



Music Therapy

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INTERPROF



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Concept of music therapy

- Definitions in music therapy
- Historical development of music therapy
- Therapeutic understanding of music (why music?)
- Influence of music on a person
- Theoretical justification of music therapy



LATVIA

“Music therapy is the scientific application of music for therapeutic purposes (Strobel, Huppman, 1991); it is the application of music and tools of its expression (sound, rhythm, melody, harmony, dynamics, etc.) in either individual or group relationships between a music therapist and a patient/client with the purpose of establishing and advancing relationships, communication, learning, cognition, mobility, expression, activity, or physical, mental and social health of an individual, thus encouraging their potential development and /or rejuvenation of functions and achieving a better quality of life.”



LITHUANIA

„Music therapy is a health care profession carried out by the qualified music therapist, helping people to improve (to maintain, restore, enhance) health through the use of music/ musical communication and the therapeutic relationship. Music therapy is an interdisciplinary profession that integrates music therapy, music, medicine, psychology, psychotherapy, special education and social work disciplines of knowledge and practice issues.”

Music therapist - a person, in accordance with the requirements of formal music therapist who has acquired professional qualifications and meeting the requirements. The music therapist is a health care professional.”

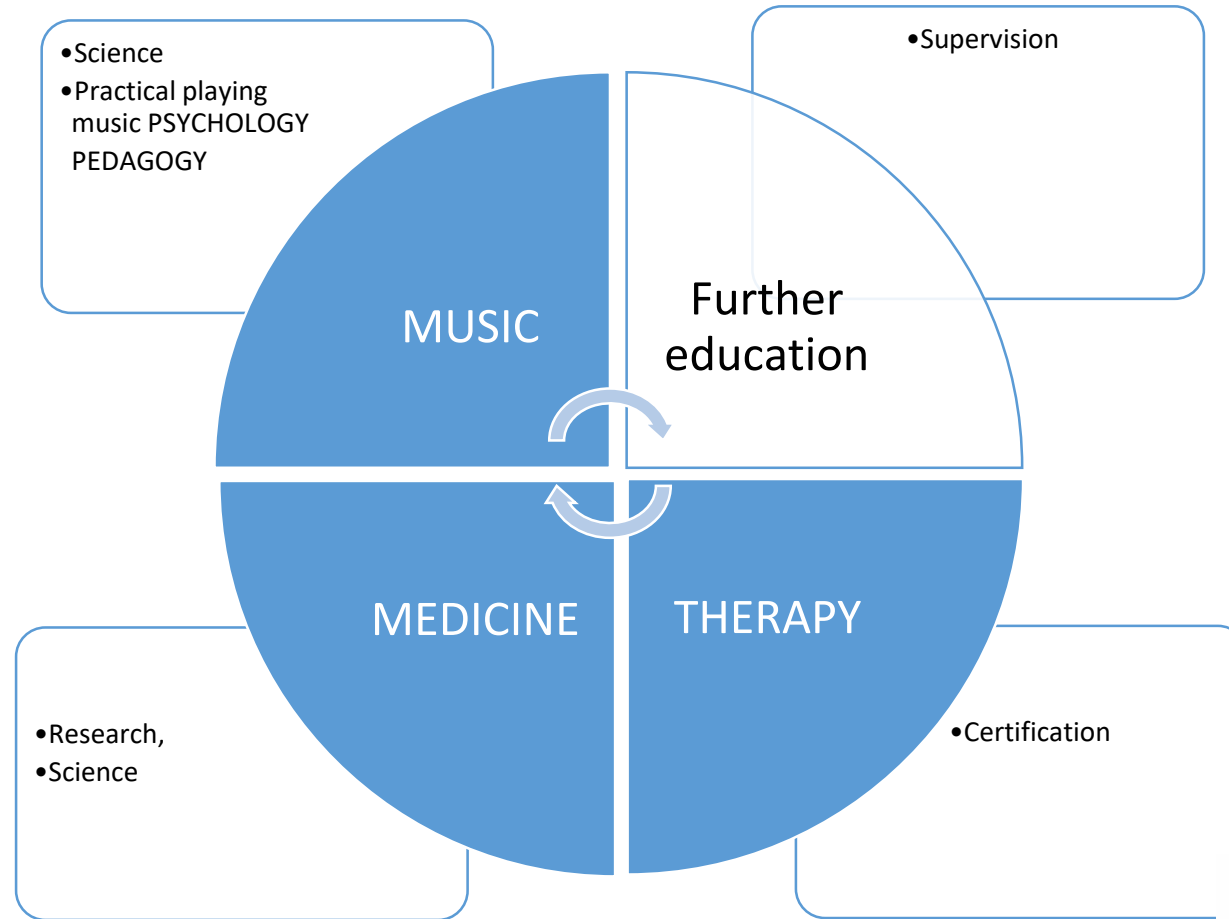
European Music Therapy Confederation(EMTC)



Estonia, Greece, Hungary and Italy refer to the definition of the WFMT (1996)

- „Music Therapy is the use of music and/or it’s musical elements (sound, rhythm, melody and harmony) by a qualified music therapist, with a client or group, in a process designed to facilitate and promote communication, relationships, learning, mobilization, expression, organization and other relevant therapeutic objectives, in order to meet physical, emotional, mental, social and cognitive needs. Music Therapy aims to develop potentials and/or restore functions of the individual so that he or she can achieve better intrapersonal and/or interpersonal integration and, consequently, a better quality of life, through prevention, rehabilitation or treatment.”
- Collected by M.Nöcker-Ribaupierre 2013

