

MAGAZINE



Excerpt from an interview with Katie Chambers, cellist for Victoria Vox.

Description: human interest piece about an atypical character in the sometimes stuffy classical music world.

[edited for length]

Cellist Katie Chambers is best known as ukulele siren Victoria Vox's sidekick, although she can be found playing everything from Rachmaninoff sonatas to Asian-flavored electropop depending on which day you catch her. She came to the cello later than most who end up as professionals, and as a result has an unusually earthy approach to playing and teaching. I caught up with her over breakfast in Washington, DC's Columbia Heights neighborhood.

EW: The music industry is fueled by caffeine. Where have you had the best cup of coffee in your whole life?

KC: I'm a real Starbucks girl. I mean, I drink a lot of coffee. I feel like I cannot play unless I have coffee. I was at a gig the other day and I hadn't had coffee and I was like, "I don't know if I can do this. I don't know what key we're in! What's going on?" I don't even really care where it's from. Where the coffee is. That's the best cup of coffee.

EW: You studied at the San Francisco Conservatory with Jean-Michel Fonteneau. Is there anything he said that stays with you?

KC: He always said to be your own teacher. To listen to how things sound. It's funny how you can be playing but not really listening to the quality of what's coming out.

EW: Oh yeah. I tell my students to differentiate between hearing and listening all the time. It's quantity versus quality. isn't it?

KC: That's right. I mean, if you're really listening to yourself, then you can start being your own teacher. Making corrections. Playing into a mirror. Recording yourself. Thinking about what you're doing and what you want.

EW: What music did you listen to in high school?

KC: Hip hop. P-Diddy. Tupac. Backstreet Boys. It was the late 90s. It happens.

EW: No judgement here. I listened to Pantera. Still do. So, was there a moment when you knew you were going to be a professional cellist?

KC: I came into this game really late. I didn't even take a lesson until my junior year of high school. I started out at the University of Maryland with two options: I could play lacrosse, or I could play the cello. I decided to try cello because you can't really make lacrosse a career. That was literally my thought process. My mom told me I could always change majors, so I went into the music program there. Then I got a scholarship to go study with Jean-Michel, and that really put music in focus for me. I was with all of these people who had basically come out of the womb with a bow in hand, and I missed all of the summer camps, the repertoire, the Squire *Tarantella* of it all. I just jumped straight into the Saint-Saëns concerto. I didn't really understand what I was getting into.

EW: Final question: what's the best meal you cook?

KC: Spaghetti with tomato sauce. The secret ingredient is anchovy melted into the oil. It's super salty and delicious.

EW: We need to get that waitress over here again.

KC: I'd like more coffee.

Complete text from: *Perfect Strangers*, (2015)

Description: teaching adult learners to harness their perfectionistic tendencies and make them work for, rather than against, them.

In the context of adult learning, perfectionism can be described as a set of beliefs that drives a person to maintain unrealistic expectations, frequently to their detriment. Practice becomes self-flagellation. Lessons become an exposé. Performance, torture. Of the students I've had who have quit the cello, my guess is that at least half of them did so not because they were not making progress, but because the process was poisonous to their well-being. They were unable to witness their progress in the context of reasonable expectations, and in the end, it defeated them.

What I've learned is that the underlying motivators behind perfectionism are useful if they can be separated from the system of beliefs they are attached to. It's tricky, but possible. To understand how requires a little bit of sports psychology, a shift in context, and a parable from a 1970s tv show.

The science of striving

In most fields, perfectionism is regarded as maladaptive (aka leading away from propagation of the species, aka not good), but performance psychologists differentiate between high-level athletes' "perfectionistic concerns" versus "perfectionistic strivings". Concerns lead to things like crippling performance anxiety and negativity, while strivings make the stress of high expectations fuel for productivity and the "perfection" is measured by improvement. This internal motivation drives athletes and musicians to be better every day while fostering a healthier and more realistic goal- one that is actually possible.

Another compelling relationship lies within the kind of motivation that drives a player. In a study of elite college athletes (where there is a reasonable expectation of high performance), there is a positive correlation between a mindset of "hoping for success" and good performance, as well a correlation between "fear of failure" and especially what they term "fear of disappointing important others" and lower than average performance. In other words, playing to excel ends up manifesting high performance from high performers, and playing to avoid screwing up or stop repeating mistakes gives lower than average performance from athletes with high aptitude.

The main takeaway: if your goal is constant improvement, you are likely to succeed and enjoy high achievement. If your goal is to be perfect, you are nearly guaranteed to feel like a failure even if you have done well and perform below actual aptitude.

