

PIANO TEACHER, PEDAGOGUE OR THERAPIST

Excellence is Excellence!

The idea for this article occurred to me while sitting in the physical therapy room at St. Lawrence Rehabilitation Center in the middle of my fifth week following a stroke I suffered on March 29, 2007—the morning after I returned from the 2007 MTNA Collaborative Conference in Toronto. While my physical therapist patiently broke down the elements of walking, I began to praise her excellent teaching style. In fact, she demonstrated all the attributes of a great music teacher. In other words—excellence is excellence!



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This particular session had a profound psychological affect on my future rehabilitation work because I could now focus on physically improving, while relating it to what I enjoy doing the most—teaching piano and pedagogy. I became fascinated with how similar my productive therapy sessions were to productive music lessons.

As a stroke patient in a rehab center you have several types of therapy and, therefore, several different therapists. Since my brain was still functioning very well cognitively, the ever constant analytical and critical pedagogy in me never stopped working, and I noted constantly what “worked” for me and what didn’t. Eventually I identified 10 traits or skills that seemed to illustrate the similarities in excellent teaching and excellent rehabilitation therapy.

1 The Excellent Therapist/Music Teacher . . .

Lets the patient/student talk first—it can make or break the lesson/session

I can’t remember a single session where the therapist didn’t do an emotional barometer check on me before

starting the planned activities for the session. When my spirits were low or I had not slept well, the session was adjusted accordingly. But they always encouraged me to talk about what had happened to help me get “on track.” On days when I was energized and upbeat they let me explain why—like when I started writing this article. The importance of taking those first few minutes to talk was always tremendously appreciated. I’m sure our students feel that way, too. They need to know we really care about them as individuals, not just for how they play that day.

2 The Excellent Therapist/Music Teacher . . .

Relates preparatory exercises to purpose so there is a clear understanding of the ultimate goal: why should I do it?

Both of my physical therapists often had me doing what seemed like weird unrelated exercises on the mat or in my wheelchair. However, they would then explain how these exercises related to learning to stand, shifting my weight to walk or navigating to turn corners. I was much more motivated to do them because I could understand how these exercises now related to my goal of relearning to walk. They also seemed to enjoy my constant need to understand the purpose of each exercise, just as I enjoy the inquiring student that yearns to understand. In similar fashion, if a piano student understands that warming up with an F Major scale legato 16th notes in one hand and detached 8th notes in the other will make the Bach Invention in F Major easier to learn, he is much more likely to do it.

3 The Excellent Therapist/Music Teacher . . .

Gives patient/student a chance to warm up and get started even if there are mistakes

Often, when attempting the first few steps on a given day, my technique was not smooth at all. I totally appreciated Priya, my physical therapist, never criticizing those first few steps. Frequently she would let me take several steps before she would mention improper cane position or incorrectly shifting. This helped me gain confidence and want to continue versus feeling criticized immediately and discouraged about my progress. I really hope all music teachers let students have some breathing room before the criticizing begins.

4 The Excellent Therapist/Music Teacher . . .

Finds Different Ways to Make the Same Point!

While trying to learn to walk after a stroke, one of the important concepts to learn is how to shift your weight so you can get the weak leg to actually bend and move forward. I can’t even count how many different ways this was explained to me so that I could get the correct image and sensation.

When teaching pedagogy students, I constantly stress the need to find different ways to explain concepts versus just repeating the same thing over and over—and louder and louder. Take, for example, the challenge of getting the correct sound on a chord. We might stress the importance of a loose wrist and firm fingers. For others the image of sinking into the keys might work better. For some, it’s all about hearing the correct sound. Our students will be grateful for our efforts, as I know I

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was when my therapists searched for different ways to explain concepts.

5 The Excellent Therapist/Music Teacher . . .

Understands and accepts different learning styles and respects the individual

Music educators have seen a lot of emphasis placed in recent years on the importance of recognizing the different learning styles of our students. I was fortunate that both my wonderful physical therapists accepted my analytical style of breaking down everything into small steps and my auditory need to verbalize each step out loud to learn how to walk: step, shift hips to the right—pull left leg through—shift to left—tighten butt, straighten knee. The other patients tended to look baffled or perhaps thought I was crazy constantly talking out loud to myself. The only way I could internalize the concept was by talking out loud and putting it to a certain rhythm. As we progressed and refined the movements, my tempo changed: I went from a grave in 9/8 to a largo in 6/8 and eventually to an andante in 3/4.

Being who I am, I would also need to criticize each small part and then ask my physical therapist for feedback on my critique. Both therapists were somewhat surprised at how they didn't really need to criticize me much because I was always critiquing myself. However, we must never forget how important it is to also point out the positive in our student's performances.

