Clarinet Clarity: An Interview with Julie DeRoche

Dr. Mary Ellen Cavitt

Part One.
This interview will be continued in the June issue of the Bandmasters Review.

Julie DeRoche is Chair of the Music Performance Department and Clarinet Professor at DePaul University in Chicago and has performed frequently in the clarinet section of the Chicago Symphony. After having read many of her clarinet pedagogy articles over the years, I was excited to be selected to be in an administrative development program with her last summer at Harvard University. What follows is a discussion we had about clarinet skill development. I hope you enjoy!

—Dr. Mary Ellen Cavitt

**MEC:** I wanted to start out by speaking with you about various component skills of clarinet playing. There are some things that are different about clarinet playing position than other instruments. Can you discuss your views on clarinet playing position?

**JD:** For me, the goal is to try to get into as natural a position as possible, whether you’re standing or sitting. Because the instrument is so big in the beginning, most of the time young kids are going to be sitting. I think the main thing is to get the weight on the “sit bones,” not back on the tail bone, and then let the spine just have its natural curve so that the body isn’t rounded. This is probably typical of any wind instrument and keeps you from cutting off your wind supply. The shoulders should be relaxed and the upper arms basically just hanging down at the sides, not allowing the elbows to poke up in any way. The hands will form sort of in a tent shape, one on top of the other. The upper arms are naturally picking the clarinet up, moving it toward the face and the mouth. There’s not a lot of tension through the arm. The wrists have to be to the side of the clarinet, but moving slightly toward under, so they’re not lifted. If the wrist is bent too far in or too far out, it creates an unnatural position. Any time you extend it too far one way or another, tendonitis issues may start to show. I always like to say, “put your hands in a position similar to praying, relax the arms, and the heels of your hands come away from each other, and then put one on top of the other,” and that’s pretty good. The key is to keep yourself erect on your spine, otherwise fairly relaxed.

**MEC:** Sometimes you see professionals with their legs crossed and their bell on their knees. How do you feel about that?

**JD:** To me, it doesn’t solve the intended concern. Usually a neck strap is used because of the potential for tendonitis, but that comes from incorrect hand, wrist or body position, rather than from the weight of the clarinet. Instead of thinking of hanging the clarinet on the right thumb, you actually want to have both hands hold the clarinet, taking the weight of the clarinet and balancing it between the two hands. You use enough grip so that you’re actually holding on. I wouldn’t really play this way, but I can take my right hand away from the instrument and play a C, D or E (on bottom of the staff),

**MEC:** Why don’t you like the neck strap?

**JD:** I think it’s a bad habit.

**MEC:** Is it because their top lip isn’t doing any work?

**JD:** It’s because the clarinet gets heavy after a while, and I think it gives them an extra bit of security. I confess that sometimes when I have had a really technical passage and I just want the bell to be more still, I have done that. The problem is the knees will muffle some of the sound. It really does affect the sound, but a lot of clarinet players would not like me to say that. And, because you’re kind of bent down, it doesn’t facilitate breathing. However, I hate neck straps. If students with small hands need to use their knees, I’d rather they did that than use a neck strap.
balancing the clarinet between my upper teeth and my left hand, not even using the right thumb at all. In other words, students should not rely on the right thumb alone. I also think that both hands should put slight upward pressure toward the top teeth rather than having the clarinet sit on the bottom lip, for a lot of reasons I’ll talk about later. If you’ve got it hanging on a neck strap, usually the strap has to be fairly low, because otherwise the clarinet’s waving around in their face when they’re not playing. They tend to have it set too low, then reach for it with their neck, and let it hang on the bottom of their embouchure.

**MEC:** It sort of dampens the reed.

**JD:** Yes, and again, usually someone begins using a neck strap because they are diagnosed with a tendonitis problem. With the strap, the problem may improve a little because the clarinet is not quite so heavy, but other problems filter in, and the original problem doesn’t really get solved. If you find a way to fix the original problem (incorrect hand, wrist or arm position), they usually don’t need the strap. Maybe if there’s a band director out there who says, “I put all my fourth, fifth, sixth graders on it because it’s really helpful,” then I’m not going to argue. But they still need to be in the right body positions.