A few things to remember

1. Perfectionist tendencies are usually a reflection of the very things necessary to succeed at something difficult- goals, standards, and a desire for improvement. Don't punish yourself for this stuff! It will only compound negativity unnecessarily and make objectivity impossible.

2. When it comes to the learning process, you are not an exception. Every player experiences upswings in progress followed by plateaus and the occasional sense that no, there never was progress to being with. This phenomenon is a natural function of improvement: your standards quietly evolve along with your playing. Results that sounded markedly better week one are tolerable week two, but come week three, it's time for another upgrade in refinement. Try to see this change in expectations as a signpost of success, not a constant thorn in your side.

3. It does not get easy, you get good at something that remains difficult. This reality works for you in two ways, by serving as a reminder that the task is one accomplished over a long period of time, and also giving you permission to feel measured doses of satisfaction when you reflect on the journey.

4. It is the nature of practice to sound less than your best. Practice is supposed to be an analysis of strengths and weaknesses, and then an attack on those weaknesses. You're doing something right if you can find things that need work. Keep in mind that critique does not equal insight. Analyze what is going on and be specific in your mission. Don't say "That sounds lousy", instead say "The tone disappears when I pass midpoint on the bow." Then you are in a position to experiment with possible remedies and actually fix what's wrong.

5. Lessons are a little like the dentist. While your hard work should be recognized, the main emphasis is prevention and drilling the problems you bring in. What good dentist would let you walk out with a cavity? Expect your instructor to go after the flaws, but also expect them to know the difference between a mistake caused by nerves or bad luck and one that stems from something fundamental. Music teachers listen to people fail for a living. Mimi Zweig once told me, "There's no judgement. It's just information." Teachers are here to help, and we expect (and require) you to make mistakes so we can figure out how best to proceed.

Breaking the cycle

The worst part is that perfectionists tend to also be introspective, so there's the added stress of recognizing this mindset in yourself and then feeling miserable for not being able to let go of it. It is reminiscent of the old Kung-Fu show where, in order to snatch the pebble from the Master's hand, the student has to not want it at all. Liberation lies in acceptance. If you can just see these tendencies existing solely as an extension of your desire to be excellent, it diffuses the unproductive aspects of your efforts, leaving you with a real chance of being able to enjoy the journey.

Perfectionism transforms simple mistakes into indictments and distracts you from what's really happening. What's really happening is a player trying their best to develop as a musician, and there are legions of teachers, students and friends here at Strings pulling for you, because we're doing the same thing.

Imperfectly.

ACADEMIC

Excerpt from an academic paper, *Musical Intervention following Traumatic Brain Injuries* (2010)

Description: Completed as part of the “Mind, Brain and Teaching” certificate at Johns Hopkins. Brain injuries can be unpredictable and difficult to treat. Inspired by anecdotal evidence from my own work with TBI patients, this paper was a literature review of the most promising therapies and directions in research.

Some of the most authentic applied research is done via collaboration between music conservatories and neighboring medical institutes. One such partnership lies in Salzburg’s Mozarteum and the Doppler Clinic in conjunction with Paris-Lodron University (2004). They focused on Parkinsonian problems with motor control involving speed, accuracy and ability to track and grasp moving objects. Not the typical “perform this task to this rhythm” exercise, music was simply played while tests were conducted. The findings are compelling, because it implies that different emphases create different results. Acuity and strength remained unchanged, but speed of movement was greatly improved. It appears that rhythm improves coordination while melody improves confidence and range of motion.

With these studies in mind, future work could include differentiating between types of music based upon strength of rhythm or type of melodic movement, or using a single piece and asking a patient to focus on one component (either rhythm or melody) and then the other, for two modalities of therapy.

Emotional well-being

It is natural to see how damage to the hippocampal region causes a shift in emotional state, or how aphasia or amnesia could lead to feelings of helplessness. In many instances, a patient can have an injury that

leaves the limbic system completely unscathed, yet the harm done by TBI can manifest as a marked decline in quality of life due to depression or anxiety.

Pacchietti et al. (2000) found that music therapy combined with physical therapy (PT) in levodopa-responsive patients with Parkinson's scored significantly higher than PT alone when assessed for happiness, quality of life, and emotional function using the standardized Parkinson's Disease Rating Scale questionnaire. Musical interventions included choral singing, vocal exercise, rhythmic body movements, and guided group improvisation.