6 The Excellent Therapist/Music Teacher . . .

Creates assignments and activities based on the patient's/student's interests

We know how much easier it is to motivate students if we can find how music relates to their outside interests and other aspects of their life. Is this a student who needs a flashy piece for a school talent show? Or is this a teenage girl who needs to play a sentimental romantic piece to express her sadness over not having a date for the school

dance? Young students often respond well to making up songs or exercises using the names of friends, favorite animals, TV or cartoon characters or even hobbies or sports. They are much more likely to want to do the pieces that relate to their lives and what they like or feel.

During my rehab stay, the only therapy I had problems with was speech therapy. Luckily, my speech was not affected greatly. According to my friends and family I just talked slower and softer. (Several people actually seemed to enjoy the "slower and softer Ingrid.") After going through three therapists who I believed were giving me basic "cookie cutter" questions to test my cognitive skills, which were quite good, I finally got a therapist who accepted me for who I was and worked at designing activities that would stimulate me. I am sure I would have quit this part of my therapy had I not found a person willing to take the time to truly understand me. Rather than giving me ridiculous questions about train versus plane travel time, cooking and grocery shopping items, my new therapist focused on topics that would relate to my life. She would ask me about what items I would need to pack to take for a conference, questions about fashion accessories and general travel questions. She also printed out my website and asked questions about my books. Since I had trouble staying focused with outside distractions, she made me talk while the radio was playing or opened the door to see if I could adapt to others talking at the same time. When she couldn't be there for two days, rather than making me go to one of the other therapists who I had already fired, she gave me homework involving scheduling appointments, which naturally would be useful for me.

7 The Excellent Therapist/Music Teacher . . .

Incorporates the importance of breathing

Singers are taught exactly where and how to breathe. Piano teachers need to

incorporate breathing in their teaching, too. I always suggest making breath marks in the music for musical phrasing or to facilitate technical execution. Adding lyrics to music makes it even easier for students to know how to sing and breathe with the music.

As I worked in physical and occupational therapy, I can't even begin to tell you the number of times I heard my therapists say "Breathe!" I was so tense, I literally forgot I had to inhale and exhale. My therapists were constantly reminding me of where and how to breathe when I stood up, sat down, walked or did exercises on the mat. The simplest thing for me to remember was to EXhale when EXerting and inhale before the exertion.

After two weeks of physical therapy, it was my big day to show my gait in front of the director of the rehab center to determine if I was "up to getting a brace." I told the therapist I was experiencing performance anxiety. She worked on helping me to BREATHE and told me to just do what I've been doing, including talking out loud. I controlled my breathing, held my head up high and did the best I could at that time. At the end of my walk, she gave me the most wonderful smile to tell me how proud she was of me. I cried happy tears explaining I had not wanted to disappoint her. I could understand even better now how my students feel after a performance.

8 The Excellent Therapist/Music Teacher . . .

Realizes a good sense of humor is essential

I think we would all agree that having a good sense of humor is an essential trait of a good teacher. It's just as true for a therapist, and this was especially needed by Jessie, my occupational therapist, whose work primarily involved trying to get my arm and shoulder loose, getting mobility and working on finger motion. Unfortunately—or perhaps fortunately—the only real pain I experienced

was in my shoulder. To alleviate the pain, even more painful stretches were required. However, Jessie always made it a point to tell a joke or quote some ridiculous line from a funny movie at the most difficult times. He enjoyed using his limited musical knowledge by trying to put all concepts into musical terms. Instead of counting to 5 for an arm moving exercise, we agreed on 6/8, which he still remembered was more of a feeling of 2. He frequently complained about my tempos being too fast. He joyfully managed to include the words “crescendo” and “accelerando” in exercises that were building in intensity.

I managed to get a good laugh out of Jessie, while he tried to teach me how to put on and take off this humongous football jersey with one hand (not an easy task). I told him that I would have done better had it been a top from Chico’s!

As teachers, I am sure we can remember numerous situations where a good joke or some levity helped ease the tension of a difficult lesson. As I got increasingly exasperated with a teenage girl’s attitude one day, I remember lovingly looking at her and saying “Blond piano teacher goes berserk during a lesson! Video clips on the 11 o’clock news!” She laughed and we found a way to resume tackling the trials and tribulations involved in bringing out the joyful character needed in her Haydn Sonata.

9 The Excellent Therapist/Music Teacher . . .

Is nurturing, yet demanding: knows how to challenge and when to revisit challenges

If I had to list some of the essential personality traits of great teachers and therapists, among my top two would be *nurturing* and *demanding*. The physical therapists in particular were always supportive and encouraging while still making demands. They knew that with my strong determination, I would often become very frus-

trated and overly critical of myself. On those days they backed off just a tad, knowing I would sense it, but their tact helped me repair my confidence.

Jessie’s nurturing side was also evident in our sessions. But one particular day he really showed his caring personality. At the end of my second week in the Rehab Center, I came back to my room and discovered a large box. Much to my great joy, Mike Bates of Yamaha had sent a full-size portable digital piano that was beautifully touch sensitive and had an incredible sound. I obviously was thrilled to be able to practice, even if it was only with my right hand. However, it was very difficult to sit comfortably in my wheelchair and figure out how to position my left arm. No matter how I positioned it, I felt tremendous pain in my shoulder. Jessie took the time to come to my room to design a pillow out of a taped towel that was at a height and width that worked. This was an excellent example of the personal connection I felt with all my therapists; I knew they really cared about me as a person. Our students also need to feel this personal connection.

