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HISTORY, MODELS, TECHNIQUES, TESTS WITH CHINESE INSTRUMENTS

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DECLARATION

I confirm that this is my own work and the use of all materials from other sources has been properly and fully acknowledged. I agree with storing my work in the library of Faculty of Education, Charles University in order to be available for educational purposes.

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INTRODUCTION

I am very interested in Music Therapy. It is fascinating that music can heal people. In future, I want to be a Music Therapist.

Music Therapy in China only began during the last 20 years. Its system is not quite elaborated or complete at present. There is much room for improvement.

Music Therapy is very individualised work; it differentiates according to cultures, regions, religions, politics and beliefs. This means that everyone's taste in music is different. Asians and Europeans, in particular, have dissimilar feelings for the same composition. I grew up in the typical Chinese culture, so I can understand and recognize some problems with students in Chinese schools. I am trying to find specific methods and ways in which to heal and help Chinese students and children by means of Music Therapy. Also, they can improve their musical skills by these recommended exercises and practices.

In this thesis, I also mention two tests which I conducted to compare Czech and Chinese students, because my purpose is the healing of Chinese people. So in these two tests, I used several Chinese traditional pieces to be listened to in two types of schools. I wanted to find out how Czech students reacted to Chinese music and instruments.

When I was a student in China, we only had music lessons at school. I never attended a Music Therapy class or lessons. Last year, I attended some Music Therapy classes and participated in a clinical lesson with real clients in the Czech Republic. I feel that maybe the use of Chinese traditional songs, repertoires and instruments is a good way of bringing Music Therapy to normal Chinese schools. Due to these students being born in this culture, they may better understand Chinese music than other types of music. Therefore, it will be more effective in helping them.

This Diploma work is my first step towards the aim of thinking about, understanding and also learning Music Therapy. In future, I wish to go to America to continue my Music Therapy studies. I chose this area because America is the first country to have established Music Therapy as a worldwide discipline.

My aim is to bring Music Therapy to every Chinese school, from kindergartens to universities, and especially elementary, middle and high schools. My dream is that students will have regular lessons every week, just as they do in subjects such as Mathematics and English.

I hope that I can use all the knowledge, training and experience which I obtained at the Faculty of Pedagogy in my future work in America and China.

1. Music Therapy as a Phenomenon and its Definition

Let us preface that MT can be manifested as an *art, scientific branch and interpersonal process*. In connection with these disciplines, MT bears some specific qualities. When MT is identified with art, its main attributes are subjective, individual and creative processes. If we consider MT as a scientific branch, its main attributes are objectivity, universality and truthfulness. MT as an interpersonal process reflects intimacy, the ability of communication and a close relationship between the individual roles represented by the therapist and client during the process.

From another point of view, we can categorise MT as a *discipline and profession*. The former is represented by a body of knowledge consisting of theory, practice and research. When MT is identified as a profession, this denotes an organized group of people, among which are clinical therapists, teachers and lecturers of trained or specialised workers, leading the enquiry.

No less important are the two categories of MT which have been discussed in many countries around the world, concerning the different methods and aims of this work.

MT in the *Strict Sense* concept is the method closely connected with Psychotherapy, Psychology and the medical sciences. (Independent models have been developed in Special Pedagogy such as C. Orff's MT.)

Nowadays MT in the *Wider Sense* concept is usually characterized as the application of music in many other professions, such as Special Pedagogy, Physiotherapy, Neurology and others.

It is very difficult to create a universal definition of MT because of the necessity of the integration of all the divergent elements which are noted above. As we discover in much modern literature on MT, the rapid evolution of this branch has brought about many changes, caused by variable clinical practices and cultural and local diversities.

From the definition of the American MT Association it seems to me most important that MT is not only the process of healing by means of music, but an aid to patients with health or educational problems.

Music Therapy has to be also defined as the subject field which encompasses Occupational Therapy, General Psychology, Psychotherapy, Special Education, Musical Education, Music Psychology, Anthropology and Medicine.

The World Federation of Music Therapy, WFMT, defines Music Therapy as follows:

"Music Therapy is the use of music and/or 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 intra- and interpersonal integration and consequently a better quality of life through prevention, rehabilitation or treatment." (WFMT 1996)

This definition, which covers various examples and methods of practice, is acknowledged globally.

Professor Kenneth Bruscia shows his idiographic outlook on musical treatment in his masterpiece entitled "Defining Music Therapy", in which he values music, especially music with a therapeutic intention. The following is his detailed definition:

"Music Therapy is a systematic process of intervention wherein the therapist helps the client to achieve health, using musical experiences and the relationships that develop through them as dynamic forces of change."

The definition of Music Therapy given by Bruscia emphasizes the music, conversely emphasizing the connection between those two. As far as he is concerned, Music Therapy can be classified into 2: music in the process of treatment and music like treatment.

For instance, some musical physicians, psychiatrists and psychologists in certain countries use Music Therapy as an adjuvant to other treatments. There is the possibility that mutual listening to music will be used by a clinical psychologist as one of the branches of therapy which will assist common reflection or stir the emotions and reactions, and consequently to realize the verbal field. Musical treatment also plays a role in dental medicine and surgery.

Bruscia's "music as therapy" is a supplement where music is highly valued. For shifts in music can always reflect changes in relationships. Musicians, such as Paul Nordoff and Clive Robbins, will concentrate heart and soul on musical treatment and their achievements speak aloud. As to "music as therapy", piano music extemporized by the therapist can be regarded as an accompaniment which follows extemporization, the primary form. And therapists also uphold various musical gestures from patients. Music plays a core role in experiences where responses to music can be taken as a reference for research and interpretation. On condition that what on his or her mind could be displayed by the clients, ultimately what was really momentous would be referred to.

Music Therapy also can be defined by the numbers of clients. Both individual treatment and group treatment are options for practitioners, which can aid patients ranging from young to old whose different

physical or mental disabilities could be cured.

Music Therapy is now being developed, and will take time to alter and improve. Musical treatment does not act as a superficial, instant cure-all or even a mysterious nostrum on which not only the therapist but also the patients should spend a certain period of time and energy. Step by step musical therapy in the clinical process has realized its intended effect.

The musical therapy process includes many creative interpersonal elements which come from music, art, education and science. Those components are derived from the interaction between the Music Therapist and his patient. We can not superficially define Music Therapy as any procedure which is connected with musical practice. Even successive musical experiences, which are helpful to some extent but not systematic, can not be regarded as musical therapy. Authentic musical treatment refers to a well-planned, clinical practice which covers deliberate consequences towards every detail. Observation and estimation of the patient to help discover the crux of the problems will be the first step for the Music Therapist, as well as help the therapist to be aware of the patient's reactions and meanwhile help to adopt the proper method of different musical mix and practice. Then the Music Therapist will set concrete goals for both individual and group patients, which can somehow point the way for clinical practice. These concrete goals can also illustrate the patients' changes under different circumstances, moods and reactions when hearing music, which can imply the upcoming advancement as far as physical, spiritual, social or sentimental areas are concerned. The therapeutic modes differ from each other in such a way that the Music Therapist helps the patients achieve the therapeutic objectives with music or music-oriented practices.

Taking into consideration the three key elements, the Music Therapist, the patient and the music, we can not merely regard musical treatment as a unilateral subject. In the process of musical treatment, what the Music Therapist values most is the kind of atmosphere in which both the doctor and patient support each other and share the same goals of success. The most important thing is mutual trust and care between the doctor and patient, which works most effectively, compared to any other techniques.

When referring to medical or educational treatment teams, physicians, psychiatrists, social workers, physical therapists and special educators are often regarded as working in co-operation with the Music Therapist. They co-operate with each other to find the proper way to help the patient to the best extent, meanwhile fulfilling their mutual therapeutic objectives.

It is not necessary for clients to be skilful musicians to participate in or reap the benefits from musical treatment, even though music itself is a necessity in the process of Music Therapy. The clients can probably

obtain some skills involving music in the process of their treatment, which is not the original purpose of musical treatment. Whereas, improving the clients' skills in the non-musical field such as the physical, spiritual, social and sentimental areas, by using the learning experience of music is the ultimate goal of Music Therapy.

2 . History of Music Therapy

It has been almost from the appearance of human civilization up until modern times that people have been discovering that there is some relationship between music and healing. To be more exact, there are close connections of the theories and experiences between music and healing. Musical healing practices have followed the cycle of History for a long period of time, as Music Therapists have attempted to investigate music or music-oriented experiences.

2.1 Ancient Times

In most aboriginal and archaic civilisations, Religion is thought to act as the cure for physical and mental health, even for pursuing the contented state of happiness, health and wealth. In most cases, medicine appears almost simultaneously with religious ceremonies. The intimate connection between music and religious ceremonies, pointed out by some important theorists, demonstrates the reason why music is considered to have a close relationship with medical treatment in ancient cultures. Nowadays, anthropologists and ethnomusicologists have reason to believe that music, religion and healing practices can be regarded as a whole in many of these cultures.

It is apparent that relationships among music, religion and treatment exist in many ancient African tribal cultures, in which a shaman, or witch doctor, or medicine man is considered to be the main musician, medicine man or clergyman in the tribe. According to the culture, illness and disease can be eliminated or dispelled by the shaman with particular songs, tempos, musical instruments represented by drums, bells and rattles, dances and actions bound up with magic or religious ceremonies. In the process of the treatment, singing is regarded as a necessary item. Some African shamans or medicine men believe that the impaired part of a patient can be cured by using the healing powers produced by playing a particular instrument like a magic drum or harp.

Song and dance are also adopted by the medicine men in American India who even use special songs to cure correspondent illnesses as specialised ways of healing. It is rooted in the minds of the medicine men or shamans who dwell in South-West America, Mexico and Central America that curing a special illness or disease is based mainly on the use of a particular song. The proper use of healing rituals, a mixture of song and dance, as well as sand paintings by the Navajo Indians to treat some particular illnesses can be regarded as the best example.

Drums and tempos are of vital importance to many shamans and medicine men of ancient tribes with, apart from songs, influences from

the civilisations of the Americas, Africa and Asia in the process of healing. Special drum symbols are used by some shamans to communicate with the gods and spirits, so that information between beings on earth and beings in heaven and the underworld can be successfully conveyed. The patient can achieve a psychological state induced by (or as if induced by) a magical incantation which speeds up the process of treatment with the help of a shaman who uses drum tempos, bells, intones, some special garments and dances as tools in the healing ceremonies.

In the Chaldean civilisation of Ancient Egypt, music was considered to be a close connection with religious ceremonies and clinical experiences. Clappers and rattles were adopted by the Babylonian priest-doctors to expel evil spirits by adjuration or prayers. In the process of temple healing ceremonies, chanting was of vital significance. As the earliest medical record written on papyrus shows, certain specific chant therapies were used for certain particular objectives. Apart from the above-mentioned, music was considered to have various functions since it was used not only as the earliest form of medical treatment, but also in connection with the process of growing crops, harvesting, weaving or carrying rocks, etc.

It is believed that in the culture of Ancient Asia, the healing characteristics of music were used in some religious and healing ceremonies on quite a complete scale. The Chinese musical form and experience are valued by Cosmology for the meaning of the tunes. The use of sentiments which are related to different moods became systematic in musical performances, such as the rules of pitch arrangement. In India, the clergymen who undertook and accelerated the notes to attain Samadhi (a kind of super-conscious sleep-like state after a meditative trance arising from the shift of notes) attach great importance to the attributes of music concerning its mysterious mantra. Ancient Indians pinned their faith on the accurate functioning of the Veda tone because they believed that any random flaw in diction would disequilibrate the cosmos. The development of Ragas, a profound succession of tunes, which were regarded as the promotion of unique moods and psychological disposition, can be traced back to the second century A.D. It is believed that Ragas can boost desire including humour, sorrow, indignation, courage, terror, hatred, astonishment, peace, serenity and relaxation.

In Ancient Greece, the intimate relationship between music and treatment was considered as the personification of Apollo, the Greek God of both Music and Medicine. From the Greek perspective, the lack of harmony in a person's being led to disease which somehow could be cured by music with its powers of ethics and morality. Consequently, a person's being could be brought back to harmony to achieve the healing purpose. In terms of the Greek distinctive cultural spirit, music was able

to influence the will, character and behaviour of an individual, for it was regarded as an effective power closely associated with Nature.

The Greeks also discovered the fact that various forms and modes of music had a reasonably predictable influence on human behaviour and sentiments. Pythagoras believed that a particularly ordained use of music could create a positive effect on one's health. Therefore, he undertook the investigation of the physical features of sound and laid a good foundation for the current tonic system. Furthermore, by using dance and music, Pythagoras, who greatly valued musical medicine to promote the order and proportion essential to health, developed the clinical practice of music to heal patients. Music and Drama were used by the Greeks in a cathartic manner to purify their emotions.

The central part of much of the Greek therapeutic treatment by music was listening to music with the purpose of regaining balance and enhancing health the warning to Greek physicians was that the abuse of music in treating psychopathy and mental disease would bring no good, but harm. Apart from the above-mentioned, Greek philosophers, Plato and Aristotle, valued the positive influence of music, as well as its significance in people's physical and mental health, and their proposal was that the proper use of music and rhythm could cure people and promote the healthy and ethical development of citizens.

Plato and Aristotle may be regarded as the pioneers of musical treatment, namely the proper use of music, for Hippocrates is known as the Father of Medicine.

Taking the positive, moral, medical and therapeutic effects of music into consideration, the Romans espoused the Greek philosophy. For instance, it was believed that snakebites and the inflictions resulting from battle could be cured by music, which could also cure chronic insomnia. Lucretius suggested that after-meal flute music could aid digestion and that music could influence a person's opinions, feelings and actions. Relatively permanent disorders of the mind could also be healed with instrumental music by Zenocrates or with flute music or vocal song by Caelius Aurelianus. According to Aritesdes Quintilianus, who believed that the proper use of music was a necessary type of psychotherapy, music could be properly used in a therapeutic way to cure a psychotic person.

2.2 The Middle Ages

Boethius (480-524) who had significant influence on music in the early Middle Ages, greatly reinforced the fact that music could affect a person's character and moral behaviour. He insisted that music could both mentally and physically affect human nature and morals, which could result in beneficial and decisive influences on the health and balance of

body and spirit. Because of the above-mentioned, music was considered to be of great importance in the education of the young during the Middle Ages.

The Christian Church was prevailing and had significant impact on the lives of western people in the Middle Ages. The Church regularly organised all areas of life, including musical practices. Music was regarded as an aid to Religion, to give the mind access to Christian teachings and develop holy opinions. According to the rife theology of the time, illness was considered to be a penalty for sin. As a result, Religion and religious music were of great importance in medical treatment in the Middle Ages. Certain anthems were used as a cure for colds and other diseases. Music was created to honour God who purportedly prevented people from getting ill. Special music to aid and encourage sick people who enjoyed high social positions would be composed by Court songwriters.

During the Middle Ages, the Greek and Roman cultures of philosophy, music and medicine were recorded in it. The Arabic version of the works of Greek doctors and philosophers and their thoughts concerning musical principles associated with the universal order and relationships played a dominant role in Arab thinking. One could play music, which is normally done by means of utilising selected human sounds or Stradivarius, with a suitable proportion of universal order in the wards of Cairo hospitals..

2.3 The Renaissance

During the Renaissance, not only doctors but also musicians got their inspiration from the classical Greek era. The thought was prevalent among the Greeks that health was a symbol of harmony and that disease was a symbol of disharmony, which replaced the dominant medieval opinion that disease was the penalty for sin.

The Greek theory emerged concerning the four humours or factors which should be kept in balance in order to pursue a state of health. The four humours of the human body, namely black bile, phlegm, blood and yellow bile, and the connected moods: melancholic, sanguine, choleric and phlegmatic, had been connected by medical theorists with the four substances which the world consists of (Earth, Water, Air and Fire, according to Empedoclean Theory).

Nowadays, musical theorists relate the four musical characteristics of bass, tenor, contralto and discant with the Empedoclean universal elements. The other four frequently used musical terms such as Mixolydian, Dorian, Lydian, and Phrygian were connected with the four musical substances and their related moods. According to Renaissance thought, when the four elements are in harmony, harmony will appear in

music, the body, and even in the universe. The proper use of music can result in harmony in mental and physical health.

The masterpieces of Zarlino, who is known as a musical theorist and composer of the 16th century, also demonstrated the intimate relationship between music and therapy in the Renaissance era. Zarlino believed that music and the practice of medicine were bound up with each other and that music could assist a doctor to prescribe accurate proportions of the necessary treatment for recovery and to obtain the essential skills to recognize the rhythm of the human pulse accurately. Zarlino also believed that music could produce abundant positive effects such as pain relief, restoration of hearing, cure of vermin bites, healing mental disorders and inebriety, and dispelling plague. Zarlino also asserted that each of the various types of music used in musical treatment could increase or decrease certain passions and moods, sentiments or feelings.

Music became combined with medical treatment during the Renaissance. It is believed from the perspective of physicians at that time that music could have a significant impact on human mental states and it was normally accepted to use music as a prophylactic. Because during this period of time when plagues prevailed, people were convinced that music had positive sentimental effects which could help people resist illness.

2.4 The Baroque Era

A popular philosophical tendency in medicine concerning the theory of the four humours developed in the Baroque epoch. Music and medicine share some similarities according to the highlighted power of music to produce affection and passion. A large number of references by writers of that era, such as Shakespeare and Spencer, took further steps to prove the popularity of the healing capabilities of music.

Books concerning the healing power of music for different physical diseases were continuously published during the Baroque epoch. Nevertheless, from the 17th century, some physicians started to work more particularly on the psychological powers of music. In the 18th century, a French physician named Louis Roger cautiously studied case histories which resulted in treatises. He suggested music as a treatment for minds desiring systematic structure and to arouse the nervous system by harmonic quivering which could help to eliminate destructive foreign humours.

2.5 From the mid-18th century to the 19th century

In the latter half of the 18th century and in the early 19th century,

people began critically to check the theory of the healing power of music, although a certain close relationship between music and medicine still existed. During the 19th century, many doctors insisted that music was of vital significance in healing mental and sentimental maladies. With the development of human physiology in the 19th century, many doctors directed their attention to the power of music with regards to its physical, decisive elements such as blood pressure, pulse rate, respiration and digestion. They also exchanged their professional scientific reports on the physiological impact of music. Apart from this, other musicians as well as scientists like Hermann von Helmholtz and Hector Berlioz, did research and published works on the power of music and sound on human actions and the function of music to ease stress and heal diseases.

The therapeutic impact of music aroused public attention in the late 18th century. The American Press started to report items about music being regarded as an accessory to medical treatment and an influential element in the treatment of mental and psychological conditions in particular.

In the early 19th century, American reporters related to medicine and psychiatry also started to publicise music as a workable alternative cure for different kinds of mental and physical conditions. Professor Benjamin Rush of Pennsylvania University, who was also a physician, strongly suggested using music as a cure for mental illness. His intricate courses in Psychopathology were involved in the therapeutic use of music which motivated his students to undertake further studies on this topic. Edwin Atlee's paper issued in 1804 pointed out that the reason why music is a cure for mental disturbances in particular, is that music has the unique capability of drawing people's attention to healthy moods. It is Samuel Matthew who predicted the later rules of musical treatment through knowing the significance of the patient's musical background knowledge, education and superiority, in order to choose music for healing purposes. Matthew suggested that the doctors should begin to utilise music which suited the patient's mood and attempt to change the music to lead the patient step by step to the required mood.

Music was used at the beginning of the 10th century by Pinel and doctors in France as the treatment for mental and nervous system diseases, such as delirium. Chomet issued his paper, *The Influence of Music on Health and Life to the Paris Academy of Sciences*, in 1846 which has been quoted by Whittaker in an essay entitled "Music as Medicine" and which has aroused the interest of American physicians.

Using music therapeutically became prevalent after this, and using music as an effective treatment for psychiatric disorders in particular. A series of practices researching the response of psychiatric patients towards spot vocal and instrumental music on Blackwell's Island were

reported by the *Virginia Medical Monthly* and a New York newspaper.

The New York City Charities Commissioner and the hospital's Medical Director assisted in the extra experiment on the use of music which aimed at reducing suffering among those poor patients, because the patients actively reacted towards the experimental musical treatment of spot concerts and respective sessions.

Afterwards, the pioneer of musical treatment, George Adler Blumer, recommended the use of music as a cure for mental disease. His article entitled, "Music in its Relation to the mind", which illustrated his ideas, was issued by the *American journal of Insanity* in 1892. Since Blumer worked as the Chief Executive Officer of Utica State Hospital, he employed musicians to play music for the patients. He is considered as the first person to set up and undertake musical treatment in an American hospital.

Croning, another neurologist of that time, showed great interest in the psychological function of music and used music widely in his practice, contributing greatly to the mental treatment of his patients. In his paper, published in 1899, which illustrated constructive psychology, he proposed the basic principle for healing mental disorders with aural and visual stimulation. Croning believed that music could help to restrain patients' bad dreams and consequently purify the mind and promote an optimistic attitude during their waking hours.

