

THE DEATH - REBIRTH MYTH AS THE
HEALING AGENT IN MUSIC

by

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ABSTRACT

The general purpose of the study is to build a case for use of the creative arts in therapy. The second and more specific purpose is to provide one example of how music can be used as therapy through the Death-Rebirth Myth.

Inadequacies of standard therapies which could be improved by inclusion of creative arts therapies are described, the primary focus being the dearth of creativity. Theoretical foundations are developed for the healing aspects of the Death-Rebirth Myth. The myth is then revealed within the musical context. Finally, the role of the music therapist is discussed in light of the mythic approach focusing on the music therapist as a ritualist.

Appendices provide practical examples using the Death-Rebirth Myth as a healing agent in music. These sessions are described with short evaluative questionnaires, descriptions of sessions and photographs. Musical examples of the Death-Rebirth Myth are included on tape.

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CHAPTER I

INTRODUCTION

This thesis represents a growing body of studies and literature which strive to link certain knowledge of the past to present practical situations. Because much traditional wisdom is intertwined in complicated systems and rituals it is a challenge to identify the body of knowledge which can be abstracted from traditional structures and described in meaningful, modern terms acceptable in this case both to the clinician and health care administrator.

This problem might not exist if we had always embraced the wisdom of the past and kept the connecting threads through the evolution of culture and society. Because the pendulum of change can make such a sudden and extreme arch, throughout history many valuable ideas and approaches are rejected. We are presently involved in a rather wide-scale attempt to pick up some pieces and re-integrate many of the ideas of the past.

The present work draws information from a variety of disciplines and fields, old and new, in an attempt to make a contribution to a relatively new field, Music Therapy.

It represents an initial attempt to synthesize ideas across disciplines. This type of investigation tends to

be more general than specific. The framework presented here does represent a general overview rather than a systematic approach. Rather it is an exploration into the possibility of cross-classifying information from different fields in order to take the first creative step in the direction of developing useful ideas for the future. Areas represented are: Music Therapy, Anthropology, Philosophy, Religious Studies, Psychology, Art History, Music, Linguistics, Psychiatry, Natural History and Education.

Purpose

This study has a twofold purpose. The general purpose is to provide a rationale for implementation of the Creative Arts Therapies. The second and more specific purpose is the examination of the Death-Rebirth Myth as a Healing Agent in music. The second part will represent one example of how the Creative Arts Therapies, particularly Music Therapy, can be used in the therapeutic environment.

Problem

The problem is that we have lost the historical thread of the arts as healers for everyman. As Jose Arguelles (1975) art historian and aesthetics philosopher states:

"What began as the history of art logically must end as the history of man's insanity,

for the degree to which art becomes specialized as fine art and dependent for its meaning on art history, is the degree to which man loses his innate wisdom. In recent times this process has been hastened by the machine. Since expression is innate to the human species in denying ourselves our expressive wisdom we have denied ourselves our own humanity." (p.290)

One of the threads from the past which must be connected to the future is the concept of art as a preventative and curative resource. The most profound and immediate need for this change is felt in the therapeutic environment. Other areas in which the same principles apply will be education and other places where the community comes together to share ritual.

Statement of the thesis

The forms and patterns of music can be used as symbolic representations of the on-going process of regeneration and renewal--the death-rebirth myth--for healing in the therapeutic environment.

Stimulus for the Study

In my experience as a Music Therapist I have noticed that patients often produce poems, movements, paintings,

verbal descriptions and musical improvisations with the death-rebirth myth, or some situation which strongly suggests the death-rebirth myth. These results have come without any suggestion on my part. As guide in those sessions, I became curious about the influences on my own choice of music and instructions to patients which may have been leading to death-rebirth themes.

I discovered two main influences directing the death-rebirth response:

- 1) Directions often encouraged patients to develop images of death-rebirth processes in Nature.
- 2) Music always had an obvious tension/resolution element.

Pinpointing these two influences has encouraged me to examine them in greater depth. Hopefully through this process I will be able to describe in more detail the value of using the death-rebirth myth in music for therapy and healing. One important point is that theory was not conceptualized and then applied. Rather it has emerged from patients and clients themselves, then formulated into the present work.

Description of the Study

Chapter II attempts to establish a rationale for use of the expressive (or creative) arts therapies in general. Included within this chapter is a survey of the literature describing various inadequacies in therapies which do not

employ creative arts. The dearth of creativity is a particular focus. Although this section is presented in general terms and poses many unanswerable questions, I hope that it will convince the reader that there is a strong need to consider the advantages of the Creative Arts Therapies.

The main portion of the work will examine the two influences mentioned above, Chapter II will present the Death-Rebirth Myth itself, and Chapter III the music and it's relation to the Myth.

Chapter IV will consider the Music Therapist as a shamanic portotype and outline some of the possibilities for training future Music Therapists.

Finally, in Chapter V, there will be a brief conclusion and synthesis and an outline of directions for further research.

Appendices include some informal data on patient and student responses to the death-rebirth myth in music.

Definition of Terms

Archetype - the first or primary pattern or model. It is the essence of situation, character or concept which has no limits in time or space.

Creativity - the ability to produce new forms or to solve problems by novel methods.

Creative Arts Therapies - (used interchangeably with Expressive Arts Therapies) - therapies which employ the various

media of the arts: plastic, arts, dance & movement, music, sculpture, drama, costume, masks, etc.

Death-Rebirth Myth - an archetypical story which symbolizes the ongoing process of dying and being re-born.

Esoteric and Traditional Psychologies - psychological systems of the East and Native Indian cultures.

Medical Model - the conceptualization of behavior disorders and psychological abnormalities as diseases analogous to organic diseases.

Music Therapy - a therapy which employs music as an essential component of various rituals directed to encourage growth and improvement.

Myth - an archetypical story manifested within a cultural context through ritual.

Psychotherapy - the application of specialized techniques to the treatment of mental disorders or to the problems of everyday adjustment. Psychotherapy emphasizes insight and understanding and is therefore classified as a depth therapy in order to distinguish it from systems which minimize understanding and insight and stress symptom modification, such as behavior therapy.

Theme - the myth as manifested within a musical context.

Therapeutic Environments - places in which therapy is provided.

Therapy - treatment directed toward the cure of a pathological condition - or in a more general sense simple growth and amelioration.

CHAPTER II

THEORETICAL AND CONCEPTUAL FOUNDATIONS

REVIEW OF THE LITERATURE

A. Rationale for Implementation of the Creative Arts Therapies

In providing a rationale for increasing the use of Arts Therapies within health care systems, particularly in mental health, it is first necessary to consider some trends in the more widely-accepted forms of therapy. By widely-accepted forms of therapy, I refer to techniques derived from the medical model. The discussion centers on cultural trends in treatment which affect the largest percentage of patients/clients presently under health care. There are pockets of progressive change and some people in need of help are able to find less rigid forms of therapy. However, these resources are limited and have not reached the largest populations of institutionalized persons and other persons in various forms of treatment and therapy.

The purpose of this section is to present the idea that there are counter trends available through expressive arts therapies which would either:

- 1) Be more effective than other current therapies;
- 2) Compliment and enrich other forms of therapy;
- 3) Add a new dimension to therapy through the concept of the arts as a healing influence.

1) Any method or technique, scientific or artistic, can be misused. All scientific methods are not misused nor are all artistic methods necessarily used properly in therapy. On the contrary, the influence of the tool depends often on the individual using the tool. The present discussion pertains primarily to cultural trends which have brought us to the present situation.

2) Although the present discussion centers on psychiatric treatment, all therapies can be considered relevant to the discussion since at the base of the arguments is the issue of assumptions about what "patients" can and cannot do. For example, one of the issues discussed is choice. Because society has assigned powers to the professional medical community, we are likely to assume that the handicapped individual, or Down's Syndrome child is just as incapable of making decisions about him/herself as the psychiatric patient.

3) The material presented is written from the perspective of a Music Therapist. I have led Music Therapy sessions in a variety of therapeutic settings over a period of ten years. I have also been teaching and training Music Therapists and other health care professionals. From this perspective, the following concerns emerge:

a) Present systems of therapy, non-artistic in nature, often discourage patients from recognizing and developing their creativity, a valuable source of healing.

b) Many members of the medical profession, both staff and administrators, have difficulty understanding the use of music as a therapeutic medium so explanation and justification is often difficult due to something which might be called language differences.

c) Standard research methodologies and techniques which I have borrowed from the medical and behavioral sciences have not adequately described or documented significant therapeutic endeavors within music therapy sessions.¹

Most of the following criticisms can be traced back to the technological approach to healing. We are in a period in which science holds more value than other means of discovery. Value placed on the scientific discovery has filtered down into all the levels of our lives. There has been an emphasis on situations, interactions and behavior in general which are observable and quantifiable. By observing these phenomena, data can be obtained and conclusions can be drawn primarily through statistical methods.

Neither the vehicle of the scientific method (meaning empirical research) nor the exact and precise search for conclusions need be criticized. However, the over-emphasis of these means, perhaps even the misuse of them, deserves critical review.

