its teaching of the fundamental principle of 'automatic deep breathing,' which, understood and applied for vocal purposes, restores a natural and primitive law.

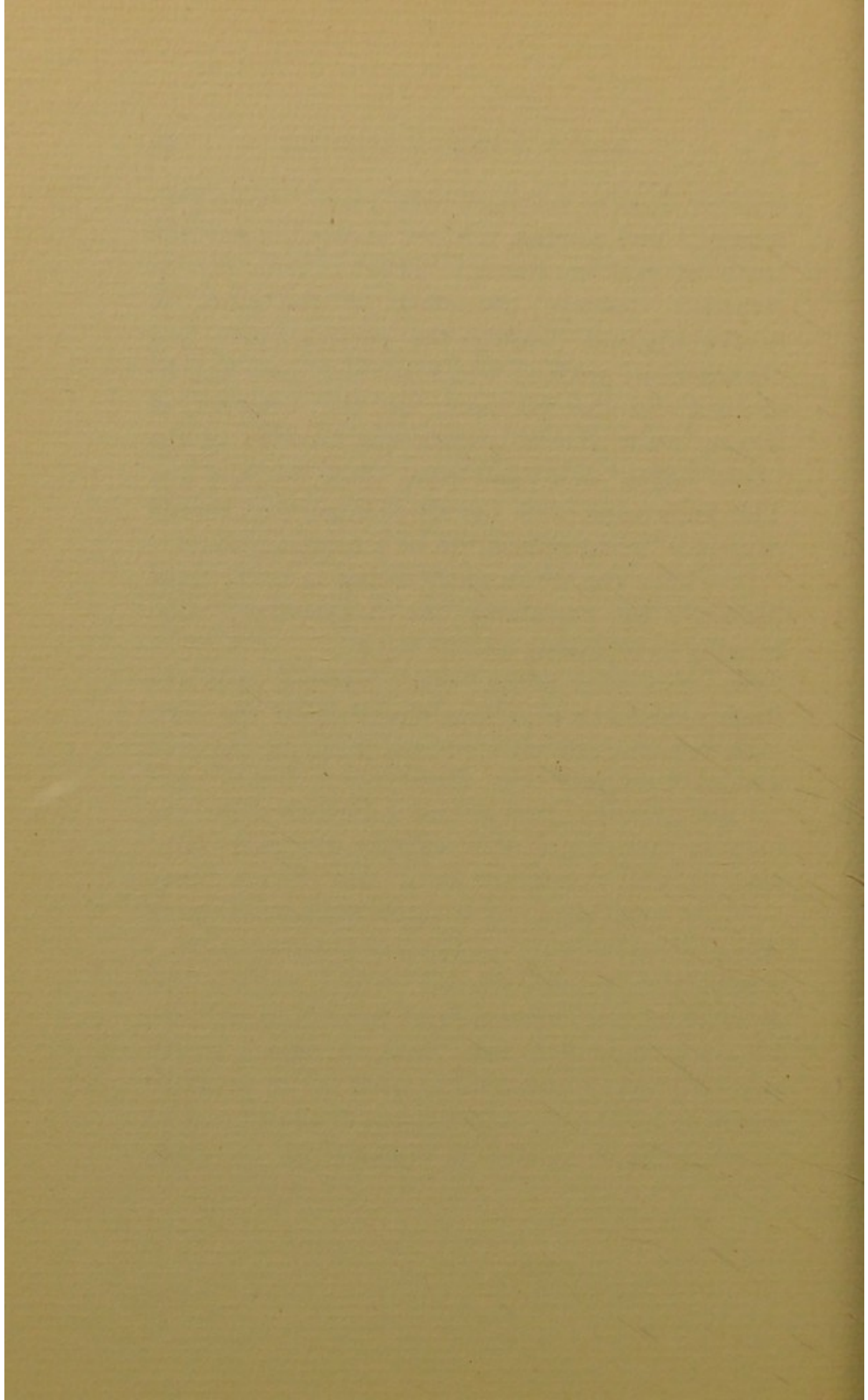
Q.—Can you explain why, in the face of what seems a very convincing argument, there is more than one opinion about right 'breathing' ?