Music Therapy was also becoming more widespread in the hospitals of London in the late 19th century. The Guild of St. Cecilia, an association founded in 1891 by the Reverend Frederick Kill Harford, offered musicians to London hospitals to play anti-depressant music to help reduce anxiety and pain and improve the hospitalised patients' sleep. It was emphasised by Harford that the Guild would co-operate closely with the medical profession that is to say that the musical narcotic would have to be prescribed under the guidance of a doctor. He also emphasised that the musicians should be paid for their services. During the interval between the musicians' visits, the use of musical boxes and phonographs was introduced to help the ongoing treatment. Members of the Guild succeeded in comforting patients, eliciting speech in some depressed patients, decreasing fever, calming hysteria related to high fever, and tranquilising mentally insane patients. It has been shown in practice, that both provocative and sedative music have their own types of clients. Harford noticed the importance of making clear the differences in character, age and gender and when doctors chose the proper music for patients they should take those variables into consideration.

Florence Nightingale and Queen Victoria's physician, Sir Richard Quain, gave their approval to the Guild of St. Cecilia which was the British association's initiative concentrating on offering proper musical

treatment to a great many patients and which scientifically tested the impact of music on people suffering from physical and mental disorders. At the end of the 19th century, British Dr. Davison stated that music had a beneficial impact on hospital patients. He demonstrated cases about the therapeutic power of music to reduce or eliminate pain and fever or to cure insomnia.

During the 19th century, the use of music as a significant role-player in therapeutic programmes was prevalent among organisations and schools for the blind, the deaf and the physically handicapped.

In 1832, one of the imitative uses of music as an adaptive treatment came into being. Lowell Mason undertook a musical programme at the Perkins School for the Blind. Music and rhythmic practices were introduced in schools and mental hospitals for the deaf, containing example curricula for the education of the deaf. Musical treatments were popular in special schools for some physically handicapped children. Moreover, successive essays published in a popular magazine of the age advocated the positive effects of music to the masses. The beneficial effects of music have been recognised in that music and singing instruction can be regarded as a bridge to the formation of character, stimulating better personal characteristics, comforting disharmonious persons, preventing pulmonary Tuberculosis, enhancing the lungs and healing dyspepsia. From the foregoing examples, it is apparent that many doctors, psychiatrists, social innovators and educators backed and demonstrated the therapeutic importance of music during the late 18th and 19th centuries. Nevertheless, Boxberger (1962) pointed out that it seemed that using music therapeutically in this period was restrained to particular cases instead of being united in the extensive theory and philosophy of medical healing. The categories of music and medicine started to diversify to some extent over a period of time. Music advanced as a performing Art, whereas Medicine evolved into a specialised Science.

2.6 THE 20th CENTURY

Even though people overlooked the traditional intimate relationship between music and clinical practice, because of the technological revolution of the 20th century, around the turn of the century, some people still continued to undertake scientific research on the therapeutic effects of music. Many musicians from the New York area advocated using music therapeutically during the early to middle part of the 20th century. They had success in doing experiments, offered music in hospitals, gave lessons and seminars on musical treatment, and established associations to promote the use of musical treatment. There was a prevailing phenomenon in the 1920s and 1930s when scientists began to study the

psychological power of music and psychological responses towards music. Research continued during the 1940s and 1950s on the functions of music with regard to physiological reactions. At the same time, the research on the impact of music on mood shifts and extensive mental health was being continued.

The invention of the phonograph at the turn of the century resulted in a renaissance interest in the use of music in the hospital setting. People used recorded music for entertainment and as an aid to sleep, to tranquilise fears related to medical operations and as an aid to anaesthesia and for the alleviation of pain without the loss of consciousness.

Even though the medical community did not widely approve of musical treatment in the early part of the 20th century, many physicians went on advocating the use of music as therapy in the operating theatre, rehabilitation centres and the plastic surgery wards of both adults and children. During the First World War, musical programmes were used in exercises for joints and muscles to assist soldiers to treat and use injured limbs. Music became widely used as a general psychological stimulant in hospitals and as a complement to mental treatment during World War I and World War II. During this period of time, the practice of musical treatment was developed also in psychiatric hospitals and prisons. Significant literature, including the comprehensive *Music in Institutions* (1936) by Van de Wall, has been published on musical treatment through subsidisation by the Russell Sage Foundation.

Certain specialised educational associations continued to keep an eye on the adaptive use of music during the 20th century. For instance, music was used in schools and settings for those who were suffering from hearing impediments to promote residuary hearing capacity and speed up speech improvement. After the Second World War, musical treatment advanced to a systematic and professional role, so the therapeutic use of music was practised on patients with an extensive variety of disorders and conditions. Recently, there seems to be a revitalization of using music as a prophylactic and the reinforcement of natural health in America. Firms like MUSAK have established a business providing background music to affect and manage people's moods and activities in offices, businesses, factories and many other trade and public places. Using music therapeutically is developing to a great extent and health programmes have been established in businesses, hospitals and other firms as employers realise the necessity to relieve and assuage staff pressure, improve health and pursue forward-looking and effective ways to enhance teamwork and stimulate creativity. "Sound hearing" programmes have been established in both Eastern countries and philosophies and the Western world, and are frequently used as a treatment, and for increased health, wellbeing and awareness. Pioneering medical physicians have

demonstrated a renewed interest in the role of music in medical therapy since the late 1970s, and scientific research in the category of music and medicine has been firmly enhanced. The early 1980s witnessed the development of many professional associations connected with using music in medicine and treatment, such as the International Society for Music in Medicine, Biology of Music Making, Inc., and the International Association of Music for the Handicapped.

The establishment of Music Therapists for Peace in 1988 proved that recently there has been prevailing interest in the use of music for health and a harmonious society in general. During the period of the 1992 Persian Gulf War, the Israeli government also took part at a vital moment. The Israeli Broadcasting Station especially regulated its programmes in those days before the crucial moment, through broadcasting songs enhancing power and national cohesion and offering typical guidance for security and defence preparations in songs and poems with popular rhythms. Afterwards, on the first night of aggression, when people hurried to their gas-proofed houses, comforting, retrospective music was played to help alleviate fear and anxiety. In the time of war, Hebrew songs were the only music played by the Broadcast station, and particular children's music was broadcast at night, to help children to handle stress and psychological trauma under those circumstances. In recent days, there is an increasing interest in achieving healing through using musical vibes in a direct way to the body.

2.7 History of Chinese Music Therapy

Abundant literature concerning the connection between music and health also exists in the Western hemisphere. The ancient five Chinese notes which are Gong, Shang, Jiao, Zhi, Yu are connected with the notes of do, re, mi, sol, la, which are bound up with the five elements, organs in the body and five primary senses of human beings as well.

The note Gong or do, which is intermediate in nature, can offer calmness as well as seriousness because it is related to the element of Earth and the organ of the spleen. For those who have been suffering from fear, the note of Gong can be taken into consideration.

The note Zhi (sol) is energetic in feature, so as to cause someone to be exhilarated and passionate, as it is bound up with the element of Fire and the organ of the heart. This note can be a treatment for those who are in a mood of despair.

The note Shang (re) can be utilised in the treatment of those who are easily made anxious and petulant, because Shang is connected with the element of metal and the organ of the lungs, and is noted for its cleansing nature and for giving a feeling of peace to people.

The note Yu (la) shares the similarities with the element of Water and the organ of the kidneys. Since its feature is cooling and dampening and can somehow be regarded as a sedative to some extent, chronic sleeplessness resulting from agony or ecstasy can be treated by means of this.

Related to the element of Wood and the organ of the liver, the note Jiao(mi) is assuasive in nature and offers a feeling of soothing and relaxation. So it can help to dispel rage.

Chinese people believed that music could define a man in ancient times. The philosophy is that we can probably know a person's nature by what kind of music he or she plays or listens to.

The healing processes by means of music in China are very old, but the appearance of Chinese modern Music Therapy can be traced back to the 1980s. And the seminar on musical treatment by Chinese Professor Lin Bangui (who is from Arizona State University), at the Central Music Academy in Beijing, can be regarded as the most significant issue. This scientific introduction, which is not haphazard but characterized by order and planning, attracted the attention of many musicians and doctors.

A data-based report, "Physical Reflection of Music", which was published in 1984 by Zhang boyuan of Beijing University, illustrates what people's different physical reactions are when listening to bright and lyrical music. Afterwards, an article about Music Therapy, "The Effect of Music to Ache Remission, Music Therapy and The Means of Music Therapy", was gradually published by Gaotian, Pu kaiyuan and Lu tingzhu in 1986, 1994 and 1995.

The initial clinical practice took place at Changsha Mawangdui Sanatorium in 1984. Consequently, about 200 hospitals, sanatoria as well as musical medical centres and departments were established. Many musicians and doctors spare no efforts in exploring the discipline of this therapy. Since the establishment of the Chinese Music Therapy Association in 1989, a National Conference is held every two years.

A number of hospitals, sanatoria and comprehensive hospitals have embarked on trying musical treatment gradually. Thus the Chinese Music Therapy Union has more than 200 members, most of which are hospitals and sanatoria. Some doctors undertake music, electrotherapeutics and electronic acupuncture concurrently, which has resulted in the effective emergence of electronic acupuncture instruments and musical electrotherapeutic instruments.

3 . Main Principles of Music Therapy

3.1 The Foundations of Music Therapy

Music, which includes the sound that can be heard and the vibration of sound waves that can be felt, is a powerful form of sensory stimulation and a multi-sensory experience. One can generate the experience of visual stimuli when one is watching a live performance, and one can have the experience of kinaesthetic stimulation when one is dancing or doing exercises to music. At the same time, music can hold one's attention for a long time, which is very helpful in order to develop the ability to concentrate one's attention on something for a long period. It is certain that all the above-mentioned experiences are always experienced when one feels happy and at ease while listening to wonderful music.

Different music can assist in different physiological responses, such as heart rate and pulse, blood pressure, as well as brain waves, etc. The rhythm of music can significantly affect the pace of human behaviour and physiological rhythms, such as respiratory rate, movement speed rhythm, heart rate, and so on. In addition, different music can cause different emotions. In addition, music is a unique form of communication, not only because the lyrics of a song can convey specific information, but also because music is of the utmost significance to non-linguistic communication. Music is very helpful in establishing a good physician-patient relationship, which is the fundamental driving force of successful treatment. At the same time, music is a kind of presence in time and, by its physical structure, it forms a real presence. Due to this real presence, music can be heard, felt, measured, and demonstrated with graphics and symbols, and music can be an effective medium to help those patients who have withdrawn from reality and society to return to the real world and establish new contacts with the real outside world again.

Most physiological disorders and many psychological or mental disorders have the common basic psychological characteristics of barriers to self-expression and a reduced self-image. However, one can only successfully build good links with the outside world when one accepts oneself and first of all treats oneself objectively. Music can be both a medium for self-expression and an approach to enrich one's emotions and promote self-growth. People can express their emotions, feelings, ideas and thoughts freely either through the linguistic function or the non-linguistic function of music when participating in collective musical activities. All of the musical activities used in Music Therapy are suitable for different patients in various functions, and they can assist patients in

experiencing success, which is very important for ego formation and self-evaluation.

A healthy individual must be able to successfully build a good interpersonal environment around him, but all patients, irrespective of psychological or physiological disorders, have a certain degree of some interpersonal barriers. Musical activities are often collective activities for multiple participation. The nature of music needs close and accurate co-operation of the participants, any errors or failure in co-operation will soon lead to a failure in harmonious sound effects, which will immediately be fed back to each participant, causing unpleasant sensations of hearing, psychological and even physical. Therefore, the music itself with a kind of strength helps all the participants to co-operate completely, and makes them control any possible destruction of musical harmony by an individual impulse or self-expressive behaviour. In addition, the charm and pleasure of music will attract people who are socially withdrawn to participate in social musical activities and, at the same time, will change their inhibited state. Different kinds of musical activities can help patients develop auditory, visual, motor, linguistic communicative, social, cognitive and self-help abilities and skills. At the same time, music can also aid patients in improving the ability of proper self-expression.

The process of Music Therapy generally consists of four main steps:

1. Determine the patient's problems and make a comprehensive assessment of the symptoms, physical, emotional and social status.
2. Develop long-term and short-term treatment goals and objectives.
3. Set up the treatment plan according to goal-setting and the patient's physical, intellectual and musical abilities.
4. The implementation of musical activities and the evaluation of the patient's responses.

3.2 The Basic Functions of Music in the Therapeutic Process

The functions of music in the process of clinical therapy can be divided into three areas: physical / physical function, interpersonal / social role and psychological / emotional effects. No matter which school or method of Music Therapy, all inevitably use the three functions of music for clinical therapy. In other words, the three functions of music will be effective more or less for any Music Therapy practice. However, a particular genre of Music Therapy or a certain method of Music Therapy may emphasise or focus on one or two of the three functions.

3.2.1 Physiological / Physical Interaction

Considerable research has confirmed that music can cause a variety of physiological responses, such as the lowering of blood pressure, the slowing of respiratory rate, the slowing of heart rate, the rise of skin temperature, the decrease of muscle action potential, the decrease of skin resistance, etc., so as to clearly promote the homeostasis of the body, reduce anxiety and promote relaxation. Long-term physical and psychological stress can cause serious damage to the human body, such as leading to heart disease, hypertension and other cardiovascular diseases, gastrointestinal diseases, cancers, neurological dermatitis, urticaria, migraine headaches, etc. Music can be an excellent treatment for the above diseases.

Music can produce a significant analgesic effect; music can stimulate the auditory centre of the brain to excitement, which can significantly reduce pain. In addition, music can also cause the enkephalin of blood to increase, which will reduce the pain significantly as well. According to a large number of experimental and clinical reports, the use of music during surgery can reduce by half the dose of anaesthetic, post-operative recovery can be greatly reduced or require no analgesics, which can reduce the harmful effects of the anaesthetic. The analgesic effect of music to reduce labour pain during childbirth also has very obvious effects. Research on the role of music for pain relief shows that the pain threshold and pain tolerance thresholds can be increased by 42% and 48% according to the 32 persons who were tested with music, compared to those not treated with music.

In addition, from the late 1980s, some American medical scientists began to study the effects of music on the human immune system. But research is still at the very beginning stages and will be progressing in the future.

3.2.2 Interpersonal / Social Role

Music is a kind of art form of social non-linguistic communication, and musical activities (including singing, musical instruments, writing of lyrics for songs, etc.) themselves are a form of social contact. A lack of social information and social interaction will seriously affect one's mental health, and those suffering from mental illness, psychological illness, children with Autism and patients with a variety of age-related diseases including dementia, as well as patients with a variety of long-term hospitalised chronic diseases, certainly have some interpersonal communication barriers or lack of communicative functions.

Music Therapists provide patients with a safe and pleasant interpersonal environment, through a variety of musical activities, such as chorus, instrumental ensemble, dance, etc., in which the patients

gradually restore and maintain their capacity for social interaction. Patients learn to improve their interpersonal skills, language ability, ability to co-operate with others and to increase self-confidence and self-image through these musical activities. In addition, patients can find opportunities to express or release their inner feelings through music and language during the musical activities. Patients support, understand and sympathise with each other in emotional communication to alleviate the variety of psychological and emotional distresses and pain. They also have the opportunity to express themselves and experience success in the enhancement of self-confidence and self-image, and to promote psychological health through the musical activities.

3.2.3 Psychological / Emotional Effects

Music can have a very great influence on one's emotions, so Music Therapists treat music as a powerful weapon which is easily used. Music Therapists believe that emotion may definitely influence one's cognitive system. Common sense tells us that one often focuses on the positive side of things when one feels good, and will regard bad things as good things; but one often focuses on the negative side of things when one feels bad, and will regard good things as bad things. Therefore, as long as the mood changes, the view of the issues changes at the same time. Music Therapists use music precisely because of its huge influence on mood, in order to change one's emotions and ultimately to change one's cognition. But they do not simply play a number of beautiful tunes to patients to ease their emotional pain. On the contrary, Music Therapists will make extensive use of depression, sadness, pain, anger, and the contradictory emotions of music to inspire a variety of emotional experiences, to help patients get rid of negative emotions as far as possible. When the negative emotions vent to a certain extent, the positive ones will start to appear from the bottom of one's heart. At this time, the Music Therapist will gradually begin to use positive music to support and strengthen the inner power of positive emotions. This is a process during which the patient re-experiences and faces again his/her rich inner emotional world. The patient faces again his / her own emotional conflicts or traumatic experiences with music as the stimulus. The pain of emotional experience and life experience will gradually be transformed into a tragic aesthetic experience with the appeal of music to be sublimated. Persons who successfully undergo this kind of Music Psychotherapy will often be more cheerful and confident in character; more mature in personality, and experience a re-birth of spiritual experience.

3.2.4 The Role of the Aesthetic

We can find their prototype in the real world of any one of the art forms of literature, painting or dance. Music is the only one of all the art forms without a prototype in Nature and the objective environment. But it is precisely because music is without a prototype in the real world and unrelated to the shackles of the real world that it is entirely free to change with the needs of the human heart. This is also why the relationship between music and the inner world of the human being is the most direct and appropriate. In other words, music is simply the creation of the human mind, which is not subject to any constraints of objective reality and is the direct reflection of the inner heart of the human being.

Music can have a variety of styles, a variety of emotions, but one common feature of all styles of music is beauty.

Just like music, beauty is also unique to the human experience. There is no difference between the beautiful and the ugly in the objective world itself, but only when the human being experiences it as beautiful, does it have a connotation of beauty in the objective world. Bruscia said: "life is beautiful, even if it's painful." That is why, when people suffer tragedy, they often shed a tear without negative world-weary thoughts, but moved by the suffering of life or by the beauty of life. Which is really where tragic beauty lies. Li Zehou, a famous Chinese aesthetician, defines beauty as: "beauty is the essence of the object of power of human being." In other words, if a person experiences the beautiful, he experiences the essence of his life force. If a person often experiences the beautiful in his own life, then his life is necessarily dynamic and positive. By contrast, if a person rarely or never experiences the beautiful in his life, his life is certainly on a decadent decline and a negative retreat. The experience of the beautiful is just like a bridge connecting music and life closely together.

And what is the relationship between beauty and human health? What are the functions of the experience of beauty for treatment, especially for Psychotherapy?

Let us imagine a person with psychic trauma caused by a traumatic blow of certain life events. Whenever he recalls the traumatic event, his heart is filled with pain. Then he is filled with his own traumatic experience of suffering as a negative experience and the knowledge associated with a negative self-concept: "I have bad luck!" "I'm so unfortunate!" "Fate is so unfair to me!"..... This kind of negative pain experience and the concept of negative cognition cause him to lose confidence in the future.

However, during the process of Music Therapy, when this person faces the painful past and experiences the traumatic event again with sad, but beautiful music under the therapist's guidance, the sad music will

encourage and promote him to release his long-suffered feelings and emotions, at the same time, he will experience the beauty of the music accompanied by the re-experience of the traumatic event. Often, the beautiful experience of the music will be combined with the bitter experience of the traumatic event and gradually the trauma will be transformed into a kind of tragic experience of the beautiful. When a person experiences the beauty of this tragic experience in his experience of pain, the impact of the traumatic events will ultimately translate into a very profound and positive outlook on life, and then the effects of the traumatic events on the patient are no longer negative, but positive. So we can say that music has the magical function to transform the pain of a negative traumatic experience into a positive and profound life experience.

If the patient begins to have increasingly beautiful images with the music, and increasingly feels the experience of beauty during the process of clinical psychological Music Therapy, the therapist will quickly sense that the patient has started to emerge from the quagmire of pain, and the treatment process has reached a new milestone.

There are some opposite experiences for each person, such as good and bad, life and death, positive and negative, optimistic and pessimistic, which form the two opposite forces and tendencies of the positive and negative. The one which is stronger between the two opposite forces and tendencies is that one which determines a person's vitality or the decline and depletion of vigour. Positive people who have a strong physical vitality are not easily knocked down, or even overcome diseases that other people can not overcome, such as the dreaded cancer. But the feeble ones may die from some minor disease. Similarly, positive people can bear spiritual combat and injury that ordinary people can not overcome, and pessimistic people may commit suicide because of some normal injury or setback. Therefore, the treatment of physical disease and mental illness also depends on the vitality of the individual.

So what is of vital importance to determine one's existence? In short, the existence of life itself is a good, pleasant and positive experience. If one can often experience happiness and joy (which also means beauty) in one's own life, one feels much better about life, and one's vitality and powers of self-healing and self-help will be strong, with a strong power of endurance against trauma and attack. If one can not feel happy, joy and beauty in life, one will feel bad about one's life, and will then naturally feel that life is short or living is worse than death. That is why we see or hear of too many people committing suicide just because of some minor problems in daily life (for example, failure in an examination, criticism by others, etc.).

In most clinical Music Therapy, therapists often found that they did

not have to worry that the patient would be suicidal if he experienced more positive, good images in the process of treatment. On the contrary, they found that they would immediately get a strong signal that the patient was under the very severe risk of committing suicide if he had no positive, good images, no matter how good the music used was. In the successful process of Music Therapy, patients were not saved by the therapist's superior technology, but by the process of self-help, through beautiful music. Thus, both the experiences of beauty for artistic experience and in everyday life have directly important functions for human survival, which are never merely an elusive spirit of enjoyment.