¹ • Very few research tools have been developed specifically for music therapy. Most often tools are adapted from other disciplines.

1) Licentious Technology

Loren Eiseley (1971) comments:

"In his enthusiasm for a new magic, modern man has gone far in assigning to science--his own intellectual invention--a role of omnipotence not inherent in invention itself. Bacon envisioned science as a powerful and enlightened servant--but never the master of man." (p.130)

It is clear that science has contributed greatly to the quality of life for modern man. However, it is also becoming clear that there is only one means to search for knowledge. It may be a case of the means distorting the end. If discovery is the aim of science and its resultant technology, science/technology may appear to be the most efficient means to that end. However, what other means are we leaving behind? And more important, how has our striving in the technological age molded our cultural values in general, and in this case as pertains to health care services?

In Medical Nemesis, (1976) Ivan Illich states:

"Primitive people have always recognized the power of a symbolic dimension..."

(which) set boundaries. Malinowski claims that only industrial society has allowed the use of available tools to their utmost efficiency; in all other societies, recognizing sacred limits to the use of sword and plow was a necessary foundation for ethics. Now after several generations of licentious technology, the finiteness of nature intrudes again upon our consciousness."(p.264)

The morality of the issue surfaces in Illich's statement. In a powerful indictment of the medical community, Illich says that the medical profession claims freedom from the broad world of law and religion and is thus immune to moral criticism by token of its base in science. It does not lay itself open to criticism from society at large but only to its own internal codes.

Illich contends that people are deprived of their health because it is literally taken out of their hands. He considers this an economic, political and moral outrage:

"The physician decides what is symptom and who is sick. He is a moral entrepreneur, charged with inquisitorial powers to discover certain wrongs to be righted. Morality is as implicit in sickness as it

is in crime or sin." (p.p.38-39)

Thomas Szasz (1974) applies similar criticisms to psychiatry and proclaims the contemporary use of psychoanalysis and dynamic psychiatry as a means for obscuring and disguising moral and political conflicts as mere personal problems.

He further states:

"...therapeutic interventions have two faces: one is to heal the sick, the other is to control the wicked. Since sickness is often considered to be a form of wickedness and wickedness a form of sickness, contemporary medical practices often consist of complicated combinations of treatment and social control." (p.69)

a) A Question of Values

Using medicine, and psychiatry in particular, as a form of social control is an attempt to perpetuate the values of society at large and the individual therapist in particular. Inherent in this process as it functions from day to day is the illusion that if a statement or treatment has scientific grounding it is value-free. On this matter Illich (1976, p.41) says: "The assertion of value-free cure and care is obviously malignant nonsense and the taboos that have shielded irresponsible

medicine are beginning to weaken."

Hans Strupp (1977) commentator on the effects of psychotherapy in particular states:

"One of the great stumbling blocks in psychotherapy research and practice has been a failure to realize the importance of values. Therapists continue to assess treatment outcomes on the basis of global clinical impressions whereas researchers have assumed that quantitative indices can be interpreted as if they were thermometer readings. Instead values influence and suffuse every judgement and outcome." (p.8)

Illich (1976) has three main objections to the medical system or health business:

"1) undesirable side effects of approved, mistaken, callous or contraindicated technical contracts;

2) the medical practice sponsors sickness by reinforcing a morbid society that encourages people to become consumers of curative, preventative, industrial and environmental medicine;

3) the so-called health professions have an even deeper culturally health-denying

effect insofar as they destroy the potential of people to deal with their human weakness, vulnerability and uniqueness in a personal and autonomous way". (p.24)

This leads into the issue of self-determination. Since the average person, encouraged by the trend to specialization, is overwhelmed by the mystique of medicine and has forfeited rights to his/her own health, little self-determination exists. The patient is in the hands of the doctor in every respect.

Because treatments are decided under society's and the therapist's value system at that moment, the values of the patient and rights to self-determination and self-actualization are greatly inhibited. As long as the patient is willing to conform to the prescribed social code in varying degrees of strictness, he/she will become cured. If the patient has ways of being and speaking which fall outside the prescribed behavior for a particular social code, these strange "behaviors" are considered deviant and therefore symptoms of some illness.¹ Szasz (1976) says:

"Actually often the only thing "wrong" with the so-called schizophrenic is that he speaks in metaphors unaccept-

¹•The humanistic psychologists are an exception. The influence of the humanistic school is strong in education but not in therapeutic environments.

able to his audience, in particular
to his psychiatrist. (p.14)

Szasz also makes the point that what is considered a schizophrenic thought disorder is merely a person's lack of desire or ability to follow the form of Aristotelian logic--the acceptable form of thinking in society today. (1974)

It is assumed in these cases that the patient is wrong or sick or wicked. Usually no effort is made to respect the novel thought patterns of a patient, or to interpret these patterns as a sincere effort to communicate knowledge or feeling. The key to allowing self-determination is respect.

It seems that once an individual has delivered him/herself into the hands of the medical profession, little choice remains. Thomas Szasz objects to what he calls deterministic explanations of human behavior in psychiatry. He says the aim should be to maximize the scope of voluntaristic explanations...to reintroduce freedom, choice, responsibility into the conceptual framework and vocabulary of psychiatry. (1976)

b) Illusion of Predictability

"According to the popular image of science everything is in principle, predictable and controllable; if

some event or process is not predictable and controllable in the present state of our knowledge, a little more knowledge and, especially, a little more know-how, will enable us to predict and control the wild variables.

This view is wrong, not merely in detail, but in principle. Under tension, a chain will break at its weakest link. That much is predictable. What is difficult is to identify the weakest link before it breaks, "the generic we can know, but the specific eludes us!" (Bateson, 1979, p.40)

Persons who are "different" fall into the category of "unpredictable persons". In a general sense, one of the postulates of the behavioristic model, one of the most widely-used forms of therapy, is that human behavior must be predictable or it is deviant. The illusion of predictability currently reigns in medicine and the behavioral sciences. This illusion has affected two particular groups: 1) the patients or subjects; 2) the public at large.

Viktor Frankl (1959) has said that the individual

personality remains essentially unpredictable. (p.132)

And yet various schools of psychology, psychiatry and some in psychotherapy have invented hundreds of systems which determine a standard "functioning level" or set of behaviors for both normal and "deviant" personalities. Even if one is considered "deviant" he/she is expected to follow prescribed patterns of being. A great deal of pressure is placed on patients from therapists, family and peers, to comply with these standards of predictability. An individual is rarely encouraged to discover or develop his own unique and perhaps creative problem-solving devices.² The creative is the innovative, the novel, the unusual. Therefore predictability often precludes creativity. This rigidity on the part of therapists is in the interest of perpetuating the medical mystique. The health care system implies that the individual does not have the resources to aid in his/her own cure because if left to his/her own devices a patient/client may encounter an "unpredictable outcome." The illusion is the belief by society as a whole that this will not happen if left under the care of a "professional."

The more all-encompassing effect of this illusion on society is the present inclination to forfeit individual rights and support this system socially, economically and intellectually. As society forfeits its' rights via consensus, the individual suffers. Illich (1976) passion-

ately describes the ultimate loss as man gives up even his rights to death:

"Society, acting through the medical system, decides when and after what indignities and mutilations he shall die. The medicalization of society has brought the epoch of natural death to an end. Western man has lost the right to preside at his act of dying. Health, or the autonomous power to cope, has been expropriated down to the last breath. Mechanical death has conquered and destroyed all other deaths." (p.204)

The over-riding danger for society of the illusion of predictability is that all behaviors, including death, can and should be predictable. And yet Strupp (1978) who himself still hopes for a "science of psychotherapy" states:

"Of course a treatment or set of therapeutic procedures may work when the theory is wrong; or the theory may be reasonable, but the techniques may be inefficient or ineffective. The point to be made is that the individual practitioner has no sure way of answering these questions

since he/she must rely on the clinical method. Furthermore the history of science amply demonstrates that humanity's capacity for self-deceptions may persist for centuries." (p.7)

Another major influence on the illusion of predictability has been the wide-spread use of statistical methods. The public at large and most health professionals believe:1) that empirical studies prove things;2) facts cannot be manipulated and distorted under the protection of empirical evidence and statistical methods.

Unfortunately statistical methods and empirical findings are often misused, whether deliberately, ignorantly or unconsciously. One rarely finds a study without bias or hidden assumption, whether its contained in research design, screening of data or choice of statistical method. The area of inferential statistics is particularly hazardous in this regard. Value-free research is a difficult task.

The other obvious concern is regarding the over-use of statistical method. In the hierarchy of research, studies employing statistical methods carry a lot more value than descriptive methods such as case studies. The assumption is that statistical studies are more objective than descriptive studies. This may or may not be true depending on:

- 1) who is doing the study
- 2) if they have an axe to grind
- 3) if they are aware of their own
biases and values
- 4) if they are ethical

and many other considerations. The only clear point is that it is easier to mask values in statistics than in descriptions.