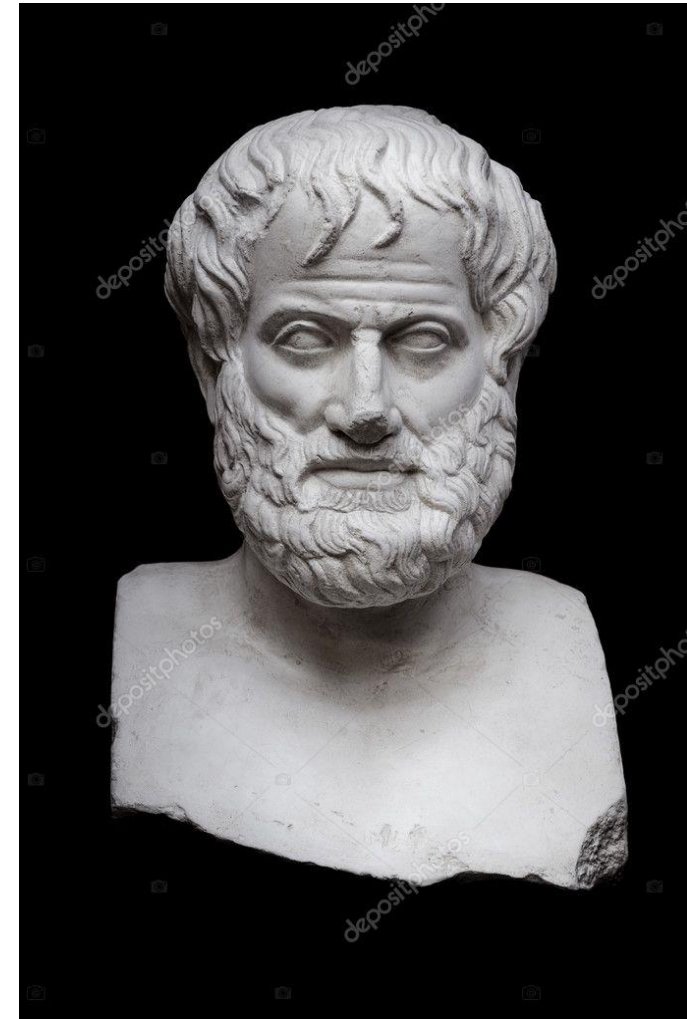
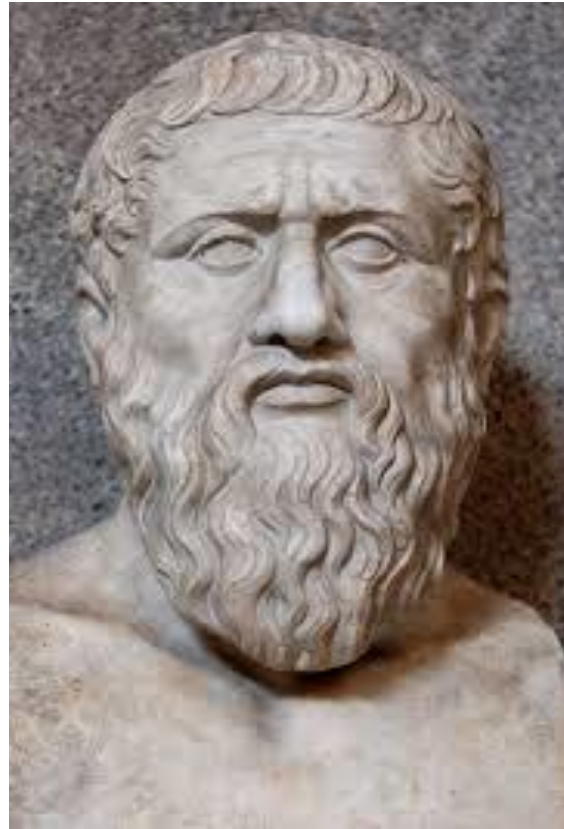
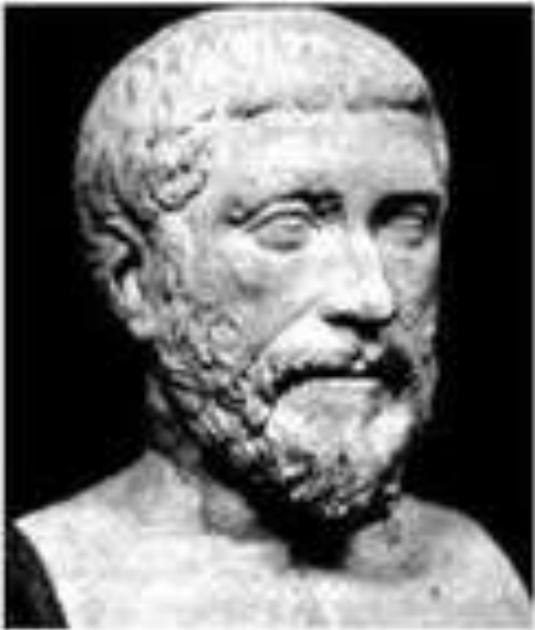
Fields of professional activity influencing the music therapy and music therapists



INTERPROF

Historical conditions of origination of music

- Music therapy historically is mentioned already long time ago
- One can say also: one upon a time there lived music
- The secret of antique catharsis of Pythagoreans
- There is an opinion that the Greek philosophers Pythagoras, Plato and Aristotle can be regarded as the founders of music therapy because they were interested in how music works on the psyche of a person



Paradigms

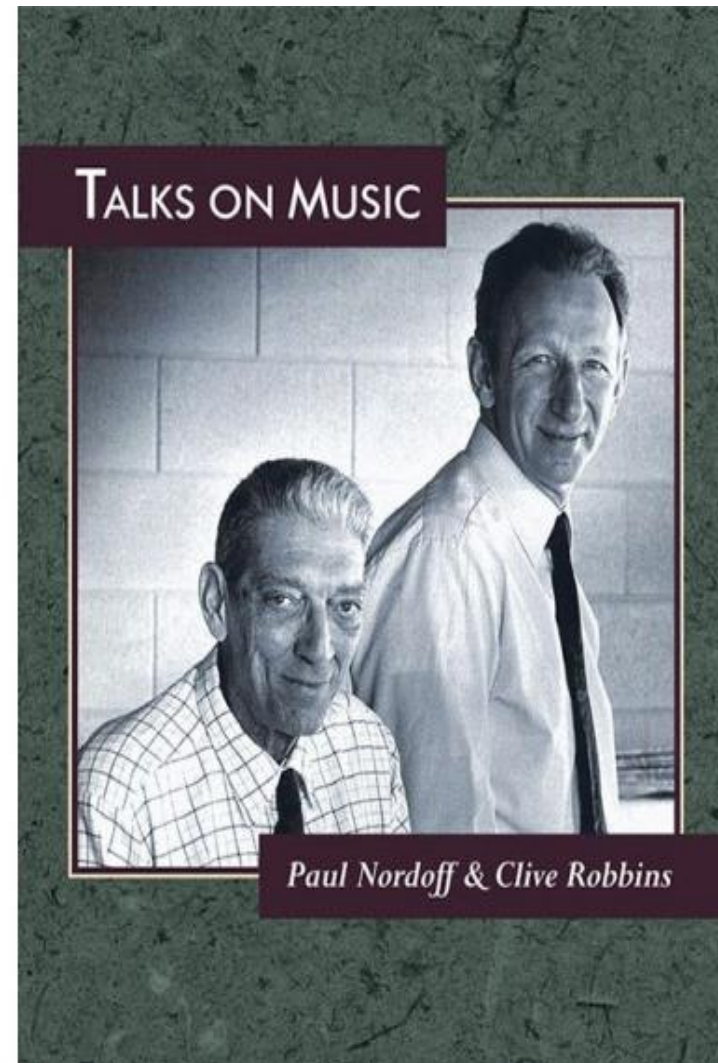
- Magic paradigm
- Mathematical paradigm
- Medical paradigm
- Psychological paradigm (*Henk Smeijster*)
- Pedagogical/transformative paradigm (*Mirdza Paipare*)

Forms and functions of music therapy

- Individual music therapy
- Group music therapy
- Creative/active music therapy – Nordoff-Robbins model of creative music therapy
- Receptive (perception-related) model of music therapy
- Free improvisation music therapy
- Psychodynamic/psychoanalytic model
- Guided Imagery and Music (GIM)
- Society's music therapy
- Systemic (family) music therapy
- Integrative – eclectic music therapy

Creative Music Therapy

P. Nordoff & C. Robbins



Orff Music Therapy

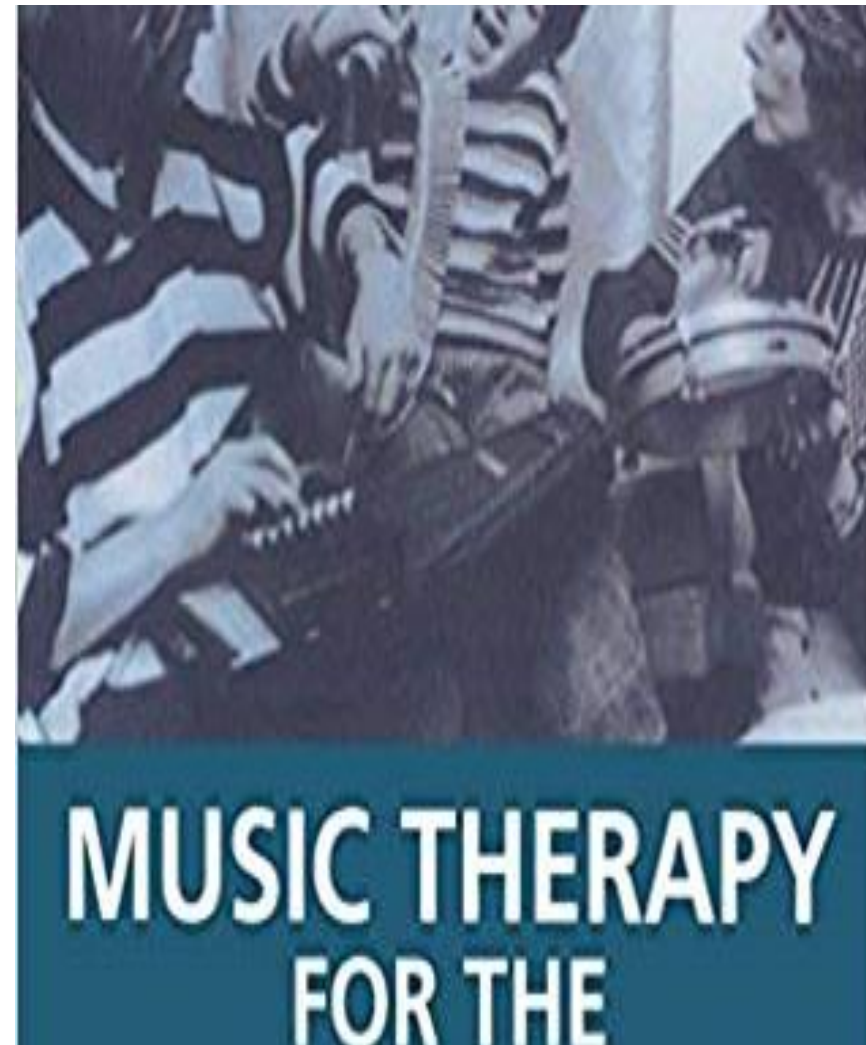
Gertrud Orff (1915-2000)