A.—Now you are asking a valuable question ! The answer is this: The teaching of breathing is allotted by doctors to those professing to teach it. These people do their best, but they are quite unaware of the deep significance of the 'confirmation' of right deep breathing, and this 'confirmation,' or production of sound, is relegated to

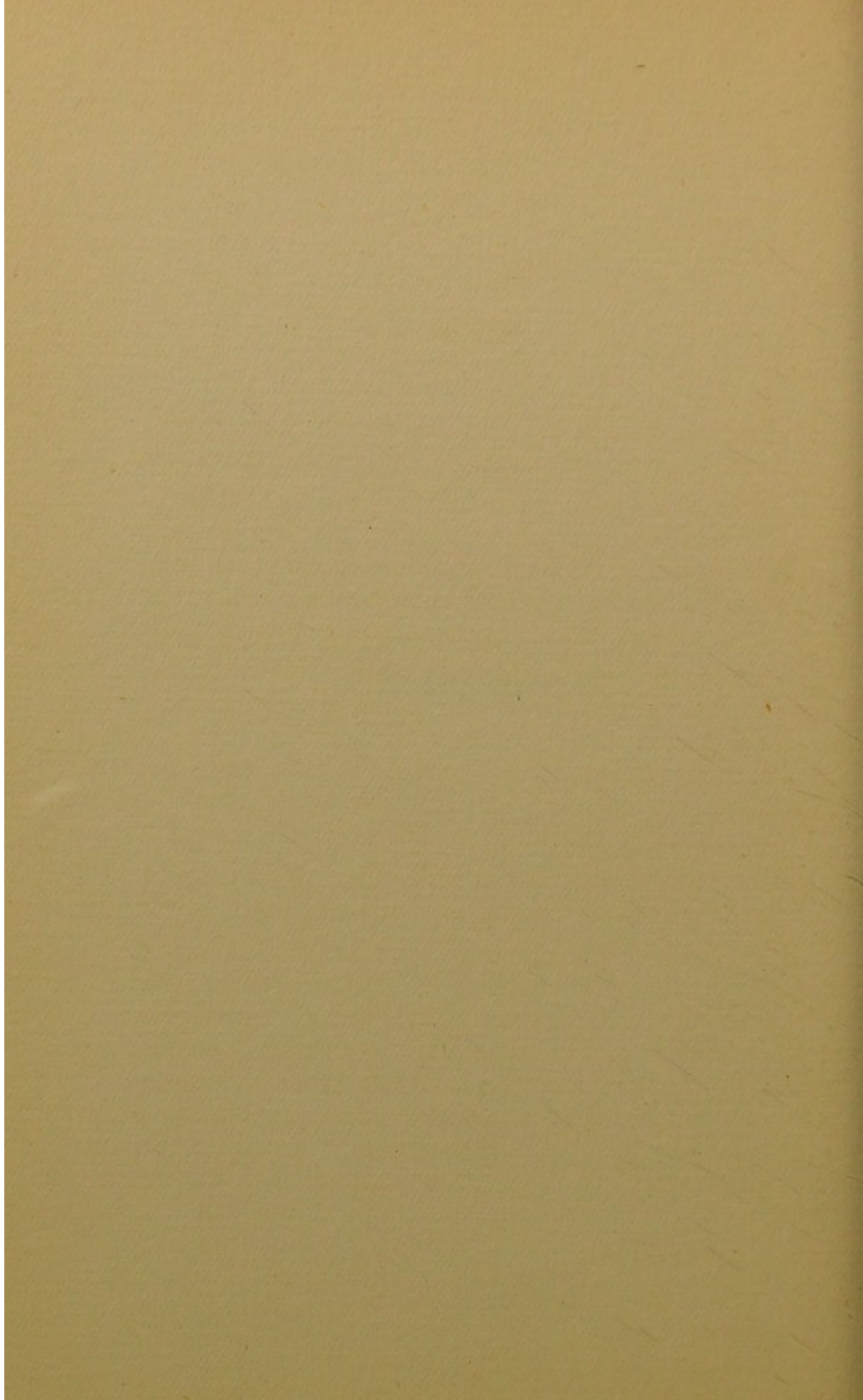
another class of teachers, who teach 'voice production' and singing, without understanding the truth of real breathing. This 'schism' in instruction destroys the effect at the start, it breaks up and distorts the perfect unity and 'connection' without which nothing good can be evolved by the teachers; so the teachers of singing really should acquire the faculties of the 'born singer,' and know what those faculties are. This knowledge, with the art of imparting, should cause the 'great reform' to be a recognized fact.

