

Sample Musical Performance **Anxiety Diagnostic Questionnaire** (MPADQ) Statements:

- I consider myself to be a good musician.
- I consider myself to be a perfectionist.
- I feel like I belong in my teacher's studio of students.
- I fear the future.
- I have other activities I take part in and enjoy besides singing.
- I believe that, even if I don't sing for a living, I will be happy.
- I am an extroverted individual.
- I have a method for coping with stress that works.
- I am good about setting boundaries and not taking on too much.
- I often have low self-esteem.

Sample AQ Statements:

- I'm breathing faster than normal.
- I'm not as good as I should be at this point.
- I'm having trouble sleeping.
- I chose pieces that are too difficult for me at this point.
- My teacher doesn't think I am singing as well as I should be.
- I'd rather be singing this in a practice room than in front of people.

Predictor Categories:

- 1) Student-Teacher Relationship
- 2) Sense of Belonging at School
- 3) Generalized Anxiety and Stress
- 4) Perfectionism and Self-Criticism

- 5) Self-Concept of Performance Ability and Confidence

6) Low Self-Esteem

- 8) Singers' Concept of Recital Stakes
- 9) Musical and Performance Background

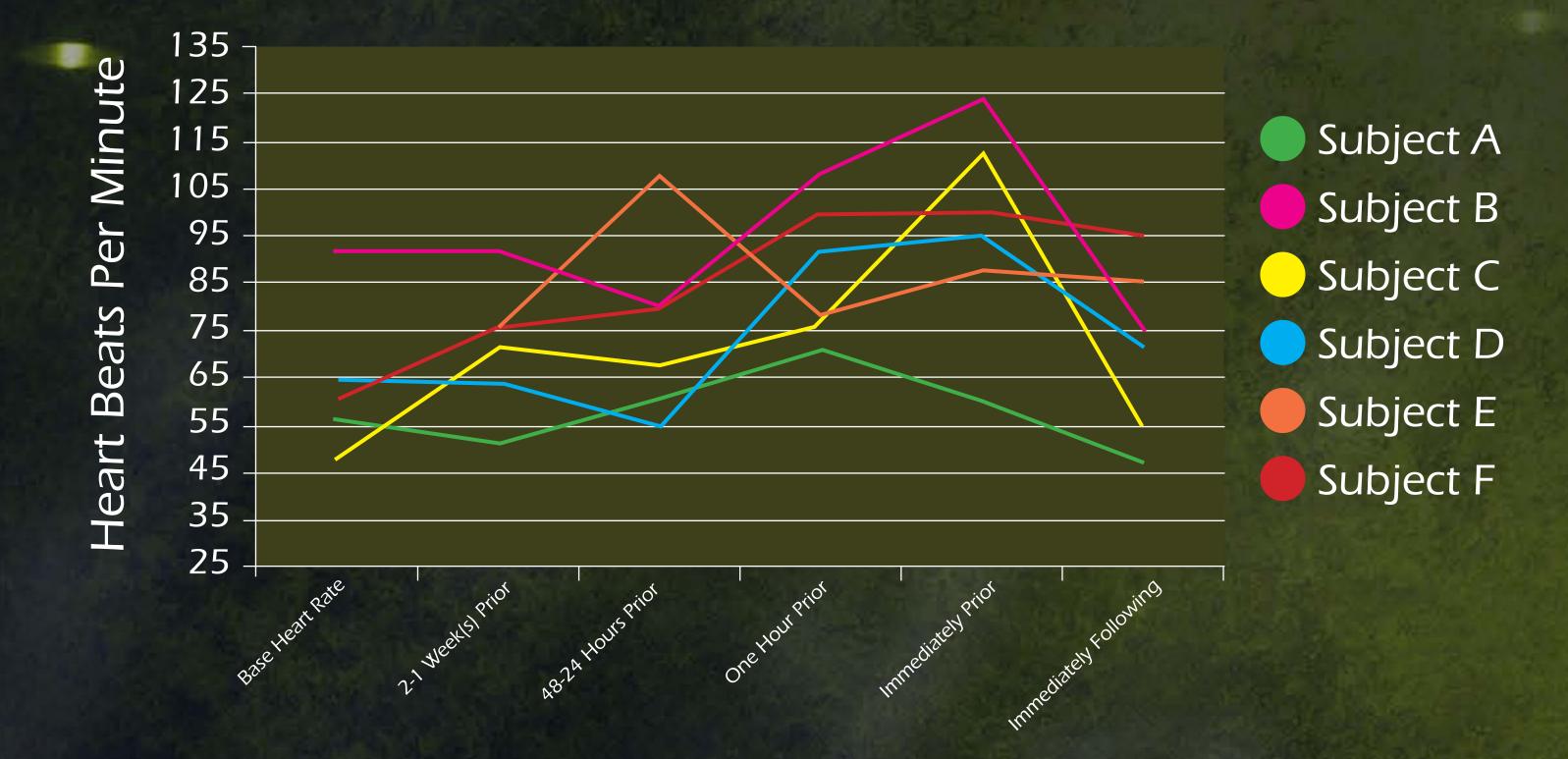
7) Singers' Concept of Long-Term Stakes

- 10) Enjoyment of Musical and Performance Activities 11) Personal Support Structure in People and Activities
- 12) Existence of a Romantic Relationship and Happiness in Relationship
- 13) Physical and Emotional Health
- 14) Spiritual and/or Religious Support System and/or Beliefs
- 15) Feelings of Being Out-of-Control
- 16) Controlling Personality and Competitiveness
- 17) Self-Concept of Anxiety
- 18) Self-Concept of Focus
- 19) Self-Concept of Musical and/or Performance Preparation
- 20) Conflict Resolution Inclination
- 21) Introversion
- 22) General Negativity
- 23) Personal Drive / Motivation

stage fright and singers: Personality-Based Predictors and Strategies

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Heart Rates: Subjects A - F



Respiration Rates: Subjects A - F



Background

In the current age of heightened awareness of psychological impairments, the problem of performance anxiety among musicians is highly visible and recognized as a disabling force by musicians, music educators, and physicians alike. The detriments of musical performance anxiety (MPA) can range from technical mistakes in solo lessons, to debilitating anxious thoughts during performances, to the possible termination of what could have been a promising career on the stage. While different studies produce varied statistics on the number of performers affected by MPA, as many as 90.6 percent of all people may encounter anxiety when they find themselves in the spotlight, a figure that should not be ignored and must be addressed by voice educators.

Performance anxiety is a widely researched topic. Musical performance anxiety, however, receives approximately fifty percent of the attention that anxiety among public speakers, actors and athletes receive. But, in multiple studies musicians show more psychiatric pathology that contribute to performance anxiety. These include: obsessive-compulsive disorder, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoia and psychoticism. When studies on musicians are done in musical or medical fields, the canon of knowledge is greatly lacking in specifics to singers. After exhaustive