

The Organ Recital in America

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I. The Calamity

After many months on *The New York Times* best-seller list, *The Tipping Point*, published in 2000, has become a buzz-phrase. Malcolm Gladwell argues in his book that minor alterations, carefully conceived and skillfully enacted, can produce major consequences for society. He convinces us that a few individuals or a single, almost random event can set off a social epidemic that deeply alters our culture for good or ill. Gladwell's ideas make us think about our own professions and contemplate the worth of small-scale, behind-the-scenes activities. Small gestures can have far-felt results. We have all experienced them on a personal level. In society at large, however, the spreading ripples of a well-placed motion can be long-lived and powerful.

Some of us remember the rapid growth of the Nazi party, which began with a small group of rabidly unhappy men in Munich. All of us remember the speedy spread of AIDS, which virus was probably brought to this country by a single individual. A quite different individual changed our country for the good: Paul Revere rode out one night and energized a group of men who assembled and fought for our freedom. On a current but smaller social scale, notice the craze for designer coffees, the omnipresence of Post-It-Notes, and the rip-offs involving bottled water. All of these movements involved tipping points, comprised of a series of significant stages.

There was a tipping point in the last century for our profession, and it was not for the good. Using Gladwell's terminology, one could call it "an epidemic caused by a virus." The epidemic was the exodus of the audience from organ recitals. What the virus was is a matter for discussion and argument.

Once upon a time organ recitals were popular. In the 1940s and 50s, Alexander Schreiner, Virgil Fox, and E. Power Biggs frequently played in our city. The fortunate persons who attended these concerts will remember the packed churches and the popular repertoire. Virgil Fox played his own arrangement of Bach's *Come, Sweet Death* and Liszt's *Liebestraum*. Many were entranced; some were horrified. E. Power Biggs played a lot of Baroque music, but included instruments on many of his concerts, and wasn't above playing transcriptions. Alexander Schreiner played Bach and Vierne, but also included the hymn arrangements and melodic trifles that we recognized from having heard him every Sunday morning on the radio. Our parents did not approve of Mormonism, but dearly loved *The Mormon Hour*, the Mormon Tabernacle Choir, and Alexander Schreiner.

What happened? Even organists do not attend organ recitals any more.

The decrease of attendance at organ recitals roughly coincides with the advent and spread of television, and many have blamed TV for the lack of crowds at concerts. This, however, is only part of the cause of our calamity. Back in 1950, many predicted that television spelled the end of the movie industry, but that prediction did not come true. Nor has television kept audiences from concerts of popular music. The roots of our problem grew elsewhere. The main cause of our absentee epidemic was a series of events within our own profession.

II. The Connectors

When a situation tips, when it is jolted out of equilibrium, it often tips because of the actions of a few people. What they do or create or say catches on and becomes a powerful agent by itself. Then that agent operates quickly and effectively in a welcoming environment.

“The success of any kind of social epidemic is heavily dependent on the involvement of people with a particular and rare set of social gifts.....These people on whom we rely more heavily than we realize are Connectors, people with a special gift for bringing the world together.” (Malcom Gladwell, *The Tipping Point*, pp. 33 & 38)

A prime Connector in our profession was the fantastic E. Power Biggs. At the mid-century mark, he was considered by many to be the outstanding organ recitalist in the United States. Biggs got the idea in the early fifties that American organists should hear Baroque organ repertoire played on the great Baroque organs of Europe. He and his wife Peggy went to Europe in the spring of 1954 with an Ampex tape recorder and some very heavy batteries. The two of them, aided only by a local person to help move the batteries, recorded Biggs playing Baroque organ music on the great old organs of northern Europe. This Columbia long-playing album became a best-seller and introduced American organists to what Baroque organ music was really supposed to sound like.

A second important Connector in our story was the German organ-builder Rudolf von Beckerath. About the same time that the Biggs were recording in Europe, Trinity Lutheran Church in Cleveland, Ohio, decided to ask a German builder to make them an organ. In 1957, after insisting that the church install a wooden ceiling to improve the acoustics of the church, von Beckerath installed a 44-stop, four-manual instrument with complete encasement and mechanical key and stop action. This instrument changed the history of organ building in our country. For the very first time, Americans could hear a mechanical-action organ live, with traditional classical voicing based on the work of the old Baroque organ builders.

The Cleveland von Beckerath had results that spread throughout the North American organ world like wildfire. The impetus for this phenomenon is an outstanding example of what Gladwell calls The Law of the Few, which is the first area of change. Within two years von Beckerath began installing organs in Canada. In the sixties he placed large instruments in Pittsburgh and New York. These instruments in turn were an inspiration to American builders like Charles Fisk, Robert Noehren, Hermann Schlicker, and Fritz Noack. The German Organ Revival had reached America.