In fact, I believe we should be starting them on a C clarinet, but we’re not. It would solve so many problems in so many ways. C clarinets are getting easier to find. Orchestral players use them because they sound a little different in the orchestra. If you transpose a C part on a B-flat, it blends into the orchestra more. If you’re actually playing on a C, it’s brighter and it sits above the orchestra, as does a piccolo. It actually sounds different, so orchestral players use C clarinets frequently when the composer asks for them. That’s been going on for a while. The C clarinets are much lighter and smaller for the young player to hold and the tone quality would not be too bright for their band.

**MEC:** Are there any general rules for hand position you use to teach students?

**JD:** I prefer a U shape between the thumb and index finger in the bottom hand and more like an angled V in the top hand. The left hand index finger’s middle knuckle should be hovering right around the A-flat/G-sharp key, and the first knuckle right around the A key. The fingers should not be pushed down and away from those keys, which I see a lot. That often comes from people in marching bands, who are told to lift their elbows and make a C position with the fingers. This causes a big gap between the first two fingers in the left hand and a lot of tension.

**MEC:** What part of the finger comes in contact with the keys?

**JD:** The pad, so you can close the tone holes. The right hand thumb is on the wood in the back, where the thumb rest is. In a full-sized thumb, the thumb rest will be near the middle knuckle, slightly toward the tip of the thumb. Then the fingers cover the tone holes naturally at the pad of the finger, in the hand position that I described. (Hard to describe without demonstrating!)
Clarinets in the naturally high position. When your mouth is closed, if you think about where your tongue is, you can probably feel your upper molars with the side of your tongue, and the tip of the tongue is either floating behind the upper teeth, or it might even be touching them.

When you open your mouth, you just leave the tongue relaxed in that same position, and think of saying “shhh...,” like you’re telling someone to be quiet. The secret is, you have to make sure they’re saying “shh” and not some weird alteration of that. If they blow like that, that’s the first step to good tone and consistent pitch. To reach the very highest altissimo, when you get above high E, you may have to give yourself a little more space in the mouth, but not that much.

MEC: Do you use a syllable?
JD: If I were going to use a syllable, I would use Robert Marcellus’s syllable of “eee-yuh,” and then give a little more space in the mouth for the altissimo. I almost hate to say that because most of the time, once the students learn to play the altissimo, they’re good enough that tongue position alterations, which are not done often and are subtle, will start working instinctively.

Then for the embouchure I would ask the students to open their mouth slightly, maybe a centimeter or maybe a little more; it depends. The best place for what I call the pressure point (which is where the reed touches the lip, which touches the teeth) is right where the reed and mouthpiece separate. You usually only have to open the mouth about the width of your finger, unless they’re tiny little fingers. Then I start with the bottom lip. Roll the bottom lip over the bottom teeth, using the lip muscle. In other words, don’t let them roll it in with their finger or with the clarinet. You want to get them in the habit of using the muscle. Roll the bottom lip into their mouth, over the bottom teeth until the front edge of the bottom teeth is right about where the color change is between the lip and the skin. That’s important because it makes them get some of the next steps.

MEC: Do you roll over the teeth or do you just cover them?
JD: The place where the clarinet is going to sit is right at the color change between the lip and the skin. The top front edge of the bottom teeth will be right at the line where the lip and skin meet, and that’s because I don’t like the reed resting just on the lip tissue because there’s no muscle there. Or, if you go in too far, you’re only on your skin, and that’s going to be painful and not sound good. You want to get on the line of muscle that controls your lip. I would say you’re rolling over your teeth; you’re just not going ridiculously far in. You should still see a triangle of your lip on either side of the mouthpiece.