In general, statistical methods should be checked and balanced by the following questions:

First, although some parts of man can be observed and behaviors quantified, there are many invisible parts of man which are equally important when drawing conclusions about personality types, diagnoses, even learning.

Emotions, feelings, values, attitudes and philosophies are not easily pinpointed with statistical accuracy, even if they are measured by standardized tests claiming to describe these kinds of attributes. These statistical methods sometimes paint a superficial picture of man, ignoring the deeper levels of existence, the unique individuality of personalities which often pertains directly to difficulties in life. Although mathematical procedures verify quantitative questions, sometimes, the important "shaping" characteristics of man tend to be qualitative. There are few testing devices or systems of discovery which capture these powerful qualities.

Second, in order to justify use of a particular treatment or method, therapists must provide examples of research documenting the effectiveness of their chosen treatment or method. In medicine, it is generally believed that statistical research rarely lies. In fact, the positive effect of a certain method may very well apply only to the population tested in one study. Replication is rare, and not encouraged by publishers of journals. Generalization is common through the structures of inferential statistics.

Third, statistics can be made to show a variety of results. It would take a great deal of integrity and lack of bias on the part of the researcher who uses statistical methods, for his/her research not to reflect personal attitudes, bias, values, etc. These influences are seldom mentioned. In addition, there are many statistical methods. If one does not show results, it is common to apply other methods until landing on the one which does show the results sought. With the large percentage of research published, researchers have a lot invested in the hope that their particular treatment or theory will work.

This criticism should not be construed to include enquiry, or even scientific enquiry. The point is that statistical methods are only appropriate for certain aspects of human personality and behavior. Their use not

only far exceeds the appropriate limits, but also has inhibited other types of discovery, equally valuable and also more appropriate to certain aspects of man.

The fact that the arts are not now widely-used in therapy may be due to the fact that it is difficult to observe and quantify artistic events, experiences and products, except within some standard of achievement- not always the most important consideration in therapy. And in order to employ methods, they must be statistically verifiable.

The Task Panel on The Arts in Therapy and the Environment for the President's Commission on Mental Health states: (1979, p.1978) "...the measurement techniques of present statistical methodology are not enough to capture the qualitative and affective gains made through exposure to the arts." Although quantifiable research techniques have been used in the arts, results rarely show significant change. This is probably due to the following:

1) Changes inspired by the arts therapies are not easily observed, especially in a behavioral context. Artistic experiences often strike a deeper level and change is more gradual and long-term. Often action which occurs from insight does not happen immediately.

2) The spiritual qualities of artistic experiences are vague and mystical, though equally valuable even

though they are difficult to quantify.

3) Since present research methods may measure only a portion of the artistic experience, the rest of the experience remains unaccounted.

Studies of the arts in therapy therefore are often confusing and give the feeling of trying to fit a square peg into a round hole.

c) Lack of Spiritual Freedom

An individual is free to support or not support the medical system. Sometimes persons are given the choice of whether or not to commit themselves to treatment procedures. Viktor Frankl (1959) emphasizes the ability to choose and introduces the next deficiency in present therapy systems, the lack of spiritual recognition.

"...everything can be taken from man but one thing; the last of the human freedoms--to choose one's attitude in any given set of circumstances, to choose one's own way. It is this spiritual freedom which cannot be taken away that makes life meaningful and purposeful." (p.p.65-66)

The idea that medicine and particularly psychiatry are a type of new religion is common and growing in popularity, referred to by Thomas Szasz and others. On this

issue Frankl says:

"Continually a psychiatrist is approached today by patients who confront him with human problems rather than neurotic symptoms. Some of the people who nowadays call on a psychiatrist would have seen a pastor, priest or rabbi in former days so that the doctor is confronted with philosophical questions rather than emotional conflicts." (p.118)

Frankl shares Illich's and Szasz's view about the dehumanization of psychiatry and urges the psychiatrist to give up mechanical systems of treatment and stop playing the role of technician. He describes the cultural condition of man as an existential vacuum and therefore stresses a search for meaning:

"I would strictly deny that one's search for meaning to his existence, or his doubt of it, in every case is derived from, or results in, any disease. A man's concern, even his despair, over the worthwhileness of life is a spiritual distress but by no means a mental disease...Logotherapy regards its assignment as that of assisting the

patient to find meaning in his life."

(p.p.104-105)

Frankl recommends a personalized and existential meaning to fill the vacuum:

"For the meaning of life changes from man to man from day to day from hour to hour.

What matters therefore is not the meaning of life in general, but rather the specific meaning of a person's life at a given moment." (p.110)

Current methods of therapy have little concern with the issue of meaning. Instead, issues of conformity, functioning level, appropriate behavior take precedent. Levels dealt with in therapy are usually only observable levels. The deeper levels of consciousness and meaning are most often not a consideration. Even Freud's system of psychoanalysis, which has so greatly influenced psychiatric treatment for the last few years, and which claims to deal with deeper levels, considers primarily physiological influences and maintains a rigid approach to interpretation of feelings and experience.

d) Responsibility and Action

Even though Frankl (1959) stresses self-determination, choice and freedom he de-emphasizes self-actualization as

the ultimate goal in therapy. Instead he encourages self-transcendence. His Logotherapy was born out of his own experience in concentration camps. He considers suffering as an ineradicable part of life, even as fate and death. Without suffering and death human life cannot be complete.

An underlying theme for Frankl is responsibility. He claims that only "things" can be determined by others. Each man is unique and must take responsibility to act and to find meaning. No man and no destiny can be compared with any other man or any other destiny. No situation repeats itself and each situation calls for a different response. Sometimes the situation in which a man finds himself may require him to shape his own fate by action.

The lack of encouragement for responsibility and action on the part of the individual helps to create the career mental patient. Illich called the medical business a radical monopoly which feeds on itself.(p.35) Rites have been mentioned which serve to protect and perpetuate this monopoly. Perhaps the strongest influence on keeping the system alive is the patient's own loss of responsibility for self succumbing to the seduction of the medical mystique. This surrender has allowed the career mental patient to exist:

"'Clinical' psychology is a remnant of the medical model. It may prove its worth in case after case by dismantling pathological view point. For judging by results belongs to medical empiricism; besides, it assumes what is to be established: that the soul's pathologizings are to be dismantled. By taking the soul's sickness fantasy at face value as clinical pathology, the clinical approach creates what it then must treat. It creates clinical patients." (Hillman, 1975, p.3)

Clinics, hospitals, mental health centers are filled with people who have given up responsibility for their own health and life. Instead of encouraging these people to take hold of their responsibility, the mental health business provides drug and other treatment regimes which rely totally on clinical methods. Patients and clients must be under regular surveillance by therapists. If they are not, it may be dangerous not only because of possible harm to themselves and others, but because in the patient's ignorance, they may take exception to the prescribed treatment. This strict control is necessary

if treatments are to be effective.

As Illich says:

"the monopoly...serves to legitimize social arrangements into which many people do not fit. It labels the handicapped as unfit and breeds ever new categories of patients.

People who are angered, sickened and impaired by their industrial labour and leisure can escape only into a life under medical supervision and are thereby seduced or disqualified from political struggle for a healthier world." (p.35)

Once a person is admitted to an in-patient ward the enforcement of the value system of the medical treatment staff offers an added humiliation. An even more powerful influence is discrimination by society. The ill effects of lowered self-esteem are often more difficult to "cure" than the initial causes of the "illness" which precipitated hospital admission in the first place.

Frankl mentions another bad effect of institutionalization and treatment which functions as a self-fulfilling prophecy:

"Our current mental hygiene philosophy

stresses the idea that people ought to be happy, that unhappiness is a symptom of maladjustment. Such a value system might be responsible for the fact that unavoidable unhappiness is increased by unhappiness about being happy." (p.p.115-116)

Hillman (1975) simplifies the problem:

"We cannot recover soul from its alienation in professional therapy until we have a vision of pathologizing which does not require professional treatment in the first place." (p.78)

Summing up, it is clear from the above that current and widely-accepted forms of therapy, particularly psychiatric treatment do not encourage the following:

- 1) Freedom
 - choice
 - self-determination
- 2) Responsibility
- 3) Action
 - self-expression
- 4) Spiritual realization
- 5) Philosophical realization
- 6) Innovative thought and behavior

The last and most important inadequacy to be noted is the lack of encouragement of creativity in standard treatment forms. This particular shortcoming has direct relation to the eight points mentioned above. It is difficult to divorce the issue of the effectiveness or lack of effectiveness of therapy from the issue of a lack of creativity. Although it may be said that theorists have indulged in a fair amount of creativity in creating systems of therapy (licentious technology), patients are not encouraged to exert equal amounts of creativity when breaking away from these systems or in creating their own. Creativity in reference to the patients/clients is influenced by all the above points in varying degrees.