Development therapy



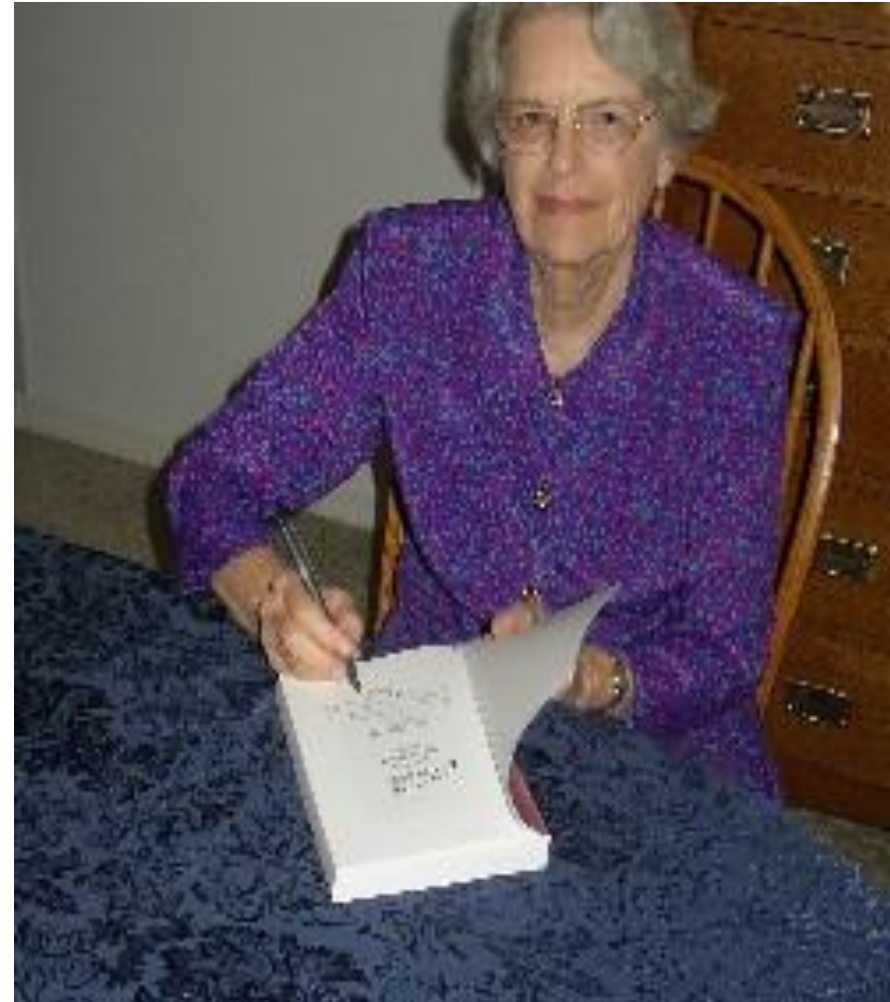
Free Improvisation Therapy

Juliette Louise Alvin
(1897 – 1982)



Receptive Music Therapy

Helen Lindquist
Bonny (1921 –2010)



Music Therapy Development in Latvia

- Historical background
- Regulations
- Professional MA programme *Music Therapy & Arts therapy* in Liepaja and Riga
- Development professional identity of music therapist`s in Latvia (MT technology, sertification, supervision)

Music Therapy in Liepāja

Dr. Reiner Haus



Historical Background

- Context and traditions
- Preconditions in MT & AT programme formation
- Orientation towards new conception in health care environment (resource based approach, multi-professional approach, team work)
- Search for interdisciplinary approach
- Request from the employers (health care environment, special education environment, social care/rehabilitation environment)
- Human resources (experience, different background of the founders for each specialization of MT(AT))
- Cooperation and support with professionals from foreign countries

Regulation

- MT & AT Profession in Health care

Definition:

Health Care:

Professional and individual prevention, diagnostics, treatment, rehabilitations and medical service

Health Care person:

Persons with medical education and who professionally carries out medicine





Professional MA programme

- *Music Therapy & Arts therapy* in Liepaja and Riga (collaboration, cooperation)
- Annotation of the Programme
 - **Degree:** professional MA degree in health care
 - **Qualification:** Art therapist in specialization (music therapy, dance movement therapy, visually-plastic art therapy, dramatherapy)
 - **Length of studies:** 2,5 years (Riga – full time studies), 3 years (Liepaja- external studies)
 - **Total programme amount:** 100 credits (150 ECTS)
 - **Integrative study programme,** however, Master`s degree is obtained in health care
 - **Member of EMTC (MT) & EcArTE (AT)**

Legacy of music therapist as a medical practitioner

- Profession of arts therapist (profession standard) in music therapy in the health care
- Definition
- Health-care – medical practitioner -
- Professional prevention, assessment, treatment, rehabilitation, medical service
- Medical practitioner in Latvia/Lithuania