Q.—Then the textbook is trying to unite these teachings by explaining the rudimentary rules relating to breathing and its use?

A.—Yes; that is the 'task' referred to in the Preface, and the questions have helped the textbook considerably to elucidate its main object—namely, 'reform.'



CONCLUSION



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FINALLY, I wish, as author, to state that the understanding or 'key' to the initial method, explained in the textbook of right breathing, etc., came to me in 1883, when I was living in a little 'upper part' in Mount Street, Grosvenor Square. I knew I had found the true way to restore my own voice, after a loss of six years, and as I grasped the system, a great desire to tell others about it came to me, for I realized it was in the nature of a discovery—a revelation.

I did tell one of the leading London professors of singing, with whom I had studied at the Royal Academy of Music. He said: 'Well, why don't you take pupils, and teach your "discovery"?' adding, "I will send you a pupil to begin with." I was delighted at the idea; the pupil came, and made such quick and good progress that I was soon able to send her to sing to the kind professor. He was surprised and charmed with her performance, approved of the method, quality of voice, and its production, remarking on the sustained breathing and consequent ease. The generous praise and approval of the professor induced me

to take up teaching seriously, as he had said, 'Go on'; and from that time, in 1883, I have taught with equal success men, women, and children. It was a labour of love from the beginning, later to become an important source of income when the need came.

