

Laryngeal Position in Singing: Strategies and Techniques for Maintaining a Low, Relaxed Laryngeal Posture in Classical Singing

Dr. Carla LeFevre

University of North Carolina-Greensboro

1. Why a low larynx/open pharynx?
2. Eliminate tensions that preclude low larynx, open pharynx position:

Tongue. Any method designed to lower the larynx must include the intentional release of the tongue. It should be full, wide, and slightly arched in its neutral position. One should be able to see the tongue of the singer, even from a seated position. Tension in the root (base) of the tongue may not be visible. In this case, tension is determined by listening for absolute clarity of sound and quality of vibrato. Is there extraneous noise in the voice? Is the vibrato too prominent, uneven, wide or too narrow?

Jaw. When the jaw protrudes or its muscles tense, the throat cannot release to the optimal position. The jaw should swing slightly back and down during Inhalation while the tongue relaxes laterally toward the molars and the soft palate stretches to a wide position. One can easily feel the impact of jaw position by inhaling to an open throat position, then jutting the jaw forward and back. (Similarly, the result of poor head/neck alignment is noticeable, both aurally and physically, when one sustains a pitch while alternating between a forward-reaching head position, and that in which the spine is properly aligned.) The transfer of jaw tension to the throat is noticeable by hanging the mouth open and engaging the masseters without allowing the mouth aperture to change.

Neck. There is a natural tendency for singers to tense their necks during Inhalation. Even when the neck is relaxed during Inhalation, it will usually tense at onset. Frequently check this tension by having the singer rotate the head up and down.

3. Teach the singer to locate and palpate the larynx.
4. Identify the problem to determine a course of action. Where exactly is the tension? Is a front vowel or a particular consonant causing the larynx to rise? Does the larynx stay low until the higher register?

Strategies and Techniques

1. Gently place a finger on the larynx to track its position during inhalation, then exhale and inhale several times without allowing the larynx to rise.
2. Palpate the larynx while singing [u]. Be sure the tongue is not pressing down in the mouth, but is high and wide. Maintain this laryngeal position while migrating to [y], then [i], [e], [a].
3. Place the thumb and forefinger around the top of the larynx between the hyoid bone and the thyroid cartilage. With pressure against the skin of the throat, pull down while singing.
4. Follow directions for #4, but actually slide the fingers down the throat. As the fingers line up with the inferior edge of the thyroid cartilage, move the thumb and forefinger outward around the neck while continuing to apply pressure on the throat. An image for this action is an upside down Y.
5. Place the hands on the chest, middle fingers on the sternum, and pull the skin downward and outward.
6. While doing #5, produce forceful, low-pitched, breathy, grunting gorilla-like sounds and imagine these noises emanating from the chest. Practice producing two of these noises immediately followed by the desired starting pitch. Huh, huh, huh! (Low, low, high.)

7. Visualize the sound emanating from the indentation in the throat just below the larynx and above the clavicle bones. Placing a finger in this „dip“ may improve the outcome. One can think of this as a little „mouth.“
8. Inhalation phonation: The tongue must feel relaxed and thick to the point of almost gagging. This Sensation is alleviated at the onset of the phonated inhalation. Relax shoulders, neck, and jaw. Sing an unspecified pitch with inhalation phonation. Follow this phonation immediately with the onset of normal exhalation phonation on the desired pitch. Avoid re-setting the throat before the actual onset. This can be done on any vowel.
9. Yodel from heavy chest to a higher pitch in head voice. Use a downward hand motion while flipping to the higher pitch. This technique is useful primarily for female Singers, as male head voice is thyroarytenoid -dominant.
10. At onset of phonation, tilt the larynx forward.
11. Inhale as though you are about to burp; then, suddenly suppress the “burp”.
12. Imitate a turkey gobble to assist in releasing a tense, locked larynx. Lay the back of the fingers along the side of the throat, pointing the fingers toward the back of the neck. Move the hands up and down quickly, with or without phonation.
13. Inhale with a relaxed throat and tongue; then position the folds as though suddenly you have been interrupted just after you have taken a breath to speak. While suspending this Position, begin the sung tone. This action establishes the appoggio and the descended laryngeal position.
14. While holding your breath with puffy cheeks, phonate on a low pitch with a minimum of air escaping through the lips. Emulate that sensation while singing.
15. Similar to #13, but no air escapes from the lips, as in the beginning of a [b]. Just as the air pressure increases to the point where phonation is no longer possible, “explode” the sound with a “buh”. First use a spoken sound, then a sung pitch.
16. Embrace the subglottal pressure sensation of other voiced consonants, such as [d] [g] [dʒ] while singing text.
17. While humming through a straw, dose the end with a fingertip and continue to hum. The resulting air pressure will cause the larynx to drop. Work to maintain this Position while phonating normative.
18. While humming through a straw, dose the end with a fingertip and Continue to hum. (Plug the nose to be sure sound is coming out of the mouth only. The resulting air pressure will cause the larynx to drop.
19. Imagine widening the neck around the collar (think of having a rat neck.)
20. Imagine the clavicles separating laterally while inhaling.
21. Yawn while inhaling, keeping the tongue in the [ŋ] or American [ɪ] position, or inhale while producing a snoring sound (keep the tongue wide, not bunched.)
22. Inhale through a yawn and while holding this Position, phonate through a uvular R.
23. Place a finger in the indentation just below the base of the skull. Think of the jaw melting into the neck and inhale into the fingertip.
24. Hold the breath with puffy cheeks; then, allowing only a tiny air stream to escape the lips, phonate loudly on a low pitch. The sound should resemble a foghorn, and there should be a sensation of widening in the lower throat. Release the cheeks and lips, allowing the air to escape suddenly, and burst into a neutral vowel sung in the middle register. (If you are not sure of the sound of a foghorn, a YouTube search reveals plenty of examples.
25. Allow the head to drop forward as far as it can do comfortably. The lips should slightly part, and the singer should be conscious of draining all tension from the jaw and tongue. Inhale through the slurp position, and laterally Stretch the back of the pharyngeal wall. Phonate on the non-descript, neutral vowel that occurs naturally with the specified tongue Position for Inhalation. Be sure to allow ample airflow and to maintain the high tongue position; otherwise, throat will feel compressed. If properly executed, the perception of sound placement will be „in the mask.“ If this is not the case, and throat tension is present review the Steps above and be sure to implement each prescribed action. After successfully accomplishing these steps, complete the exercise by slowing raising the head while continuing to phonate without consciously changing the Position of the larynx, pharynx, or tongue. Continue

to monitor support/airflow. As the head rises, the sound will remain free of tension, with the pharynx widened and the larynx in a comfortable low Position, allowing for full resonance.

26. Between Inhalation and phonation. simulate the initial stage of vomiting. The presupposition of many singers is that this position will close the throat; however, quite the opposite is true, assuming there is adequate breath support.