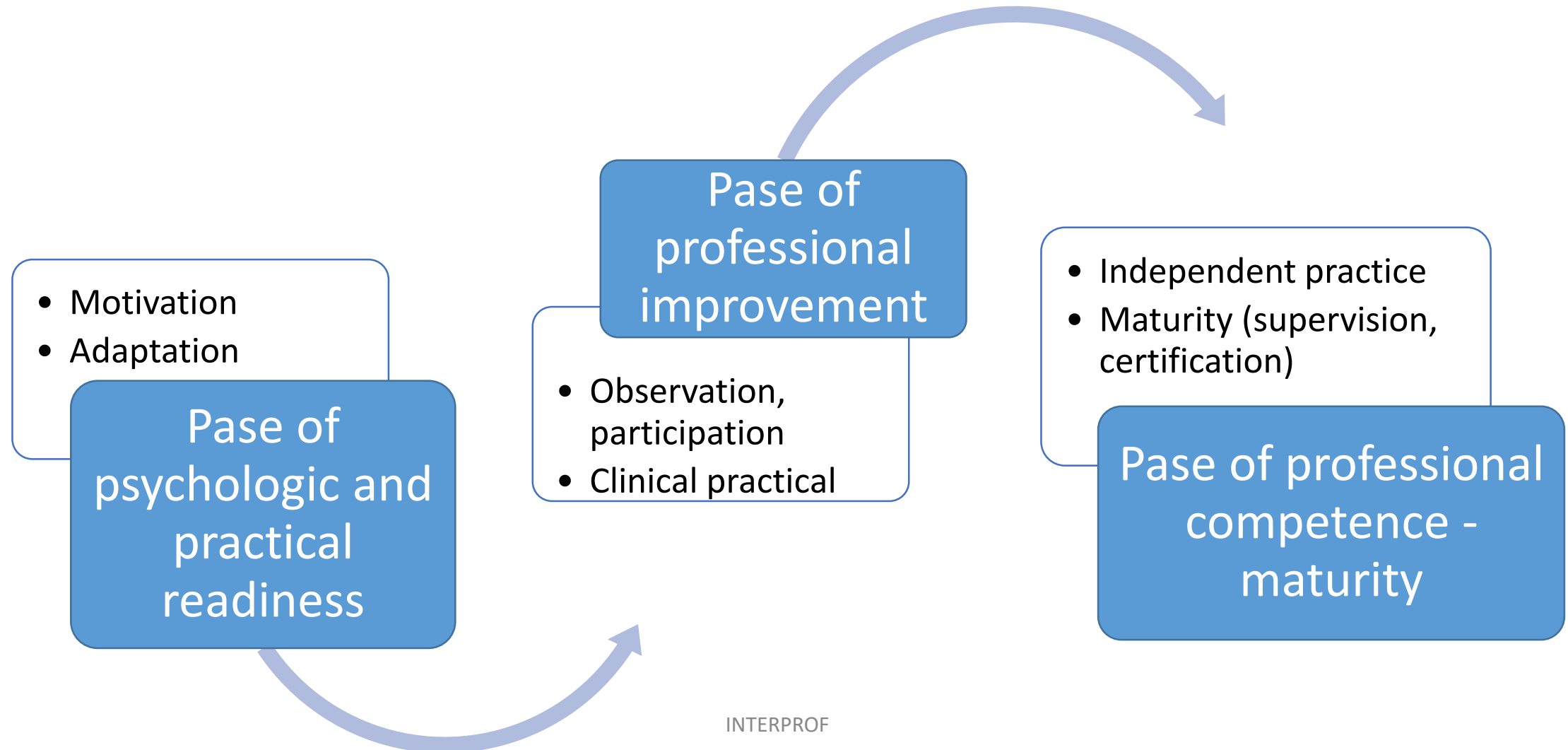
Professional study programs Music/Arts Therapy in Latvia

- Similarities, differences of study programs, cooperation)
- Annotations of study programs
- **Degree:** Professional Master's degree in health-care

Qualifications arts therapist in music therapy, arts therapist with qualification in music

- **Length of studies:** 2.5 years (Riga – full-time studies), 3 years (Liepaja – extramural studies)
- **Volume of program:** 100 CP (150 ECTS)
- **Integrative study program, Master studies in health-care**
- **International associations (EMTKM (EMTC) and) & EcArTE (for arts therapists)**

Development of the profession of music therapist in Latvia (Paipare, 2016)



Profession and education (2)

Cabinet Regulations No. 268, 763 and 461

Profession standard (<http://www.lm.gov.lv>) (<http://likumi.lv>)

Profession standard of arts therapist

Prescribed by National Education Content Centre (2008)/ **Ministry of Education and Science**

http://www.visc.gov.lv/profizglitiba/stand_registrs.shtml

- PS0434 / Health-care / Arts therapist
- Code of profession – 3229 15

Prescribed by Cabinet Regulations No. 461 (2010.g.) / **Edition presented by the Ministry of Welfare** <http://likumi.lv/doc.php?id=210806>

- Regulations regarding the classifier of professions, principal tasks and principal requirements for qualification according to the profession and Procedure for use and updating the classifier of professions
- Annex 2 (Standards of fifth level of professional qualification) – profession standard of arts therapist (paragraph 1.12.)

Profession and education (3,

Arts therapist is a medical practitioner who has obtained education appropriate for a medical practitioner

- *Master's Degree in health-care*
- Arts therapist's *professional qualification* with **specialization** in one of the types of art (**visually plastic art, dance and movement, music, drama**)

(in accordance with Cabinet Regulations No. 268 and 763 of 2009 and Regulations No. 461 of 2010)

Functional expert (2012)

Medical Treatment Law

Arts therapist – functional specialist

A functional specialist (physiotherapist, occupational therapist, riding therapist, technical orthopedist, audio speech therapist, or nutritional specialist, **arts therapist**) is medical practitioner, who has acquired a **professional higher medical education** at second level and acts according to his or her competence in medical treatment.

(in accordance with Amendments in Medical Treatment Law section 45.1, the law is adopted in Saeima on 21 June 2012, the law was announced by the State President and is becomes effective on 11 July 2012)

Functional specialist

In his or her specialty a functional specialist, within the scope of his or her professional competence:

- 1) shall understand the evaluation of human functional limitations and rehabilitation principles;
- 2) performs medical treatment by using appropriate diagnostics, evaluation and **medical technologies**, and provides opinions;
- 3) perform professional education work.

Medical technologies of arts therapy

National Health Service

Database of medical technologies to be used in medical treatment

Medical services in rehabilitation

Medical technologies in arts therapy approved in Latvia:

1. Music therapy ([annex](#)) MT 10-007.
2. Arts therapy ([annex](#)) MT 10-008.
3. Drama therapy ([annex](#)) MT 10-012.
4. Dances and movement therapy ([annex](#)) MT 10-013

Medical technologies of arts therapy approved in

Latvia: http://vsmtva.vec.gov.lv/resursi/file/Medicinas%20Tehnologijas/DB/30_Rehabilicijas_med_pakalp/Makslu_terapija.htm

Medical technologies of arts therapy

MT technologies for **assessment and analysis** of patient's physical, psychological condition and social situation (arts-based assessment (interview, self-assessment inquiries, tests) (60 min / 90 min)

MT **work** technologies (warming-up methods, activity methods and conclusion methods) (30 – 120 min)

MT **results assessment** (60 min)

Elaboration of **opinions and recommendations** (30 min)

Supervision of own practice individually or in a group

Medical technologies of arts therapy approved in
Latvia: http://vsmtva.vec.gov.lv/resursi/file/Medicinas%20Tehnologijas/DB/30_Rehabilitacijas_merd_pakalp/Makslu_terapija.htm

Profession

(in accordance with Regulations No. 268 of 2009 and Regulations No. 461 of 2010)

Arts therapist

Health-care
profession

Four specializations

Arts therapy
or
visually plastic arts
therapy

music therapy

dance and
movement therapy

drama therapy

• 4 specializations

Latvian Union of Art therapy
associations (LMTAA)

Latvian Art therapy association (LMTA)