4 . How is Music Therapy related to the Other Branches

4.1 The Music Therapy, as a Kind of Education

Music programmes are used by music therapists in musical education to promote the development of the creative, communicative, perceptive and social capabilities of students requiring special education. Music Therapy has some other functions which is regarded as the target in the Individualized Education Program (IEP). For instance, it can be used to learn academic concepts, to enhance co-operation and promote proper social behaviour, to offer access to effective communication, to improve self-respect and self-confidence, to increase motor reactions and flexibility, and to stimulate research and the examination of issues which affect students' lives. People tend to keep an eye on their perceptive, sentimental and physical capabilities by singing, creating, moving and listening to music. With the guidance of a professional music therapist, students can transfer what they learn through Music Therapy to other areas of their lives.

Recently, many certified music therapists are being hired by local schools and non-governmental educational centres.

Musical treatment can be considered as a kind of service which is a significant element in aiding students to accept a specific education and to live up to their goals. Music therapists provide support services with musical educators in many schools, and what they provide can be in different forms such as direct service, reference and on-the-job training.

Musical education differs vastly in the international sphere. The prevailing current of thought includes classroom education, teaching aids in schools and private education, consultative work, reviews of all the different types of music therapies. Young people are given many choices to learn from excellent Music Therapy courses, such as the noted Guildhall School of Music and Drama and the therapeutic methods of Nordoff-Robbins.

4.2 Special Music Education

Music teachers or therapists often use educational approaches of applicability or compensation to help and promote disabled pupils to learn music during "Special Music Education" in schools. These specially designed courses aim to enable disabled pupils to maximise their acquisition of basic musical knowledge, skills and abilities to successfully participate in a music ensemble or school choir. In many Western countries, the law requires the assistance to disabled children to return to

mainstream society as often as possible, that is why all regular public schools have to accept students with disabilities and provide them with the necessary Special Education syllabi. The special music education is mainly used for disabled pupils in ordinary schools who are competent in most of the classroom musical activities, but need some special guidance at the same time. This also applies to Special Education schools or classes, set up specifically for pupils with disabilities. Practice has proved that a considerable number of pupils with disabilities can successfully master much musical knowledge and many skills with the help of certain special counselling.

The approach of "Special Music Education" is a secondary level teaching method, the nature of which is between musical education and Music Therapy, but because its purpose is education, not treatment, we do not list it within the scope of Music Therapy. For this kind of approach, to acquire musical knowledge and maintain skills are the ultimate goals of Special Music Education, rather than a means for therapeutic purposes.

In addition, the relationship between pupils and teachers is a teacher-pupil relationship, not a therapeutic relationship. In reality, many teachers in Special Education institutions found that disabled pupils suffered greatly from various difficulties both physically and mentally, which made them feel dissatisfied with the traditional educational methods and only the purpose of acquiring musical knowledge. This resulted in them trying to use the approach of Music Therapy to aid pupils in developing better physical and mental capacities. At this time, the role of teachers had already begun to be transformed into the role of therapists; the nature of musical activities had also begun to be transformed into "Music Therapy in Special Education".

4.3 Music Therapy in Special Education

Teachers or therapists use music to help pupils with disabilities to acquire non-musical knowledge, very important both for their education and in daily life, and to improve their skills under the approach of "Music Therapy in Special Education". In this kind of approach, acquiring musical knowledge is not the most important thing, it is more important to acquire cultural knowledge and develop adaptabilities both for daily life and in society. Music is an ideal means of developing this type of knowledge and skill because they are closely connected in some areas.

"Music Therapy in Special Education" applies to Special Education. It aims to address the educational issues on the comprehensive development of pupils with disabilities, and its purpose and methods are therapeutic in nature, so it belongs to the category of Music Therapy. Although "Music Therapy in Special Education" is usually in the form of

group therapy, the purpose of treatment is often individualised to suit each individual's treatment needs.

"Music Therapy in Special Education" belongs to the level of enhancement because the Music Therapists' interventions aim to adapt to and obey the goals of other areas (such as Special Education), and to take the pupils' problems needing to be resolved as the objectives of treatment within the framework of Music Therapy. In other words, Music Therapists in Special Education solve the problems of Special Education within the framework of music.

The therapist, Alley, pointed out that Music Therapy has a flexible adaptation and a wide range of adaptive features in the field of education:

Music Therapy is an approach to meet the "service gap", a problem solver, a supporter and service provider for courses. Which never said: "This is not my job." So Music Therapists' role in education can be simply defined as: "(disabled) students are ignored or rejected in some capacity to participate in receiving education, so they lose some opportunities to benefit from normal education, and Music Therapists are just the experts who solve the problems. "

The well-known therapist, Jellison, proposed that the goals and objectives of Music Therapy in Special Education are intended to provide pupils with disabilities to acquire musical and non-musical knowledge and abilities to help them in a variety of living environments to lead more independent lives through courses of musical treatment.

4.4 Music for Growth

The approach of "Music for Growth" tries to use different musical activities to meet the phase of musical experience, according to the pupil's age and intellectual and physical development, to stimulate and promote the normal infant and pre-school child's overall physical and mental growth and development. The method of Music for Growth emphasises the promotion of the musical and non-musical aspects of normal development.

The main characteristics of "Music for Growth" are to stimulate the reaction to music between parent and child through musical activities, to promote positive communication and interaction between them, and to contribute to the overall development of children. The objects for this method are normal infants, pre-school and kindergarten children. The methods of Music for Growth are either different from enhancement training for little children (such as piano, violin and other instrumental training, or some children's training methods such as Orff or Suzuki) and different from the musical activities for therapeutic purposes for infants and children with disabilities, such as "Music Therapy for Growth"

mentioned later.

4.5 Music Therapy for Growth

"Music Therapy for Growth", with its more extensive clinical treatment goals, is different from "Music Therapy in Special Education" with the goals of learning about different courses and acquiring cultural knowledge. In addition, "Music Therapy for Growth" not only focus on the educational needs of children, but also on how to help people fulfil aims that were, for some reason, delayed in some early stages of growth in their lives. Therefore, "Music Therapy for Growth" can be used for any age from infancy to the old, with the treatment target being any stage of life or field of obstacles. Possible obstacles in these areas might include sensory-motor, cognitive, emotional, interpersonal relationships, physical and mental health-related aspects.

It is different from "Music Therapy in Special Education" because "Music Therapy for Growth" is closely related to the growth process and personal history, and that is why "Music Therapy for Growth" emphasises the personal history of the treatment object, family background, personal, emotional and personality development.

The well-known British Music Therapist, Juliet Alvin, raised the three stages of growth theory in her practice on the treatment of children with Autism: (1) associated with objects in the world; (2) link with oneself and the therapist; (3) link with important family members. According to the theory, therapists must stimulate children to experience physical, intellectual and social development by use of the accepted or movement type of musical activities at every stage.

The approach of "Music Therapy for Growth" belongs to the "enhanced level" in the Music Therapy context, because of the wide range of therapeutic needs of the objects of this method of treatment. Here, the treatment needs of the target are the primary consideration, and the treatment goals and treatment process should meet the treatment needs of the target. At this time, Music Therapists often have an equally important role and responsibility as other treatment professionals.

4.6 Music Psychological Science

Music Psychology can be considered as a ramification of the scholarly and scientific study of music and a style of complementally psychological researches. It studies the impact of music on people, not only on the individual but also in the social context. Music Psychology has been officially researched at many universities and has become an attractive branch of Science, however it is comparatively new as far as its *testing and effects are concerned.*

Undoubtedly, human culture is bound up with music which is one of the few almost-complete invariables of society, whether by cantillating, rhythm section, vocals or instruments. Music plays a significant role in people's everyday life in most industrialized nations. It is heard in advertising doggerels and in lifts, and it is played on radios and MP3. Music is now wholly the content of civilization. It is apparent that music is of great importance to humans from the cultural angle. The purpose of studying Music Psychology is to discover what mental and physical impact music has on people and whether certain psychological situations may be changed or established by using some types of music.

Music Psychology can be regarded as an extensive science which is the combination of factors of traditional musical science with applied psychological research, the social science that studies the origins and social relationships of human beings and the research of noesis among other rules. Contemporary research includes the impact of musical ceremonies like concerts, emotional reasons for musical predilection, and research into musical practices. Each of these fields can define the impact of music on people and offer information about the significance of music to the brain.

Some people make use of music in an active way because of its stirring or restful factors. It is suggested that drivers suffering from anxiety should play quiet music in their cars as a way of remaining calm. Some particular songs are used in sporting events as a way of exciting the masses and developing an expectant ambiance. The aim of Music Psychology is to discover why particular forms of music can have these impacts and how they could be produced to create special responses from individuals.

It is a necessity that music therapists should gain knowledge of Music Psychology. This knowledge concerns the fundamental processes of the ear and the brain. It is regarded as the physiological condition of the musical senses, and the physiological condition of music practice and musical penchant.

Music has been used not only from a personal perspective in education, but also in professional treatment, namely Music Therapy, to transmit a cheerful mood and to ease the mind. Music Therapy, as a typical ramification of Psychology, has been advanced and is now being used in clinical practice.

To illustrate the healing methods and aims of Music Therapy, let us present some causes, experiments and research from this branch.

David Merrill, a student, undertook an experiment to find the impact of music on the capability of mice to learn something new. The mice ran through a labyrinth to discover if the music influenced their speed of learning. In this experiment, the mice spectacularly promoted their

capability of solving the labyrinth problem by listening to Mozart for 10 hours per day, whereas the mice listening to the heavy metal music became increasingly worse at handling the labyrinth than they had been at the beginning of the experiment.

Based on the Association for Psychological Science, it has been shown that Intelligence Quota marks increased in children who attended keyboard or singing lessons. In another research, boys from the age of 6 to 15 who attended music lessons obtained higher marks in oral memory tests than another control group of students who did not accept musical training.

It has been proved by some researchers that patients who listened to harp, piano, synthesizer, orchestra or slow jazz music suffered less pain after surgery than those who did not.

Musical treatment is particularly effective for students suffering from Autism. These students have problems communicating with classmates and teachers and become anxious in loud and unusual situations. Students suffering from Autism provide good feedback to musical treatment.

There were two groups of participants in a research on university students. While one group listened to seven songs which included violent lyrics, the other group listened to seven songs without violent words. And the fourteen songs were all by the same artists. Then they were asked to define the words from the violent and non-violent songs. There was a tendency from the group who had listened to the violent words to possibly attribute offensive meanings to words like "rock" and "stick." A report was issued by the American Psychological Society illustrating the study which undoubtedly evidenced the connection between violence among young people and the violent media containing music.

Dorothy Retallack published a book in 1973, entitled *The Sound of Music and Plants*, in which her experiments on the impact of music on plants are illustrated. In her experiments, Rock music was played to one group of plants and Jazz to another. Two weeks later, the group which listened to the Jazz was healthy and twisted towards the direction of the radio, whereas the other group which listened to Rock grew very tall and were drooping. Most of them died within 16 days, with weakened blooms.

Until now, most of the musical researches have adopted minor examples and some of them were not accepted, due to contradictory variables. As a result, even if these achievements were remarkable, more studies are still necessary. Nevertheless, allowing for similar results for certain forms of music which the studies have produced, Music Psychology is deserving of further research.

5. Models and Methods of Music Therapy

Cheryl Maranto's comprehensive anthology published in 1993 contained countries on all continents, which are known for their various methods of getting to know and experience musical treatment. In this book, Maranto recorded elaborate details concerning not only 14 models and categories in the USA, but also over 100 skills. Bruscia defined, as access to getting to know this term theoretically, the way, fluctuation, process, skill and model.

The definition of method is the special kind of musical practice which the patient needs for the therapeutic aim; the peculiar way in which musical practice is designed is called variation; everything that the doctor is obliged to do in treating the patient is regarded as a procedure; a technique refers to one step in any process which is used by the doctor to ensure the patient's instant practice; and the only access arranged in methodical order is called the model, a process and skill according to fixed rules.

5.1 Guide Imagery and Music

GIM (guided imagery and music) refers to a kind of skill to arouse or form mental images of things, in order to facilitate self-actualization by listening to classical music which is bound up with a mentally and physically improved condition. Imagery enables aspects of the self which can be used by the patient under guidance of the doctor.

There is no tendency which demonstrates that GIM can cure or treat specific symptoms. Instead, GIM searches for the internal consciousness of the client. It is generally believed that everyone is capable of understanding his own problems and conquering the problem within the self. Consequently, GIM can be regarded as human-centred treatment under the influence of Abraham Maslow and Jung.

Actively listening to music is regarded as the most significant process in sensory Music Therapy which includes many models and processes. The Bonny Method of Guided Imagery and Music, namely GIM, is the most global model whose professional practitioners range from North and South America, Oceania and Asia to ten European countries.

According to the Association of Music and Imagery, 1999, we can see by the official description of GIM that it is music-centred research in awareness. GIM is also associated with other models of musical psychotherapeutics and can be more precisely defined by using the description of Helen Lindquist Bonny, who is the founder of the model that "GIM is a procedure, in which imagery is elicited in the process of

listening to music". GIM can also be precisely defined in a comprehensive way according to Goldberg, 1995, that it is the profound access to music psychotherapeutics where particular classical music is used systematically to develop a moving developmental process of internal experiences which allow for the appearance of all sides of human experience in complete, humanistic and transpersonal ways, such as psychological, spiritual, physical, social, sentimental and collective unawareness.

Helen Bonny, who is musician, more exactly a violinist, and minister's wife, was educated as a Music Therapist and investigator in behavioural customs in the 1960s, but her work in pastoral guidance for a long time led her in a different direction. Helen Bonny discovered GIM from her work concerning music in LSD therapy in the early 1970s, which refers to the use of lysergic and diethylamide psychogenic medicine in a controlled, effective and clinical manner to promote self-awareness and consciousness. It is acknowledged that the patient cannot recall many of the harsh experiences after this treatment, which is considered as one of the problems of LSD-oriented therapy. The process of using two non-drug ingredients of LSD therapy which contain the shifted state of awareness and the dynamic capacity for classical music is regarded as a development of GIM. Step by step, Bonny worked out a session format in four phases and a succession of musical programmes.

Nowadays, over 30 typical musical programmes exist, with more arising as a result of newly-added programmes. Ken Bruscia, who published a guide to demonstrate the complex history of the GIM musical programme, released a set of 10 CDs which concern music for the imagination. The musical programmes, which last for 30-50 minutes and are composed of 3 to 8 definite movements or solo pieces of classical music in their longer or shorter forms, historically include not only Baroque but also modern music in instrumental and oral forms.

The patient is exposed to the opportunity of experiencing parts of his or her life as imagery in many forms which can be compared to the patient's problems and beliefs, strong points and weak points. GIM can be regarded as the opportunity of re-creating one's life story in a symbolic way, aiming to rearrange life fragments and the sentiments related to them. GIM periods include 4 primary steps known as the Overture, Introduction, Musical Journey and Finale, which are similar to the process of the Sonata which goes about introducing the subject, development to develop, recapitulation to transform, and Finale to integrate the subject.

The GIM procedure will be illustrated in this step and objectives will be set for the session. The therapist will attempt to shift the patient's attention from the outer to the inner world in the process of the Overture,

wherein the core for the session should be ascertained. The patient's physical shift of position, which starts by lying down on a mat and closing the eyes, symbolises the transit from the conscious state of the outer to a more open inner world. The doctor should be in a convenient position for the complete physical control of the audio system and to be able to observe the whole body of the patient, while recording the dialogue. This recording will be taken into account, along with notes by the therapist on the main reactions in the process of the Musical Journey.

The therapist will lead the patient to experience relief and the process of concentration which can speed up the pace of the realisation of further relaxation and the refreshed step of consciousness. Concentration or focus is a restriction of the possible alters which is essential to prevent the occurrence of insecurity or chaos in this researching space-time.

In the process of the Musical Journey, the therapist uses a GIM tape programme which lasts from 30 to 50 minutes, in order to speed up the sentiments and visual imagery topics offered by the patient. The musical programmes which cover particular selected pieces of classical music should satisfy the patient's needs and aims. It relies on not only the therapist's choice of programme or improvised music, but also on the patient's exact imagery and procedure. The therapist leads and interacts with the patient while playing the music, thus helping the patient to make associations between the music and images which are aroused by the music. In this process, if the therapist has held a misdirected notion, he will change the music tapes according to the exchange and interaction. The therapist must be trusted by the patient to follow the patient wherever he chooses and dares to risk going, who shares the imagery of the patient in order to get to know, in broad perspective, internal experiences in various forms, including sight, hearing, smell, gestures and feeling. The imagery of the patient which also contains memories and sentiments can be clear or discursive, fast or slowly shifting, personal or impersonal, intermittent or sequential. The therapist will try his best to lead the patient to become absorbed in the Musical Journey and in the research of imagery, regardless of the original objective, which can cause impersonal experiences.

The therapist gives guidance to the patient in the processes of the overture, integration and processing steps which will lead the patient to return to an ordinary state of awareness. The therapist will have a discussion with the patient on the images or experiences of the musical programme and assist the patient to work on the programme so as to link him or her to personal or sessional aims. The patient is encouraged to follow the standard norm that keeping and focusing his experience on a different mood, such as a painting, a carving or a poem, will have the duration of between 5 and 10 minutes.

5.2 Improvisational Music Therapy

Apart from Nordoff-Robbins and Clinical Orff-Schulwerk, there exist other types of improvised models. That certain skills lead to a patient's reaction on every level can be regarded as the primary theory of improvised Music Therapy. The patient can be exposed to the context of the musical experience, with the therapist playing a supportive role in establishing a sentimental atmosphere which receives and promotes the reaction of the patient. Group participants can be provided with the experience for enculturation, communication and the manifestation of moods and sentiments.

Rhythm and Orff instruments are considered as the most usual tools for this method. In this model, a combination of movement, speech and play can also be used by the Music Therapist.

5.3 Creative Music Therapy- Nordoff-Robbins Model

The internationally known Nordoff-Robbins approach, which is the most noted improvisational model of Music Therapy, has been developed under the co-operation of Paul Nordoff, American composer and pianist, and Clive Robbins, a British professional educator. They are regarded as the pioneers of Creative Music Therapy.

Many countries like UK, Germany, America, Australia, Japan, South Africa, Canada and Norway have adopted their methods which were developed between 1959 and 1976. There is an obvious tendency that the followers of this method will keep on practicing this approach in their medical work.

Regarding the Nordoff-Robbins approach, its uniqueness can easily be recognised. Firstly, playing music ranks foremost in the experience and musical reflection offers the basic substance with which to analyse and interpret. Working in pairs can be regarded as the symbol of the Nordoff-Robbins' individual practice, in which one person sets up the musical connection from the piano, while the other promotes the patient's reactions and participation.

Helping the client to establish contact in the context of the musical experience is the original target of the Music Therapist in this skill of medical improvisation which was created and advanced by Nordoff and Robbins. To begin with, the Music Therapist plays a supportive role to establish a musical-sentimental atmosphere to receive and facilitate the client's reaction. Take the following as an example: the Music Therapist will take some rhythm or drum beat which is discovered in the client's actions as the basis of an improvisation. Meanwhile, he makes attempts to

connect the tonal context of the improvisation to a tonal pattern which is discovered in the client's screams and phonations. The focus of the session, which is based on the interaction between the Music Therapist and client, will be set up at the time when contact and resonance have been established. During the procedure of treatment, gradually the Music Therapist co-operates with the client to set up the anticipated responses and skills which were advanced in earlier sessions.

Improvisation has been used in Creative Music Therapy so as to generate musical reflection from the client, aimed at arousing action--oral or instrumental reactions—from the client by building up the client's musical skills and freedom of expression and thus developing communication and inter-reactivity between therapist and client. Dissonances can be freely used in Creative Music Therapy and improvisation adopts rhythms, modes, scales, systems and styles in their various forms.

The Creative Music Therapy of Nordoff-Robbins attaches importance to working with the mainly human and unexceptional parts of the client. The power of music which can evoke sentimental responses and can function as a self-organizing or self-realising strength has been given enormous emphasis.

5.4 Free Improvisational Therapy- The Alvin Model

As the trailblazer of musical treatment, Juliette Alvin laid the foundation model for improvisational musical treatment from 1950 to 1980. As a concert cellist, she enjoys an international reputation and holds the firm belief that the effect of music can act as a therapeutic medium. She defines Music Therapy in her own way as follows:

“Music Therapy refers to proper use of music in the field of healing, recovery, education and training of both adults and children who are developing physical mental or sentimental chaos.”

The client can extemporise on various musical instruments and work out his or her own method to arrange sounds under the guidance of Alvin's approach. The therapist leads the client to establish proper connections with substance, self, and others by improvisations which shape a dynamic relationship and mutual interaction between therapist and client in the process of the sessions. Alvin's method, improvisation in particular, which is regarded as a developing procedure, is used simultaneously with other active and sensory musical experiences.