Students can appreciate praise and criticism delivered with different voices. Priya is a soft-spoken person, but I always knew when she was pleased. I could feel the enthusiasm in her gentle manner just as clearly as I could hear the more exuberant enthusiasm expressed by other therapists when I had done something well. One thing they all had in common was the courage to be demanding, while maintaining that nurturing and caring side.

For our students, there are times we need to assign a challenging piece that might terrify them at first, but time and effort will result in a deep sense of accomplishment. Meeting challenges is often very good for them and we have all seen students’ joy at mastering something they once considered way beyond them.

Being in therapy taught me the special effectiveness of the “surprise challenge.” After two weeks of walking

with a brace, I was startled to hear Priya suggest suddenly that I try walking without it. This surprise challenge—one that I did accomplish—totally lifted my spirits on a day that I wasn’t feeling terrific. It also gave me more confidence to do short transfers from the bed to the bathroom or getting in and out of my wheelchair without the brace. Later, when I was walking with a very wide-based cane with four prongs, Priya suddenly handed me a single-based regular cane, which looked terribly scary. I was quite shocked to find that I could actually walk a little with this small cane. The third surprise challenge was when she abruptly announced that I was going to walk from the lobby of the rehab center to outside the building. Once again I thought she was crazy. I had never even been to the lobby except in my wheelchair, and now I was going to walk on carpeting, go through doors and walk on pavement. I probably was as excited as the student who suddenly could play the middle section of *Für Elise* up to tempo.

It is important to have students tackle challenges, but what about when the challenges aren’t successes? Back off for a while and then revisit those challenges later. I remember a particular exercise in physical therapy, which I was unable to master at all, and this upset me greatly. However, one week later, Priya did the same activity, and I was thrilled that it was much easier. I know I am guilty of often assigning pieces that might be too difficult, and we sometimes end up dropping the piece for a while. But I often encourage the student to go back after a period of time to try to conquer that challenging piece. Three pieces that were ultimately success stories in this way were Chopin’s Minute Waltz, Mozart Rondo alla turca and Liszt’s *La Campanella*. Naturally, the three students were thrilled that we decided to revisit them.

10 The Excellent Therapist/Music Teacher . . .

Knows how to help solve problems and knows when to step back and let the patient/student try

An important part of my pedagogy courses is helping students learn how to dissect their students' technical problems, as well as their own. It is our job to figure out exactly *where* and *what* the problem is and then show the student how to fix it in their practice. We hope they eventually can start learning how to problem solve themselves, but first we must give them the tools. This is especially true when it comes to fingering and how to move the wrist or arm. If we always mark it for them, they will not develop the necessary problem-solving skills.

One week before I left the rehab

on the last step from the garage to the house. I panicked, and my husband really had to support me physically because I didn't know what to do. When I reported this to Priya the next day she guided me to a solution with a few simple words. While I initially felt stupid not being able to figure this out myself, with her reassuring style and way of including me in the problem solving, I eventually felt good about being a part of the process. As I encountered new problems, I remembered this experience, and it helped me a lot.

When one has a stroke, the brain has to relearn many things. One of the most difficult at first was how to move

problem was solved! When students get stuck, we can gently guide them toward a solution, such as suggesting a finger number change or wrist motion that might make the passage easier to play.

We must always remember that having our students be part of the problem-solving process will heighten their sense of accomplishment and lead them on the road to becoming more independent learners. I discovered this in a very real way once I left the rehab center and had to learn to conquer the new challenges I encountered every day.

Finally, I must mention an additional person who was instrumental in

keeping me mentally on track throughout this ordeal: the psychotherapist. At all times I felt his respect for me as an individual and his honest desire to help me cope with the wide range of emotions I was feeling. I am sure we would all agree how often we as music teachers function as

psychotherapists (if only we were paid as well!). Don't we find ourselves dealing with psychological issues such as performance anxiety or problems with siblings or parents? Being the recipient of caring therapy deepened my appreciation for this role.

Through all this, I have learned as never before the profound significance we as teachers can have on our students with just a few words of encouragement and praise. In so many ways, no matter if it's music teaching or rehabilitation therapy...Excellence Is Excellence!

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center, I was encouraged to go home for a visit to acclimate myself with how it felt, discover what problems I might encounter that we would need to address, and what skills I still needed to learn. While in physical therapy I had learned to climb four stairs with a railing, but much to my surprise when I got home, there was no railing

my feet to turn to get back into the wheelchair. The first 10 times Priya would tell me exactly what to do to get it right and then one day said, "You figure it out." I kept trying to go forward and backward to get back into the wheelchair and got stuck. She then gently said "sideways is an option!" With those four words as a hint, the