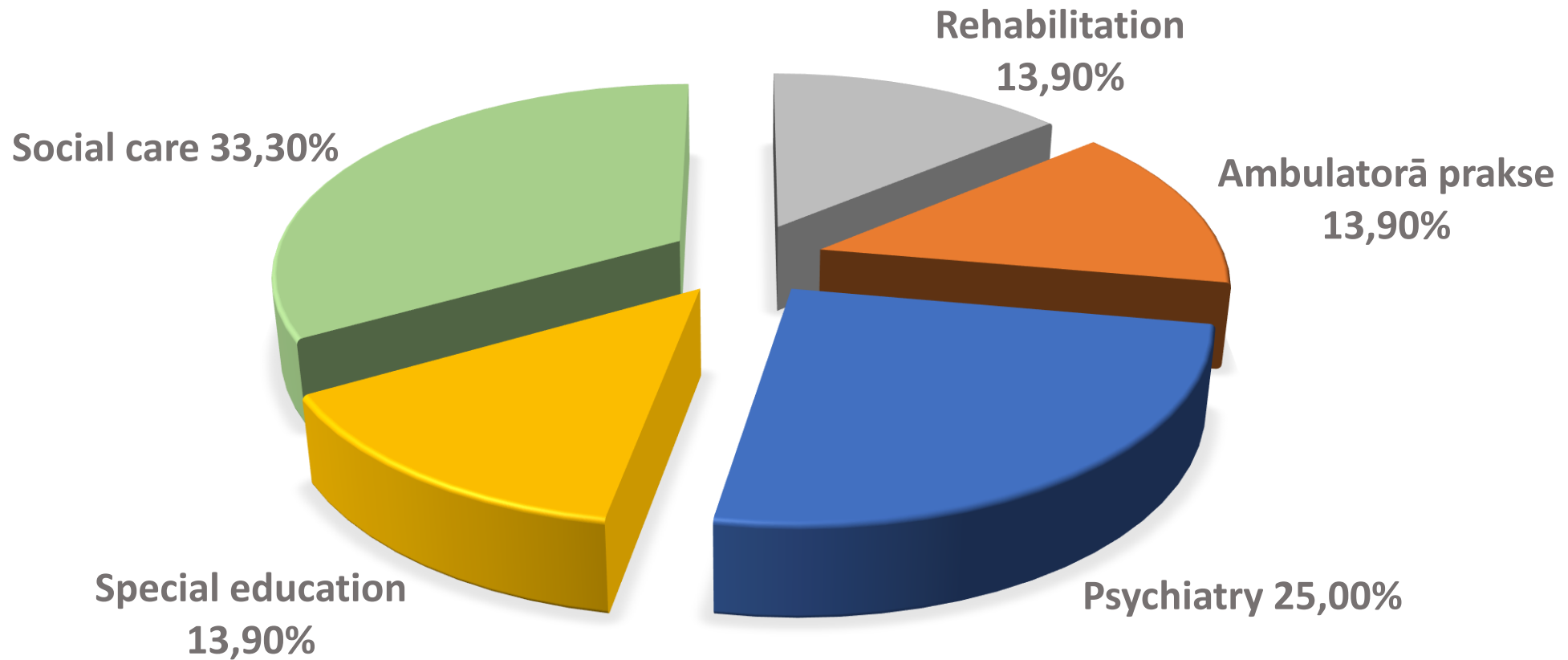
Latvian Dance and Movement Therapy
Association (LDKTA)

Latvian Drama Therapy Association
(LDTA)

Latvian Music Therapy Association
(LMta)

Working environment of music therapists

(data of 2018, 67 (LiepU), 20 (RSU) certified music therapists)



Fields of application of music therapy

In health-care institutions

- hospitals
- ambulatory health-care
- rehabilitation institutions

In social care institutions

- social care centres
- social services
- crisis centres
- care homes
- orphans care centres
- children's homes
- day centres for persons with mental disorders etc.

In educational establishments

- preschool education establishments
- special schools, etc.

Possibilities of application of music therapy in medicine

Individual Music
Therapy Session



Group Music Therapy session



INDICATIONS

- **Depressive disorders**
 - » Silverman, M. (2011) Effects of music therapy on psychiatric patients' proactive coping skills. *The Arts in Psychotherapy*, vol.38:2.
- **Schizotypal disorders and schizophrenia**
 - » Ruddy R., Dent-Brown K. (2007) Drama therapy for schizophrenia or schizophrenia like illness (**Systemic review**) *The Cochrane Collaboration*, issue 2.
- **Anxiety, panic, stress and posttraumatic stress**
 - » Lev-Wiesel R. Liraz R. (2007) Drawings vs. Narratives: Drawings as tool to encourage verbalization in children whose fathers are drug abusers. *Clinical Child Psychology and Psychiatry*, Jan;12(1):65-75.
- **Behavioural disorders, attention deficit and hyperactivity disorders**
 - » Gold, C., Voracek, M., Wigram, T. (2004). Effects of music therapy for children and adolescents with psychopathology: a **meta-analysis**. *Journal of Child Psychology and Psychiatry*, vol. 45:6.

INDICATIONS

- **Autism**
 - » Gold, C., Wigram, T., Elefant, C. (2006). Music therapy for autistic spectrum disorder (**Review**). *The Cochrane Collaboration, issue 2.*
- **Eating disorders**
 - » Meekums B., Vaverniece I., Majore-Dusele I., Rasnacs O. (2012). Dance movement therapy for obese women with emotional eating: A controlled pilot study. *The Arts in Psychotherapy*. vol 39, pp.126– 133.
- **Speech development disorders**
 - » Groß,W., Linden, U., Ostermann, T. (2010). Effects of music therapy in the treatment of children with delayed speech development. *BMC Complementary and Alternative Medicine*, 10:39
- **Asthma**
 - » Beebe, A., Gelfand, E.W., Bender, B. (2010) A randomized trial to test the effectiveness of art therapy for children with asthma. *The Journal of allergy and clinical immunology*, Aug;126(2): 263-266.
- **Cardiovascular diseases**
 - » Aweto H.A., Owoye O.B., Akinbo S.R., Onabajo A.A. (2012). Effects of dance movement therapy on selected cardiovascular parameters and estimated maximum oxygen consumption in hypertensive patients. *Nigerian Quarterly Journal of Hospital Medicine*. Apr-Jun. 22(2), pp.125-129

INDICATIONS

- **Neurologic disorders** (incl. cerebral damage, sensory, movement disorders)
 - » Kim, M.K., Kang, S.D. (2013) Effects of art therapy using colour on purpose of life in patients and their caregivers. *Yonsei Medical Journal*, 54(1):15-20.
- **Chronic pain**
 - » Christie, D. (2006) Thinking, feeling and moving: drama and movement therapy as an adjunct to a multidisciplinary rehabilitation approach for chronic pain in two adolescent girls. *Clinical Child Psychology and Psychiatry* . Vol 11(4): 569–577
- **Oncologic diseases**
 - » Thyme, K.E., Sundin, E.C., Wiberg, B., Oster, I., Astrom, S., Lindh., J. (2009) Individual brief art therapy can be helpful for women with breast cancer: a randomized controlled clinical study. *Palliative and Supportive Care*. 7:87.
- **Palliative care**
 - » Bradt, J., Dileo, C., Potvin, N. (2010). Music interventions for mechanically ventilated patients (Review). *The Cochrane Collaboration*, issue 12.

CONTRAINDICATIONS

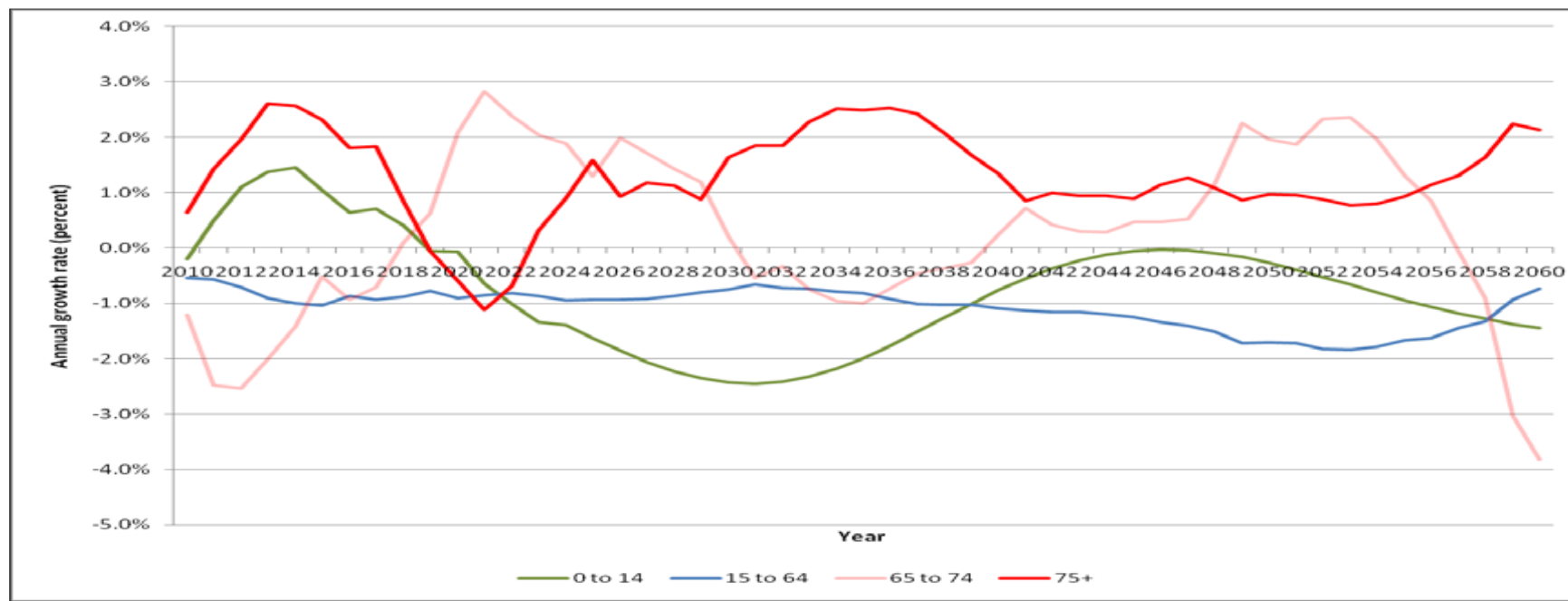
- **acute conditions**
 - psychotic condition
 - necessity for surgical intervention
- aggravation of chronic disease
- **contraindications in relation with MT specialization**
 - uncompensated arterial hypertension
 - acute musculoskeletal pain
 - increased pressure in eyes
 - allergy against any of arts materials, etc.