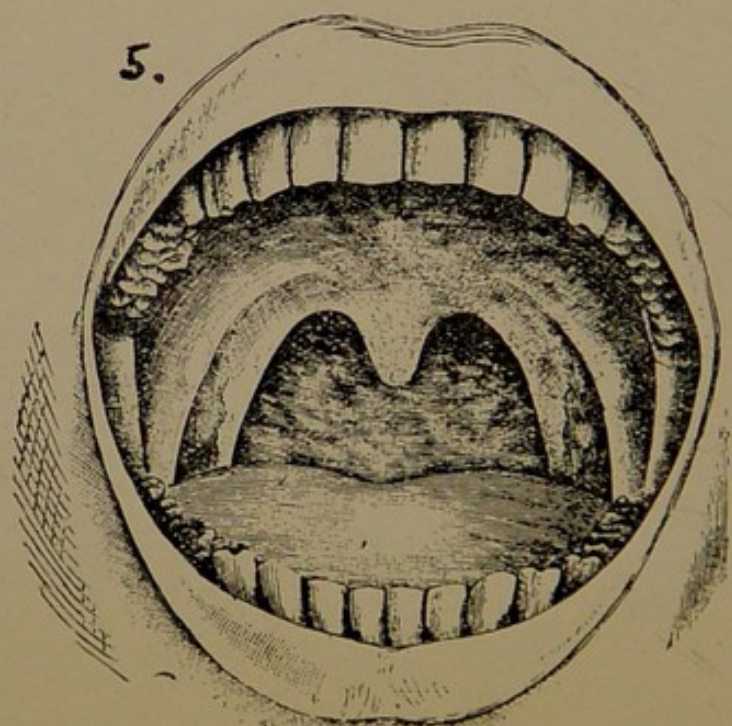
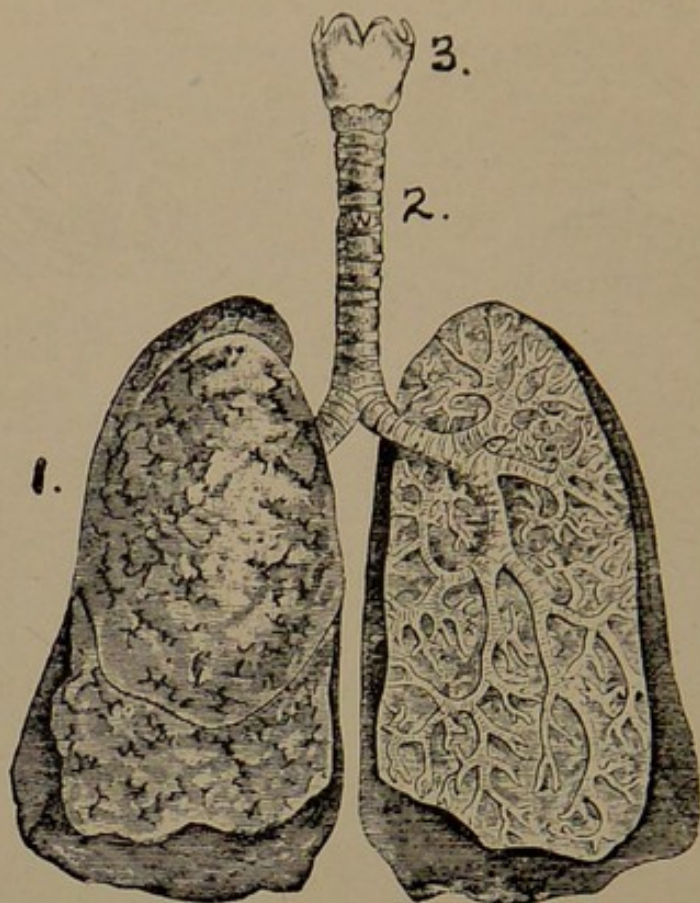
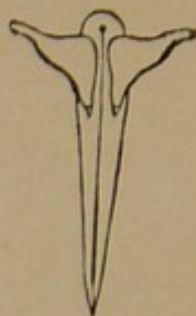
I have ever been most grateful to the kind professor who declared I had a natural 'gift' for teaching, and by whose advice I began to give lessons in singing with all the necessary studies allied to the art. The textbook merely relates the details of the initial discovery.