Alvin advocates psychological treatment and her work involves those

children who are suffering from psychological deficit, Autism, maladjusted disturbances and Phys Dis. She believes that Freud's analytical overviews support the development of musical treatment, because the strength of music is to uncover factors of the subconscious. In her eyes, Stravinsky is one of the most significant people whose unique compositions renewed the musical rules of harmony, melody, rhythm and form, thus giving us the opportunity to make and practice a series of disharmonious and unkeyed sounds. The above-mentioned laid the foundation of her research on improvisation therapy in its free form, in which both therapist and client can extemporise, regardless of the restrictions of musical rules, and in which music can symbolise the client's nature and personality, thereby illustrating the therapeutic items.

Alvin's method:

- 1 . Listening to or creating music is the focus of the client's entire therapeutic practice.
- 2 . Using every possible and imaginable musical item is acceptable.
- 3 . Temporary expedient can be used freely, namely using sounds or music that are totally new.
- 4 . Enormous freedom can be created by playing the instrument in various ways, by undertaking vocal sounds which are not arranged beforehand and by creating musical topics.
- 5 . No musical ability or training is required in terms of free improvisation which is not estimated by musical discipline.
- 6 . If the client does not require it, no musical regulations, limitations, instructions will be enforced by the therapist in the process of improvisation. The client enjoys great freedom to create a beat, meter, rhythmic form, scale, tonic core, musical theme or harmonic structure at random.

Alvin values the significance of establishing a relationship between the client and the music. As far as *infantile Autism and particularly developmental disabilities* are concerned, she holds the point of view that the original and principal therapeutic relationship is based on the connection between client and instrument. Alvin regards the musical instrument as the bearer of the unpleasant sentiments shown by the client and representative of a safe, intermediate substance. By doing so, the client will be enchanted with the music and set up a relationship with the instrument or therapist, thus concentrating his feelings on the mutual music. After experiencing this procedure, the direct relationship between

client and therapist develops. So the musical relationship is considered to be the origin of her conceptions in terms of the aims, processes and successful results of the therapy.

5.5 Singing and Discussion

Regarding teenagers and the elderly, singing and discussion can be regarded as distinctive methods of musical treatment. The music stirs the client's reactions to the words of the song. Most often, the music itself encourages the display of opinions and sentiments connected with the songs.

The following are the distinctive processes of this method: it begins with therapist singing songs with which the client is familiar. Then the therapist will start a discussion concerning the subject of the songs and the therapist will extemporise a song with lyrics from the client, after the client has displayed and exchanged his or her own opinion, sentiments and moods.

This is considered to be a very positive result of the session, because the therapist creates a song which is optimal in helping the individual client to transfer his or her sentiments and moods optimistically.

5.6 The Models Related to Music Education

5.6.1 Clinical Orff-Schulwerk

This research using Carl Orff's musical education for German school-children has been particularly applied to children with learning difficulties and children in America who are suffering from infantile Autism. Clinical Orff-Schulwerk, namely COS, lays an effectual foundation for these children due to their tendency toward rhythm, order and repetition. The complete procedure includes utilising the practice of grouped action, rhythm, sounds, words and musical expression. Simple intones, rondeaux, poems or meaningless words are used to form the structure. All will be sung in the pentatonic range when ostinato is used. The rondo pattern is widely used.

Even the most severely disabled or disturbed children can participate in the treatment with a practically-designed percussion section. The client can be taught some special tasks steadily and gradually by means of "successive approximation". Modelling, namely imitation and behaviour forming are able to influence the children's learning and be re-strengthened by using behavioural skills. The therapist will pay abundant attention to language development by using sign language in the process of treatment towards grouped Autistic children. And this can be regarded as heightening speech.

The Orff theory also involves body image consciousness, lateralisation, gross motor expression, fine motor co-ordination, sensory language, special relationships, simple classification and ordinary association. The reason why COS is considered to be of significance is that children can participate in a significant group experience with the aid of COS.

Orff-Schulwerk refers to a method of teaching and learning music. It is based on children's favourite activities such as singing, tone rhymes, clapping, dancing and keeping beat on anything available. This inherent aptitude can be transferred into learning music, firstly by listening to and playing music, and secondly by reading and writing, which is the same pattern by which one acquires language.

Orff-Schulwerk takes place under circumstances where competition is put aside. Enjoying the pleasure of making excellent music is one of Orff-Schulwerk's advantages. When there is the tendency that children do not want to stop doing what they have worked out, the aim of Orff-Schulwerk will have been accomplished.

Poetry, rhymes, games, songs and dances are the usual forms of Orff-Schulwerk, which may be traditional and initial. The children can talk and sing at random and, at the same time, they can also clap and stamp or play drums, sticks and bells.

Marimba and orchestral bells are typical instruments which can provide good sounds in a short time. Children will become responsive to the physical stimuli and participate properly by playing together as in a band.

"Tapping on the body" is also used in Orff-Schulwerk, which includes snapping, clapping, tapping the thigh and stomping. A lot of ordinary musical factors and patterns such as pentatonic scales, a repetitive musical phrase in a composition, repetition and the exploration of simple themes, rondeaux, canons, chants, call-response, folk songs, children's songs, and musical games are mostly undertaken in the beginning of Orff-Schulwerk.

Children's knowledge and cheerful memories can originate from personal musical practice by composition and extemporisation under the guidance of Orff-Schulwerk. Learning can not be considered as meaningful unless it can satisfy the learner. The learner will gain a sense of achievement from his or her capability of utilising the acquired knowledge for the purpose of creativity.. Orff-Schulwerk is a topic of great diversity not only for the teacher, but for the student as well.

Composer Carl Orff and his associate, Gunild Keetman, evolved the basic texts for the Schulwerk as models for teachers worldwide. Now translated into eighteen languages, Orff-Schulwerk is based on the traditional music and folklore of each country in which it is used.

When it comes to Orff musical treatment and Clinical Orff-Schulwerk, the Music Therapist motivates the participants and sets up an environment which leads the client to reveal himself through music, to go through the musical experience by making music with others and to develop the expected motor, social, behavioural, communicative, cognitive and sentimental techniques, or to handle the problems at hand by means of using the Orff-Schulwerk materials such as instrumentation, speech, movement and additional tools.

From Gertrud Orff's perspective, the Orff-Schulwerk instrumentation can be applied to the following 3 therapeutic aspects: take the acoustic-active participants into consideration; play a bridge-like role for both therapist and client; act as both a distancer and connector and a way for the client to access communicative and social practices. Moreover, since the Orff-Schulwerk is used in therapeutic treatment, it can probably produce a treble non-verbal communication: client and material, client, therapies as well as material, and client and client.

5.6.2 Kodaly Concepts

Zoltan Kodaly was a Hungarian who worked in the field of composition, education and ethnomusicology. Thanks to his theory of musical education, systematic and well-ordered methods about how to teach music were worked out. Later on, a group of people under the influence of Kodaly's concepts of musical education, improved on those methods. To realise the core value of musical philosophy, that music should be shared by people all over the world and plays an essential role in developing a healthy human being, they use diverse teaching methodologies.

Fundamental theory

1. Everyone is able to read and write music, as long as he can read and write language.
2. The best way to gain the skill of performing and writing music is to practise singing.
3. To achieve the ideal results of musical education, one must start learning when very young.
4. Because of the fact that folk songs, part of a child's linguistic culture, are the source of his native musical language, these should be used as a method of guiding learners in the early stages of musical development.
5. Nothing except music that is the most valuable in the artistic aspect, no matter whether it is folk or classical, should play a role in teaching materials.

6. Music, among all the subjects taught in schools, should be the focus and lay the foundation for all other teaching.

Objectives

1. Singing, playing musical instruments and old-fashioned types of dance, many old-fashioned singing games, religious songs with simple lyrics and notes, and songs sung in traditional manner, whose sources cover different musical factors step by step, from national folk songs to international music.
2. The performance, appreciation and analysis of the global art of music are invaluable.
3. Being armed with the abilities related to music, so as to read and write music, sing songs and choral music.
4. Writing music in an impromptu or well-thought out way, with the familiar lyrics changing with every single stage of development.

According to Kodaly, native Hungarians, whether they have musical genius or not, should receive musical literacy training as well as linguistic literacy training in their mother tongue. To achieve this goal, Kodaly worked out a systematic course schedule in which young children are trained the basics of music by practising original folk songs in Hungarian. In his musical teaching methods, Kodaly puts emphasis on naming the notes by syllables, memorising by repetition, feeling by heart. Training is carried out in the following ways: reading signals, playing games, clapping hands, reading musical sounds, understanding rhythm, etc., the most important one of which is singing.

Some specialists, expert in specific treatments, and professional musical teachers believe that for students who are disabled in some respect, Kodaly's methodology is highly effective. These students include the ones that are mentally slow, hearing disabled, learning disabled or emotionally unstable.

5.6.3 Dalcroze Method

The Dalcroze Method, known as Eurhythmy, is another access to music educators, used to develop musical perception, ear-training and extemporisation in the promotion of musical ability. The chief instrument of this method is the body. By this method, students can display through actions what they have learnt from the rhythm of a musical episode. Generally speaking, this method which was developed by Emile Jaques-Dalcroze, a Swiss composer, musical educator and theorist, is associated with music, action, thought and the body.

The main factors of the Dalcroze Method:

1. Eurhythmics, in Greek meaning “good rhythm”, is a kind of musical display by action, intended to cultivate musical techniques by kinetic practices. Students listen to music to learn the rhythm and structure, in order to be able to demonstrate what they have learnt by ad-lib movements. For instance, stepping and clapping can be regarded as the representative of note values and rhythms.
2. Solfège, known as fixed do, can help to train the ear and visual skills.
3. Extemporisation is the use of instrumental action and sound.

Since the early 20th century, Eurhythmics programmes have been used by some Dalcroze teachers as a therapeutic method of helping the blind and deaf, mentally or physically disabled and maladjusted people. Dalcroze, who developed specialised Eurhythmics practices to aid the blind to gain spatial consciousness and perception, haptic sensibility, sinewy sense and awareness, and developed auditory skills, gave lessons to blind students in Barcelona. Dalcroze rhythmic movements are thought to be of importance as well in assisting the optically disabled to establish self confidence in exploring space.

5.6.4 Suzuki Method

There is a rule which the Suzuki Method follows that all children have ability and that this ability can be advanced and improved by a training environment. All children can speak their native language easily and, if the same natural method is used in teaching other skills, these can be learned just as successfully. Suzuki described the process as the Mother Tongue Method and referred to the whole system of this teaching approach as Talent Education

Shinichi Suzuki (1898-1998) who was born in Japan and graduated in Western Music in Germany in the 1920s first started teaching young children in his homeland in the 1930s. In addition, he made great progress in his ideas and philosophy of teaching at the end of World War II. His teaching method has now swept over various parts of the globe and is becoming more and more successful internationally. Since he was a violinist, he utilised his first-hand ideas on the teaching of the violin, but gradually, his method has been used in various fields, such as Nursery School teaching.

Important factors in the Suzuki Method of instrumental teaching are the following:

- an early start (aged 3-4 is normal in most countries)

- the importance of listening to music
- learning to play before learning to read
- the involvement of the parent
- a nurturing and positive learning environment
- a high standard of teaching by trained teachers
- the importance of producing a good sound in a balanced and natural way
- core repertoire, used by Suzuki students across the world
- social interaction with other children: Suzuki students from all over the world can communicate through the language of music

Aims of the Suzuki Method:

The Suzuki Method has made it possible for many children to play music at a high level. In fact, the Suzuki Method has resulted in its followers becoming eminent professional musical artists. But this is not its ultimate goal: the focus is on the improvement of the whole child, on education through music. Dr. Suzuki himself always said that his wish was to cultivate the human qualities in the child.

A lot of Music Therapists are conducting studies on the clinical applications of the Suzuki Method. Suzuki himself connected how his method of violin instruction, with patient and persistent application, could help students who were physically disabled improve muscular strength and motor control and make violin playing possible for blind students. Suzuki has a belief that each one of us has musical potential which, once stimulated, can be advanced. Because of this, he encouraged teachers to use his method in teaching children with different levels of ability. The Suzuki Method has been used effectively for young children who have developmental disabilities, visual impairments, learning disabilities, Cerebral Palsy, or chronic illnesses, as well for the elderly.

6. Forms of Music Therapy

Music Therapy can be classified from several points of view. Among these, for example, are

Music Auto- Therapy and Music Hetero- Therapy

In the former, patients try to achieve therapeutic results by working with music by themselves. Sometimes they use it as an intuitive, reflective and preventive method for achieving mental wellbeing. Physicians and medical staff, who have time to play in string quartets, jazz ensembles etc., could also be found among such patients. The advantage of this type of MT is a more intimate process and the option of own choice.

Music hetero-therapy is usually realized between two people, where the client and therapist are two persons. In specific cases, a team of experts and professionals, who try to find the diagnosis and heal one patient, may also be involved.

Active and Passive Music Therapy

If we take into account how patients share in the MT process, we can differentiate between the active and passive music therapy types. In active MT, the patient develops some musical activities while singing, sounding the instruments, playing rhythmic structures (using his own body or the objects surrounding him) and improvising. All these functions can be realized by the patient himself or as a member of a bigger group or community. The target of this exercise is not to accomplish excellence in the studied musical disciplines, but an effort to give the patient freedom and to assist him in discovering his specific diagnosis. Of course, it is an advantage for the patient to be able to play some instrument, as he can thereby please himself and boost his self-confidence.

There are many methods of active MT, including the work of C. Orff's Schulwerk, resounding the body itself (for example, by clapping, stamping etc.), improvising (with a partner using the black keys of the piano as a pentatonic source), playing in ensembles, singing and composing music.

Passive (receptive) MT can be realized by listening to live music or music reproduced on CD, DVD, tapes, films and video, or by media such

as radio and television. The advantage of live music is the visual impression and possible contact with interpreters (who can be therapists and other patients.) The lack of this visual impression results in some therapists rejecting recorded music in preference to live music. Though receptive music is more passive, it does not eliminate the other therapeutic disciplines such as painting, dance or creating dramatic stories or fairytales.

Music Therapy for Individuals, Groups and Communities

The forms of MT are influenced by the therapeutic situation, which is determined by the number of co-operating clients. From this point of view, the most often utilised forms of MT are represented by the MT of individuals, groups and specific communities. Besides these main forms, pairs' and collective MT also exist.

Individual therapy reflects the mutual relationship between client and therapist. Usually it is realized in the form of solo contact with the client, but occasionally it can also be realized in a group, if the interaction among its members is reduced. Individual therapy is demanding both for client and therapist, because of economy and personal claims. However, there are types of clients whose problems cannot be solved in a group for special practical reasons. This concerns clients with severe handicaps; clients who need a bipolar relationship with the therapist; clients who benefit more from an individual form of therapy than work within a group; clients who cannot work effectively in a group, as they bear some symptoms of social imperfection (they do not respect any rules, they are aggressive, they refuse to co-operate). Individual therapy is also necessary for clients suffering from mental diseases. It serves also for shy, timid, diffident clients, patients with a low level of self-esteem or, on the other hand, for important personages from the upper ranks of society, who do not want to disclose their problems to other patients.

Group therapy utilises group dynamics, which is usually defined as the summary of group activities and group interactions. The group can be small (3-8 patients) or big (8-15 patients). The patients operate as a group for a short or a long period. Therapy is realized in two types of groups also from another point of view. The shut (or fixed) type gathers patients who undergo hospital or out-patient treatment approximately at the same time, thus they undergo the whole process together. The members of the group know each other, which helps with problems of reliance. Groups usually gather clients with a low level of adaptation; the main task of the therapist is to ensure enough stimuli for the healing process.

The second form of group therapy is represented by open groups. Every member who leaves the group is replaced by a newcomer. When receiving clients with severe mental or physical diseases into group

therapy, it is necessary to take many factors into account. Besides the norms and aims, we must assess whether the client should take part in the process at all. If not, we must work with a co-therapist or reduce the number of clients in the group.

Therapy for a community is not identical with group therapy. In this case, we do not create a specific companionship of clients, but work with a natural group of people which actually exists in a particular setting. The final number of members is not limited.

There are some differences in the targets of group and community therapy. The latter wants to achieve change both in the whole system and in the individual members of the community who create this system. The best known type of community therapy is family therapy. It resolves the relationships, development and misunderstandings within families which can cause individual and general problems. The therapist believes that, if the client has to be changed, the whole of his environment must be changed. This involves the system, its structure and the principles of interaction among family members. Sometimes family therapy can be a part of individual therapy, for example when a therapist working with children, also invites their parents, brothers and sisters to their sessions. In all cases, music serves as the means of communication.

7. The Musical Means of Music Therapy Techniques

Music in Music Therapy can somehow transcend the conventional aesthetic perspectives, acting as a means through which people get to know each other and express their ideas and thoughts.

The media through which people create or recreate music varies. Normally these are:

- Body;
- Vocal sound;
- Musical instruments.

7.1 Body

Changes in the body position, the distance between limbs, for instance, as we normally first observe with our eyes and then our ears, lead to the games we play. People acquire a sense of rhythm and muscle co-ordination with the functioning of the brain, skeleton, joints and nervous system, through no other means than body games, which at the same time improve sensitivity, auditory analysis and serve as an effective method of releasing emotional tension. Body games also bridge the gap between people, which can be seen during pair motion games and in hand-clapping by children on the same side or in the opposite direction.

The body game is supposed to come first, before elementary instruments with which people try to create music, because when playing body games they produce a wide range of sounds, thus enabling us to achieve the therapeutic goal of the game. Some practical body games are as follows:

- clapping hands
- slapping (rhythmically slapping on certain parts of the body)
- stomping (rhythmically moving, walking or dancing)
- snapping one's fingers

For instance, one can play the hand-clapping game alone or in pairs with the hands clasped or with the back of the hands. There are no specific rules as to the style in which you clap your hands, and a table, the floor or your partner's hands may all be chosen.

7.2 Vocal Sound

We are able to convey our feelings and emotions through our voice, which varies for each individual, just as in the case of signatures. Our physical and mental health also has some bearing on this.

Science long ago revealed that our vocal cords and emotions are "connected" in such a way that our vocal cords contract instantly when we experience fear or anxiety, and thus giving rise to speech problems (e.g. hardly being able to produce a sound). In opposite our relaxation and equanimity combine with a laxity of the vocal cords.

Two singers, standing close to each other in a choir are expected to experience an electromagnetic energy resonant transfer between their vocal cords, a special effect known as myotransfer.

In China, teenagers and adults often label themselves as off-key singers. Music of our own production carries more messages when it comes to communication, yet people prefer recorded music. They are likely to develop an unfavourable feeling towards singing and vocal improvisation after being familiarised with vocal techniques. Such a result is understandable when we relate to events from our past negative experiences, anxiety or phobias and our voice is adversely affected by our disability. However a surprising revelation of our own voice can be made possible if we succeed in breaking through the initial barriers.

Numerous examples of musical exploitation in therapeutic work with a voice include group music therapy (Schwabe), the technique of vocal support (Austin), vocal therapeutic models or "Revelation of a Voice" (Werbeck) etc.

Generally, there are three forms of voice expression in terms of music-therapeutic voice techniques:

- speech
- primitive singing (vocalisation)
- singing songs

Speech

Extra-linguistic and paralinguistic components of language such as various interjections (e. g. mutterings, "hmm" etc.), modulating factors of speech (silence, dynamics, time, melody, intonation and colour of speech, rhythm, pauses and speech expression) are readily attainable with special exercises through voice therapy.

Therapists illustrate how the client uses these means to practise greeting, expressing emotions and making important announcements etc. Systematic exercises in using the rhythm of words, cries or interjections, which are speech modulation factors, are constructive in the cultivation of expressing one's skills.

Creative singing

An improvised, often spontaneous creation of melody such as vocals, mantras, shamanic songs and similar linguistic units can possibly be regarded as the most antique form of voice improvisation. The non-European ethnic groups developed a large number of techniques of primitive singing and adopted them in treatment.

Tonality, for example, is one technique which is implemented by using "vibration strength for creating long, prolonged sounds without using rhythm or melody", while mantras refer to the poetic hymns, prayers or chanting of sacred sounds to practise meditation.

Overtone singing (or harmonic singing) takes the form of an ancient shamanic form of singing which is making two sounds synchronously, thus making it possible for a singer to sound the upper octave of a basic tone and other overtones.

Doo-wop style, characterised by words and nonsense syllables sung in harmony by small groups against a stylised rhythmic melody, is just another form of primitive singing.

Clients in their pre-verbal stage of speech development who are afflicted with mental retardation, dysphasia, infantile Autism etc. opt for vocal self-expression instead of singing to improve their language performance.

A song

Music Therapists are expected to have an adequate number of songs in store to suit different occasions and the tastes of different age groups. Therapist may compose new songs or adapt established ones as well. Rhythm or melodious rhymes can easily be found in songs for infants (children during the first few years of life) and school-age children. Music Therapy usually has both a beginning and end song especially designed according to each client's situation, with all the songs in them being quite adaptable. The simple alternation of the dynamics, tempo, accompaniment and arrangement of solo or group singing etc. result in brand new versions of songs.