Music therapy for premature babies



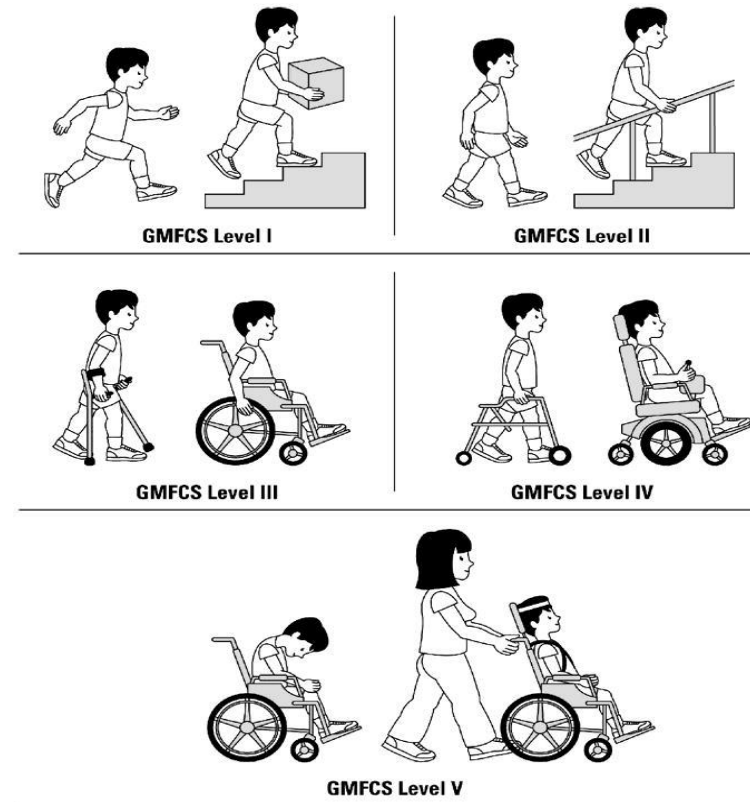
Music therapy for adults with neurodegenerative diseases

- Aging of society. Increase of forecasted diseases (dementia, Parkinson, MS)
- Music therapy can increase the motor and cognitive functions



Music Therapy in Rehabilitation

- Music, as a symbolic system, is a cognitive technology, an extension or prosthesis of intelligence, a form of embodiment of thought whereby mental life expresses and builds itself. In this perspective music is a tool of the mind and, as such,
 - it allows for interesting opportunities for rehabilitation.
- (Alessandro ANTONIETTI)



Methods & Technics of Music Therapy (*Melodic intonation Therapy*)

Ideal Candidates for MIT

A good response to MIT is defined as improvement in conversational speech skills. Patients who are most likely to respond well to this treatment have most or all of the following characteristics:

- a unilateral, left-hemisphere stroke
- poorly articulated, nonfluent, or severely restricted speech output
- able to produce some intelligible words while singing familiar songs
- poor repetition, even for single words
- moderately well preserved auditory comprehension
- poorly articulated attempts at speech
- good motivation, emotional stability, and good attention span

Summarized from: Helm-Estabrooks, N., Nicholas, M., & Morgan, A. (1989). *Melodic Intonation Therapy program*. Austin, TX: PRO-ED.

Methods of music therapy: receptive music therapy and active music therapy

- Types of Music Experiences in music therapy
 - improvisatory experience
 - composition experience
 - receptive experience (Bruscia, 1998)



There are two types of music therapy: passive and active music therapy. Active interventions include improvisation, playing instruments, singing, or writing lyrics and songs, passive music therapy as listening to music or sounds during therapy, either by recording or played by the therapist (Mrazova, Celec, & Ing, 2010)

Receptive music therapy

The listening experience may be focused on – physical, emotional, intellectual, aesthetic or spiritual aspects and the client's responses are designed according to the therapeutic purpose of the experience (Bruscia)

Receptive music therapy methods

- music relaxation for children and adults in different clinical settings
- imaginal listening – including music imaging, guided music imaging and group music and imagery
- song (lyric) discussion – where the song serves as a springboard for discussion of the client’s life issues
- song reminiscence – the method of using songs to promote discussion and reflection
- music listening experience based on the client’s preferred music
- music appreciation activities – where the therapist helps a client to understand and appreciate the aesthetic value of music
- music collage
- somatic listening



Verbal processing of client's experience in music therapy

- Verbal processing as 'an integral part of music therapy practice
- discuss with clients how they are feeling and what has happened
- find the focus for the music therapy session
- understand responses to a musical experience
- gather more information
- give feedback
- give interpretation
- close a session (Nolan, 2005)



Selecting Music for the Receptive Methods in Music Therapy

• Music for relaxation

- Tempo is consistent and steady
- Tempo is slow
- Melodic line may be predictable with the rounded shape and small range of intervals
- Harmonic structure is typically tonal and consonant
- Instrumentation is likely to include strings and woodwinds
- Legato, pizzicato in bass line
- Few dynamic changes
- Repetition is key feature
- Texture likely to be consistent
- Supportive bass line
- Predictable in melodic, rhythmic and harmonic features

• Music for imagery

- Tempo may vary
- Tempo is predominantly slow, but there may be contrasting section of faster m.
- Melodic line may be include leaps and wide intervals
- Harmonic structure may have more variance, sometimes with dissonance
- Instrumentation may include brass and percussion
- Combination of legato, staccato, pizzicato, marcato and other forms. Large dynamic changers
- Repetition is less important
- Texture is likely to change from thin to thick
- Bass line may vary between supportive to not.
- Less predictable in melodic, rhythmic and harmonic features

Characteristics of music for receptive music therapy

1. Classical music of Western tradition
 2. New- age music
 3. Celtic music
 4. Meditative music
 5. Trance music
 6. Jazz music
- (Bonny,2002)

- Other consideration when selecting music for receptive methods:
- Associations with music (Albinoni's Adagio in C minor, Grieg's 'Morning' from The Peer Gynt suite)



Active improvisation music therapy



- Improvisation in music therapy includes any experiences in which the client actively participates in spontaneous music making with the therapist and/or other clients playing instruments, vocalizing or sounding their bodies or other objects (Bruscia, 2014)
- Improvisation that is centered on meeting clinical goals is often referred to as clinical improvisation.
- The creation of extemporaneous music helps client organize their physical movements in space, initiate new ideas, have an aesthetic experience, develop a relationship with another person, and identify and explore feelings (Bruscia, 2014, Nordoff & Robbins, 2017, Wigram, 2004).
- Clients in individual therapy can improvise alone or with the therapist, client in group therapy can also improvise alone or with therapist, but often improvise with other group members.