These are two of the causes of our epidemic—basically two very good causes. But something went wrong. It is precisely at this time in our profession's history that audiences deserted the organ recital.

III. The Contagion

An epidemic can be anything that spreads widely and rapidly. It can be a disease, a fashion fad, or a desirable social movement. If the effects of the epidemic are harmful, we may call the agent a virus. Is it safe to assume that organists believe that low attendance at organ recitals is an unfortunate social movement? May we call the cause of the epidemic a virus?

The problem here is that the organ revival in our country was a very good thing in itself. Wonderful instruments were built. Good organs made good organists better. We were quick to learn what Baroque organ music should sound like, what stops to use, how to articulate, and what new old music to learn. We introduced ourselves and others to the glories of Buxtehude and Couperin. We changed the repertoire for the respectable organ recital—less Guilmant, more Pachelbel.

For ten years the organist's magazine of the mid-century, *The Diapason*, kept a record of the most-performed pieces on reported recital programs. Heading the list, of course, was Bach's *Tocatta and Fugue in d minor*. Close behind were Franck's *Chorale in a minor*, and Marcello's *Psalm XIX*, a transcription. The ten most played composers in 1951, the end of the record keeping, were, in this order: Bach, Handel, Franck, Vierne, Mendelssohn, Dupre, Karg-Elert, Brahms, Haydn, and Widor. The only pre-Bach composers, way down the list of forty-five men, were Buxtehude, Purcell (mainly transcriptions), Couperin, and Pachelbel.

The former top-ten composers still appear on current programs. If one were to compile a current annual record, however, there would be a noticeable shift of emphasis away from Handel and the nineteenth-century to pre-Bach and twentieth-century composers. There is nothing wrong with this shift in itself. The problem is that the movement did not take the audience with it. The very old music fascinated those in the know, but sounded esoteric and foreign to listeners used to Bach, Franck, and Widor. The modern repertoire also took getting used to.

The second problem was the new instruments. The brilliant Baroque sounds of the organs built in the old north-European style were often placed in spaces that had little or no reverberation time. Sounds that would have been majestic and thrilling in a German cathedral were harsh and overpowering in a carpeted Presbyterian church in Minneapolis. The experience alienated audiences and irritated church members.

These were two very contagious viruses.

What made them contagious? Can we formulate a cohesive explanation for this particular area of human behavior? Is it even fair to call an intrinsically good idea a virus?

Contagion means that a virus or a style or a message is sticky. It makes an impact. It alters the organism it attacks. It profoundly changes the society it influences. The new organs of the fifties and sixties had the prestige of authority. “This is the way organs were,” we said, “and this is the way they should be now.” If we wanted the respect of our professors and our peers, we admired the organ revival, and participated. There was a rapid and widespread adjustment in what type of organ music was presented to audiences and congregations. There was a critical change in how organ music was played and how it sounded. The organ revival in North America grew because builders and teachers and recitalists made it contagious—but only to an inside group, not to the general audience. An expert on the history of baseball once said, “If you appease the purists, you will repel the huge broader audience that would otherwise be poised to start taking an interest.” What would modern piano recital attendance look like if performers played only Rameau, Clementi, Field, and Messiaen, on period instruments?

Perhaps only a few people left their churches because of the organ revival, but thousands stopped attending organ recitals. In spite of this exodus, this epidemic, the content of the reformed organ recital has remained basically the same to this day. Current recitals are much like the new type of program that appeared *after* the heydays of Virgil Fox and E. Power Biggs.

We are forgetting that to insist on ideological purity is to flirt with extinction.

IV. The Context

*There is much good in it,
there are many good and true people in it;
it has its appointed place.
But...it is a world wrapped up in too much of itself,
and cannot hear the rushing of the outside world...
Its growth is sometimes unhealthy for want of air...
It knows only its fashionable self.*

Charles Dickens, *Bleak House*

The context of the organ revival was one of artistic and historical correctness. This was an honorable ideal, and it moved us into action. Many of us were very sensitive to this change in context. Our instruments, our repertoire, and our playing improved. Contextual changes, however, are capable of tipping a situation in a very different way than we might ordinarily expect, especially if the changes are too extreme. Radical changes in environment bring radical changes in behavior, because “the impetus to engage in a certain kind of behavior is not coming from a certain kind of person but from a feature of the environment.” (Gladwell, p. 142)

Our changes were too radical, and too sticky in the wrong way. There was the misguided one-upmanship of organists who convinced their churches or colleges to purchase organs that out-authenticated the instrument down the block. Congregations, campuses, organ

students, and church organists were subjected to screeching mixtures, archaic headache-inducing tunings, flat pedalboards, no pistons, and stops with German, Dutch, and French names. Why do we even wonder that the musical public at large considers organists to be elitist and old-fashioned, and why do we ask why there are such small crowds at organ recitals?