2) A Dearth of Creativity

Until recently literature on the topic of creative process and creativity in general has been lacking. Although a great deal has been written about creativity in the last two decades, much of it fails to capture the essence of creativity. Rosemary Gordon in her book Dying and Creating: A Search for Meaning (1978) states that there will always be an element of mystery to creativity and criticizes researchers in the area:

"Those who have recently tried to construct creativity tests have really

been misled and they mislead, for such tests tend to neglect considerations of relevance and quality, and concern themselves only with quantity or with fluency of association." (p.129)

There may be a hidden cultural resistance to describing creativity in order to keep mystery and magic in our lives. But scarcity is also due to the scientific nature of most research, as illustrated by Gordon, and the elusive nature of creativity itself.

As Koestler (1964) says:

"Laughter and tears, awe and wonder, religious and aesthetic feeling, the whole 'voilet side' of the rainbow of the emotions was left to the poets, to worry about; the so-called behavioral sciences had no room for them." (p.285)

Koestler names these types of emotions "self-transcending" and calls them the nourishment of creativity.

"The self-transcending emotions are the step-children of contemporary psychology. One of the reasons is perhaps that they do not tend toward observable muscular activity but to-

wards quietude, grief, longing, worship, raptness, aesthetic pleasure are emotions consummated not in overt but in internalized, visceral behavior." (p.299)

Koestler adds:

"Owing to the peculiarities of our cultural climate the participatory (self-transcending) emotions have been virtually ignored by contemporary psychology, although they are as real and observable in their manifestations as hunger, rage and fear." (p.299)

Not only are these emotions real, but they are essential to human life and health. Within the process of living, creativity might be thought of as the product of these emotions. They are essential to improving the quality of life. As Rogers (1954) says concerning a lack of creativity in our culture:

"Unless man can make new and original adaptations to his environment as rapidly as his science can change the environment, our culture will perish. Not only individual maladjustment and group tensions but international annihilation

will be the price we pay for a lack of creativity." (p.138)

There is cause to be concerned about the individual as well. If as Jung says, creativity is one of the basic instincts of man, it must be satisfied in a constructive form or it will become destructive.

Rogers has five basic criticisms of how the culture manifests a dearth of creativity:

- "1) In education we tend to turn out conformists, stereotypes, individuals whose education is completed, rather than freely creative and original thinkers;
- 2) In our leisure time activities, passive entertainment and regimented group action are overwhelmingly predominant, whereas creative activities are much less in evidence;
- 3) In the sciences, there is an ample supply of technicians, but the number who can creatively formulate fruitful hypotheses and theories is small indeed;
- 4) In industry, creation is reserved for the few...whereas for the many life is devoid of original or creative endeavor;

5) In individual and family life
the same picture holds true...
to be original or different is
felt to be dangerous". (p.137)

Sinnott (1959) considers creativity (as does Jung) to be directly connected to the processes of life itself: "Here, we should remember, is the place where matter, life and mind are most inextricably mixed. Here the natural tendencies and predilections of living stuff come to expression". (p.III)

a) The Creative Personality

Pickering in his book, The Creative Malady (1974), offers the thesis that illness, in particular psychological illness, may sometimes be an aid to creative work, which can benefit society and the "victim". He states three reasons why this thesis has been neglected up until now:

- "1) The difficulty in distinguishing an illness of the body from one of the mind;
- 2) Ignorance of the nature and causation of mental illness;
- 3) The extent to which society feared and still fears mental illness". (p.p. 17-21)

As discussed earlier, mental patients and the "patients" in general, who receive therapy, are not encouraged to acknowledge or develop their creative inclinations, but instead to follow prescribed ways of being. All individuals suffer from this approach, but those who suffer most are those who do have particularly creative personalities. These people are most misunderstood and inhibited by therapeutic procedures. An acceptance of the value of creativity must be ever present for these people to develop their creativity towards constructive ends. Throughout history, creative people are seldom recognized for their opinions and products within their lifetime. This is probably due to the fact that creativity, by it's nature, implies a type of rebelliousness, a breaking away from the usual way of doing things. Society, in order to preserve the status quo maintains a resistance to change and will react on defensive cue, considering the "novel" ideas and the iconoclastic personality deviant. Because artists are so intimately involved in the creative process, they receive a sizeable portion of the criticism. Ironically, as long as they are considered by the society to be bona fide artists, they are permitted to be a bit more strange than the average man. If one of the assumptions of the arts therapies is that Everyman is an Artist, this

creates a problem in society's acceptance of the process and results of art therapy sessions as manifested by the personality of the patient/client/artist:

"Artists...have tended to behave oddly. This probably related to their rejection of the ideas of current society and the technique of classical art and the foundation of revolutionary new schools...it is important to maintain a distinction between non-conformity and mental illness if we are not to fill our mental hospitals with those who criticize society."
(Pickering, 1974, p.288)

Freud's (1920) description of the artist:

"The artist is an incipient introvert who is not far from being a neurotic. He is impelled by too powerful instinctive needs. He wants to achieve honour, power, fame and the love of women. But he lacks the means of achieving these satisfactions. So like any other unsatisfied person, he turns away from reality and transfers all his interests, his libido,

too, to the elaboration of his imaginary wishes, all of which might easily point the way to neurosis; it is well-known how often artists especially suffer from a partial inhibition of their capacities through neurosis." (Pickering, p.289)

Freud implies here that the thinking processes and products of artists are results of pathological conditions. Considering the far-reaching influence of Freud, it is not surprising that the arts are not widely-accepted as a therapeutic mode. He considered art as a flight from reality instead of a symbolic representation which captures meaning and significance both for the individual and the culture. Of course, art can be used as a flight from reality, just as psychoanalysis can be a flight from reality. The difference is found in the "how", the application. If the individual is encouraged to develop creative drives in a constructive manner, the reality of the world and the realities of the arts can be one in the same.

Storr (1972) believes that the schizoid character aids in creativity in the following ways:

- " 1) Most creativity is solitary;
- 2) Creative activity enables a schizoid person to retain at least part of his

fantasy of omnipotence;

3) Creative activity, for the schizoid person, reflects his own scheme of values in which the characteristic feature is that a greater importance is attributed to inner reality than to the external world;

4) Certain kinds of creativity are peculiarly apt for overcoming the sense of arbitrary unpredictability;

5) Creative activity can undoubtedly act as a defense against the threat which overhangs the schizoid person of finding the world meaningless."

(Pickering, p.p. 297-8)

From Storr's comments it can be seen that the schizoid person has created a safe place in which to express himself, a place needed in fact for everyone. The other significant point made by Storr is that the schizoid person runs the risk of finding the world meaningless, experiencing isolation and anomie. This danger can be generalized to include Everyman. Frankl described his "existential vacuum" as being a cultural trend.

Although it can be assumed that everyone has traces of creativity, the easiest place to identify the personal

characteristics necessary for creative inclination are with the creative personality. Once discovered, these characteristics can then be encouraged in Everyman.

In a study done by Maduro with East Indian folk painters, the highly creative group had:

- " 1) a particularly rich fantasy life;
 - 2) could tolerate ambiguity;
 - 3) were capable of very complex symbolic identifications;
 - 4) had more fluid and permeable outer and inner ego boundaries with a strong ego-core, requiring less unconscious defensive manoeuvres".
- (Gordon, 1978, p.135)

Maduro also noted that in their works the artists were able to reflect the culture and the environment, while still adding their own unique and "novel" personality to their work. It is this combination of inner and outer exploration which is necessary if the arts are to be useful in therapy. The artists/ patients should be free to comment on the condition or situations of their lives which call for expression through their own perceptions and interpretations.

b) The Nature and Essence of Creativity

There are many different opinions about the nature and essential elements of creativity. Rogers (1970) claims that an accurate description of the creative act is unlikely for by its very nature it is indescribable. All that is possible is to attempt to bring out the essence. (p.145)

Pickering (1974) names passion as the essential element in the creative process. He says that "a psychoneurosis represents a passion thwarted, a good creative work, a passion filled. It is this thwarting of passion which takes place in the name of medical treatment." (p.309)

Rogers says that the mainspring of creativity is self-actualization and claims that true creativity must yield a product as opposed to others who would consider process a legitimate functioning of creativity.

Gordon (1978) says that a search for meaning is essential to the creative process. She further says:

"Engagement in a creative process depends, I believe, on a person's capacity to mobilize contradictory but mutually reciprocal qualities. A person must be open to new experiences no matter how bewildering or

unknowable." (p.130)

But perhaps the most interesting explanation of creativity is provided by Sinnott (1959) in an article on "The Creativeness of Life." He points to imagination and free association as the keys to creativity and says there are two distinct types of creative process:

1) An accumulation of all information available, then putting the information together into unrecognized relationships;

2) A more common process in which a new idea arises, almost spontaneously in the mind, often seemingly out of nothing and at a time when a person might be thinking of something quite different.

This second type of creativity is dealt with through a rather romantic perspective in Bob Samples book The Metaphoric Mind. (1976) He describes the creative process developing through metaphoric rather than logical classifications.

