Book Reviews


I was honored to be invited to review the recently published book, “*Melody in music therapy: A therapeutic narrative analysis*”. I found this text both interesting and informative, especially as my music therapy clinical work is predominantly song based, and my research is based on therapeutic lyrical analyses and cancer patients’ and carers’ “word” interpretations of their music therapy experiences. This music therapy textbook includes two music therapy research projects with individuals engaged in individual music therapy improvisation sessions with the first author, Gudrun Aldridge.¹ The research focus is to discover melodic development processes during hospital based music therapy improvisation sessions. Two narratives emerged from meticulously detailed musical analyses of two individual patients’ selected session episodes, their fleeting verbal responses, and the experienced authors’ interpretative reflections.

The opening chapters were literary depictions of the place of melody in human life, and historical accounts of melody from its ancient Greek roots through to contemporary aesthetic considerations. Musicological, theoretical, and psycho-acoustical perspectives of melodic aesthetics and perception were detailed, and provided a frame for the premise underlying the therapeutic power of music improvisation:

If art leads us to a better understanding of negative emotions through an aesthetic understanding of critical, problematic situations, it might teach us a certain detachment from our own negative emotions and difficult situations in our daily lives as well. Problems and obstacles may therefore be seen as a chance to find new inner attitudes and to see adversity as a learning experience. (p. 39)

The interpretive hermeneutic research perspective was acceptable to this context: “Truths … have the validity of mutual recognition (and) these truths emerge as presented in the performance” (p. 19). Therapeutic contexts, including German hospital wards recognizing the importance of art therapies and the active participation of the sick person in determining their health care, were acknowledged. The therapeutic potential of music improvisation, to possibly enable a more “immediate and spontaneous expression” (p. 47) than spoken

¹ The first case study was previously mentioned elsewhere (Aldridge, 1996, 1999), however, this text includes a much more comprehensive analysis.

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messages, was suggested. Creative activity allows one to express pathology and potential possibilities. The therapist supports, confirms, and offers “impulses” for the patient to change. The consequent detailed micro-analysis of two patients’ melodic developments in improvisation is both educative and thought provoking, especially for those who, like myself, come from other qualitative research and analytical approach backgrounds.

Chapters four and five outlined the authors’ search for the appropriate analytical method and resultant selection and delineation of “Therapeutic Narrative Analysis” (p. 63) as a process. This analytic procedure is one of “locating the study in an ecology of ideas” (p. 65). Melodic episodes are identified which inform categories for analysis. Categories of understanding from the analytical phases are synthesized into the completed narrative. Etymological explanations of emergent categories and their application within the study’s context were interesting. For example, “contemplation”, derived from the Latin “complari” meaning to view and consider, signifies the patient’s self-reflection, immersion, inner collection, and refining in musical play. I was also fascinated to discover the similarities in my own grounded theory textual analysis experiences with how one can analyze music experience. Theoretical sampling of musical episodes, their comparative analysis, and the focus on recurrent patterns are described. Readers not familiar with the sophisticated musical and interpretive analytic approaches, including the formation of “focus” and “repertory” grids framed from episode analyses, are invited to read an earlier text by David Aldridge for assistance.

Following sections in the book include descriptions of improvisatory instrumental episodes from the two patients’ sessions, each of which led to the patients’ vocal melodies, and naming of them. Here I felt privileged to be engaged with an experienced and reflective practitioner’s detailed account of their patients’ stories. The first, “It was like a walk through the sunny streets of Paris” (p. 83), was created by a young woman with breast cancer in the sixth session, and the second, “The farewell idea comes out of the music” (p. 199), was created in the fourth session by a young man with a “functional somatizing reactive depression” (p. 186). The reader is taken on a musical journey through 16 musical episodes created with each patient. Musical examples were interpreted as representing varying categories. For example, in episode 6, the patient with breast cancer’s vocal singing extends, and shifts from a lower sound to accompanying the therapist (indicative of the category “relation”). Her rhythmic play becomes denser, and tempo slower (indicative of the category “expressivity”). The therapist interprets that the patient is saying, “I am able to find my way” (p. 125). The assumption is that features of the musical improvisation and aesthetic can transduce into new ways of being in the world. The patient with breast cancer’s melodic walk through Paris signifies a person
who can now regard herself as beautiful, which in turn can provide her with a new level of hope. “The patient thus opens up new perspectives to overcome her illness and realizes herself as a new transcending personality with the help of her own creative powers” (p. 179). Similarly, the young male patient’s melodic expression was indicative, according to the authors, of a successful detachment process enabling a positive inner experience, which may help him to develop renewed self-confidence, courage, and future optimism.