Songs for physically impaired children are supposed to be simple in lyrics and rhyme, making them easy to memorise.

Songs for clients in general should be composed in line with each individual's exact condition and diversity of character, be it about numbers, body parts, clothes, colours or any given object in the outside world, e.g. animals and plants.

7.3 Musical Instruments

For most clients, a musical instrument is the most appealing choice as, in most cases; they can create their own music, improvisation as we refer to it, even though they are undisciplined. Meanwhile this process is conducive to tapping a client's potential and deepening the client's understanding of the chosen instrument, which are quite essential in the cultivation of the client's musical sense and improvisational techniques.

A Music Therapist is required to have a good knowledge of music and at least the expertise to play one instrument. Normally, the piano and guitar are top choices on the list, followed by the flute, violin and cello.

Musical instruments are categorised as follows, depending on their specific roles in Music Therapy:

- traditional instruments (piano, guitar)
- Orff's instruments (percussion instruments)
- national musical instruments
- self-made instruments
- aids and alternatives to current instruments

8. Analysis of Musical Techniques in MT

(Improvisation, Composition, Interpretation)

8.1 Improvisation

Music Therapy is a sequential system, rather than a combination of disorderly parts. It is characterised by being orderly, logical, target-oriented and well-controlled. Among all these characteristics, its orderly procedures, i.e. it is conducted in an organized way, play the most significant part. This usually includes the following steps: assessment, treatment, and evaluation. In the course of treatment, patients are exposed to different kinds of musical pieces by the therapist, each with a certain technique adopted. The therapist makes selections between different kinds of music and the different feelings they arouse according to the patient. Basically, the musical experiences fall into four categories: listening, re-creating, composition and improvisation.

Musical improvisation means the ability to compose instant musical pieces on the spot. It integrates interpretation with emotional communication, plus instrument skills and immediate reaction to partners. As a performative act, improvisation is a way of creating music that largely relies on instrument skills.

Certain improvisation approaches resemble one another; they are combined and mixed to form a certain, logical order with which approaches are applied. K. Bruscia was the first to have conducted the grouping of the improvisation approaches and, in accordance with this classification, approaches are grouped into different categories according to their basic function in the treatment. And they are: Empathetic Approach, Structuring Approach, Elicitation Approach, Redirectional Approach, Intimacy Approach, Procedural Approach, Referential Approach, Emotional Exploration and Therapeutic Issue Discussion. Thus, every approach could be included in such a classification.

Improvising Techniques :

Warm-ups: Advice for Clients

Feel free to do anything that cheers you up physically and enlightens you artistically when you're doing warm-ups. Firstly, decide for yourself whether you want a mild start or an energetic opening, then accord your

warm-up with it. Keep in mind that there are three aspects -- your voice, body and instrument that need your attention. It is suggested that you do not play an instrument until your voice and body are warmed up. You will perform naturally if both emotional and physical needs are taken into account while warming up.

In a certain sense, ensure that you wear as exalted and exaggerated an expression as possible to go with your voice, body and instrument. A lot of people stop half-way in reaching this dynamic limit. Therefore, do not stop unless you finally have arrived at the extreme limit to facilitate you with a driving force to go through the next processes of improvisation.

Soloing

One Quality Sound, as people call it, marks the beginning of a spontaneous solo, in the same way that one small step is the prelude to a long journey. It refers to the only one note or tone that reveals your inner feelings when you are performing.

Inhale, and get ready to sing One Quality Sound, Then exhale, and let go of the sound that flies from deep down inside. Be it long or short, high or low; let this One Quality Sound last all through the exhalation. When you're singing, at the same time, listen with both ears.

Instead of letting your pitch rise and fall like an alarm, keeps your pitch going steadily like the dialling tone of a telephone. This is of great importance. It is the simplicity of showing your inner self that matters most right now.

The basis to achieve touching and approving improvisations lies in your intention to express how you feel in One Quality Sound. For that reason, practise singing One Quality Sound again, to express yourself totally before you move on.

Duets

Solo/Drone :

Here, the solo we are discussing refers to several "Quality Sounds" performed in sequence. We name the process when a musician leads a short solo and holds it to the end, a drone. To put it simply, a drone is a lasting note whose pitch keeps steady. Its volume or intensity may vary from time to time, while its pitch stays the same. Do as you like whenever you want to breathe in the middle of holding a drone, and go on droning afterwards. When the initial musician is done with his improvised melody, the other musician immediately follows him by playing his own solo after receiving his partner's signal. At this moment, the first player transfers to the drone, accompanying the other duettist. This process may continue over and over again until both musicians, strengthening their notes,

conclude their performance, by ending at the same time.

The following pieces of advice are for the singer in a duet who is performing for the first time. Ensure that your piece of music is concise, and that you have given priority to making eye contact and nodding, when your partner takes over to play the solo. When you are the soloist, you should make sure that you and the person holding the drone relate to each other, and also you should keep on listening and change your note accordingly. If you hold the drone for your partner, your volume level and understanding about the drone note shall be in line with the mood, volume level and intensity of the soloist.

Solo/Ostinato :

You can use a brief repeated rhythmic/melodic pattern, which is commonly called an ostinato (in a simple way, a groove), to take the place of the drone, so as to change the structure of the solo/drone. To a lot of people, this is much simpler than practising the solo/drone structure. Primarily, be sure that your form of ostinato is easy to understand. It is the 2-3 notes repeated one by one in a simple rhythmic pattern that will get an effective response. As for the plucked string instruments and percussion instruments, this form is perfectly suited to them.

In the musical treatment, it is through music that clients and therapists communicate with one another. Music reveals the clients' demands. Inspired and propelled by the changes, clients have the opportunity to gain a new outlook on themselves and their communities. Viewed from this aspect, Music Therapists are not only possessed of the ability of putting musical skills flexibly into practice, but also of the knowledge of pragmatic mechanisms and realising the relationship between musical activities and methods. All these qualities may be beneficial to clients by using improvisational skills in the musical treatment.

Improvisation is a very crucial method of Music Therapy. We can explain improvisation in Music Therapy as a tie in which clients and therapists are closely linked. Without planning in advance, a client makes up a melody, rhythm, song, or instrumental piece, while he is singing or playing. Music significantly affects the connection between therapists and clients in the course of clinical improvisation. Creating an improvisation falls into 3 major parts, an individual, a duet and a group. Various musical and non-musical media can be employed by the client according to his preference. Voice, body sound, percussion, and string, wind, and keyboard instruments belong to the musical media, while images, titles, and stories are part of the non-musical media.

Improvisation is a creative product with music involved. It facilitates the clients to come to know themselves and their relationship with others.

Improvisation also produces original and self-styled patterns of music. In clinical improvisation, clients are inclined to be more independent. Interactive improvisation is conducive to addressing problems because of its flexibility. Clients will become more socialised if they take an active part in an improvisational activity. In the academic fields and other creative arts, improvisation is bound to be used with high efficiency.

According to Bruscia, clinical goals that can be achieved through improvisation are as follows:

1. Establish a non-verbal channel of communication, and a bridge to verbal communication.
2. Provide a fulfilling means of self-expression and identity formation.
3. Explore various aspects of self in relation to others.
4. Develop the capacity for interpersonal intimacy.
5. Develop group skills.
6. Develop creativity, expressive freedom, and playfulness with various degrees of structure.
7. Stimulate and develop the senses.
8. Play, on the spot, with a decisiveness that invites clarity of intention.
9. Develop perceptual and cognitive skills.

People can improvise with or without musical references. On one hand, it is possible to improvise music with certain references (e.g., an event, emotion, visual image etc.) which is called referential improvisation. On the other hand, music improvised with no intentional reference, namely music for music's sake, is what we call non-referential improvisation.

8.2 Composition

Composing music is a creative work featuring a novel piece of music, or arrangement of a musical piece and the process of creating a new piece of music. The forms of music may be divided into the written composition and a single acoustic event. If the composition precedes the performance, musical performers can draw inspiration from their memory, written musical notation, or both. Different people and distinctive cultural backgrounds definitely have an influence on selecting the musical elements of the composition. Improvisation is created during the performance with musical elements marshalled. The method of composing means the process of creating a piece of music.

Writing musical notation, instrumentation, and handling musical ensembles are helpful techniques in composition. Besides these, some

other skills, namely, improvisation, musical montage, preparing instruments, using non-traditional instruments, and other methods of sound production can be used.

To make a composition suitable for musical instruments/ensembles are the arrangement and orchestration. The process of arranging or orchestrating may be taken over by a composer or arrangers who operate on the basis of the composer's main idea. The following factors are concerned with the arrangement of a composition: the intended audience type and scope, school of music, stylistic treatment, recorded or live performance, available musicians and instruments, commercial goals and economic limitations.

With all these factors in mind, composers or arrangers lay emphasis on the instrumentation of the original work. In modern times, composers are capable of writing for almost any mixture of instruments. Some common group settings include music for Full Orchestra, Wind Ensemble or a Chamber Group. The composer may also choose to write for only one instrument, in which case this is called a solo.

Not restricted by writing only for instruments, composers may also decide to write for voice, percussion or electronic instruments. However, just as with concrete music, the composer can use the sounds of typewriters, sirens and other sounds not related to the creation of music.

The objective of the research on Music Therapy is to discover the effects which therapeutic treatments have on clients. The programme of musical composition involves the creation of more music, whereas art composition is simply drawing, based on utilisation of the standard medium.

Innovative musical composition is composed of the creation of songs, lyrics and instrumental music whose type is not predetermined. A client is mostly interested in the process of creating a composition. But when a piece of work is composed by a therapist for the client, that is a different matter.

Therapeutic objectives in different regions are highlighted by the composition method. The development of skills for creative problem solving and the recording of internal experiences are among the general objectives. An advantage of group musical composition is that it cultivates co-operative learning and feelings, thoughts and the sharing of experiences. A medical song with a specific purpose for a client contributes to the facilitation of self-awareness and catharsis, as well as support for important moments in the therapeutic process.

8.3 Interpretation

In the process of musical interpretation, a model is established

through the performance of the client after he/she learns a certain song or acquires the capacity to play a musical instrument. Structured musical activities and games are often involved in the process of interpretation. In these activities, the client is supposed to play particular roles or to perform certain actions which were previously arranged. Thus we can see the creative nature of musical interpretation which is more than a simple reproduction of songs. Unlike the musical improvisation approach, musical interpretation clearly demonstrates the limitations of a client's spontaneity, which is regarded as the forte of the approach. Unlikely to be developed without a certain and previously designed plan, this method requires the client's participation in the musical situations.

Patients who suffer from Autism, etc. are most suitable for the musical interpretation treatment, with a predetermined plan by which they can build a self-disciplined character, and acquire behavioural patterns through role-play.

In the process, the client should play by the rules and follow the instructions of the therapist. Just as with musical improvisation, musical interpretation can be classified into different types, determined by the participation of the audience before the physical games, musical performance and singing, and by the involvement of musical instruments, games, etc.

Singing songs or lessons, singing in the form of gestures, vocal imitation and melody lessons are all specific areas of vocalisation. Clients are supposed to take part in the area of vocal interpretation.

In many sectors of clinical practice, singing songs is adopted as the most common method of vocal interpretation. After receiving periods of treatment, or to be exact, singing songs for a certain period of time, articulation, speaking rhythm and respiratory control are improved for people with speech defects. Regarding those with intellectual disabilities, their vocabulary and memory show significant improvement. One reason for these effects is that lyrics and the musical arrangement of a song can provide a time and space order, a sequence of daytime activities, which as a result eases the client's orientation. Seniors can recall significant events in their lives. Each client can attach himself to a song and its text. Songs of the proper kind offer us the necessary background and emotional support; some may even convey to us further messages or stories.

Singing together or group singing offers singers a common ground as well as anonymity and relaxation. Besides, traditions are shared at the same time; this socio-cultural value should not be forgotten. Both the content and words of a song are of great importance for the client.

As suggested by P. Nordoff and C. Robbins, words and the related accompaniment of songs should be remembered by heart. After this, the therapists can focus on the client or group, and then make modifications

of time, dynamics and phrasing in order to suit the needs of the client. Voice range is a key factor when selecting songs and song keys for children.

Musical instruments lay the basis for interpretive activities. Interpretive activities represent playing instrumental songs, practising in an instrumental group and using instruments to perform imitative tasks. Playing an instrumental part in a recording is also one component of interpretive activities.

Self-discipline, obedience and the ability to empathise with others' feelings are nurtured through instrumental interpretive activities. Imitative skills also get support from these activities. The instrumental interpretation topic is another matter. The ability to accept restrictions and self-consciousness are vital, this point should be clearly realised. In playing an instrument, such objectives as motor skills, auditory and visual perception, memory and social skills are partly achieved.

The traditional teaching of the playing a musical instrument is a representation of instrumental interpretation.

There are basically two forms of instrumental interpretive activities: one is imitation and the other is using some kind of notation to give lessons. As for the former teaching style, a therapist will directly imitate the playing style. Due to its complexity, not every client can adopt the traditional notation record system. Thereafter, simple notational systems which are made up of single figures and colours have been created in order to solve this problem. To create a simple notational system is within our ability and sometimes a client can also help us.

It is possible to attach the real names of the notes to keys and these names will be used in a notation rather than musical labels. All these become possible because of the piano. Images are of great help to clients who have severe mental disabilities, especially to children at a young age. These images make the story of the songs or unique objects life-like, thus blending the practice of instrument playing and singing together.

The planning and execution of a musical play or drama, recital and other types of music in public are always fields in which the client participates. Every performance of a musical production requires an audience. But the audience varies from situation to situation. It may be the general public, hospital patients, staff of treatment facilities or members of a therapeutic group, etc.

Clients regain their self-confidence, assertiveness and self-discipline by means of musical performances. Through the whole process of the performance, responsibility is also reflected. Self-planning of a musical production is also an important opportunity for the clients to form a clear concept of their visions and ideas.

Handicapped or impaired children and young people, psychiatric

clients, the elderly and patients may obtain psychosocial rehabilitation as a result of musical performances.

A rehearsal is necessary in advance to practise such details as the performance order, the entrance and exit from the stage, as well as thanks to the audience at the end. The exact time and story, plus the order of the songs all have to be kept in mind. At the same time, other factors, such as the presentation of the show and communication signals should not be forgotten.

Another technique and method of Music Therapy is listening to music. We will mention it in the next Chapter.

9. Listening in Music Therapy

The ear is not only our organ of hearing, but is also responsible for our balance control system. Furthermore, additional investigation of its role in evolution and throughout prenatal life proves that it has many more functions in human development. The creation of music and music in itself, to some extent, reflects how our ears work. Rhythm and melody combined beget music. The rhythmic dimension of music interrelates with the working of the vestibular system. We dance to music, for rhythms both induce and convey movement and our body reacts accordingly with the stimulation of the rhythms and thus we gradually obtain a better sense of our body in space. By exposing ourselves to music (listening, playing or singing), we are simply performing an excellent exercise for our ears. In the process, one may discover possible sound combinations, tonal differentiations and the brilliant integration of the human voice and musical instruments. During a child's formative years, when he or she starts to transpose sounds into letters, music performs a vital role. From visual image to auditory sound, reading out loud completes the process, while the same applies in reverse to writing. Usually the parts of the brain which music stimulates differ widely and this depends on the style of music. A case in point is we have different genres of music that can generate our physical energy and mental energy respectively.

It has been proved that music contributes significantly to human development, self-actualisation and, above all, to the speech mechanism. With all benefits that music can carry, it is no surprise that music therapy, using the method of music listening, is growing in popularity.

During therapeutic listening, the client reflects the music using verbal and non-verbal means. Music evokes his memories and associations and discovers the reserves of his intimate imagination. When preparing the lessons, the therapist must take into account the client's preferences and experiences, the length of his possible concentration and the therapeutic aim, which will determine the choice of the repertoire. At the same time, it is necessary to watch the client's receptive abilities and attention for the given discipline.

There are many different methods connected with a special repertoire which follows specific aims of healing and relaxation. Let us remind ourselves of some of these with a brief selection. Musical Anaesthesia is a kind of listening to music with an aim of heightening the healing effects of anaesthetic medicaments and of increasing the pain threshold.

The Music Relaxation method is listening, leading to the reduction of stress, tension and anxiety. In Meditative Listening, the music assists the client's contemplation. Simulative Listening helps to support the senses and orientation in the real world.

Eurhythmic Listening assists in the rhythmic organisation and monitoring of the client's motor behaviour including the speech, breathing and bodily experiences and even the quality of dance steps. In Mediatonal Listening, music is used as a strategy to assist the client in learning, acquiring knowledge and the accumulation of information.

Several related MT methods exist, as follows:

Song/ Music Reminiscence, where listening to music evokes the client's memories of past times and experiences in his life.

Song/ Music Regression, where the therapist offers music which leads the client to go through the past again, not in the form of reminiscences, but by following and recreating actual events.

The method of Inductive Song/ Music Recall is hidden in the name itself of this MT. The therapist asks the client which song or music comes to mind in connection with problems and events which took place during the healing process.

In Song/ Lyric Discussion the therapist provides a song which serves as a bridge for questions and answers between healer and patient.

Imaginable Listening represents an important method, which serves to support and evoke the imaginative processes and inner experiences of the client. (Several categories of this method exist: Directed, Unguided, Guided, and Guided Interactive Music Imagination).

The last type of these methods, called Projective Listening, we chose as a principal procedure for tests with students and we will discuss it in the Chapter 12.

After the description of various methods of Music Listening, let us mention some advice by experienced therapists on how to choose a repertoire.

Some of them recommend working with music without scores, as those rational elements limit the level of emotions. Some of them advocate the use of a popular repertoire, known to the client, who can then sing and play along at the same time. In opposition to this, some therapists approve the use of an unknown repertoire because it bears quite unknown, fresh and surprising impressions. And we can find other contrasting opinions. Compositions built on the principle of pregnant musical contrasts (polythematic or bithematic, such as sonata form, rondo) bear the symbols of conflict which the patient has to solve. Compositions of monothematic character (fugue, variations) demand great concentration of the client's mind. (Ch. Schwabe recommends beginning with the polythematic and continuing with the monothematic.)

A repertoire of music for listening contains not only classical music but also popular genres, jazz music, folk music or liturgical music.

Some therapists prefer compositions which cause so-called positive emotional reactions. (It is identical with Platon's idea of the ethical

approach.) Some therapists declare that music with a negative emotional force is not without effect for clients who seek the Aristotle Catharsis.

A list of repertoires recommended for MT sessions have been written in several volumes, which can be found on the Internet.

Among these, the book, "Die Musikalische Hausapotheke" ("The Musical Home Pharmacy") takes a specific stand. Its author, Christoph Rueger, is an expert on the History of Music, with an extensive knowledge of the biographies and repertoires of composers from the oldest music to contemporary music. And what is more, he is an excellent pianist. The quotation at the beginning of his book is: "Music is a remedy for the soul".

In the Introduction, he states that, when choosing and explaining music, usually he uses two procedures. The first is a method of Music Therapy. For moderating certain problems, he uses music of a similar mood; after listening to it, the client has to listen to a repertoire of the opposite type of expression. The second method for Rueger is the method of Analogy which has not been used very often until now. When choosing the repertoire, the therapist has to discover the psychical state of the composer, who was in a similar situation when composing his work. Rueger examines the biographies of composers, in seeking suitable compositions which can help the client in the process of healing. The chapters of his domestic pharmacy correspond with 23 emotions and situations such as: Aggression, Fear, Stimulation, Solitude, Disappointment, Growing Old, Tiredness, Merry-making, Expectation, Illness, Love Problems, Apathy, Melancholy, Conflict, Death, and Depression etc.

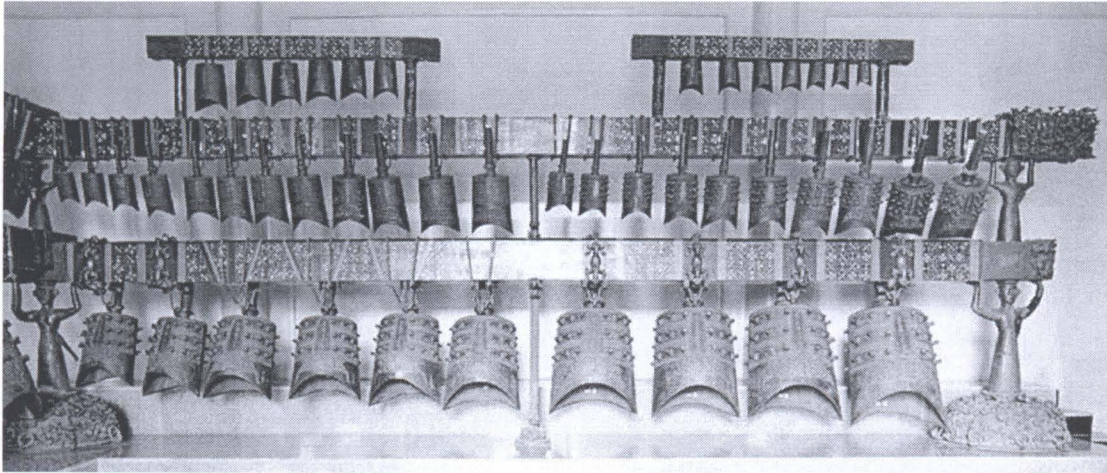
At the beginning of each individual chapter, Rueger uses quotations by composers who demonstrate similar feelings. Thus Aggression has the quotation: H. Berlioz: "I was furious as a dog tied to a chain." And after some calm scores, Ruegger recommends listening to Stravinsky - The Rite of the Spring, A. Borodin - Prince Igor, Musorgsky - The Night on Bald Mountain, or Black Mass (Sonata for Piano n.9) by A. Skryabin. The chapter on Fear opens with the quotation by R. Schumann: "I feel as I- miserable one- is losing the mind..." And the repertoire evoking similar emotions has to be, for example, P. I. Tchaikovsky- Francesca Rimini, B. Bartók - Bluebeard's Castle, A. Schoenberg- Expectation, or Symphony n. 7 (Leningrad symphony) by D. Shostakovich.