A large body of literature, including Nyack et al. (2000) and Paul & Ramsey (2001) shows stroke and TBI patients benefit simply from the playing of music in the recuperative environment. Improved cooperation in rehabilitation, decreased anxiety (measured both by pulse/blood pressure, and clinical observation) and self, staff, and family reporting of mood status and social interaction are chronicled in these two studies. Recovery is a layered process, and studies like these point to the relationship between anxiety and difficulty in rehabilitation in other areas like motor control, speech, and memory. It is interesting to note that while Brandt et al. (2005) did not directly link MT with abatement of depression and anxiety, they did offer that the MT-facilitated gains in physical recovery and muscular control improved the mood and general outlook of patients.

Detailing the mechanisms behind the effectiveness of MT in bolstering emotional health in brain-injured patients is best described as tricky, intuitive, and most of all, constantly developing. Krumhantz (2002) describes definite links between cognition and emotion that are unique to music. She and her colleagues postulate that the kind of gentle instrumental pieces that are typically introduced into therapeutic regimens tend to be relaxing because the harmonic and melodic components conform to expected outcomes. This seems to make sense, because another study by Blood et al. exposed patients to less and less predictable musical samples and found a correspondence between heightened musical dissonance and paralimbic reactions that mapped onto fMRIs in same locations as unpleasant emotions. Still other correlations are difficult to pinpoint: why is it that music is restorative when a familiar or pleasant sound does not? Is it the actual notes? Is it the

non verbal aspect plus the emotional component? It would be interesting to see how TBI patients from cultures with different (non note-based) musical traditions would fare with these therapies. Doing so may streamline and intensify the aspects of MT that are the most beneficial.

Memory and Speech

Following TBI, some patients are able to sing a song or string of words before normal speech is recovered. This apparent cognitive workaround has been the basis of much research, from small but long-term studies like Wilson et al (2006) who followed patient KL all the way through recovery from aphasia using intensive singing therapy, to Tamplin's (2008) research on dysarthria: a study that yielded marked positive results in stroke victims.

Baker (2001) looked at live versus taped versus no music as related to amnesia. In addition to palliative and calming effects, the patients who were treated with music showed improved orientation to their environment and increased later recall of information presented while the music played. The live and taped music manifested much the same results, with the number of people recalling more accurately during live performance falling within the margin of error. The research suggests that music is encoded differently and is more readily available for recall than visual information, and that the increase in retention may be a collateral effect of this.

Lee and Baker (1997) offered multiple music-involved strategies to assist in the daily routines of memory-impaired patients. They noted that many people did quite well with the actual amnesia, but their quality of life was compromised because of injuries or incidents resulting from it, like forgetting to set the brakes on their wheelchair or trying to descend a flight of stairs in it. They developed a series of unique songs that were focused on these issues, and several accident-prone clients (they are the treating physicians as well as researchers) became more self-sufficient and able to navigate daily routines by singing from task to task. Developing strategies to improve the quality of life for people with memory loss is critical. The big picture entails using music's unique cognitive and emotional entry points to stimulate memory, function, and

cognition. The smaller, but more immediate picture involves finding a way to improve the daily existence of people whose sense of space and time is made unbearable by memory dysfunction. The most successful studies share two qualities: tenacity and a focus on the patient, rather than the syndrome. There are anecdotal instances of significant gains in memory after TBI using MT alone or in combination with other therapies. The wide variance in injury as well as possible modalities of treatment should not be seen as prohibitive, but rather fertile ground for progress. Research universities and music conservatories are an ideal match to proceed with this work. There is no shortage of patients along the TBI spectrum, as well as conservatory students with an interest in the subject.

Conclusion

No review of archetypal literature concerning the brain and music would be complete without some nod to the work of Oliver Sacks. His books tend to be compendia of journal articles, written in narrative voice with anecdotal case studies used to illustrate his broader research. It seems appropriate to close with Dr. Sacks, whose goal in life is to understand the brain in order to treat *people*. While nearly any subject can be interesting for its own sake, it is important to remember that research directly impacts the lives of millions of people and their caretakers. With the exception of certain forms of amusia, music's effect on patients with TBI is an overwhelmingly positive one. "Musicophilia: Tales of Music and the Brain" (2007) describes one patient who lost all short and most long term memory after a severe brain infection. With a recall period of sometimes less than 10 seconds, Clive Wearing lived in a miserable and nonsensical world of interrupted continuity. His suffering was immense, and his caretakers could do little to comfort him.

"I haven't heard anything, seen anything, touched anything, smelled anything," he would say. "It's like being dead."

(p. 189)

A composer in his pre-infection life (though he has no memory of the work), his wife brought him a stack of

music. He denied knowing any of it, but as soon as he sat down to play, his face lit up.