Further describing this possible metaphoric type of creative process Sinnott says:

"The living system here is exercising its ability to integrate and organize a pattern out of formlessness, an achievement which rational thought, being somewhat removed from its primi-

tive being source and bound with habit and convention, may be incapable of doing...the striving of the unconscious to create patterns out of formlessness is the same process used by the body so that mind and body share this creative element. 'Creativity' thus becomes an attribute of life." (p.107)

Sinnott, therefore, does not separate physical and mental processes of creativity but considers them one vital life force.

c) Conditions for Creativity

If an individual has the essential elements of creativity, which could be passion, imagination, a searching for meaning, a desire for self-actualization, a predilection to free association, consideration of creativity as a life force, it only remains to set up the conditions to foster creativity. This must take place on the part of the individual and the society itself.

Commenting on the individual Gordon says:

"The process of creation demands first and foremost that a person be available to those freely moving, oscillations between control and surrender, between

differentiation and de-differentiation,
that is between periods of active con-
scious work on the one hand and periods
of passive acceptance on the other."

(p.140)

So Gordon describes a state in which a person has
time for both application and reflection, or nourishing
and being nourished.

Rogers (1970) claims that creativity exists in every
individual and awaits only the proper conditions to be
released and expressed. He outlines three conditions
necessary for creativity to emerge:

- " 1) an openness to experience and lack
of rigidity;
- 2) the product must have the "feel"
of being me-in-action;
- 3) an ability to toy with the elements
and concepts, to play spontaneously
with ideas, colors, shapes, relation-
ships". (p.143)

Rogers also describes the conditions which must be
provided by society to foster creativity. He says that
psychological safety must be present, i.e., accepting
the individual as having unconditioned worth and provid-
ing a climate in which no external evaluation is present.

The second condition which must be provided by society is psychological freedom to allow for symbolic expression.

Although I would question Roger's issue of absolutely "no external" evaluation, both in society and in therapy, for the most part, both Roger's and Gordon's conditions can be applied to therapeutic settings as well as to society.

These call for more freedom echo Frankl's insistence on providing choice, freedom and the right to self-determination.

Rothenberg (1979) in an article entitled "Creative Contradictions" says that creative people are drawn to tensions between opposites, and have a tolerance and an ability to work with paradox. He describes this process as "janusian thinking" and, claims that it is a conscious as opposed to unconscious activity. Opposites or antitheses are conceived simultaneously. One novelist interviewed by Rothenberg referred to the source of his novel as being one line indicating that love and hate were the same. He notes Taoism with its opposites of Yin and Yang and Buddhism with nirvana being the end of the cycle of rebirth as being similar to the concept of janusian thinking of the creative individual. This approach has particular significance here. Paradox is often what brings people into therapeutic environments.

Because of lack of insight, understanding or problem solving ability they are immobilized by paradox instead of challenged to growth through it. Rothenberg suggests that janusian thinking is often outside of or beyond logic. Therefore it follows that patients and clients should be encouraged to experiment with novel ideas to ponder what Rothenberg calls irreconcilable constructs.

d) Creativity and the Arts

The relation between the arts and creativity is not exclusive. On the contrary, creativity lives in Everyman, whether in a dormant and yet undiscovered stage or functioning at full capacity.

On the other hand, Music Therapy is no more a science than Physics is an art, as Physics in a sense is no more a science than Music Therapy is an art. The element of creativity signifies an approach or attitude, e.g., Physics is an art and Music Therapy a science, when describing approach as opposed to essence, As Gordon states:

"...the creative process can be applied to anything but it is true that artists, probably more than anyone else have been interested and concerned with the actual process...furthermore, making 'art'

involves perhaps a particularly large number of different mental activities, such as making, forming, inventing, discovering, learning and experimenting, feeling, thinking and doing."

(p.129)

It seems that the arts encourage "easy access" to creativity. By experiencing the creative arts therapies, patients/clients are able to participate in symbolic healing experiences and may also apply these newly-practiced processes in creativity to other part of their life for growth and change.

The 1978 Task Panel for the Use of the Arts in Therapy and the Environment of the President's Commission on Mental Health has stated:

"The arts, if presented in a setting of their own under the supervision and guidance of the creative professional, can provide the necessary opportunity for their inherent healing powers to support the innate strengths and integrity of the patient. If such a healing experience is made possible for the patient to carry the knowledge and strengths gained from the creative experience into the life he will take up

outside the hospital." (p.1961)

Closing

It is unfortunate to make distinctions between science and art for they can be considered one in the same as a vehicle for discovery. However, in order that the life and potential of the "total man" be appreciated, it is important for a while to take an attitude of constructive criticism. Such criticism is important to make use of other vehicles of discovery which fall under the heading of "the arts", rather than under "illicitious technology", named by Illich.

To be specific, it may be more useful for the individual and society, for man to utilize the processes, techniques, methods and attitudes of all the arts in more areas, particularly those concerned with healing. Because of a consensus in the ~~medical professional~~, society has taken on certain fixed attitudes about what can and cannot be considered therapy.

Thomas Szasz (1974) calls for new solutions: "The only viable alternative to this familiar but false perspective is to abandon the entire approach to mental illness and to substitute new approaches for it." (p.79)

In many cases, the arts could provide this alternative. Spinoza has said that "emotion, which is suffering, ceases to be suffering as soon as we form a clear

and precise picture of it." (Frankl, 1959, p.74)

The arts provide powerful ways in which to focus and clarify "pictures", whether in sound, movement, color, or shape. This is particularly true in the spectrum of emotions. The arts can even be considered the language of emotion.

In addition "the arts with their inherent ability to elicit involvement and personal action, may be employed as a counterforce to the widespread passivity in our society, the unwillingness to exercise control and assume personal responsibility." (Task Panel, 1978, p.1942)

Within the experiences offered in the arts therapies not only is there a meaningful expression of emotion, but also an invitation to personal action.

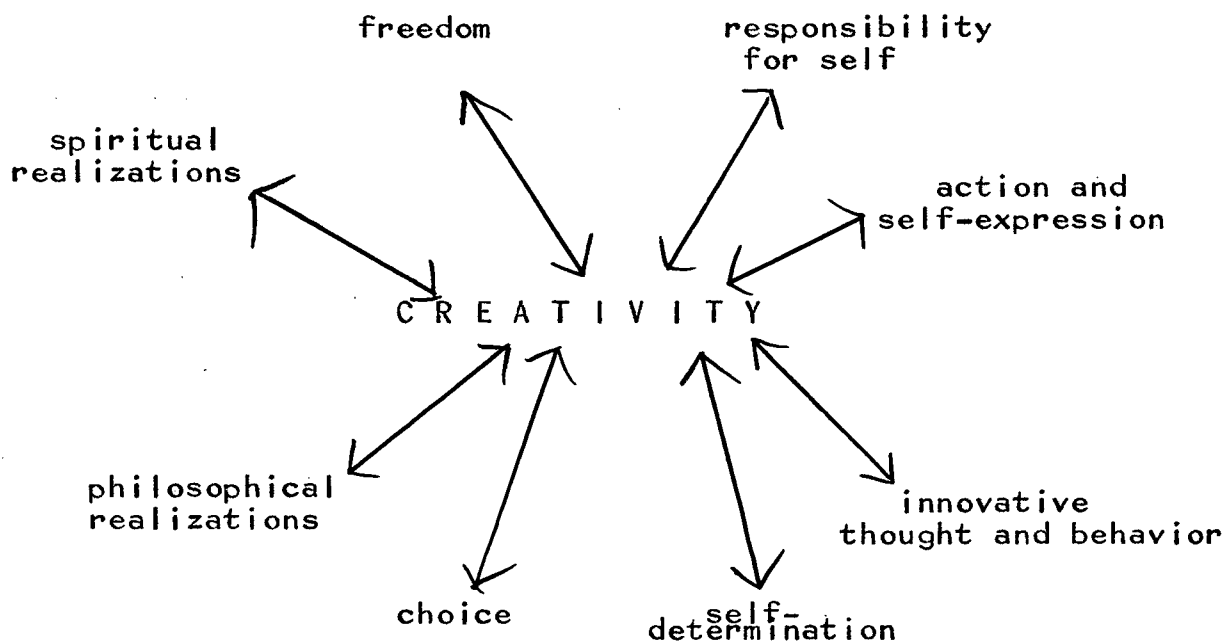
As mentioned previously the issue of the effectiveness or ineffectiveness of various therapies cannot be separated from the issue of creativity. It should be clear by now that the major concern within this document is the rigidity provided within medical treatment as opposed to the potential creativity which could be offered through the arts and modification of present therapies.

As Arieti (1976) states:

"Although creativity is by no means the only way in which the human being can grow, it is one of the most impor-

tant. The growth occurs not only in the creative person but in all those who are affected by the innovation". (p.413)

The following illustration shows the relationship between important considerations neglected in standard non-art therapies and creativity.



This illustration indicates both an inward and outward movement. All of these qualities or functions or phenomenon (which will be called categories) feed creativity and are fed by creativity. They are all necessary for creativity and the successful functioning of creativity builds on each particular category. The inward and outward motion can be considered in another analogy. The outside categories are gifts which society allows the patient to receive through an attitude of support and a spirit of discovery. The individual represents creativity. If the flow is permitted, both society and the individual benefit from any products of the creative process.