Think about the cheekbones and the jaw itself, which is the bone (not the muscle,) that goes up and down when you talk or eat. The cheekbones, jawbone, gums and teeth - the whole structure of your face is the structure of your embouchure. Don’t think of the embouchure as going around the mouthpiece. Think of your embouchure as going against the structure of the face. I describe it as being like the beams and girders of a building. Without those, you can build the walls, but the building will still fall down. It needs its structure. We use our cheekbones, we use our gums, we use our teeth, and we use our jaw to be the structure of the embouchure. You open your mouth that small amount, and you gently relax the jaw forward, then the lip goes in as we just discussed, and the chin muscle goes flat against the jawbone. I ask them to open the
mouth, relax the jaw a little bit forward, stretch the bottom lip in, and chin muscle down, and the chin muscle will feel like it is stretching down and across the jaw. Then the corners go in toward the sides of the mouthpiece.

**MEC:** Is this for someone who has a natural overbite?
**JD:** If you relax the jawbone forward, it will be moving so that the top and bottom teeth get close to being parallel to each other. If there’s a big overbite, they still slide the jaw forward a little bit, but their teeth may not be parallel. The vast majority of people eventually are going to have their top and bottom teeth pretty much parallel. This keeps them from biting up into the reed, and it provides good support. You get control of the reed, without bite. You know that sound that everybody gets when they can't get the high notes, like a grunting undertone? If you have them slide the jaw forward, higher notes will speak, and the undertone will disappear. That's when you'll know the embouchure is in the right place.

Then, the corners of the mouth stay tight against the eye teeth (or canines) and will move inward toward the mouthpiece. (I do not teach the smiley embouchure because that makes people bite.) The top lip should be working. In other words, it has to do something up there. It’s tight against the gums, and it’s tight against the teeth. Then you blow by saying "shh." So, you set the structure of the embouchure by moving the jaw forward, you set the muscles around that structure, and then you blow, “shh.”

**MEC:** So you’re doing a single-lipped embouchure.
**JD:** Yes, I do the single lip because if you use your top lip, you don’t need to do double.

**MEC:** Is your top lip pushed down at all?
**JD:** Yes, it pushes tight against the teeth and gums and down against the mouthpiece. That’s where I think you get a lot of control. Also, if you stretch your top lip under your nose, like you have an itch right there, and you are relaxing your jaw forward, your chin muscle automatically goes down, even when you are just a beginner. Those muscles are all connected. If they’re going like this [bunches the chin], it’s because they’re not using the top lip and not moving the jawbone forward. They need to stretch their jaw forward through their chin muscle. I make a big distinction between jaw position and chin muscle, but they work together beautifully if they are in the right place.

**MEC:** At what angle do you have your clarinet? Does it vary?
**JD:** The top teeth are on the top of the mouthpiece, and your jaw is going forward; your bottom teeth are parallel to the top teeth. Now to find the angle, you can actually move the clarinet up and down to find a sweet spot. If the jaw’s correct and the embouchure’s there, but the clarinet is angled too far out, the tone will spread. If you angle too far in, it will be pinched. If you get it right, all of a sudden you’ll go “ahh,” because the sound will be controlled and vibrant, and that’s how you determine the correct placement. So, the angle is determined by where it sounds best.

**MEC:** So which way do you direct your airstream? Going down the horn? Across the reed?
**JD:** It’s going against the reed.

**MEC:** What part of the reed?
**JD:** Right above where the pressure point is. Your goal is to blow against the reed, so that it beats against the facing of the mouthpiece.

**MEC:** So more like a little bit below the tip.
**JD:** Yes, and it’ll be there if you’re going, “shh, shh.” Because if you use your tongue correctly, you’re keeping the wind “tunnel” consistent, which will mean you’re getting a good, even tone.
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**MEC:** Do you prefer to tell students to blow against the reed rather than across reed?