The momentum of the music carried Clive from bar to bar. Within the structure of the piece, he was held, as if the staves were tramlines and there was only one way to go. He knew exactly where he was because every in every phrase there in context implied, by rhythm, key, melody. It was marvelous to be free. When the music stopped, Clive fell through to the lost place. But for those moments he was playing he seemed normal. (p. 209)

Any step that can be taken to improve the lives of the millions of people living with brain injuries should be invested in. It is important to ask questions like, “Why music?” “Why does it remain intact when language does not?” “What are the mechanisms behind this special encoding?” “Can we isolate and intensify the useful methods of musical intervention?” “Can we help people who are unreachable by other modalities?”

Universities all over the world are now offering degrees in Music Therapy, and current literature reflects a increasing momentum behind the research.

SPORT



Sample from the Washington Capitals-focused blog Russian Machine Never Breaks. (2015)

Description: recap of first period action, heavy on insider/ idiosyncratic humor. Written during the game, published within a minute of the final buzzer.

The first period began with whatever the opposite of a ton of offensive firepower is called. At one point, the Caps were stuck in their own zone for 97 minutes, with Green and Hillen greying after every failed clear. While exhausting and a little bit scary, the Jets weren't able to generate many chances, save Enstrom's whizzing shot that made the post sing something between a B and a B flat.

The Caps went on the power play after a tripping call, and while most of us were waiting for Ovi to terrorize Winnipeg again, John Carlson had other ideas, and with some help from a Backstrom faceoff winner and Johansson's screen, Troy Brouwer tipped the puck past the Jets netminder (or at least that's what it looks like).

As the period wore on, the home team was a little sharper. Karl Alzner, looking Alzner-y as ever, delivered a silken stretch pass to Ovi, who muscled the puck down ice, through Mark Stuart's legs, catching Pavelec five hole. For those of you counting, it was Ovechkin's 38th of the season. The selfish, enigmatic season.

The period was over. And it was good.

To see the entire piece in context, visit [Russian Machine Never Breaks](#).



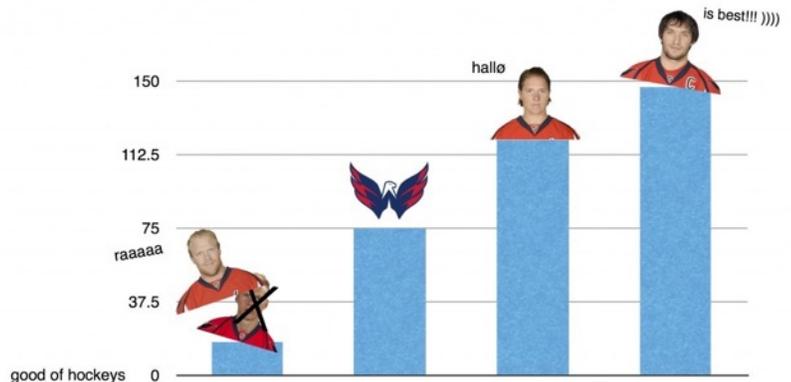
Sample from another Caps blog, Capitals Hill. (2014)

Description: humor/analysis of problematic tendency for Caps to allow a goal shortly after scoring, themselves.

Full piece available on [Capitals Hill](#).

Idea 1: Skating for their lives

With very few exceptions, the Caps do not suffer from an ability vacuum. Ovi, Nicky and Erskine are the current outliers, as is evidenced by my fancy graph. The whole point of Oates' system (which I find a little puny but still an improvement over dump and chase) is that you don't need a team of over-performers for it to be effective. It seems like every time there's a hiccup, the lines shuffle. Someone comes up from Hershey. The healthy scratch list baffles. Instead of coaching the players he has and working with their skill sets, it seems like Oates' answer is moving guys around. My theory is that pairings like Carlson and Alzner work so well is because they've had time to build chemistry. These guys are all good, and can be coached to be great in nearly any combination.



Aside from legitimate injuries, the bizarre conveyor belt of players coming to and from Hershey and free agency has to be destabilizing, and that's not even getting into the goalie situation. Can you imagine what it's like to be Holts right now? Where is the loyalty within the organization and the look at the long haul? How is he supposed to muster up confidence knowing his coach won't lean on him? There is no substitute for being in net, no amount of time at Kettler that will get him ready. This is a guy who took the team on his back 2011-12 and carried the Caps further than the quality of their play deserved, and he's getting hung out to dry by a disjointed defense and a coaching staff suffering from the vapors.