Common Challenges with Trombone Players

Being an effective brass teacher is like being a medical doctor. Some problems are bigger than others and there is a cure for almost everything. With the proper guidance and attention to a few fundamental concepts, anyone can make a good sound on the trombone.

Step 1: What is the diagnosis?

Step 2: What is the prescription?

Keep in mind, *VIBRATION + AMPLIFICATION = SOUND*

High Notes vs. Low Notes:

Some students can naturally produce a b-flat above the staff easier than a b-flat in the staff (and vice versa). Often, this can be attributed to physical makeup of the embouchure. Use the note that is the easiest as a starting point. The simple formula below can be helpful in producing the first notes:

Higher notes = faster/cooler air

firm corners of the embouchure

focused aperture

Lower notes = warmer/slower air

relaxed corners of the embouchure

open aperture

Metaphors:

A. **Drawstring bag effect as notes ascend**
B. **Seal off the lips from the corners to the center like a zip lock bag**

Breathing:

The human brain is wired to think that trying harder by using muscles will produce a desired outcome. Usually the problem gets worse when we try harder and get frustrated. The role of the teacher is to keep the student calm and be encouraging. Tension around the rib cage often causes breathing to be constricted. There are various breathing exercises that can be employed without the instrument. The key is to stay relaxed and fully inflate the lungs. When the students picks up the instrument, often times tension around the shoulders and torso inhibit a free flow of air. Air is absolutely essential in creating a good vibration. Not having enough of it can be detrimental. Developing good breathing habits early on is essential for topics covered later on such as articulation, technique, range, etc. Any excess tension cuts down on the air supply and will dampen the vibration. Two common problems include students starting a note before the lungs are full and suspending the breath and pausing before starting a note. ***The air should be like a pendulum on a clock. It is either coming in or going out, but is never stagnant. The air should always be active.***

The goal is to transcend the instrument so that it becomes an extension of your musical thinking and not a barrier between you and the audience. This is only possible when tension is released. ***You must allow the air to work for you!***

Another problem related to breathing is when students breathe through the nose. This is very logical because they are trying to hold the embouchure still to maintain consistency. Breaths should always be taken through the mouth. The key is for the embouchure and aperture to come into place just before the air passes through the lips.

Reaching 6th and 7th Position:

Most students will not start trombone with an f-attachment instrument. For the smaller student, reaching 6th position (and especially 7th position) could pose a challenge. It is important not to compromise the angle of the trombone (against the lips) or the right hand slid grip. The teacher should accept that low C may be slightly sharp until the student's arm grows.

Constricted Oral Cavity:

This can be diagnosed if the sound is small, tight, and closed off. Another indicator is when the student does not run out of air for a long time. Areas of tension include the jaw, throat, and neck. The student should strive for an "oh" syllable to open and relax the oral cavity. This can also be achieved by spreading the teeth apart and dropping the jaw. A breathing tube placed between the teeth can be used for breathing exercises.

"Pu vs. Tu"

Making a diagnosis for something that you cannot see is difficult. Students will often accidentally begin notes by saying "pu", which does not involve the tongue at all. Starting notes with the lips ("pu") results in an undefined attack on the note. The diagnosis for this is movement in the chin and the poor quality of the attack. If you see the chin bobbing up and down, most like the lips are starting the note instead of the tongue. Using a "tu" syllable to start notes produces a burst of air for a clean attack.

Cheeks Puffing

The diagnosis here is pretty simple since it is quite visible when the cheeks are puffed out. The corners of the embouchure should act as anchors (or tent stakes) and hold the cheeks in. Cheeks that are puffed out can cause

inconsistencies with forming an embouchure and can make it difficult to focus the aperture.

Smile Embourchure

This is a dangerous habit on almost every wind instrument. Smiling from the corners of the mouth should be avoided at all costs. Smiling stretches the lips and creates thin lip tissue between the mouthpiece and teeth, which can result in scar tissue over time. Students will often resort to a smile embouchure to produce high notes. Similar to when a rubber band is stretched and plucked, the lips also vibrate higher when smiling. Instead, think of the corners flexing and firming up in place. The chin should stay down and not wrinkle upward.

In general, many bad habits including posture, playing position, embouchure placement, breathing, etc. can arise from proximity issues. Examples include three people sharing a stand, minimal space for the slide, overcrowding in the section. These are all preventable situations.