Active improvising music therapy



- The music itself can take a variety of forms, depending upon the media used to produce sound as noted above, musical instruments and the voice can be used. Clients also can use their bodies to make sounds through stomping, clapping, or can make combination of sounds with instruments, vocalization, or body. The range of elements with which to work, including – rhythmic, tonal, and expressive (e.g. dynamic, articulation, phrasing) to name a few.
- The character of the improvisation is reflective of the current emotional and physical state of the client and the potential goals areas.
- Non referential improvisation – is organized solely around, and derives its meaning from, the music and sounds, without representing or referring to something outside of itself (Bruscia, 1987).
- Referential improvisation - is thematic, it is created in reference to something other than music itself, such as an ‘ image, title, story, feeling or work of art’ (Gardstrom, 2007)

Essence of Improvisation Method

Improvisation process from the psycho-dynamic point of view is based on three levels:

Level of consciousness: the cognitive level which addresses the world of thoughts and words, forms analytical conclusions, conveys the connections between emotions and impressions.

Level of pre-consciousness: level of improvisation in which the images and emotions are formed on the level of symbols.

Level of sub-consciousness: power of improvisation motivation.

The border between the levels is not strictly determined; all these levels of improvisation are important and they move from the primary level of sub-consciousness to the upper level of consciousness.



Improvisation Method

Improvisation is a spontaneous process. The musical production in each particular case is different, but always connected both with the improvisatory past and present:

The past aspects: musically cultural environment, acquired music styles, development level of musical skills, music listener's experience, past associations from the previous life situations.

The present aspects: spectrum of musical interests, life events, which influence the direction of interests and emotional condition during the improvisation, personality's development level (*Wigram, T., 2004*).



Nordoff/Robbins Creative Music Therapy also called CMT.

- There are two types of music therapy: passive and active music therapy. Active interventions include improvisation, playing instruments, singing, or writing lyrics and songs, passive music therapy as listening to music or sounds during therapy, either by recording or played by the therapist (Mrazova, Celec, & Ing, 2010)
- The training is humanistic and music centred, including comprehensive experiential components array of improvisatory skills on either piano or guitar.
- Specific aims of Music therapy: to intensify the client's possibilities, stimulate language development and ability of motor coordination, to develop awareness of own body and identity, to develop using fancy in thinking, to develop the acting and turn - taking ability by making music together.



Forms of Music Therapy – Individual music therapy

When meeting the client, the music therapist's main task is to form and maintain favourable interaction rules. The goal of the therapy- promote the client's activities and self-expression.

The therapist works as a confidant , forming mutual relationships; it mostly refers to the work with children and teenagers.

The therapist's musical activities can serve as a flexible base for different client's creative expressions. The main cooperation principle is orientated towards the client's needs- it means the interaction cannot be formal.

An active, distinct, supportive, cautiously formed and well-considered therapist's activity directed towards the participation during the therapy encourages the client to take part in the process.



Forms of Music Therapy – Individual music therapy

Despite the fact that when the therapist meets the client, he/she maintains neutrality, he/she still has to be ready for spontaneous and creative reactions.

A common free improvisation increases the therapist's impressions about the client's emotional spectrum and inner world, which is not always possible in the verbal contact.

It is not compulsory to verbalize the musical experience, award their music a conceptual significance, but, in case such a conversation seems suitable, the therapist can use it.

The client's hidden feelings and characteristics attract a special therapist's attention which likely appear only in musical communication.



Opportunities of Music Therapy

Music therapists with the help of the music language:

- try to establish a close emotional contact with the client in order to understand the causes of the clients' concerns;
- others try to help clients to recognize their emotions;
- other therapists help the patient to get rid of the negative emotions in order to create a positive attitude towards the ongoing matters;
- others think that the active music making and artistic creation themselves are able to sublime the patient's feeling, giving a way out to destructive emotions and tendencies.



Music therapy process

Edit Kramer thinks that an active participation in the art area gives positive outcomes, the art creation process has got a healing effect, it gives a chance to experience once again the life conflicts, and as a result allows the patient to fight with their problems (*Edith Kramer, 2000*).

Adrian Hill, in its turn thinks, while a human being is involved in music, they can forget or distance their concerns, art is able to deviate the patient from painful experiences (Hill, 1945).



Relationship Formation Process – Music Therapy

Music therapist/client/patient

Music therapist invites the client/patient to expression, searching the possibilities for a dialogue, tries to get rid of the leader's role.

Music therapist never corrects and never teaches the client/patient. Goal- open the client/patient's creative potential.

Music therapist accompanies musically the client/patient's creative expressions.

Client/patient needs help in order to solve their inner problems.

Music therapist assesses the client/patient's mental and physical health, analyzing the therapy process.

Client/patient does not expect fast outcomes from music therapy.



Forms of Music Therapy -Music therapy in group

- The phenomenon of group work in music therapy gives the client/patient many different opportunities for further development.
- Working in groups is aimed on discovery of practical and creative potential and individual up growth and experience exchange in the process of collective creation.
- The therapy of music is based on musical - creative actions which are accentuated on the unique role of live music.
- Group work in music therapy builds equal experience in all participators and unites them in creative actions and eliminates the social isolation.



Methods of Music Therapy on Group Work: Concepts, Differences, Responsibility

- acquire new functions and roles, use widely personality's characteristics, as well as observe how the behavioural change can influence others;
- increase self-esteem which strengthens the person's identity;
- develop decision-making skills;
- relax, get rid of negative thoughts and feelings;
- get engaged with music and implement one's creative abilities.





- The usage of music methods, similarly to the emotional learning, is the construction process of personally important knowledge which takes place in various ways, when several brain fields cooperate intensively.
- The specialist's goal - find out on what level the person's social skills, detect the weaknesses and problems in order to direct the socializing processes, relying on the positive experience, assess the achievements and set new goals.
- During the usage of music elements the cognition of oneself and one's abilities and possibilities takes place, the skill to make an emotionally fulfilled contact with the surrounding world develops, more profound identification possibilities with it, as well as the search of the unrepeatable "I".

- There are some **overall objectives in group music therapy**:
- - fortification of social consciousness, modeling contacts and co-operation;
- - improvement and expansion of body motiric;
- - expansion of sensory conception;
- - pathetic stabiolization and fortification of self-awareness;
- - furtherance of speech development.
- This ojectives can not be ranked by importance. They follow each other according to each participators individual and alternate needs.
- When the client are working in group in music therapy it encourages to express them selves with help of music and communucation psychics as wellas to contact each other , it becomes to recognize the recognize the receptivity of their own and other participators.





- Music has an inviting and cheering character. Therefore people which are playing a musical instrument may perpetrate self-motion. In such cases motion limits can be over passed.
- When working in group motion and play songs give many possibilities to develop perceptivity.
- The singing process precludes attention from the process of speaking, such phenomenon's, when the melody of speech/allocution and rhythm in the musical context are more easily to recognize.
- To be a part of a group and to be accepted by others the way you are, is the main therapeutic omen in group music therapy.

- **Improvisation in pair and group: performance and creative task, reflection on experience, discussion, generalisation**
- **"I" Level Exercises**
- Help to activate the participant's personal resources: increase self-cognition and personality's development.
- Work with the participant's self-image: improve the personality's self-esteem, help to study the attitude towards oneself, different personality's aspects, change them if necessary.
- Help to develop the prospects of self-determination and self-realization.



- Relationship (I and the Other)
- Help to develop the skills of relationship formation: study and be aware of the relationship formation models, change them if necessary.
- Promote the development of communication skills: in case of inefficient communication models, change them.
- FURTHER ENVIRONMENT (I and Others)
- Help the participant develop and improve their communication skills on a public level: improve the communication and social skills and abilities, promote the personality's socialization.