Some therapists have elaborated on the list of recommended and most popular repertoires used in the treatment of patients by means of music. Due to the vast volume of these registers, I only refer to their existence.

10. Chinese Instruments

Traditional Chinese musical instruments comprise a varied range of string, wind, and percussion instruments. Traditionally, they were classified according to the materials used in their construction. Chinese instruments are very symbolic and unique. They are used for a variety of music. In this chapter I will introduce five most popular and traditional Chinese instruments. They may fit in with Music Therapy Activities.

BIANZHONG



The Bianzhong is known as the most attractive and special percussion instrument in China. It consists of a set of flat, rounded bronze bells hung on a big rack. When playing, the performer strikes the bells with metal sticks or a long rod to produce different tones.

Four thousand years ago, a Bianzhong made from clay first made its appearance. In the Shang Dynasty (1600 - 1046 BC), the material used was copper. It was in the Zhou Dynasty that the Bianzhong decorated with bronze became the major Court musical instrument. However, the Bianzhong declined due to the cost and metallurgical skill necessary for its manufacture, from the time of the Han Dynasty (206 BC - 220 AD) onwards.

Chinese archaeologists discovered a set of 65 Bianzhong in the tomb of Marquis Yi, who lived in the Warring States Period (475 - 221 BC). After nearly 2500 years, this set of instruments can still produce music and covers a range of almost five octaves. In celebrating Hong Kong's reunification with China, this set of Bianzhong was used in "Symphony 1997" conducted by Tandu, a famous Chinese composer. Today, most 65-piece Bianzhong are made in the mode of this set of Bianzhong.

The Bianzhong differs from other kinds of casting bells in many ways.

Striking two sides of the bells on the Bianzhong can produce two quite different sounds. This is one of the most distinctive features of the instrument. The concave-shaped bottom focuses the sound waves. The bosses on the surface, which play a more important role, are used to isolate competing sounds. Owing to its twin-tone capability, a set of Bianzhong can produce a complete 12-tone scale, which was discovered 2000 years earlier than the European 12-tone system. Melodies in diatonic and pentatonic scales may also be performed on the Bianzhong. The interval between these notes on each bell is either a major or minor third, equivalent to a distance of four or five notes on a piano.

ERHU (two-string fiddle)



The history of the Erhu, an ancient Chinese instrument, dates back nearly 1000 years. The Erhu, as a member of the huqin family, is one of

the commonly-used bowed instruments which gained popularity in the Sung Dynasty (A.D. 960-1279). During playing, a bow is pushed and pulled between its two strings. The snakeskin on its sound box makes the tone quite special.

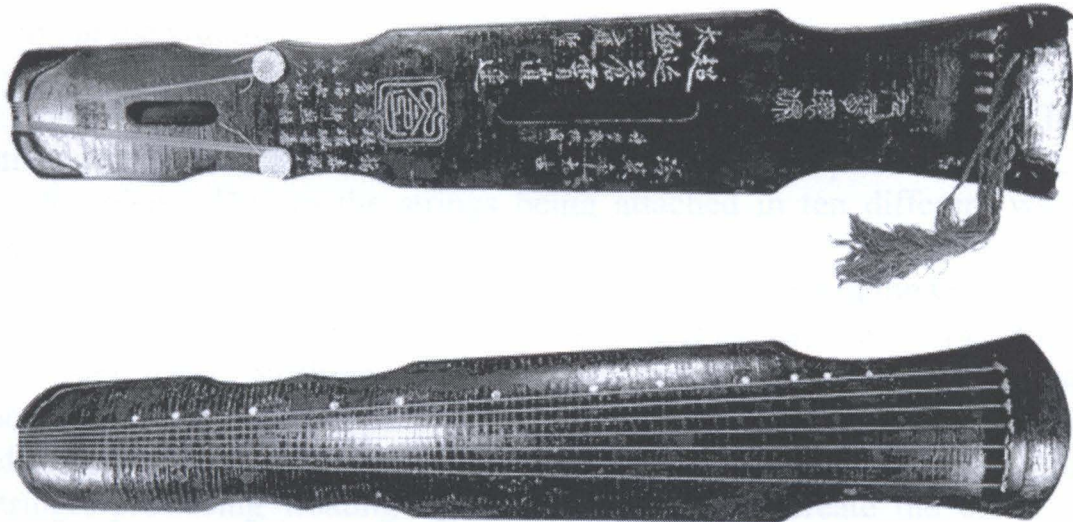
Along with the rise of different kinds of dialectical operas, the Erhu grew into a large family with various instruments. Between the 1920s and 1930s, Liu Tianhua (1895-1932), a famous Chinese musician and educator, improved the Erhu and made of it a professional musical instrument. Its body is made of high-quality wood, with python skin covering the sound box. The bow is made of bamboo and strung with horsehair. The strings fall into five tones. The works played by the Erhu employ a syncopated rhythm with a strong driving force, for which skilful finger techniques are required. It is for this reason that the Erhu serves as the leading musical instrument in traditional musical ensembles.

Due to constant improvement throughout history, the tone of the Erhu now sounds mellow and bright, similar to that of the violin, but with more feeling and expression. The low tone of the Erhu is powerful, the middle one, gentle, and the high tone, clear and bright. This mutable feature of the Erhu makes it possible to express various moods.

The Erhu, which needs various techniques to be played, enjoys great popularity not only in solo but also in orchestral performances. The sound produced by the Erhu in the traditional way is melodious, graceful, leaping, vigorous and full of excited emotion, which provides the possibility of awakening the imagination of its listeners.

The attitude when playing the Erhu: Hold the body of the Erhu in the left hand, with the bow in the right. Placing the body of the Erhu vertically on the lap, music is heard when the bow is drawn across the strings. The left hand slides up and down the instrument, while the fingers press the strings to create the desired pitch and "sliding" effects. The right hand pushes the horsehair against the strings while moving horizontally, in order to create the sounds on either side of the two strings. As when playing the saxophone, sometimes the Erhu performer attaches the instrument with a shoulder strap, so that the Erhu may be played while standing or walking. But unless it is absolutely necessary, people seldom play in this manner, because it is not very traditional or elegant to play while standing up. In the past, street performers used the standing up playing method. Today, it is convenient for Pop or Rock bands to use the standing position when performing.

GUQIN



The Guqin has a 3000-year history, and is regarded as the oldest stringed instrument in China. The essence of Chinese music can be expressed by the Guqin better than by any other instrument. A great variety of tones can be produced by the seven strings. Its timbre is elegant, lively and deep. In Ancient China, a respected knowledgeable scholar was supposed to have a good mastery of four arts: Qin (guqin), Qi (the game of GO), Shu (calligraphy) and Hua (painting)

History

In Chinese, “guqin” can be divided into two characters, one meaning “old”, the other meaning “musical instrument”. In most Ancient Chinese literature, “guqin” was recorded as “qin”. Because it has such a long history, 100 years ago people began calling it “Guqin” (“old musical instrument”).

The Guqin can produce more than 100 kinds of harmonics, much more than any other musical instrument. The notation of the Guqin is unique, with a history of at least 1500 years.

The Guqin itself has many symbolic connotations. The length of it denotes the 365 days of a year. Its surface shape is round, symbolizing the sky; its bottom is flat, symbolizing the earth. The five strings of the original Guqin are regarded as the symbol of the 5 basic elements: Metal, Wood, Water, Fire and Earth.

The sixth string of the Guqin was added by Emperor Wen, in the Zhou Dynasty (about 1115 BC). He did this in memory of his dead son, Boyikao, whose name the sound of this string resembles.

Guqin music was proclaimed as one of the Masterpieces of the Oral and Intangible Heritage of Humanity by UNESCO, in 2003.

Playing the Guqin:

There are seven strings and thirteen marked pitches on the Guqin. The strings can produce tones in a bass register. Its lowest pitch is about C2 on the piano. Due to the strings being attached in ten different ways, performers can play four octaves.

There are three basic playing techniques when playing the Guqin: san (open string), an (stopped string) and fan (harmonics). San is played by the right hand, plucking strings one by one or together, to produce powerful, clear sounds in the major notes. When playing fan, the fingers of the left hand press the strings lightly, while the right hand plucks the strings, producing floating light overtones, which create the effect of various ornaments and vibratos.

PIPA



The Pipa is a traditional Chinese plucked instrument. This wooden pear-shaped instrument has four strings. With 12 or 26 frets, the Pipa

looks like a small-sized Chinese Liuqin or lute (a traditional musical instrument in China). The Pipa made its first appearance in the Qin Dynasty and was developed in the Han Dynasty. Today, the Pipa still enjoys popularity, Chinese musicians prefer it and it is believed to have a bright future. The Pipa is not unique to China, it is called the Biwa and Dantya, in Japan and Vietnam respectively. In Korea, it has the same name as in China, but is no longer played there.

History

The Pipa was recorded in historical literature as dating back to 200 BC. The Han Dynasty (206 BC - 220 AD) witnessed a great number of records of the music of the Pipa and the stories that inspired the composition of those Pipa pieces. The Pipa has been one of the most popular Chinese instruments since the Tang Dynasty (618-907), and has maintained its appeal, not only in solo but also in chamber genres. The playing technique of the Pipa depends mainly on finger skills and virtuoso programmatic effects. Techniques like rolls, slaps, pizzicato and harmonics are used in the Pipa, not only to produce the sound effects of famous historical battles, but also to create the lyrical, artistic concepts which are reflected in poetic, landscape and historical themes. For centuries, Pipa music has been popular among the Chinese people. There used to be a large number of repertoires of Pipa music. Unfortunately, most of these have been lost, the rest have been passed down from generation to generation of artists and scholars.

Usually, the Pipa is played singly. Sometimes, it is performed in folk ensembles such as traditional "silk and bamboo ensembles" which are commonly heard in South-East China, or it may be played to accompany story-telling or local opera. Today, the Pipa is increasingly found in the newly-formed ensembles or orchestras, in which both Chinese and Western instruments are used. The typical works of such artistic format is the Pipa concerto with a Western orchestra.

The Pipa was often mentioned in the poetry of the Tang Dynasty, in which it was highly appreciated for its pure and understated melody. Baijuyi, a poet in the Tang Dynasty, described a female Pipa player on the Yangtze River in his poem, "*Pipa Xing*" ([Pipa Play](#))

The bold strings rattled like splatters of sudden rain,
The fine strings hummed like lovers' whispers.
Chattering and pattering, pattering and chattering,
As pearls, large and small, on a jade plate fall.

Playing Pipa:

The Pipa could be divided into two Chinese characters, Pi and Pa, -Pi meaning pushing the right hand fingers from right to left; Pa meaning

pulling the right thumb from left to right. Actually, Pi and Pa represent the two basic playing methods of the Pipa. In the Tang Dynasty, the Pipa was played with a large plectrum. Gradually, people got used to playing without it, only using the fingers. With the reformed instrument, the soft silk strings were replaced by nylon-wound steel strings. However, the new strings are too strong for the hands, so today when playing; performers wear artificial nails, which are made from plastic or tortoise-shell, to prevent injury to their fingernails.

YANGQIN



501 扬琴

The Yangqin, a kind of Chinese hammered dulcimer, was introduced from the Ancient Middle East to China. The traditional Yangqin, is a butterfly-shaped musical instrument, between 90 and 97 centimetres in length. The strings are made of metal, stretched across the top of the surface, under which two rows of bridges are used to support the body of the instrument, and attached to pins on the left and tuning pegs on the

right. The Yangqin finds its niche as an accompaniment to narrative-telling, singing, as well as in solos, ensembles or local operas. The Yangqin may fall into three types, in terms of its strings, including: eight-string, ten-string and twelve-string instruments.

Playing Yangqin:

When playing, the performer uses two bamboo mallets to pluck the strings. Today, a new type of tunable Yangqin, which can be seen in instrumental folk ensembles, narrative song performances and in regional operas, is increasingly played by modern musicians.

The Yangqin is in the same family of instruments as the piano, as they are all regarded as hammered dulcimers whose sound is produced by striking key-hammers. The difference between the Yangqin and piano is that, in the piano, a separate hammer is used for each string, while on the Yangqin, all the strings are plucked by two “hand-held” wooden or bamboo hammers. In addition, the piano can produce a ten-note chord, while a four-note chord can be produced by the Yangqin.

The Yangqin made its first appearance in China in the Ming Dynasty (1368-1644). Soon after, it was adopted and became popular among traditional Chinese musical artists. The opinion of the Yangqin’s entry into China varies among historians. Some believe that the Yangqin was introduced via “The Silk Road” on land, while others hold the idea that it was brought to China by sea. There are still some who hold the opinion that the Yangqin was the invention of the Chinese. The first recorded mention of the Yangqin was in *Aomen Jilue* (A Brief History of Macao), written by two local Chinese magistrates in 1751.

The modern type of Yangqin has 200 different strings of various diameters, which are fixed at the edge of the Yangqin by screws. Usually, a Yangqin has four or five bridges (the chromatic, the right, the tenor, the left and the bass bridges). Metal-made cylindrical nuts, slightly higher than the strings, located at both sides of the body of the Yangqin, are there to eliminate string vibrations.

The Yangqin is played with two small, light hammer-like strikers, which are made of wood or bamboo. Rubber fully surrounds the end of the striker to be held by the performer, while the other side is half-surrounded, in order to produce a more percussive sound.

Traditionally, bronze strings are used in the Yangqin for a soft timbre. Since the 1950s, bronze strings have given way to steel alloy and copper-wound steel strings which can produce brighter, louder or bass notes respectively. Another change is that the modern Yangqin has five chromatically-arranged bridge courses, while there are three in the traditional instrument.

11. My Concepts of Educative Music Therapy

Activities for Students

In this Chapter, I choose six activities which use Chinese instruments for music therapy. They are stated in general way, for specific uses of teachers, they could be changed according to different situations, students' levels, and environments.

Activity 1

Materials needed:

1. A chair in the middle of the room
2. Chinese instruments.
3. A blindfold.

OBJECTIVES:

1. To help reinforce listening skills.
2. To help children in knowing the particular sounds of certain instruments.

GAME:

1. Choose a student to sit in the chair and blindfold him/her.
2. Choose an instrument and go to certain place in the classroom.
3. Begin to play the instrument with a continuous rhythmic pattern.
4. Ask the blindfolded student to stand up and walk toward the sound. (Make sure that their hands are outstretched as to assist them finding the sound)
5. Once they've found you, have them name the instrument being played. If they name correctly, then they get to choose an instrument to play and they choose a student to be the "blindfolded one".

Activity 2

This is a great way to reinforce the identification of instruments and the use of auditory cues. The students start out by playing a song they have already known.

Before the children come into the room, lay out enough Chinese instruments in a circle for 1/2 or the whole class.

Greet students at the door and tell them to go stand behind an instrument in the circle with "waiting hands" behind their back. When everyone is in place we discuss loud and soft and then we name the instruments. Then we play the activity along with the record.

After we finish "Play Soft, Play Loud", the students are already in place for the next activity. Teacher play music with a really strong beat and they walk around the instruments in the circle. When teacher stop the music, she/he sing a little phrase like "play, play your instruments, play, play your instruments, play, play your instruments, and have a lot of fun." When teacher sing this, it is the verbal/auditory clue for them to play their instruments. When teacher turn the music back on, they know it is time to walk around the circle again and listen for the next cue to play an instrument.

Activity 3 SESSION 1

Tell the class that they are going to learn how pictures can represent sounds telling us when to play and when to stay silent.

Divide the children up into 3 groups
Choose three instruments and the pictures of the instruments
Each group to have an instrument relating to that group.

Demonstrate how they will know when to play when they see a picture that represents their group of instruments. Say when their picture is shown, they must play, if their picture is not shown, then they must remain silent. The children are to play as long as the symbol is shown for. Get them to play quietly, loudly, medium loud, getting louder and quieter gradually.

Choose who can now become the leader to hold up the picture.

Now stick the 3 pictures in a row. The conductor this time will point to the sign representing the groups. Again the group will play for as long as the conductor points to the picture before moving along.

SESSION 2

In groups again as the first session (children can swap groups if they want) and point out again how the pictures can represent sounds. Today, tell the class that they are going to see what happens when we combine more than one sound, using the pictures.

Let each group practice individually performing quietly, loudly, medium loud etc....get a child to hold pictures like last time.

Activity 4

Goals:

To correctly use classroom instruments

Materials:

Recording of chosen song

Classroom instruments

Procedure:

1. Choose a song that the class has been working on. Have the students list all instruments that they hear playing throughout the piece. List all correct instruments on the board.
2. Show the students each instrument you have laying out and ask them how to play each one. Put out enough instruments so that there are at least two students per instrument type, preferably more depending on class size.
3. Lead the class by choosing one instrument and playing along with the song recording. As a class, decide whether that instrument sounds good with the recording, or if another one should be chosen.
4. Next decide how many measures you want each instrument to play and write the number next to the instrument name on the board. Practice without the recording and have students perform on instruments when indicated.
5. Now decide on a rhythm for each instrument to play. A suggestion would be to have high-pitched instruments play faster rhythms with more eighth note patterns, and low-pitched instruments play slower rhythms with more quarter notes and rests. That way the low-pitched instruments serve as a bass line for everyone else.
6. Practice playing the song without the recording to make sure everyone knows when, where and what to play. Go over any trouble spots and take suggestions for changes as you go.
7. Try the song with the recording, pointing to each rhythm as it appears. On the first run-through, it may be helpful to call out each instrument name to keep them on track.
8. Try it a few more times, then switch instruments.

Activity 5

Objective:

Students will compose an instrumental piece using pictures.

Materials Needed:

Poster board with pictures of instruments presented on it
Chinese instruments used in group improvisation

Process:

As a class, look at the pictures of instruments on the poster board. Choose four pictures which are some certain situations. Have one student select an instrument to represent one of the pictures. Choose another student to select a different instrument for another picture until four instruments have been chosen.

- 1 . Ask students why they chose their instruments.
- 2 . Divide the class into four groups, each group representing a picture.
- 3 . Hand out the selected instruments to the students.
- 4 . Point to a picture. The group assigned to that picture plays their instrument. More than one picture may be selected at once. Dynamics may also be added.

Closing:

How did it feel to compose music together as a class?

Would you change any of the instruments that were selected for the piece?
Why?

What would you name this piece of music? Why ?

Activity 6

Goals:

1. Students will list different emotions and understand how each relate to specific situations.
2. Students will choose musical instruments that describe a certain emotion.
3. Students will discuss their feelings and reason why they chose the specific instrument.

Materials: Guqin, Bianzhong, Yangqin, Erhu, Pipa, Chinese drums of

different sizes/types, construction paper faces with different emotional expressions

Procedures:

1. Lead students in a discussion on emotions and feelings. Provide students with examples of situations that involve these emotions. As the students say emotions, the teacher will list them on the board.
2. Instruct students that they are going to choose musical instruments that describe certain emotions. Demonstrate an example of this using the emotion of anger and beating on a drum.
3. Discuss with students what other instruments they might use to describe anger. Assign students to groups of four and give each group several emotions to describe with instruments. As the students discuss, monitor behavior and listen to different opinions.
4. Students will spend 5 minutes discussing before they choose instruments. After students choose instruments, hang a construction face on the blackboard and have each group play the instruments that they chose for that emotion. Discuss if they would have picked the same instruments for the emotion listed.
5. Students will individually explain why they would have picked the same instrument or a different one to describe an emotion.

Evaluation:

Teacher will ask if students understand why each instrument was chosen and the reasoning that each group gave.

12. Tests from Czech and Chinese Schools

Analysis of Tests on Two Cultural Groups

Aim:

I have been living in Prague for six years. I realise that there are many differences in culture, religion, history, education and music. I assumed that students who come from the Czech Republic and China would have quite diverse feelings and imagination when listening to the same music. No matter whether the results are good or not, we can see the problems, the reactions and differences from the elaborated texts and, according to the results, maybe we can improve therapeutic processes and the games concepts for Music Therapy in future. It would also be a great advantage for Czech students to become acquainted with Chinese musical instruments.