Every element of the model is inherent in experiences with the arts. Although these processes could naturally be distorted by poor leadership or lack of wisdom and respect, the potential for arts, and arts therapies experiences to heal are great. The next section will provide some examples of how native cultures use the arts for healing.

SECTION B

THE DEATH-REBIRTH MYTH

I am the tree

And in this moment of being tree

I experience both the endless struggle
and profound beauty of life in the same
breath.

We are engaged in a quest for survival and
balance.

I hear the music of our dance even through
the silence of dark hours.

Soon the leaves on my brother will turn
many shades

And leave...to replenish the earth again.

I too change.

I sometimes die and am reborn.

As long as we share connecting patterns
we are one,

Not I, nor he

...but whole and sweet life.

- C. Kenny
1979 (unpublished)

1) Myth

Before the implementation of the Death-Rebirth Myth, it is important to reinstate the concept of myth as healer. This presents some difficulty both because of the present popular definition of myth and certain cultural associations attached to the concept of myth. The most simplified definition of myth is that it is a widespread cultural story. There is usually a message in the myth beyond the story, a helpful hint about how to live. Perhaps because we experience myth through rituals and rituals are associated with "magic", modern man finds it difficult to accept the concept of myth. Myth has been distorted in general usage to mean an untrue story, something which seems true, but is not. Larsen (1976) holds scientists accountable for some of this distortion.

"Science has in fact rendered 'mythological' all assertions about the nature of the universe which are not verifiable by experiment. From the animistic beliefs of primitives to the highest metaphysics of philosophers, theologians, all models of the universe or the workings of reality which cannot be explicitly validated in the experimental paradigm of science become unverifiable theory--myth for short. And

the most prevalent modern meaning for myth is, in fact, attractive fiction, tempting, but inprovable." (p.3)

Culturally, this is how we find ourselves in relation to myth at the present time.

But we are coming into a time of myth once again.

Larsen (1976) continues:

"But against the background of history, the eye-opening years of our rational, scientific enlightenment seem a brief moment in the morning of consciousness. We have culturally yawned and stretched a little, but the shadow, myth-susceptible dreamer is still there just below the surface of our new-found awareness."
(p.3)

Dimmitt-Church (1975) offers a current interpretation of myth:

"Myth is a synthetic mode of experience and expression that derives from the right brain, holistic mode of consciousness. It relates to that part of man's psyche that is largely inaccessible to the external empirical world, is largely non-verbal, and is more closely in touch with the repository of inarticulate, instinctual patterns, or arch-

types that affect external life indirectly through symbolic activity but are not directly accessible to consciousness." (p.51)

Thus through myth we are able to externalize our individual human hopes and fears into the cultural context and experience them as "shared" phenomena.

Weekamn (1975) provides a contrasting idea about myth and mode:

"I do not even think that we have to change our mode of consciousness in order to find meaning in myths as well as history and science. We need only broaden the world of our data, have a fuller notion of what makes up reality, and include the uniquely human and psychic elements of life in our notion of the factual. Then the old polarities of myth and fact, religion and science, revelation and rationality disappear. Myth is seen to be as ordinary and as extraordinary as any attempt to express the mystery of the world, and as fruitful." (p.106)

This is a sensible way of dismissing the imagined polarities of myth and fact.

Regarding the function of myth, Joseph Campbell expresses one of the functions to be a shift of emphasis from the individual to the group. Myth is a wonder which man cannot explain, an informing energy, a reminder that the whole world is Divine.⁴ For the Navaho people, myths affirm that there is rhyme and reason in a world full of hazards (Kluckholm, 1946, p.233).

Malinowski (1948) states that for primitive cultures in general:

"Myth fulfills an indispensable function: it expresses, enhances and codifies belief; it safeguards and enforces morality; it couches for the efficiency of ritual and contains practical rules for the guidance of man. Myth is thus a vital ingredient of human civilization." (p.101)

He also stresses the intimate relationship between myth and ritual, together providing a living reality. (1948) Ritual is the form through which we experience myth.

In the Melanesian culture "an intimate connection exists between the word, the mythos, the sacred tales of a tribe, on the one hand, and their ritual acts, their moral deeds, their social organization, and even their practical activities on the other." (Sandner, 1978)

Since our interest in both myth and ritual comes

from a desire to reinstate them for present day healing, it is necessary again to develop a current interpretation. Sandner (1978) through his description of Navaho symbols of healing provides us with this opportunity.

"The myth makes do with what "facts", it has, and goes about its business of creating an intuitive emotional interpretation of them. The rituals embody sacred action appropriate to the structure of the world built up by myths. They go hand in hand, completing and complementing each other--the mythic reality and the ritual response." (p.13)

In other words we go with what we have, searching for the bare bones of mythic content left for us, the common territory which unites people, and also begin to create rituals in which to relive myth.

a) Symbolic Healing

"If we listen sensitively, patiently, to the symbol code of the mythic messages, could they in fact change us by changing the way we look at our lives and ourselves, by changing the angle, the position in which we "Stand under" them? (Dooling, 1976, p.51)

Integral to the use of the Myth of Death-Rebirth is the concept of symbolic healing. Within symbolic healing, the symbol, in this case the music embodying the Death-Rebirth Myth, has some spiritual, psychological, physical effect and inspires a healing of some damaged part of personality. In this case, by stimulating the person to identify with the process of death-rebirth, the person is able to experience a metaphoric dying and rebirth. Metaphoric dying engages the psyche on some level, whether through cognitive recognition or spiritual inspiration. This reaction is difficult to monitor from behavior and may take the form of learning from corrective experience, acquiring new insight, identifying the similarities between symbolic death-rebirth and some present life dilemma.

Since there are many interpretations of what constitutes a "symbol", it is important to clarify its meaning here. Whitmont (1969) in The Symbolic Quest, defines symbol as "the expression of a spontaneous experience which points beyond itself to a meaning not conveyed by a rational term, owing to the latter's intrinsic limitation." (p.18) He says that a symbol is the best representation of a relatively unknown thing.

"The symbolic approach by definition points beyond itself and beyond what can be made immediately accessible to

our observation. While this approach is not abstract or rational, neither can it be regarded as irrational, rather it has laws and a structure of its own which correspond to the structural laws of emotion and intuitive realization."

(p.14)

Both Dooling and Eliade claim that "symbolism is a revelation of reality, a message that speaks of passage from one world of meaning to another, sometimes Divine to human." (p.50) For present purposes, all of these ideas shed some understanding on "symbol". But Suzanne Langer's (1953) simplified definition will serve both to clarify the meaning and to establish an important link which will be discussed later: Symbol is any thing which may function as the vehicle for a conception. In this case the music is the vehicle which establishes a relation between the mythic concept of death-rebirth and the people participating in the musical experience.

Dimmitt-Church (1973) adds a new dimension in describing symbolic activity:

"'Symbolic activity'" is manifest as a synthesis of right and left brain functions, both in experience itself and in the expression of that experience.

Both knowledge and meaning involve the entire psyche, both wholistic and analytic functions, both inner mythic and outer historical dimensions of existence." (p.51)

Symbols are necessary vehicles for healing in native cultures. Again Sandner explains the function of symbols for the Navaho: "Symbols not only provide a vocabulary and an explanation but also change the psyche by converting energy into a different form, a form that can heal." (Sandner, 1978, p.14) Here he refers to a Navaho "sing". A "sing" means a healing ceremony to the Navaho people. Describing a healing ceremony of the Cuna Indians of Panama, Levi-Strauss (1967) notes:

"Once the sick woman understands, she does more than resign herself, she gets well. But no such thing happens to our sick when the causes of their diseases have been explained to them in terms of secretions, germs or viruses. We shall perhaps be accused of paradox if we answer that the reason lies in the fact that microbes exist and monsters do not. And yet, the relationship between germ and disease is external to the mind of the

the patient, for it is a cause and effect relationship; whereas the relationship between monster and disease is internal to his mind, whether conscious or unconscious; it is a relationship between symbol and thing symbolized, or between sign and meaning. The shaman provides the sick woman with a language, by means of which unexpressed, and otherwise inexpressible, psychic states can be immediately expressed." (p.193)

Whitmont (1964) presents two possible approaches to the problems and disturbances which life presents:

- 1) symptomatic--deviations from normalcy;
- 2) symbolic--meaningfulness yet unrealized.

Again on the Navaho use of symbols Sandner says:

"By the presentation of these symbols man is put in touch with his inner resources. If the healing images are strong enough, if the medicine man is skillful and unwavering in his purpose, and if the patient's involvement is deep and urgent, then healing can confidently be expected to occur." (p.22)

The same process can be applied to current "therapies". This brings up the question of specific disabilities. In light of present medical knowledge, Sandner's description could be read as dealing with psychological or spiritual "lack of resources" only. However, enough research has accumulated to safely conclude that the mind-body separation theory is a dubious idea. These areas of research include biofeedback, altered states of consciousness and neurophysiology. It is becoming clear that mind and body are part of the same whole and are mutually effected by stimulus. The category of illness pertaining to this information is the area of psychosomatic "diseases".