- **Musical portrait**
- **Procedure and instruction:** participants are offered to choose a musical instrument or a sounding tool which according to their opinion complies most with their personal character. Task: “draw” your own portrait, mood, personality, etc. with the help of sound. A more precise question can be asked: “How does your character sound when you are angry or happy?”
- **Possible variations for the task follow-up:** group members are offered to improvise their portraits in three ways:
 - What am I like from the mother’s point of view?
 - What am I like from the friend’s point of view?
 - How do I see myself?



- **Greeting**



- **Goal:** promotion of a creative self-realization.

- **Forecasted time for the task completion:** a few minutes at the beginning of the class.

- **Procedure and instruction:** group members are asked to sing a greeting song with a particular intonation- *happily and joyfully, angrily and energetically, sadly and gloomily, peacefully and meditatively, slyly and in a yielding way, solemnly and proudly, etc.* Group members sing either together or one by one in their comfortable pitch.

- **Instrumental improvisation**

- **Procedure and instruction:** group members sit in a circle. Everybody chooses a musical instrument which are placed in the middle of the circle. Participants play one by one their musical instrument, performing different tasks set by the leader:
- each participant presents their instrument(participants acquire the skill to wait for the end of the previous improvisation and only then to carry on playing);
- play one mood, emotional condition (sorrows, joy, anger, peace);
- improvise one common theme, for example: “argument,” “holiday,” “an angry dragon”, “spring forest,” “sea storm”, etc.
- make a dialogue between the participants, when one of the participants devotes an improvisation to another one and waits for the reply (it is important to develop in the participants the skill to listen emphatically to the other participants' play).
-

- **Instrumental Improvisation**

- **Sending letters**” - a participant gazes at another participant and “sends a letter” , the group member plays his/her improvisation on the musical instrument, but the one who has “received the letter” chooses the next participant and “forwards the letter.”
- **“Instruments’ families”** – participants present their instruments in groups, everybody joins in when they feel that their instruments belong to the particular instrument group (wooden, metal, small or big, wind, percussion, melodious, etc.)
- **Group work** – participants are divided into groups (about 5 people per group), each group prepares an instrumental **improvisation on the chosen theme**. The themes can be chosen:
 - - from the surrounding environment, e.g., “Autumn Leaves,” “Eastern Market,” “The Chinese Language,” “Thunderstorm in the Countryside” etc.
 - - from the inner world, e.g., “Family Argument,” “Love,” “First Loss,” etc.
- Each group of participants does not say the theme of their improvisation, but offer other groups to guess it.



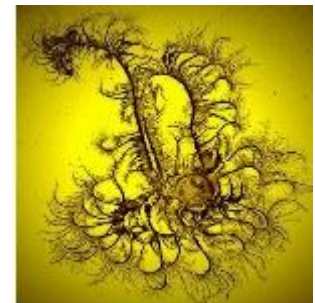
- **The improvisation method:**
- promotes acquisition of the language of music and development of musical skills;
- gives an opportunity to listen to oneself;
- develops emotional manifestations.
- It is connected with the possibility to reveal the human being's inner force and allows to develop lots of abilities:
- develop one's spontaneity;
- improve the cognitive skills- processes of attention, memory and thinking;
- explore one's experience;

- find out how to communicate with other people on different levels, using own sensory abilities;
- self-expression, giving joy to oneself and others;
- develop valuable social skills (team work).
- acquire new functions and roles, use widely personality's characteristics, as well as observe how the behavioural change can influence others;
- increase self-esteem which strengthens the person's identity;
- develop decision-making skills;
- relax, get rid of negative thoughts and feelings;



- **Music therapy** had large effects for mixed diagnoses, developmental problems, or behavioral problem, and that these effects were equally significant among children as well as adolescents.
- Music therapy interventions can be effective with individuals in outpatient treatment programs:
- **Gold, Wigram, and Voracek (2007)** - the therapy tended to be more effective when focused on disciplinespecific music therapy techniques including improvisation and subsequent discussion.
- **Lefevre (2004)** referenced numerous case examples of her use of music interventions with clients ranging in age from 6 to 13 years.
- **Odell-Miller (2011)** explained the benefits of music interventions on her work with a 21 year old client with borderline personality disorder.
- **Gold, Voracek, and Wigram (2004)** shared the results of their study on the effectiveness of music therapy for children and adolescents diagnosed with various types of psychopathology.

- Music is widely used in therapeutic practice as a distractive, relaxing, and anxiety-reducing mechanism and seems to be an effective tool for reducing symptoms of depression (**Mrazova, Celec, & Ing, 2010**).
- Using a client's preferred music choice in therapy can be an excellent way of engaging with the client and building rapport. Particularly with adolescent clients, rapport building is an essential and often difficult part of the therapeutic process (**Tyson, 2003**)
- **Baker and Bor (2008)** concurred with this argument, stating that clients use music as a way to regulate their emotions by escaping from thoughts and feelings.



- **In what cases can music therapy be used for help?**
- **Neonatology** Premature birth (P07) Disorders of respiratory adaptation (P22).
- **Whether music therapy should be introduced into the NICU environment?**
The benefit of music therapy for infants and the benefit for mothers.
- Over the past time music has been introduced into the NICU as a therapy designed to enhance treatment and facilitate growth and development of premature infants. The efficacy of music therapy for premature infants demonstrated significant clinical benefits of music across a variety of physiological and behavioral measures (Standley, 2002)
- **Which kind of music is preferable?** Recorded and live music performed by one or more instruments; singing or speaking softly in a singsong manner; stimulation such as skin-to-skin contact; female voice and harp music combined;
- **When to start music intervention?** Multi modal stimulation (auditory, tactile, visual, and vestibular interventions) may already start at 32 weeks gestational age.



- **In what cases can music therapy be used for help?**
- **Psychosomatic diseases** Asthma (F45.3), Anorexia (F50.0), Bulimia(F50.4), Indigestion problems (F45.8), Stomach ache(F45.3),Enuresis (F98.00)
- In recent years the number of cases of psychosomatic illnesses has grown considerably. Patient with eating disturbances like bulimia and anorexia seem to point to the unstable situation in families and show the wrong direction of the development of society.
- **Methods: Promoting a positive emotional state with music (free instrumental and vocal improvisation)**
- MT offers free improvisation on tools;
- Reflection of the patient's emotional state;
- Opportunity to develop new emotional qualities musically and then transfer them to yourself and others.
- **New Experience Building -associative improvisation.**



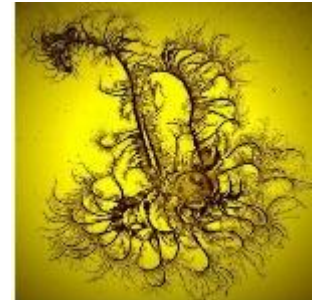
- In what cases can music therapy be used for help?
- **Psychiatry** Retardation of psychic development, Recurrent depressive disorder(F32), Exogenous and endogenous psychoses (F25.9, F30-39), Specific phobias (F40, F41)
- 1. MT is an effective treatment for psychiatry's clients.
- 2. Constancy of therapist and group members within safe boundaries (i.e. regular time, place and approach) are important in achieving therapeutic benefits for clients.
- 3. Diagnosis and backgrounds are important factors in determining how to help psychiatry's clients through music therapy.
- 4. MT using methods involving improvisation within group interactions is successful in achieving therapeutic.



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- **Music Therapy methods (Psychiatry and Psychosomatic disorders)**
- Creating the musical activity of the emotional and intellectual sphere of the personality - free instrumental improvisation.
- The quality of expression of the patient's musical game is integrated by the music therapist into his piano and vocal improvisation, thus offering the patient an emotional dressing in sounds. The music therapist offers the patient his or her idea of the future's desired disclosure in improvisation. Musical material is supported and enhanced by a music therapist with a piano or vocal accompaniment.
- A fictional, improved emotional adventure affects the patient's ability to create new adventure and thinking opportunities, regulates psychic self-organization/



MUSIC SPEAKS WHEN WORDS CAN'T