Materials:

I prepared five big pictures of the main Chinese instruments, a brief introduction for each, three recordings of Chinese traditional music, questionnaires, and colour pencils.

Objects:

Two groups of Czech students (Primary Schools and the Prague Conservatory) aged approximately 15-19 years. We worked with 18 students.

One group of Chinese students aged approximately 15-19 years. We worked with 15 students.

Method:

In this case, I used the Receptive Music Therapy Method by CD player, a method which I mentioned in a previous chapter. Firstly, let me repeat that the music listening experience can stimulate reactions and effect changes in a client's physical, psychological, cognitive, social, developmental, aesthetic and spiritual domains. Music listening may be used to promote psychological insight, enhance relaxation, evoke imagery, alter mood, etc. When compared to other Music Therapy methods, receptive approaches are also easier for the beginner to use.

One of the receptive methods is called Projective Listening, which seemed to me the most suitable for work with students. Therefore I used it for tests at the Prague Conservatory and the Korunovační Primary School.

Working with this method, the therapist presents the selected music and asks the client to identify with it. The client has to describe, perform and pronounce his free associations by verbal and non-verbal means.

This Projective Listening contains for example: Projective Sound, Projective Storytelling (after listening, the client has to narrate or write his story), Free Association (during listening, the client writes whatever he likes, without paying attention to the content of the text), Music Dramatisation (using dramatic means, the client demonstrates what he hears in the music) and Projective Drawing to Music (the client draws while listening).

Process:

1. I gave a short introduction about Chinese music and showed the pictures of each instrument.
2. I gave the questionnaires and colour pencils to the students and explained how to reply to the questions.
3. I played the recording, and let them listen to the music. After each piece, I gave the students time to fill in the questionnaire and to draw some pictures to express their feelings.
4. After I had collected all the questionnaires, I told them the meaning and expression of every composition they had listened to.

Detailed description of my work at schools:

1. Information about Chinese cultural traditions, vocal and instrumental music, the Peking Opera, the pentatonic scale, and instruments such as the bianzhong, pipa, erhu and yangqin.
2. Task for students: you will listen to 3 instrumental compositions, all of these are programmatic, all of them belong to the old traditional repertoire popular in China, the composers of these pieces are anonymous.
3. Then we listened to the first two examples (Flowing Water, Ambush on all Sides) without telling the students their titles.
4. We asked students what kind of emotions, psychical states the compositions evoked in their minds (Please write a maximum of 5 key

- words. For inspiration, we can recommend, without reducing your imagination which may be more original, some examples: delight, pleasure, enthusiasm, calm, expectation, excitement, relief, sadness, fear, anxiety, nostalgia, dejection, anger, a feeling of danger.)
5. Then we listened to the 3rd example (Big Wild Goose Catching the Swan). Our introduction: At first, we take into account your imagination and, secondly, the ability of programmatic music to narrate some stories. Once more, we shall not disclose to you the title of the composition, but we ask you: what is this composition about? While listening, let your mind work with free associations and try to write a short story. It can be connected with your previous experiences or it can be something created only in your imagination.
 6. Does the music evoke any colour in your imagination? If so, which one? (We know composers who feel music associated with colours, such as Messiaen, Rimsky-Korsakov, Berlioz, Liszt).
 7. Draw a picture inspired by your listening (you can use symbols or draw a story).

Hypothesis:

- a. We work with positive and negative emotions (although we know that this division is not formally used). We wondered if this division could also be expected from the respondents of the tests.
- b. We wanted to examine whether programmatic music could evoke imagination identical with the subject of the compositions.
- c. We wanted to discover if the images were so strong and authoritative that they could influence the majority of respondents in the same way.
- d. We wanted to research the Czech students' perception of Chinese musical instruments. We wanted to learn if some archetypal situations exist which evoke similar images.
- e. We wanted to examine what types of subjects were expressed in the students' drawings.

Results:

Generally, we may conclude that, comparing these two tests, we find that the group of Chinese students know and describe the music better, because they are living and growing up in this culture. But regarding imagination, Czech students, when listening to the recordings, have greater fantasy in their minds and their thinking is freer and less inhibited

than Chinese students. From this point of view, I think the GIM method of Music Therapy will be more suited to Chinese students; this method will assist Chinese students more, developing their thinking and fantasy.

Some Chinese students (of older age) could probably know the repertoire of chosen compositions. Therefore their reaction and valuation of the listening were more credible. The tests of Chinese students also disclosed how different can be the manuscript of individual pupils, according to the demanding construction of the characters.

Detailed results:

76% of the students divided positive and negative emotions according to the subject to the composition.

39% of the key words used were identical with the title of the composition.

20% of the key words used were topics very close to the title of the composition.

33% of the students, in the pictures they drew, used themes which disclosed their previous knowledge of China. Their sources could be magazine articles, books and, especially, films. (Somebody drew the monk training Wu Shu).

7% of the Czech students rejected the listening as “horrible”, “awful”, “boring”, “terrible”, “monstrous”, “shocking”. (We may assume that this was a group of bad students who would even refuse to listen to a Czech repertoire.)

Results of Czech Students

19% of the students divided positive and negative emotions according to the subject to the composition.

12% of the key words used were identical with the title of the composition.

4% of the key words used were topics very close to the title of the composition.

20% of the students, in the pictures they drew, used themes which disclosed their previous knowledge of China. Their sources could be magazine articles, books and, especially, films. (Somebody drew the monk training Wu Shu).

7% of the Czech students rejected the listening as “horrible”, “awful”, “boring”, “terrible”, “monstrous”, “shocking”. (We may assume that this was a group of bad students who would even refuse to listen to a Czech repertoire.)

Results of Chinese

- 57% of the students divided positive and negative emotions according to the subject to the composition.
- 27% of the key words used were identical with the title of the composition.
- 16% of the key words used were topics very close to the title of the composition.
- 13% of the students, in the pictures they drew, used themes which disclosed their previous knowledge of China. Their sources could be magazine articles, books and, especially, films. (Somebody drew the monk training Wu Shu).
- 0% of the Chinese students rejected the listening.

CONCLUSION

In my thesis I am searching Music Therapy, this fascinating area. It is an old but as the same time very up-to-date subject. Music has been a medium of therapy for centuries. It can be traced from Ancient times till now. Over the last seventy years, music therapy developed as a clinically applied and systematic discipline.

Music Therapy is based on many subjects, such as Music Psychology, Music Education, and Physiotherapy and so on. Models or Methods are very important in Music Therapy. They are the ways that can be directly used on clients. I described several internationally well-known and acknowledged models which approach to the subject both from music psychology and music education, such as GIM, Improvisational Music Therapy, Clinical Orff-Schulwerk, Kodaly methods, etc. Some used techniques are quite similar to Music Education; I mean for example, improvisation, composition, listening and interpretation. By my understanding, Music Therapy can be concerned as a kind of education, which can guide and educate human's inside world.

In the later chapters, I introduced five Chinese instruments and used Chinese traditional music in the tests as an initial therapeutic process. Both in Europe and Asia, they have very strong tradition for using piano, violin or other percussion instruments in Music Therapy. I just think it may be a good idea to use Chinese instruments in Music Therapy, especially in China. Because Chinese people know these instruments better. According to this idea, I also made some activities for these instruments. I hope they can be useful for the future work in this branch.

After the thesis, I obtained lots of knowledge about Music Therapy. It must be very helpful in my future study. I am very glad that I chose the subject that I really like and paid much passion on it.

SUMMARY

This diploma dissertation consists of twelve chapters which focus on the history, definitions, models, methods, forms, techniques, Chinese instruments, school's tests and activities of Music Therapy.

The first chapter indicates general information about Music Therapy and covers the formal definition of the term. The second chapter includes the history of Music Therapy, from Ancient time to the 20th century. In the third chapter I mentioned the foundation of Music Therapy from physical, emotional, social and aesthetic point of view. The fourth chapter describes the relations of Music Therapy and other disciplines which are Music Education and Music Psychology. The fifth chapter is dedicated to the most important prototype models in Music Therapy. The sixth chapter is concentrated on the forms of Music Therapy. The seventh chapter expresses the music means and techniques of body, voice and instruments in Music Therapy. The eighth chapter indicates the use of the techniques such as improvisation, composition and interpretation in Music Therapy. The ninth chapter is continuing with the description of listening disciplines in Music Therapy. The tenth chapter is commenting the most important and popular Chinese instruments which might be used in Music Therapy. The eleventh chapter contain my several proposals of Music Therapy's activities which also represent the work with Chinese instruments. The last chapter includes the analysis of the tests, realised in Czech and Chinese schools.

RÉSUMÉ

Tato diplomová práce je sestavena z dvanácti kapitol, které se zaměřují na dějiny, definici, modely, metody, formy, techniky, čínské hudební nástroje, školní testy a další aktivity z oblasti muzikoterapie. První kapitola podává základní informaci o muzikoterapii a zabývá se definicemi tohoto pojmu. Druhá kapitola zahrnuje dějiny muzikoterapie od starověku po 20. století. Ve třetí kapitole zmiňují základy muzikoterapie z fyzického, emocionálního, sociálního a estetického hlediska. Čtvrtá kapitola popisuje vztah mezi muzikoterapií a ostatními obory jako jsou hudební výchova a hudební psychologie. Pátá kapitola je věnována nejzávažnějším modelovým technikám muzikoterapie. Šestá kapitola se zaměřuje na formy muzikoterapie. Sedmá kapitola popisuje hudební prostředky a užívané techniky muzikoterapie, jakými jsou práce těla, hlasu a nástrojů. Osmá kapitola analyzuje techniky improvizace, kompozice a interpretace, užití v muzikoterapii. Devátá kapitola pokračuje s popisem poslechových disciplín v muzikoterapii. Desátá kapitola zmiňuje nejdůležitější a nejpopulárnější čínské hudební nástroje, které mohou být užity v muzikoterapii. Jedenáctá kapitola zahrnuje několik mých návrhů muzikoterapeutických aktivit, které představují také práci s čínskými nástroji. Poslední kapitola obsahuje analýzy testů, uskutečněných na českých a čínských školách.

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Supplements

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小燕子

王路词
王云阶曲
金色风铃网制谱

♭B Cm7 C7 F

1. 小燕子，穿花衣，年年春天来这里，
2. 小燕子，告诉你，今年这里更美丽，

♭B ♭E Cm7 Gm | ♭B ♭A Gsus4 F

我问燕子你为啥来？燕子说，这里的春天
我们盖起了大工厂，

Cm7 C7 F | 2. ♭B ♭A Gsus4 F

最美丽。装上了新机器，欢迎你

♭B rit. C F7 ♭B (Ending)

长 期 住 在 这 里！

★ 本曲倒数第四小节有一个延长记号“ rit. ”，此音要奏得自由一点，不要受拍子的约束。接着的那个“后倚音”要自然、流畅地带而过，不要太突出。

康楚情歌

(大众乐谱网制谱)

四川民歌
魏东明改编

Moderato

p

rit. *pp*

myscore.org

娃哈哈

音色: 黑管

节奏: 进行曲

The first system of the score consists of two staves. The upper staff is in treble clef with a key signature of two flats and a 4/4 time signature. It contains a melodic line with various triplet and sixteenth-note patterns. The lower staff is in bass clef and provides a harmonic accompaniment with chords labeled Cm, Fm, G, Cm, and Fm. Fingerings are indicated by numbers 1-4 above the notes.

The second system continues the piece. The upper staff features a melodic line with a first ending (labeled '1.') and a second ending (labeled '2. 音色: 黑管'). The lower staff provides harmonic support with chords Cm, G, and Cm. The second ending leads to a change in timbre to a black saxophone.

The third system shows a melodic line with slurs and accents. The lower staff accompaniment includes chords Fm, $\flat B$, and $\flat E$, indicating a key change to B-flat major.

The fourth system concludes the piece. The upper staff has a melodic line with various rhythmic patterns. The lower staff accompaniment features chords Fm, Cm, G, and Cm. The piece ends with a final chord in the bass clef.

送别

(美) 奥德维曲
李叔同填词

1=^bE 长亭外，古道边，芳草碧连天；
5 3 5 i — 6 i 5 — 5 1 2 3 2 1 2 — 0 0

晚风拂柳笛声残，夕阳山外山。
5 3 5 i · 7 6 i 5 — 5 2 3 4 · 7 1 — 0 0

天之涯，地之角，知交半零落。
6 i i — 7 6 7 i — 6 7 i 6 6 5 3 1 2 — 0 0

一瓢浊酒尽余欢，今宵别梦寒。
5 3 5 i · 7 6 i 5 — 5 2 3 4 · 7 1 — 0 0

长亭外，古道边，芳草碧连天，
5 3 5 i — 6 i 5 — 5 1 2 3 2 1 2 — 0 0

晚风拂柳笛声残，夕阳山外山。
5 3 5 i · 7 6 i 5 — 5 2 3 4 · 7 1 — 0 0

凤阳花鼓

安徽民歌

1=G 3 3 3 3 2 — 3 3 3 3 2 — 3 3 3 3 2 3 2 3 2 3 2 —

6 6 5 3 — 6 6 5 3 — 3· 5 6 1̇ 6 5 5 3 2 —
说 凤 阳, 道 凤 阳, 凤 阳 本 是 好 地 方;

1. 2 3 5 3 2 1 2 — 6 6 5 3 5 6 1̇ 6 5 3 2 —
自 从 出 了 朱 皇 帝, 十 年 个 有 九 年 荒.

3 3 3 3 2 — 3 3 3 3 2 — 3 3 3 3 2 3 2 3 2 3 2 —

6. 5 6 1̇ 2̇ 1̇ 6 5 6. 5 3 1̇ 6 5 3 2 —
大 户 人 家 卖 骡 马, 小 户 人 家 卖 儿 郎;

1. 2 3 5 3 2 1 2 6 6 5 3 5 6 1̇ 6 5 3 2 —
奴 家 没 有 儿 郎 卖, 身 背 花 鼓 走 四 方.

2. Tests from Czech Schools and Chinese School and Transcriptions

Transcriptions of tests from PRAGUE CONSERVATORY

PAPER N. 1

Listening n.1 - key words

delight, water, motion, nature, meditation

Listening n.2- key words

fear, run, flight, calm, death

Listening n 3 -keywords

no any, only picture

PAPER N. 2.

Listening n.1- key words

astonishment, joyful, remembrance, something positive, happiness.

Story- We are successfully returning from the town

Listening n. 2- key words

adventure, admirable and unexpected phenomenon, apprehension, preparation for duel, illness, danger

Listening n.3- key words

problem, the thoughts of a person in anxiety and seeking the way how to escape

1000 thoughts in one manosecond, majority of negative atmosphere

Story: A small but sturdy boy was walking in the town (for example Karviná) and he was attacked by a group of gipsies. He terminated at the operating room in hospital.

PAPER N. 3

Listening n.1- key words

nature, brook, birds, waterfall, idyll

Emotions: fun, laughter, merrymaking, sprightly feeling. jubilation

Listening n. 2- key words

frisky games, restless monk, interrupted meditation, buzzing fly

Emotions: excitement, tension, delight, fury

Story: The monk tries to meditate, but the fly is continuesly disturbing him. At first he laugh but later he becomes angry.

Listening n. 3

Story: The dog is seeking refuge in the nature during the unblissful (unhappy) night. He is barking, howling and at last he falls asleep in the cave. He dreams that he is driving through the meadow. He finds a companion, they are jolly and they play frisky games. he awakes in the storm, he weeps and whines and he tries to fall asleep once more but in vain. The storm is finished, the heaven clears up. It is a time of dawn (day-break).

PAPER N. 4

Listening n. 1- key words

good humour, lightness, rain (drizzle)

Listening n. 2 -key words

the danger, struggle, mystery, action, hunt of the prey (bag)

Listening n. 3 - key words

Story: The storm on the farm.

The thunder began. The strong wind is blowing. The cows are angry mooing on their meadow running away to hide themselves. On the farm they are waiting until the whole tornado calms down. The last drop of rain fell down. Everything is finished. The heaven is clear and without clouds again.

PAPER N. 5

Listening n.1- key words

night, celebration, glitter of stars, snowflakes

Listening n.2- key words

tension, trembling, expectation, nervousness, group of the wild aggressive wasps

Listening n.3- keywords

Story: Somebody meets somebody else in the hot and dusty afternoon. Conversation, walk in the nature, disagreement, conflict, an effort for conciliation, reproach, return.

Another story: The group of the wild wasps who seek their food is flying in the summer landscape. They evoke conflict, but at last wasps continue in their voyage.

PAPER N. 6

Listening n.1- key words

delight, merrymaking, carefree mood

Listening n. 2 -key words

The summer day, peace, the light rain, the storm with the wind

Listening n. 3- key words

The story: The tour- for example riding the bicycle, starting, going up, going down, murmur, wind, brake

On the boat- the calm sea, waves, rocks

PAPER N. 7

Listening n.1- key words

The summer night, waterfall, splinter of the glass, birds

Listening n. 2- key words

The starting train, echo, uncertainty, quarrel, expectation

Listening n. 3- key words

Pilgrimage and its ambushes (obstacles), insect, time

PAPER N. 8

Listening n. 1- key words

celebration, the high society, old temple, noon, banquet

Emotions: delight, merrymaking, moderate feeling

Listening n. 2- key words

travelling, solitude, wandering, overcoming the ambushes, hopeless feeling, the victory

Listening n. 3- key words

the empty wood, arrival of the butterflies, revival of the wood, arrival of wasps, duel

Story: The butterflies arrive into the empty wood and the forest revives. After that the wasps appear in the wood and they fight against the butterflies until they destroy themselves mutually.

The wood dies too.

TEST FROM THE ELEMENTARY SCHOOL KORUNOVAČNÍ

PAPER N.1.

Listening n.1 key words

delight, peace, lightness, now I want to sleep, merrymaking

Listening n. 2 key words

I felt a fear, the melody is similar to train, peace, melody illustrates some war, at the end it was very jolly

Listening n.3 key words

hardness, delight, jolly melody, very little fear, calm

Story: A time to time it is pleasure, a time to time it is hardness and fear

PAPER N. 2

Listening n.1. key words

I am glad, jolly, during the listening I wanted to dance as I would been in China

Listening n. 2 key words

I feel tired, occassionally jolly, in tension, my mood is peculiar

Listening n. 3 key words

In my imagination I saw water and goats, a woman with wasps, rabbits and chamois

PAPER N. 3

Listening n.1 key words

rain, clarify, steps, happiness, peace, sun

Listening n. 2 key words

tension, the arrival of new things, conflicts, obscurity, change

Listening n.3 key words

Story: An old man lost a grey hair. He has not force any more. The young generation has to overtake the old man's property. They have to solve some problems, but at last they find the seeked harmony and a sense of their life

PAPER N: 4

Listening n.1 key words

lightness, being little asleep, light pleasure, may be dream or fantasy, may be a sound of a river

Listening n. 2 key words

fear, pleasure, running,almost hard, limitation

Story: A battle. I don't know why I imagined the soldiërs from Gallia with horses. Why inhabitants of Gallia? As they fight and laugh to the victorious end. Probably the village is fighting

Listening n.3 keywords

calm, peace, fear

Story: It happens at the sea. There is peace and in one moment the storm begins

PAPER N. 5

Listening n. 1 key words

peace, I got quite new ideas, something romantic, particular, peculiar

Listening n. 2 key words

It is very peculiar music. Generally it is amusing. It sounded as from a fairy tale, it sounded as in the mountains. The sound was blazing out in the space

Listening n.3 key words

Somebody was somewhere in the mountains

PAPER N. 6

Listening n.1 key words

a bird, morning, rhythm, child's like, fun

A story: A bird was born and he tries to learn flying

Listening n. 3 key words

warmth, party, saw, country, fly

Story: it seems that the mosquitos stinged (bit) a person who wants to drive it away

PAPER N. 7

Listening n.1 key words

a marvelous morning, crazy bells, fairy tale

Listening n.3 key words

piano, rising sun, no positive, mosquitos

PAPER N. 8

Listening n. 1 key words

delight, hurry, bells

Story :The monk training Wu-shu

Listening n. 3 key words

impatience, nervousness, stress, sleepy feeling, fear

PAPER N. 9

Listening n. 1 key words
delight, laughter

Listening n. 3 key words
fear, bluster, fearlessness, time to time also aggressivity

PAPER N. 10

Listening n. 1 key words
The bird who awakes early in the morning is quicker than the other, he jumps farer

Listening n.3 key words
invoking, Satan, night, full moon, wood
Story: Invoking the Satan during the night in a dark wood in the time of full moon

Transcription from Chinese tests

PAPER N. 1

Listening n.1 - key words
Nice weather and nice temper
I sit in the beach, and with nice sunshine.

Listening n.2- key words
Argue, anger,
I dispute with somebody.

Listening n 3 -keywords
Fight with somebody
I am running so fast, but I can never catch the thing I want.

PAPER N. 2.

