

SOUND DOC'S PANEL

P.Barathi *

A physician examines a patient, comes to a preliminary diagnosis, prescribes some medicines, and advises him to come for a follow-up. In what way music therapy differs from the routine clinical practice ?

All forms of music therapy include musical experiences such as performances, improvisations and listening experiences. Such experiences, as well as the related physical, emotional, affective, cognitive, behavioural reactions develop during each session and throughout the complete set of sessions which make up the whole music therapy relationship. All these experiences and the related reactions develop in time- a temporal development process.

To sustain the whole process, it necessitates a core of conceptual contents that must maintain a certain level of stability which is designated as structure. A professional relationship is maintained which is marked out by the level of consciousness the professional therapist has of the structural elements he is placing at his patient's disposal while performing his role, in contrast to a 'normal' relationship where the structural factors can function automatically without us necessarily being aware of them.

The music therapeutic process involving application of music includes musical experiences which characterize the relationship between the music therapist and the client, the therapeutic process being chosen, planned, led, judged, concluded, interrupted or carried on according to the structural elements constituting it, namely, the psychological and cultural factors through which one interprets the process. The therapist needs to possess a consciousness of his own psychological balance, which necessitates training in order to develop his personal consciousness followed by 'didactical analysis'- in other words, it is of prime importance to develop 'interpretive competence'.

It is necessary to distinguish between two types of 'supervision' in music therapy:

Classical Supervision Model

- Has an absolutely firm ground from both a theoretical and methodological point of view.
- Historically well-established.
- Clearly identifies everyone's roles, spheres of competence, responsibilities.
- Involves the danger of relegating music to a condition of inferiority or irrelevance.
- Music is recognized to be a significant element only if it is translated into the psycho-therapeutic language, basically different from itself, so that a great deal of its essence or specific musical dimension inevitably gets lost.
- Includes music therapy models based upon psycho- dynamic, humanistic, cognitive- behavioural approaches.
- The music therapist sees his place in the hierarchy of the different kinds of knowledge, knowing whether he is competent or not as for a why socially recognized as related to the care of health- capable of being reduced to a merely technical acting, which sticks to the standard norms of operation.
- The therapist's knowledge is usually included among the 'interpretive logoi' which are traditionally recognized, and he is conferred the responsibility and power for orientating clinical or 'curative' processes.

Technical Supervision Model

- Musically-oriented music therapy.
- The music therapist should be a musician 'provided with musical skills' being able to achieve true interpretative quality through his musical practice.
- There is a gradual unfolding of the process in development, based on the communication between the music therapist and his client.
- The musician grasps the 'why' dimension, which is the basis for interpretation, guided by his intuition- the artist gains access through an intuitive why.
- Whereas the musician usually pursues aesthetic goals, the music therapist aims for some responsible 'care' of his client.
- The music therapist should have reached a true psychological maturity, which allows him to meet the Other in music through non- mystifying and non-'projective' attitudes, unlike a pure musician, who aims at appreciable artistic results.
- In this way music therapy becomes an autonomous and not merely operative discipline, in other words a therapeutic application of music.

* Dr. P.Barathi, M.D.,

Prof of Physiology, Music Therapist

e-mail : iyer.bharthi@gmail.com