

## **Improvisation and Music Therapy**

### **Introduction**

Music has been used therapeutically by humans for thousands of years. Music therapy became recognized as a profession in North America during the mid to late 20<sup>th</sup> century and improvisation was formally introduced into the process shortly thereafter. This paper will give an overview of how and why improvisation is used in music therapy and the implications of its use.

According to the Canadian Association for Music Therapy (CAMT), “music therapy is the skilful use of music and musical elements by an accredited music therapist to promote, maintain, and restore mental, physical, emotional, and spiritual health” (CAMT 2010). It involves the relationship between therapist(s) and client(s) who may work in one-on-one or group settings. Music therapy is used with people of varying ages, experiences, and challenges, which may include but are not limited to physical and mental health, trauma, and well-being. Music therapy methods can include recreation of pre-composed music, listening, composition, and improvisation (Hiller). According to the CAMT, “Music has nonverbal, creative, structural, and emotional qualities. These are used in the therapeutic relationship to facilitate contact, interaction, self-awareness, learning, self-expression, communication, and personal development.” Experts agree that it is important to create a consistent, safe space and feelings of trust between therapist and client for therapeutic processes to take place effectively.

How is improvisation incorporated into the processes of music therapy? In the safe space created for therapist and client, musical improvisation is used as a method of

interaction. Music, while not able to express or describe objects in the same way as spoken language, can be an effective form of non-verbal communication. Patients may improvise music to express thoughts and ideas that they feel uncomfortable expressing directly or cannot express verbally due to physical, emotional, or psychological restraint. Hiller explains that ‘clinical improvisation’ is distinct from ‘musical improvisation’ because they have different aims; in clinical improvisation interpersonal relationships are prioritized above musical aesthetics. Clinical improvisation strives to build a therapist-client relationship and foster communication, and while aesthetically pleasing sounds may result from clinical improvisation, it is not a requirement or even necessarily a goal. Musical improvisations often strive for aesthetic value, and while this process may be therapeutic in a general sense that is not usually the ultimate goal (Hiller; Pavlicevic). Part of the ICASP project is to explore improvisation as more than a strictly musical practice and recognize its social implications, but these issues have not yet been well-discussed in the literature on music. However, research suggests that improvisation can be a way of expressing emotion without confinement to a previously composed piece or someone else’s work. It is an expression of present feelings (Wigram 14).

### **Description of Different Processes/Activities in Music Therapy**

Improvisation is used in therapy in many different ways that may involve improvisations by therapist, client, or both. In clinical improvisation, therapist and patient interact through on-the-spot musical composition using instruments, vocals, and other forms of media (Hiller). These processes can be developed in different ways, as outlined below.

In improvisational therapy sessions, clients may create extemporaneous music as a form of self expression. The therapist may listen to and/or play with the patient, elaborating on and responding to the sounds that are being created. A therapist may also start the improvisation and invite the client to join in. Similar processes can occur in group settings where some or all participants take turns creating, listening, and responding to their own and others' improvisations (Bunt, CAMT).

Percussion instruments are frequently used in clinical improvisation. These instruments are accessible tools in music therapy because they can be relatively easy to play and require no understanding of harmony and melody. Singing and other vocalizations are also used frequently and considered to be an accessible instrument for many clients. Other commonly used instruments include guitar and piano, though any instrument can be used in the process (Bunt). Sutton also suggests that silence is an important element in therapeutic improvisations. Again, the purpose is not to create "good music" but to use the musical event to create an interpersonal connection between therapist and client (Pavlicevic 272). Music therapy can be used as a stand-alone practice and/or in conjunction with other types of therapy such as one-on-one talks with therapists and group discussions. For example, Sutton suggests that music can be used as a form of pre-verbal therapy that can lead to a verbal reflection afterwards (75). Clients do not need to be skilled musicians in order to participate in clinical improvisation.

### **Concerns**

Music therapy, and the use of improvisation in these processes, is still criticized for providing insufficient evidence to support its effectiveness, particularly for the patients outside of therapy (Bunt). Pavlecevic argues that there can be problems across

related disciplines (such as psychoanalysis, developmental psychology, anthropology) about how to talk about music and improvisation and understand how and why music “works.” (269). Hiller’s survey study of over 500 registered music therapists in the United States found that while 90% of participants use and/or have used improvisation in their practice, many say that improvisation was not a part of their education and report having no theoretical training in improvisation. He advocates training for effective use of improvisation both one-on-one and in group settings for all music therapy clinicians to best promote client health.

### **Implications (links to Improvisation, Community, and Social Practice)**

I believe that music is a valuable therapeutic tool. Listening to and making music can be an effective way of overcoming many of the challenges that clients face, and improvisation in music therapy can be used to help people express and share their in-the-moment feelings. It can also be practiced by people with little to no musical background. By enabling communication, building relationships of trust and support, and helping people to address and possibly resolve challenges they may face, such as traumatic events, improvisation can be a valuable contribution to effective therapy. Outside of a clinical setting, more improvisation may help people of all backgrounds and experiences to express their emotions and tell their stories. Improvised music can be seen as a practice with many potential impacts for individual and community health, and one which can ultimately alter the shape of human culture.

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