Listening n.1- key words
Comfortable

Listening n. 2- key words
running

Listening n.3- key words
Running, catching

PAPER N. 3

Listening n.1- key words

Nice feeling, quiet

Listening n. 2- key words

I am running in a forest.

Listening n. 3

Speed, catching, fast, and chaos

PAPER N. 4

Listening n. 1- key words

Clean, peaceful, flowing water

Listening n. 2 -key words

Struggle, hitting, fight

Listening n. 3 - key words

The big birds are catching the small one for lunch.

PAPER N. 5

Listening n.1- key words

Water falls to a wild lake.

Listening n.2- key words

Aggressive, unhappy, danger

Listening n.3- keywords

Tension, threaten, uncomfortable

PAPER N. 6

Listening n.1- key words

Nature, positive, bright, rain

Listening n. 2 -key words

Mysterious, danger, hidden

Listening n. 3- key words

I was in a very bad situation and want to hide in a shade.

PAPER N. 7

Listening n.1- key words
River, jump, drops, relax, peaceful

Listening n. 2- key words
Struggle, threaten, lonely

Listening n. 3- key words
Wandering, hopeless, running race

PAPER N. 8

Listening n. 1- key words
Traveling, midnights, cold, sea

Listening n. 2- key words
In the most threaten time, I am running alone and flight with an army.

Listening n. 3- key words
Lovely, vivid, compact, dancing

PAPER N. 9

Listening n. 1 key words
Rain, nice , beautiful, bell's sound, ringing, liquidly

Listening n. 2- key words
Ambush, the king is fighting with other country

Listening n. 3 key words
The flowers are destroyed by monster.

PAPER N. 10

Listening n. 1 key words
Flowing water

One player is playing the stringed instruments in the top of the mountain, another person is hidden in the forest and listening the music quietly.

Listening n.2 key words
Troubled, disordered, crowed

Listening n. 3 key words
Escape, flee, inescapable, insuppressible

PAPER N. 11

Listening n. 1 key words
Two children are playing water

Listening n.2 key words
Fear, tender, anxiety

Listening n. 3 key words
Dysphonic, fret, annoying

PAPER N. 12

Listening n. 1 key words
Steaming, dreamlike, wonderful

There is a small house in the mountain, many birds are singing and flying around it.

Listening n.2 key words
Flight, butcher, brutal

Listening n. 3 key words
Breezily, jumping, alive

PAPER N. 13

Listening n. 1 key words
Waterfall, beautiful, bell's sound

Listening n.2 key words
Threaten, some one is tracing me.

Listening n. 3 key words
I am looking for something.

PAPER N. 14

Listening n. 1 key words
Safety, morning, I am walking in the grassland, many white sheep.

Listening n.2 key words
Break open, crack, and eruptible

Listening n. 3 key words
Escape, looking for something

PAPER N. 15

Listening n. 1 key words

Clouds, breezy, fly

Listening n.2 key words

Painful, dark, negative feeling

Listening n. 3 key words

Jump, athletic, swordplay

Věk: 16

Pohlaví: muž

Obor studia:

KLAVÍR !

UKÁZKA č. 1

Napište 5 klíčových slov

Radost, voda, pohyb, příroda, meditace

Napište příběh



UKÁZKA č. 2

Napište 5 klíčových slov

Strach, běh, let, klid, smít

Napište příběh



UKÁZKA č. 3

Napište 5 klíčových slov

Napište příběh



OBRAZEK
č. 1, č. 2, č. 3

Věk: 16

Pohlaví: MUŽ

Obor studia: KLAVÍR

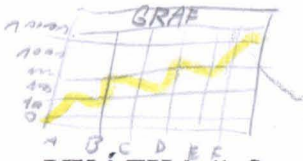
UKÁZKA č. 1

Napište 5 klíčových slov

ÚZAS, RADOŠTNÁ VZPOMÍNKA, POZITIVUM, ŠTĚŠTÍ

Napište příběh

Cesta z města s "povízenou"



UKÁZKA č. 2

Napište 5 klíčových slov

Dobrodružno, Podivuhodne a nečekané úkazy, obava, příprava na souboj, neto, nebezpečí

Napište příběh



RUSSIA VS USA



UKÁZKA č. 3

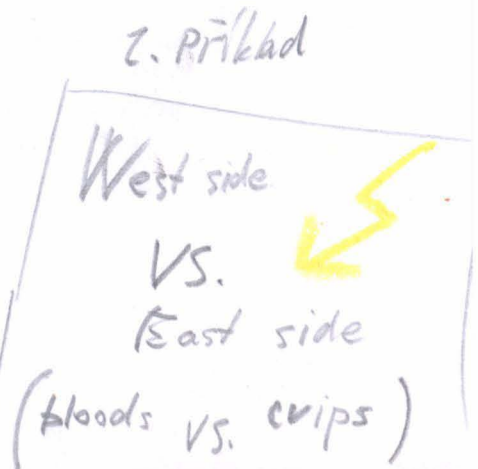
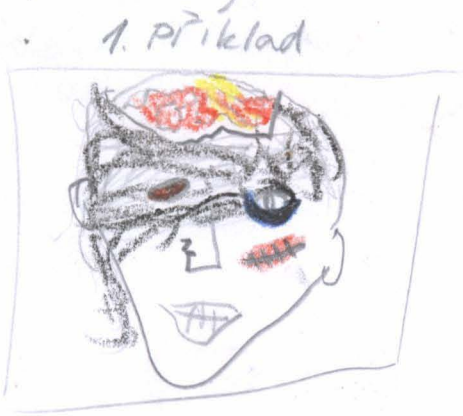
Napište 5 klíčových slov

PROBLETI, DYSLEM JEDINCI V TÍSMI a hledání unikových řešení!

1000 myšlenek v 1 nanosekundě. PŘEVÁHA NEGATIVNÍ ATMOSFÉRY

Napište příběh

Malý, ale statný chlapec šel městem (např. KARLINA) a byl přepaden skupinkou ROMŮ → skočil na operačním sále



OBRAZEK
č. 1, č. 2, č. 3

Věk: 17 Pohlaví: Muž Obor studia: Skladba

UKÁZKA č. 1

Napište 5 klíčových slov

Příroda, potok, ptáčky, vodopád, idyla

Napište příběh

Emoce - legrace, smích, veselí, rozvernost, jánot

UKÁZKA č. 2

Napište 5 klíčových slov

Skotačením, neposedný mnich, vyrušená meditace, bezvládní mo

Napište příběh

Emoce - Vyrušením, napětí, radost, vztek
radostně

Příběh - Mnich se snaží meditaovat, ale stále ho
vyrušuje moncha. Nejdříve se jí smje, ale pak
ho vž rozčilí

UKÁZKA č. 3

Napište 5 klíčových slov

Napište příběh - (s obrázkem) Pes za neblahé noci hledá v přírodě
útočiště. Štěká a vaje, nakonec vane v pokyni
ždá se mu, že se protáhne po louce.
Najde společníka, veselí se a skotčí. Hrají si spolu, probíhá se
probádním do bouřky, pláče a křičí, mnohé se snaží uhnout
Bouře ustane, vše se rozjasní. Šítá.

OBRAZEK
č. 1, č. 2, č. 3



→ 2. část



→ 1. část - AEM

TEST ČÍNSKÉ NÁSTROJE

KONZERVATOŘ PRAHA

Věk: 16 let

Pohlaví: muž

Obor studia: SKLADBA; BICÍ NÁSTROJ

UKÁZKA č. 1

Napište 5 klíčových slov

polohoda, lehkost, děs (mohlem),

Napište příběh

UKÁZKA č. 2

Napište 5 klíčových slov

nebezpečí, boj, tajemno, akce, konba na lovisšti

Napište příběh

UKÁZKA č. 3

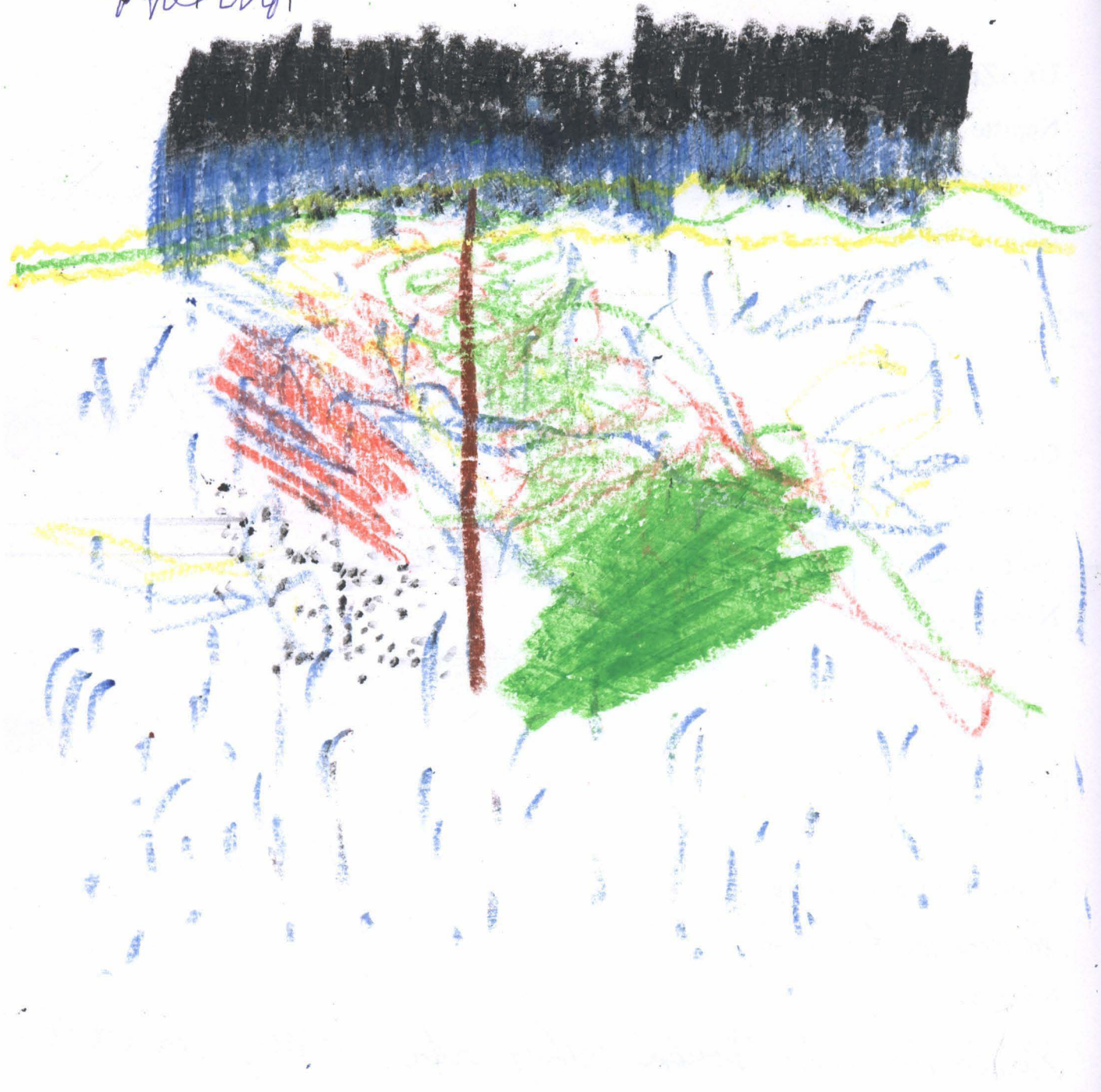
Napište 5 klíčových slov

bovta na farmě

Napište příběh

Začalo hrnít. Fouká velký vítr. Krávy našťvaně
bucí na své pro louce, ale se dobře probají se
schovat. Na farmě pak vyčlávají, až se celá
ta smůla uklidní... Dopada poslední kapka.
Je po všem. Nele je ras čisté a bez mraků...

OBRAZEK
~~1. 2. 3.~~ č. 3.



Věk: 21

Pohlaví: M

Obor studia: Sbladea

UKÁZKA č. 1

Napište 5 klíčových slov

slavnost, vyšší společnost, starší
chrám, poledne, hostina

Napište příběh

emoce - radost, veselost, umírněnost

UKÁZKA č. 2

Napište 5 klíčových slov

cestování, osamělost, bloudek
překračování nástrah, bezraděj, vítěz

Napište příběh

UKÁZKA č. 3

Napište 5 klíčových slov

Napište příběh

pustý les
půleť matyži
čísli les
půleť sos, souloj

Do pustého lesa půleť matyži a les čísli. Poté ale
les půleť i sosy, které s matyži loží a
úplně kniči novějším. Les také umírá.

OBRAŽEK
č. 1, č. 2, č. 3



Věk: 12

Pohlaví: ž.

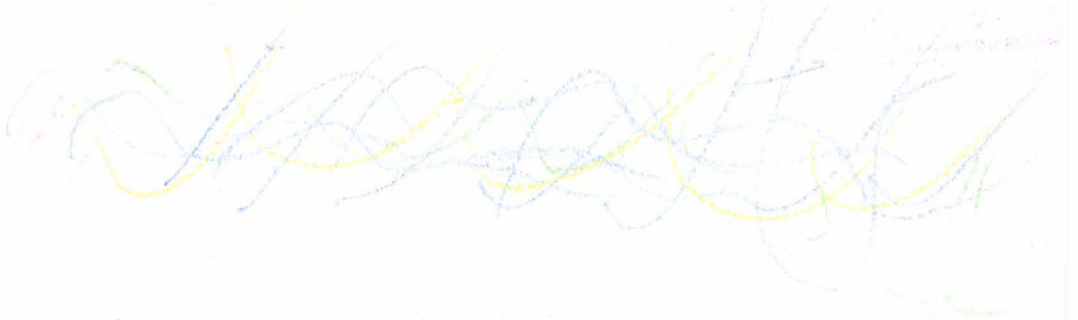
Obor studia: ZŠ KORUNOVAČNÍ

UKÁZKA č. 1

Napište 5 klíčových slov

lehkost, trochu usínající, lehká radost, třeba seš nebo fantazie, a trochu
zvuk řel

Napište příběh

Bílá
žlutá

UKÁZKA č. 2

Napište 5 klíčových slov

strach, radost, utíkající, zapoutání, docela těžký, spontánnost

Napište příběh

válka chcem proz ale mě se se představila Galliel
vojsko s koňma. Proč Gally protože bojují a smějí se vs vítězství
koncem. no j spis bojuje vesnice

UKÁZKA č. 3

Napište 5 klíčových slov

klid klid strach

Napište příběh

je to asi na pat
to v moři je klid a na jednou
a čne bouřka



OBRAZEK
č. 1, č. 2, č. 3

Věk: 13

Pohlaví: Muž

Obor studia: ZŠ KORUNOVAČNÍ

UKÁZKA č. 1

Napište 5 klíčových slov

Radost, úspěch a hořkost, zvonky

Napište příběh

Třénující Wu-shu mnich

UKÁZKA č. 2

Napište 5 klíčových slov

Napište příběh

UKÁZKA č. 3

Napište 5 klíčových slov

Utrpělivost, nervozita, stres, ospalost, strach

Napište příběh

OBRAZEK
č. 1, 2, 3



= 8 trigrams

č. 3



Věk: 11

Pohlaví: Ž.

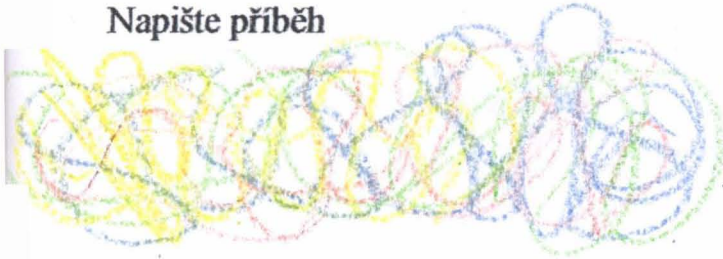
Obor studia: ZŠ KORUNOVAČNÍ

UKÁZKA č. 1

Napište 5 klíčových slov

Radost, klid, lehkost, sed' chi spás, veselá.

Napište příběh



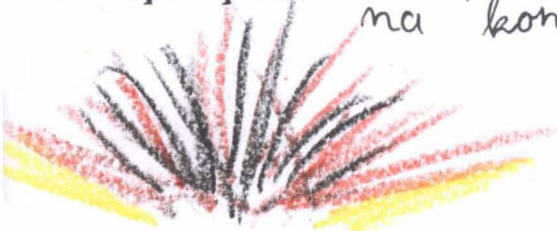
Pod m je dobře usnad...

UKÁZKA č. 2

Napište 5 klíčových slov

na konci cisla strach, melodie jako vlak,
klid, melodie jako nijaka valka,
na konci byla hrozně veselá.

Napište příběh



Jako hra valka.

UKÁZKA č. 3

Napište 5 klíčových slov

svědost, radost, veselá melodie, brochu strach, klid.

Napište příběh



Nikdy je so radost, nikdy svědost a strach!!!

OBRAZEK
č. 1, č. 2, č. 3

问卷 中国古典音乐

年龄： 17

性别： 男

专业： 作曲

曲目一

用五个词以内形容一下对这首曲目的感觉

高山流水

请写出一个故事

一个人在一座很高的山上弹着古琴，另个人在一个地方偷听的听着
一切都很有静，宁静。

曲目二

用五个词以内形容一下对这首曲目的感觉

千回百转，是说一个人重重危机的状况。

请写出一个故事

曲目三

用五个词以内形容一下对这首曲目的感觉

捕捉

请写出一个故事

针对该曲目请绘画出你脑海中所浮现的画面

曲目一

曲目二

曲目三



问卷 中国古典音乐

年龄： 18

性别： 女

专业： 鼓乐学

曲目一

用五个词以内形容一下对这首曲目的感觉

清新, 宁静, 美好, 幸福

请写出一个故事

两个人一起在弹琴.

曲目二

用五个词以内形容一下对这首曲目的感觉

快快快, 捕捉的快乐, 但是过于单调

请写出一个故事

总是增增减减, 故

曲目三

用五个词以内形容一下对这首曲目的感觉

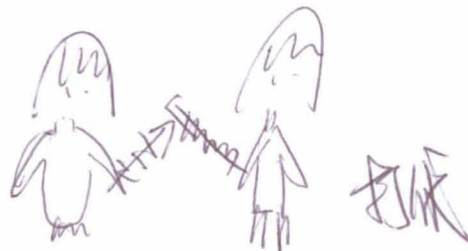
请写出一个故事

听起来像是长打快一般, 但是是随意的调子

针对该曲目请绘画出你脑海中所浮现的画面

曲目一

曲目二



曲目三

问卷 中国古典音乐

年龄： 17

性别： 女

专业：

曲目一

用五个词以内形容一下对这首曲目的感觉

安静 平和 清新

请写出一个故事

高山流水

曲目二

用五个词以内形容一下对这首曲目的感觉

急切

请写出一个故事

跑着被人追着

曲目三

用五个词以内形容一下对这首曲目的感觉

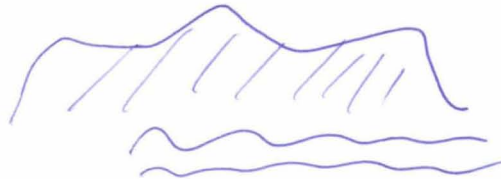
请写出一个故事

追击

大鸟追击小鸟

针对该曲目请绘画出你脑海中所浮现的画面

曲目一



曲目二



曲目三

问卷 中国古典音乐

年龄： 18

性别： 男

专业： 钢琴

曲目一

用五个词以内形容一下对这首曲目的感觉

悠长 轻松

请写出一个故事

开始如以取听钢琴音乐，舒服地躺着。

曲目二

用五个词以内形容一下对这首曲目的感觉

危机

请写出一个故事

被人追杀

曲目三

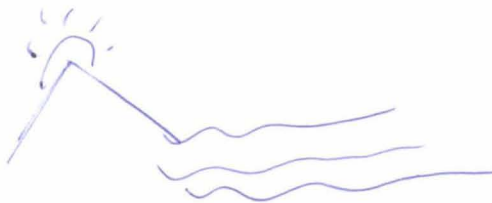
用五个词以内形容一下对这首曲目的感觉

捉拿 猎物

请写出一个故事

针对该曲目请绘画出你脑海中所浮现的画面

曲目一



曲目二

曲目三

问卷 中国古典音乐

年龄： 18

性别： 女

专业： 音乐教育

曲目一

用五个词以内形容一下对这首曲目的感觉

风和日丽 心情明朗

请写出一个故事

我坐在海滩上晒着太阳，感觉很轻松，听着歌。

曲目二

用五个词以内形容一下对这首曲目的感觉

争吵

请写出一个故事

一个人在跟别人争吵，越来越激烈，最后无趣而终。

曲目三

用五个词以内形容一下对这首曲目的感觉

在跟别人打仗

请写出一个故事

一个人在跑步，但总是被人提到，总是跑不快。

针对该曲目请绘画出你脑海中所浮现的画面

曲目一



曲目二



曲目三



3. CD- The music used during the tests

