Therapeutic Uses of Music

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Abstract
Musical therapy is an umbrella term encompassing a variety of activities that take place in social, educational, and hospital settings. These range from simple group singing through sophisticated psychologically oriented uses of programmed orchestration. The increasing recognition of musical therapy as a unique profession is attested to by the many universities that presently offer curricula leading to the degree of music therapist. Although the music therapist is the primary professional in this field, many of the same functions are carried on by school teachers, social directors, and volunteers.

Keywords: Music therapy; Projective technique; Meditation

Therapeutic Value of Listening
The universal appeal of “commercial” music is the result of its ability to temporarily alleviate inner tensions. The more intense catharsis experienced at symphonic concerts and music drama is attributable to the greater maturity of the music [1].

A technique used at outdoor rock concerts is the simultaneous use of high decibel levels andcessive repetitions of aggressive musical motifs. The protest attitude intrinsic to the youth culture is thus reinforced; in addition, internalized fears are overwhelmed.

Music projected at a minimal dynamic can subtly influence emotional moods. Minimal music projection is used in business establishments to assuage customer irritations, e.g., banks, offices, etc.

In a hospital setting the music therapist frequently stimulates the introverted child with highly energetic music. The therapeutic goal is to motivate the young patient in the direction of some positive behavior. In contradistinction, the music therapist may surround overly active children with passive subdued types of music. The hoped for result is a toning down of the hyperactivity.

Therapeutic Value of Participating
There is a body of pragmatic evidence supporting the contention that individual and group singing exert a positive influence on emotional moods [2]. Group or community singing is equally effective with adults as with school children.

Because success with a musical instrument has the potential for elevating the self-image, the instrumental music program has become an integral part of most school curriculums. In hospital and special educational centers the music therapist very often gives instrumental and vocal instructions as part of an overall therapeutic plan.

Structured music programs for senior citizens are growing in importance [3]. Music appreciation, playing a musical instrument and group singing have been found to be excellent devices for constructively utilizing leisure time.

Music as a Projective Technique
Evaluating the free associations and overt behavioral responses to a variety of orchestrated musical moods is a method of obtaining insights to a patient’s self-defeating behavior. Cognizance is also taken of the types of songs patients sing and listen to during the day. This knowledge, together with that gained from other therapeutic modalities, facilitates the formulation of a more efficient plan for behavior modification by the mental hygiene team.

Music and Meditation
To a great many active people, contemporary living is synonymous with stress. Some of the reasons for the ubiquity of the stress syndrome are the numerous liberation and protest groups, the high rate of unemployment and underemployment, and the precarious international situation. The adverse effects of stress are pretty well known. Although the most common complaints are headaches and backaches, stress is a factor in nearly every psychosomatic illness.

Meditation in one form or another has become a most popular method of countering the debilitating effects of stress [4]. The precursor of contemporary methods of “meditation-reverie-relaxation” is the autosuggestion formula of Emile Coue: “Every day in every way I’m getting better and better.” There are clinical studies supporting the transitory advantages attributed to meditation; such as: measurable decreases in heart rate, respiratory rhythm, muscle tension, and oxygen consumption. During the meditative state the relaxed body is capable of a high degree of rejuvenation; the psychological concomitant is a feeling of serenity. Biofeedback experimenters are presently monitoring the four frequencies of brain wave patterns (especially alpha and theta waves) to determine the most efficient ratios relating to maximum relaxation.

Of the many methods used to attain the meditative state, none is more effective or easier to learn than musical meditation. A note of caution is in order. No system of meditation can cure a deep rooted personality conflict. Where professional help is needed, the safest procedure is to contact the local office of the American Psychiatric Association or the American Psychological Association for the names of competent, ethical practitioners.

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Received September 09, 2015; Accepted October 29, 2015; Published November 07, 2015


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Meditating position

The participant should be comfortably seated in a quiet area of the home or office. The eyes should be closed and the luminous level kept low in order to avoid visual distractions. The supine position is generally not recommended because it frequently leads to the sleep state. Special relaxation chairs adjustable to the contours of the body are beneficial. Although sleep is the most efficient bodily attitude, an inadequate sleep period may have a negative effect and could therefore interfere with the day’s scheduled work plan. For many, competing in today’s complex society, sleep is very often a time for reliving daily stresses—concretely and symbolically.

Time schedule

Rigidity plays no part in preparing a schedule for musical meditation. Some find it convenient to meditate in the early morning and others late in the evening. The consensus, however, is that two daily musical meditation periods ranging from fifteen through thirty minutes are adequate. Experience further suggests that one session be held after lunch—at the office or in some quiet area—and a second session at home before the evening meal.

Music program

The musical selections (15 to 30 minutes) are subjectively chosen for their ability to induce relaxation. Through past listenings most individuals have evolved a personal backlog of musical favorites with this quality. The musical choices may consist of contemporary popular selections, symphonic excerpts, religious music, operatic favorites, etc. The dynamic level should be low enough so as to minimize the danger of the subject actively interacting with the music program; the result is a musical massage of the consciousness. The musical program may be consistent or varied. Many prefer the musical choices of their favorite FM station.

For some, natural sonic sources act as catalysts to induce relaxation, e.g., wind, surf, rain, neighborhood sounds, etc. These may be real time recordings or synthesized simulations utilizing pink and white noise sources, filtering, phasing, flanging,... Natural sound sources are frequently integrated into orchestration proper.

Finally, melodic continuities derived from Pythagorean intonation and harmonized in just intonation result in orchestration with positive qualities for relaxation. For example, modal and tonal scales based on Pythagorean intonation are close positions of successive perfect 5ths (F-C-G-D-A-E-B=FGABCDEF, CDEFGABC, DEFGABCD, EFGABCD, etc.); just intonation utilizes harmonic ratios:

G6 D9 F#11
E5 Bb7 D9
C4 E5 Bb7
C4 E5
G3
C2.

Recapitulation

The subject is seated in a comfortable chair in some quiet, subdued area. The consciousness of the subject is then massaged by a subliminally projected music program for a period of fifteen through thirty minutes twice a day. A satisfactory musical meditation period results in the subject feeling rejuvenated both mentally and physically. The meditation session frequently concludes with one or more relevant positive autosuggestions.

Concluding Statement

Patients in a residential setting frequently show a predilection for a particular art form, e.g., music, dance, painting. The creative therapist may take advantage of this interest and supplement the psychotherapeutic regimen with sessions devoted to music therapy, dance therapy and art therapy.

References