**JD:** Yes. Tell students the point is to make the reed vibrate against the facing of the mouthpiece. If you blow into the aperture, you’re going to spread it apart. Instead, you want to make the reed and mouthpiece meet each other. It will feel as if the air is going downward, but it’s really going against the reed. They get an infinitely better sound this way. I’ve done this in clinics for music educators. If you have your tongue in that “shh” position, you can’t puff your cheeks. The air is going forward; it’s not going sideways. Puffy cheeks are a result of the air going sideways because the tongue is too far down. Often teachers say, “don’t puff your cheeks,” but the problem is not the cheeks. If the cheeks are puffing, it is because the tongue is low and the air is moving to the sides. The tongue has to be in the right position so that the air doesn’t go sideways; it goes forward, against the reed. The tone evens out, and you don’t have to change the tongue position for throat tones, high notes, etc., especially on better clarinets. You’ll have a lot better pitch, and you’ll enjoy the sound. When there are twenty students playing at once, you’ll enjoy it even more. It takes a while for young students. Obviously they don’t put it all together at once, as we all know. So I just have a mantra that I developed: Is your pressure point right? What about your chin? What about your corners? Are you using your top lip?

**MEC:** So the pressure point is where the reed and the mouthpiece split, and where the line of muscle at the color change between lip and skin meet the reed; that’s all in one place, right?

**JD:** For me, it’s the place where your reed touches the lip, which touches the teeth. That’s at the color change, where the muscle line is. People always ask me, what if you have a thick lip, what if you have a thin lip? It’s mostly the same, except if it’s a really thick lip; maybe they can’t put quite so much in. If it’s a thin lip, it doesn’t matter at all. They still can get on the pressure point.

**MEC:** Have you seen people who are touching too much of their lip with the reed?

**JD:** They’re usually puckering the lip out too far and not rolling it around the teeth enough. If you see the color change when they are playing, they don’t have enough in. But, if the lip disappears entirely, they have too much in. The bottom lip shouldn’t be so far gone that it’s completely swallowed because then they’re usually putting the reed on their actual chin muscle, and they’ll get a rub right here. There shouldn’t be too much visual evidence you play, such as a rub mark on the chin. You should see some lip on either side of the reed, but that’s it.

**MEC:** Sometimes you see students with their ligature touching their chin. Would you work with the mouthpiece and barrel and match pitch, or are you looking for a particular tone when they start?

**JD:** First of all, if the ligature is touching the chin, the angle is too close. I always start students on the mouthpiece with the barrel on only; it’s easier to hold. The squawk is funny, and everyone laughs. Once they get a noise, it’s kind of a fun way to start.

As far as teaching students, I think there’s nothing wrong with getting on the whole instrument as soon as possible. Actually let them start playing some notes so that they have more fun with it. For me, the better way to listen is with the clarinet in your hands, trying to get a good clarinet sound. I can’t really describe tone in words, but I think of it as a spectrum of color, and I want the whole spectrum. I don’t want just the dull colors, I don’t want just the bright colors, I want it all there.
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Sometimes I describe it NOT as a donut with a hole, but as a jelly donut: lots of vibration in the middle. If you're trying to project in a large room, you need both brightness and depth, and you need center for sure.

**MEC:** How do you think of center when playing clarinet?

**JD:** Well, it's an aural thing. I think you get it by having that tongue position. That will give you center. I think of it as not too bright, and not edgy, so it has a soft character. It's not hollow. It's not like if you were singing with your tongue really pushed down. It's more of a natural voice.

Dr. Mary Ellen Cavitt is Associate Professor of Music Education at Texas State University. She received the bachelor's and master's degrees in music performance from The Juilliard School and a doctorate in music education from The University of Texas at Austin. While teaching instrumental music at DeLay Middle School in Lewisville, Texas, New Braunfels Middle School, and Georgetown High School, her bands received numerous awards. In 1992, she was named Outstanding Young Bandmaster of the Year at the Texas Bandmaster Association Convention/Clinic.

Dr. Cavitt served as adjunct professor of horn at The University of Texas at Arlington and Southwestern University in Georgetown, Texas and performed professionally in several orchestras in Texas, New York, and Arizona. She has served on the music education faculties of Michigan State University, The University of Arizona, and The University of Texas at San Antonio, and coordinated the instrumental music programs as an administrator for North East Independent School District in San Antonio, Texas.

Dr. Cavitt is an active clinician and adjudicator in instrumental music and serves as mentor to several band directors in Texas, Mississippi, and Louisiana. Her research has been presented at regional, national, and international conferences in the fields of music education and music therapy.