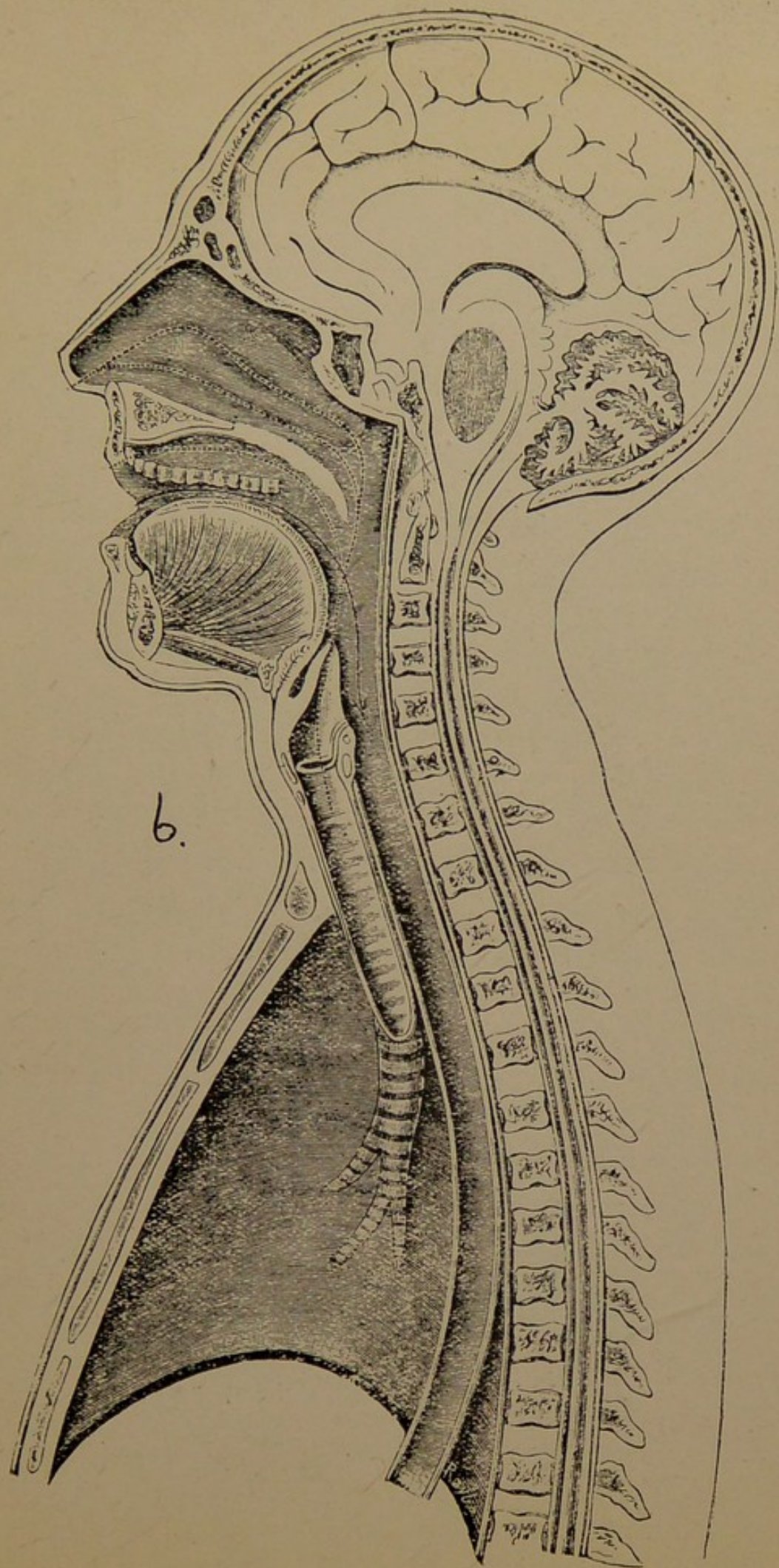
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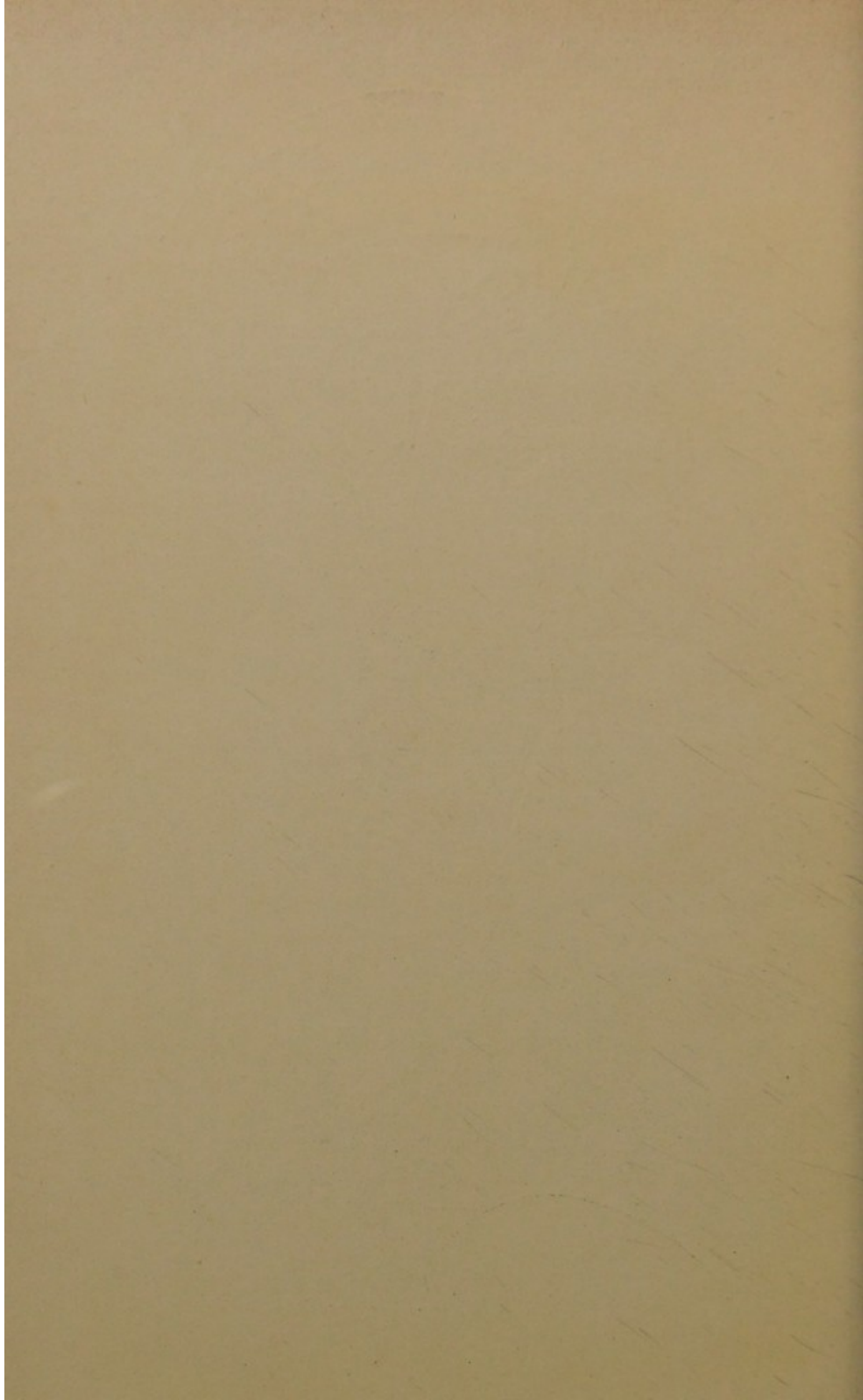