Moerman (1979) in an article on "Symbolic Healing" states:

"Research...in psychosomatic medicine, biofeedback, and hostpathogen interaction all indicate in a general way that there are substantial pathways which link physiological and cognitive states, that these two realms of human existence, body and mind, are linked, and moreover, that these pathways are the stage on which metaphoric concepts of performance are effective and influence biological processes." (p.62)

He discusses a relationship between symbol and substance, mind and body, psychological/sociological phenomena and physical symptoms, mental acts and physical life. Studies in neurophysiology have identified one of the links between mind and body in the center of the autonomic nervous system, the hypothalamus.

"...the power of the metaphor, a 'strategic prediction' can move us, that is, change our minds and lead us to behavior change. Metaphorical structure, the system of meaning of a healing discipline is decisive in its effectiveness as much as drugs... as in Native healing rituals where both drugs and songs and dances are felt to have equal impact."

(Moerman, 1979, p.60)

Since symbolic healing occurs both in and between mind and body, the metaphoric and the physiological, it represents a holistic approach. The relation between symbolic healing and the death-rebirth myth is that the whole person experiences or learns about the value of the death-rebirth process, on its various levels from actual death to some temporary situational loss. Sandner (1978) describes four basic forms or archtypical

principles of symbolic healing:

- 1) a return to the origin or source, the Creation of the world;
- 2) management of "evil";
- 3) the restoration of a stable universe;
- 4) the theme of death-rebirth.

We will concentrate on the last category.

b) The Regenerative Experience

Within religious and cultural systems, the regenerative experience has always been valued as one of man's basic healers. In some, as will be illustrated, the cycle of regeneration provides the *raison d'être*, the essence of meaning to life.

Buddhism is based on the continuous cycle of death and rebirth. One never really dies. One is born again many times until the achievement of Nirvana. This process may take a person through many bodies and many ages. Each life is related to the past lives and each life strives to complete the unfinished business of the past (karma).

"...the wish for perpetual survival is perhaps the most powerful desire motivating the ordinary person's life. It is very interesting to see how this problem is handled in the

Zen system. To begin with the idea of being dead verses being alive is labelled a fallacious concept based on dualism. The Buddhist cosmology of constant change, of a basic Nothing that takes a variety of forms says that the student is part of a process that does not end but simply changes or flows." (Deikman, 1971, p.78)

In the Hindu tradition the Bhagavad Gita says:
 "For certain is death for the born, and certain is birth for the dead.

The poet Maulana Jalaluddin Rumi (1207-1273) considered to be the most influential figure in the development of Islamic thought sees that:

"Everything follows the rule that sacrifice is necessary to reach a higher goal. The field has to be ploughed, be torn mercilessly, so that it can receive the seed; the seed grows and is harvested and the grains are crushed under the millstone; the flour then has to endure the process of baking in order to become bread, which will be crushed

again by man's teeth. But by this constant succession of sacrifices the grain will finally become part and parcel of the human nature and will thus participate to a certain extent in the human soul and spirit."

(Schimmel, 1978, p.7)

Another Eastern philosopher, Gurdjieff (1949) says: ...the appearance of one indivisible I...But in order to be able to attain this or at least to begin to attain it, a man must die...Attachment to things...keeps alive a thousand useless I's in a man. These I's must die in order that the big I may be born...continual consciousness of his nothingness and of his helplessness will eventually give a man the courage to "die", that is, to die, not merely mentally or in theory, but to die in fact and to renounce actually and forever those aspects of himself which are either unnecessary from the point of view of his inner growth or which hinder it.

(Pababola, 1977, p.7) Christian philosophy and practice is based on the model of Christ who died, only to be born again, transcending life on earth, achieving a higher state of existence. The baptism ritual allows a person to become born again by dying to original sin.

Brother David Steindl-Rast (1977) a Benedictine monk,

provides a useful interpretation of the Christian approach to death, focusing on the similarities between Eastern and Western thought. He says that one of the basic approaches to daily life in the monastery is to have death at all times before one's eyes. "It is seeing of every life against the horizon of death, and a challenge to incorporate that awareness of dying into every moment so as to become more fully alive. (p.22)

He makes a distinction between purpose and meaning. And as Frankl in our first chapter claims, we live by meaning and often lose the meaning by getting lost in purpose. He lends a Christian interpretation to the non-attachment principles we hear so often associated with the Zen tradition.

"Whenever we give ourselves to whatever presents itself instead of grasping and holding it, we flow with it... everything is alive as long as we let it go...For this seems to be one of the basic laws of life; we have only what we give up." (p.25)

He uses the example of a mother and child and their personal relationship. "Even after (a child) is born physically it has to be set free and let go over and over again...I think mothering is just like dying...it is

something that we must do all through life." (p.25)

Brother Steindal-Rast gives us his interpretation of the current state of culture within the context of his article "Learning to Die":

"Our problem at the moment seems to be that we have outgrown our child-like integrity in dealing with eschatological myths, but have not yet achieved the integrity of mature minds capable of accepting these myths more fully than the child could. We are like awkward adolescents who laugh at fairy tales that were deeply meaningful to them not long ago and will be more meaningful still a short time hence." (p.29)

Sandner discusses the death-rebirth myth and its function in Navaho life:

"Death and rebirth are the mythological symbol for a psychological event: loss of conscious control, and submission to an influx of symbolic material from the unconscious. This is always felt to be a great sacrifice, a dying to one's own self. Like the sun, the ego must prepare itself

for a plunge into the darkness of the unconscious world, there to experience rejuvenation. The symbolic process of death and rebirth is found wherever there is a life crisis necessitating rites of transformation rechanneling psychic energy from old patterns to more functional new ones." (157)

Within Sandner's description it is easy to identify the relevance of the death-rebirth myth for man today. The application would be the same. Not only does the myth have great meaning for each person in individual life, but it also serves the other important group function through identifying what Campbell calls an elementary idea, that is, an idea which applies to all people, a human constant. This second function adds depth and meaning and encourages people to consider themselves in relation to other beings. One person is not alone in suffering. Sandner discusses the matter of "suffering".

"Suffering is an integral part of human life. To the doctor or medicine man who works with people in distress, this has an immediate daily reality. He learns that man can accept a tremendous amount of

legitimate suffering; what he cannot accept is suffering that has no purpose. To be endured and accepted, suffering must be given a meaning." (p.157)

The death-rebirth myth, if accepted and experienced through cultural ritual of some kind, can be "meaningful". Death and rebirth connect the psyche to the on-going processes and rhythms of life. Any one of life's situations can provide a context for this universal myth. Victor Frankl speaks of life in the concentration camp. He says that in order to survive and find some meaning for existence, the prisoners went through a phase of apathy or what he calls "emotional death". Once they had "died" and reduced their psyche to the most basic level of existence, they were prepared to be reborn again in the concentration camp. Frankl suggests that people do not need a tensionless state, but instead require a striving and struggling for some worthy goal.

The Salish Guardian Spirit Dance Ceremonies provide an example of how the regenerative experience is used as a healer within a social/spiritual system. The initiates, who are usually young people having some problem in life, are encouraged to die to the white man's ways and be reborn again as a true Indian. (Jilek, 1972)

Through the rituals of Guardian Spirit Ceremonials, participants sing, dance, fast, costume, train and undergo a type of symbolic death which frees them from both corrupt influences, such as drugs and alcohol and anomie resulting from a lack of cultural identity. Once a person has been initiated in these ceremonials he or she is eligible to dance every season in order to renew personal healing. Guardian Spirit Dances are rituals which have been reinstated into the Longhouse by the Salish people to add healing for members of the band today.