Final reflections on the two studies result in the outline of a three phase form prior to the patient finding his or her melody in improvisational music therapy. This comprises of development, consolidation, and autonomy. This self-discovery process is indicative of a more conscious self. “The anchoring of the self in the musical expression of their personal melodies helped both patients to strengthen their inner stability” (p. 318). Important preconditions for the melodic emergence also include the presence of rhythmic and harmonic form from one’s cultural tradition. Practical steps to support the emergence of melody in improvisational music therapy are finally offered, including: intuitivity and acceptance; experimentation as spontaneous play; phases of expansion and intention; repetition and imitation for orientation; offering the appropriate context; imitation, assimilation, and innovation; expansion of the context; style; and aesthetic as performance.

The authors suggest caution when considering further investigation of the patient’s verbal interpretation of their improvisatory experiences because it could be “potentially challenging” (p. 323) for the patients and, compared to the therapist, their musical vocabulary and experience of analytic listening is restricted. This is one acceptable view. From my own constructivist perspective, I would be interested in the patients’ more extended verbal interpretations of their improvisatory experiences, perhaps after time has lapsed following the sessions. I wondered whether the patients would consider that the improvisatory sessions altered their world view in a comparable way to that suggested by the authors. A mention of the ethical procedures needed for these types of studies would also have been interesting for those trying to negotiate conducting practice research with Hospital ethics committees.

I recommend this book for all music therapists interested in an accomplished music therapist’s internal dialogue which informs their improvisatory practice and interpretation of therapeutic effect. This book extends understanding of the improvisatory process and potential, and invites discussion about intrapsychic interpretations of clients’ musical expressions. Even if one is not experienced in the method, reading this text can extend one’s own thinking about their internal dialoguing about their own clinical work. I would expect that experienced music therapist improvisers would also find the work informative and inspiring. Many music therapy improvisation authors

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discuss the method’s general characteristics, with, perhaps, occasional musical examples. This is one of the rare accounts of painstaking attention to the interplay of melodic elements between therapist and patient, with accompanying postulations about how such elements may be indicative of patients’ new awareness and identity formation. Gudrun and David Aldridge are to be commended for sharing their extraordinary work with us.

References


Clare O’Callaghan, PhD RMT
Peter Mac Cancer Centre, Melbourne


This book, as the introduction claims it to be, is the first to focus entirely on the use of music therapy with families. Co-editor Amelia Oldfield is arguably the largest contributor to the published literature in this field to date, and much has stemmed from her work, as evidenced by the fact that her publications are cited in almost every chapter of this book. However, as the introduction also points out, it is clear that other clinicians have been developing unique work with families for some time, “away from the limelight” as such, and many of the chapters document this previously unpublished work.

The book is a collection of ten chapters each by a different author (including one each from each of the editors), covering a range of populations including children with learning disabilities, autism and psychiatric disorders, and children in palliative care, in adopted families or in state care. The children range in age from toddlers to adolescents and the family members involved include mothers, fathers, siblings, grandparents, adoptive and foster parents. The range of settings include the community, private practice, a mainstream school, and various clinics. Most chapters describe individual family work, with a few looking at groups of families. Some authors seem to see the involvement of family members in a child’s music therapy as innovative, risky and challenging,