CHART EXPLAINED

1. The two lungs showing outside of right lung; inside of left lung.

2. The windpipe attached to larynx and lungs shows series of cartilage subdivisions or joints, proving its compressibility (*i.e.*, non-stiffness).

3. The larynx or voice box, in the cavity of which is placed the glottis with the vocal ligaments (or cords) on each side of opening.

4. The glottis in three positions—*i.e.*, in repose, yawning, and closed for vocal use.

5. The open throat—'uvula' well elevated, side walls drawn well apart, tongue flattened.

6. Complete diagram, including head, shows where root of tongue is attached to the larynx, thus forming a 'lid' to the voice box and its contents when swallowing, and capable of being drawn well down in order to open cavity or larynx, and permit vocal exit and full breathing capacity, etc.

This plate also reveals the fact that the two so-called 'resonators' are about equidistant from the larynx, and a pencil placed on outside edge of chest extension and frontal bones of face, shows

a curve or dip, which is no doubt serviceable in the emission of vocal tone, and in the production or pitch; it also frees the chest resonator for greater activity, and enables a singer to increase the compass of the voice at both ends.

The diaphragm or midriff hermetically seals off the vital organs (heart, lungs, etc.); the 'gullet' or 'gut' alone penetrates it, and carries food to the stomach. The diagram indicates the high curve of this 'spring muscle,' which is repeated from side to side as from front to back. Thus it will be seen it has direct influence on all the waist muscles.

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