research, this author was disappointed to find only a handful of studies in recent decades that concentrate on vocalists. There are a few more articles that address the issue in regard to singers but do not address it scientifically. This is an important and somewhat overlooked population of performers because of their highly unique set of circumstances on the stage that combines music and acting. In my research, it was my goal to focus on this neglected population and simultaneously bridge the gap between the scientific method embraced in the medical journals to explain musical performance anxiety and the experience-based suggestions found on the shelves of music bookstores.

Methods

- A consolidation of information about prevalence, predictors and manifestations of MPA led to creation of the Musical Performance Anxiety Diagnostic Questionnaire (MPADQ). A dozen students at the Indiana University Jacobs School of Music were recruited to participate through word-of-mouth, voice teachers, and a
- department-wide email sent to students requesting volunteers. An appropriate mix of genders, ages, degree programs and voice types was represented. Volunteers took the MPADQ, including demographic information and a series of over 100 statements with Likert scale responses. Each respondent had as much time as desired to complete the MPADQ. At the time the participant completed the diagnostic
- For each of the participants, the author made predictions based on the known predictors of MPA regarding the severity of anxiety the volunteer would experience, and the type of symptoms that would occur surrounding a performance.

questionnaire, base heart rate and respiration rates were

- Those volunteers who ultimately gave a degree recital during the same academic year were followed through the rest of the process. There were six case studies: subjects A-F.
- As the recital of a subject neared, the Anxiety Questionnaire (AQ) was administered to the subject roughly 2 weeks prior to the recital, between 1-2 days prior, one hour prior, immediately prior, and immediately after completion of the recital. Each time the subject completed the AQ, his/her heart rate and respiration rate were also measured. The exact day and time that the AQ was administered was based on the convenience of the subject.
- Information gathered from the AQs was compared to the author's predictions.

Results

The primary conclusion is that, based on basic demographic data, personality factors, past experiences with anxiety, and limited to the most accurate predictors, MPA can be forecasted in singers with a large degree of accuracy. The symptoms that arise when a singer experiences MPA occur in three areas: physical, behavioral and cognitive. Each of these types of symptoms can be treated through a variety of methods based on the type and severity of the manifestation. Proactive treatments are possible and preferable as they can prevent the singer from experiencing the various symptoms and the consequences of those symptoms in performance. It is a voice educator's responsibility to recognize a particular student's proclivity toward stage fright and guide that student to a method for finding treatment. By recognizing the likely manifestations, these symptoms can be proactively treated by the voice teacher or, in extreme cases, by a medical professional, and make performing more enjoyable and consistently confident.

(Sources available upon request.)