Our trade journal, *The American Organist*, also needs consideration. It still looks lamentably similar to *The Diapason* of fifty years ago. Consider all those tiny ads crammed onto countless pages. Does anyone look at them? Each article published has a similar format. Does it remind you of a roadside with identical billboards every hundred feet? The print used is very small. Does this ironically suggest that the magazine is designed for youngsters with 30-20 vision? Our journal need not join the ranks of the glitzy rags, but it should acknowledge the impact of visual imagery on modern life.

At the banquet of the recent and marvelous national AGO convention in Los Angeles, Hector Olivera played the organ. He was aided by two huge screens so that everyone there could see his incredible hand and footwork. He brought everyone to their feet, young and old. We clapped, laughed, and even danced in the aisles. Was it only because we had had too much to drink? Or was he one of the powerful few, a Connector, with a sticky repertoire and a sticky medium in a powerful context? Why can't we learn from this memorable moment?

Context matters. Visual context that reinforces our message will make our product that much stronger. If we can generate bigger crowds it will have an effect on how good the recital seems.

"Comedies are never funnier and thrillers never more thrilling than in a packed movie house.... Once we're part of a group, we're all susceptible to peer pressure and social norms.... that can play a critical role in sweeping us up in the beginnings of an epidemic." (Gladwell, p. 171)

It does not have to be a crowd of thousands. Smaller, closely-knit groups can have the power to magnify the epidemic potential of a message or idea. The ideal group for influencing people and starting an epidemic, according to Gladwell, is a group of from 100 to 150 people.

This is the size of our AGO chapter, folks.

Let's get started.

V. The Cure

A young person once said to me, "Organ playing should be cool. Just think of it, one person using all four appendages to create that huge sound! Man, it should be way cool." Could this be a naïvely wise call for an organ re-revival?

There are people around who have a passion for the organ, and the ability to create a new, positive epidemic. To achieve this goal, we need the work of a powerful few. Stunning

virtuosi like Paul Jacobs and Cameron Carpenter could be our new E. Power Biggs and Virgil Fox-Connectors building a new/old type of organ recital. They should perform, not hidden from view, but on exposed consoles, and shown larger than life on video screens. “An epidemic can be reversed, can be tipped, by tinkering with the details of the immediate environment.” (Malcolm Gladwell, *The Tipping Point*, p. 146)

Peter Gelb, the new General Director of the Metropolitan opera has done just that for opera. On six Saturday afternoons last season, the Met matinee performance was simulcast to 250 theatres worldwide, on large, high-definition screens. For eighteen dollars each, 60,000 people had the best seat in the house, watching and hearing Renee Fleming, Michelle De Young, and Placido Domingo up close. Mr. Gelb has created a Tipping Point in the history of opera. He is a Connector, whose creation is sticky. Talk to people who attended these shows--you will find their enthusiasm very contagious indeed.

What Peter Gelb has done for the opera, we must do for the organ. We need a context like the one that he has given his singers, making them appear even larger-than-life than they already are. We need something like the huge screen and the backstage interviews that draw the listener into the action--personal and up close--performing a repertoire that is respectable and audience friendly.

“Be a few feet ahead of your audience, not a whole mile,” a wise philosopher once said. Church organists and recitalists who believe that congregations and audiences should be educated rather than supported and inspired should remember that you cannot lead anyone if you are a long distance ahead of them. Choral conductors find that a repertoire which stretches the choir usually shrinks the audience. A handful of people listening in a darkened church to a recitalist they cannot see is not a powerful context.

Our cure will take the shape of a reversal of the events of the previous century. We need Persuasive Connectors, Sticky Repertoires, and Powerful Contexts. For the general public as well as for the organ specialist.

CHANGE THE MESSENGER, CHANGE THE MESSAGE, CHANGE THE CONTEXT.

We as a dynamic AGO chapter can be agents of change. We can participate in the great campaign to “make gentler the life of this world.” We can create a new epidemic—a positive one.

Can we tip our profession into once again popularizing the organ recital? Would it be good for your church music program if more members of your congregation attended concerts of choral and organ music? Might it raise their appreciation for what you do? Would it encourage them to go if you got off the organ bench and attended these concerts yourself?

Will you join this crusade?