Rituals of initiation, transformation, creation, the hero myths all relate to death-rebirth. Each re-enacted situation implies going through some difficult experience, dying to part of self or letting to of something or someone and being transformed, reborn, or greatly changed in some way. Eliade (1958) states:

"Initiation lies at the core of any genuine human life. And this is true for two reasons. The first is that any genuine human life implies profound crises, ordeals, suffering, loss, and reconquest of self, "death and resurrection". The second is that, whatever degrees of fulfillment it may

have brought him at a certain moment, every man sees his life as a failure. The hope and dream of these moments of total crisis are to obtain a definitive and total "renovatio", a renewal capable of transmuting life." (p.135)

This applies to all mankind, whether ancient or modern. Becker (1973) sites Adler on this human condition:

"It was Adler who saw that low self-esteem was the central problem of mental illness. When does the person have the most trouble with his self-esteem? Precisely when his heroic transcendence of his fate is most in doubt, when he doubts his own immortality, the abiding value of his life, when he is not convinced that his having lived really makes any cosmic difference." (p.209-10)

Robert Orstein (1972) simplifies the idea: "Our own death is something which we usually ignore; yet the writers of the traditional psychologies suggest, its lessons can be taken while we are still alive." (p.161)

Since the medical community functions primarily as a

closed body or society, its own internal systems are considered more relevant than the ways of the past, certain esoteric psychologies or religious philosophies. These resources are rarely integrated into the scientific body of knowledge. The regenerative or transformative experience as described here, is not employed on a conscious level. Certainly the full potential of the death-rebirth myth as a healer has not as yet been explored in therapeutic settings. However, in the past five years, the topics of actual death and symbolic death have received attention on a theoretical and in some cases practical level. This change hopefully represents a catalyst which in the near future will produce a direct result in the world of "therapies". The basic message of this literature is to consider the act of physical death-rebirth as one step in many "dying" steps in life. The assumption is that death is one of the inevitable laws of nature. Instead of thinking about death with fear and denial it is possible to consider it instead as part of the ongoing process of life. Without death there is no life, without life there is no death. An attitude about death reflects an attitude about life. It is hoped that if one comes to accept the inevitability, necessity and even value of death, the same insight will apply to life and particular life situations. Stanley Keleman (1974) des-

cribes some of the possibilities in his book, Living Your Dying:

"Discovering our dying is a turning point. Dying evokes the helplessness, the unexpected, challenging the unknown. Dying establishes new directions, gaining new powers, loosing the old. Giving up action patterns, thought patterns, being unsure, being excited, knowing something is emerging but not knowing where it is going. Dying, like any turning point, is a place of transition, a facing of the unknown and the emerging complexity of new ways of being new actions, thoughts, feelings. Each turning point is the realization of loss, an encounter with the unknown." (p.23)

The connection between physical death and symbolic death, physical rebirth and symbolic rebirth represents a level of acceptance and understanding which allows for the nurturing of insight about concrete situations in life.

c) Nature as Teacher and Healer

"The human brain, so frail, so perishable, so full of inexhaustible dreams and hungers, burns by the power of the leaf. A few moments loss of vital air and the phenomenon we know as consciousness goes down into the black night of inorganic things. The human body is a magical vessel, but its life is linked with an element it cannot produce. Only the green plant knows the secret of transforming the light that comes to us across the far reaches of space. There is no better illustration of the intimacy of man's relationship with other living things." (Eiseley, 1978, p.118)

Eiseley speaks of the "secret of transforming". The process of regeneration is evident at every turning as man confronts his environment--the process of birth, maturity, decay, rebirth. Physical elements never die, but are always recycled into another form. This process is visible in a forest, a tidal pool and in man's own creations. In a sense these situations are metaphors of man's own life. Both must learn how to survive by giving in to the process of life and death. Survival for a great percent-

age of the natural world is a matter of automatic instinct. Every Winter leaves will fall, decay and nourish new growth for Spring. Bears will hibernate through instinct. Salmon will spawn. However, because of the nature of human intelligence, this survival instinct is not always so clear in the human. Men and women can manipulate their environment and often do so without considering the consequences in terms of survival. Therapy can be considered as a type of training in survival skills for the human being. Taking examples from Nature, which Eiseley calls the hidden teacher allows people to learn about survival from Nature.

"Perhaps...it is easier for us today to speak of (our hidden) teacher as "nature", that omnipresent all...

But nature does not simply represent reality. In the shapes of life, it prepares the future; it offers alternatives. Nature teaches, though what it teaches is often hidden and obscure." (p.121)

Another value of accepting Nature as teacher, is that by appreciating our connections to the Earth and fellow living creatures, we are able to shed our feeling of alienation. One can recognize that he or she is part of a framework

(of Nature) and that the same processes, in fact creative processes, going on around a person are also going on in oneself. People realize that they are connected to their environment, not alone, and in fact are part of a whole, shared existence of Life. Native Indian cultures actively acknowledge this vital link and the significance of appreciating the link for survival. Chief Sealath spoke of it in a letter to President Franklin Pierce in 1855:

"There is no quiet place in the white man's cities, no place to hear the leaves of Spring or the rustle of insects wings. And what is there to life if a man cannot hear the lovely cry of a whipporwill or the arguments of the frogs around a pond at night? The Indian prefers the soft sound of the wind darting over the face of the pond, and the smell of the wind itself cleansed by a mid-day rain, or scented with a pinon pine. The air is precious to the redman. For all things share the same breath-the beasts, the trees, the man. The white man does not seem to notice the air he breathes. Like a man

dying for many days, he is numb to the stench.

What is man without the beasts? If all the beasts were gone, men would die from great loneliness of spirit, for whatever happens to the beast also happens to man. All things are connected. Whatever befalls the earth befalls the sons of earth." (Greenpeace Chronicles, 1979, p.5)

The Indian considered Nature, and man as part of Nature, Divine and Sacred. Chief Sealath's comment that "all things are connected" points to essential needs in our psychological and physical well-being. He implies that in order to survive people must appreciate the link between themselves and the natural world. The importance of the link to Nature is discussed by Sandner and compared to modern perspective:

"The Navaho healing process at times goes beyond the symbolic work we are able to achieve in modern psychotherapy. It does this through its approach to nature as a vital, harmonious entity alive in every part and able, through its inexhaustible power, to resolve inner conflicts. This is no mastery of nature,

such as adherents to the scientific discipline seek to acquire, but a striving for unity with natural forces. The Navaho does not relate to "raw" nature as science sees it, but to a highly refined symbolic nature which is intensely alive and imbued with an inner form of radiant beauty. At the core of this mystery is Changing Woman. She is the arch-typical symbol of the natural cycle of birth, death, and rebirth." (p.271)

And further:

"Scientific fact can never "prove" human values. It may restore the specific organ (and we are grateful for that), but it does not satisfy the individual in his quest for harmony with his surroundings and for peace of mind within." (p.17)

For the Navaho, religion provides the ritual for healing through a profound meditation on nature and its curative powers. In fact, healing is the main focus of all religious activity. And healing is not directed toward specific symptoms or bodily organs, but toward bringing

the psyche into harmony with the whole gamut of natural and supernatural forces around it. Sandner, himself a psychiatrist states:

"I saw that their use of striking symbolic images could create harmony-giving changes in their patient and that, from the psychiatric point of view, we might learn much from their skill in this area." (p.3)

Kluckhohn (1946) also mentions the inefficiency of white man's healing techniques for the Navaho and describes the unique character of a Navaho "sing", or healing ceremony:

"...the evidence is good that individuals who obtained no relief from white medicine have been cured by chants...The singer is more than a mortal and at times becomes identified with the supernaturals, speaking in their voices and telling the hearer that all is well. The prestige, mysticism, and power of the ceremonial itself are active, coming directly from the supernatural powers that build up the growing earth in spring, drench it with rain, or

tear it apart with lightening.

In the height of the chant the patient himself becomes one of the Holy People, puts his feet in their moccasins and breathes in the strength of the sun. He comes into complete harmony with the universe." (p.231)

The themes of Nature as teacher and healer are themes of water, air, forest, wind, growth. When the death-rebirth myth is used in healing, it is rarely identified as "the death-rebirth myth". Instead it is contained in the images of Nature suggested by the therapist or participants themselves. This encourages the unity which is accomplished in the Navaho "sings" and other ceremonies.

"Religion revolves around a great open secret which we all know but want to hear again and again. (In this regard) Navaho dogma connects all things, natural and experienced, from man's skeleton to universal destiny, which encompasses even inconceivable space, in a closely interlocking unity which omits nothing, no matter how small or how stupendous,

and in which each individual has a significant function until, at his final dissolution, he not only becomes one with the ultimate harmony but he is that harmony."

(Sandner, 1978, p.273)

d) Patterns

Two key word concepts which emerge from the above discussions of myth, death-rebirth and Nature are connections and patterns. These two words are not often heard in therapeutic models initiated by the medical community. However, they represent key concepts in the on-going healing, whether preventative or curative, of Native cultures. Gregory Bateson (1979) considers "patterning" to be an aesthetic process. Ridington (1979) mentions them in relation to knowledge for the Dunne-za. Regarding the difference between knowing something and knowing about something he says:

"Knowing for the Dunne-za was based upon a person's intelligent internalization of information and patterns of connection that come to him or her through direct experience. The fundamental pattern that underlies their system of knowledge is transformation. As people whose lives

were integrated into the natural cycles of their environment, they identified the changes in their own ways of seeing with the changes in the world around them".

This relational way of viewing both self and culture provides healing which is naturally built into the culture instead of the modern Western system of taking people out of the culture and environment for healing. This modern reversal sets up a type of deprivation which works against healing. Detaching or separating in this way permeates our present systems and structures. Bateson (1979) sees it in the educational system: "(Children) are taught at a tender age that the way to define something is by what it supposedly is in itself, not by its relation to other things". (p.16) He stresses the importance of connecting patterns, of experiencing the world through relational definitions of people, objects and situations.

"Is our reason for admiring a daisy the fact that it shows--in its form, in its growth, in its coloring and in its death--the symptoms of being alive? Our appreciation for it is to that extent an appreciation of its similarities to ourselves." (p.127)

Whorf (1956) analyzes language development through the patterning principle and explains every stage as a patterning process. He then says:

"Speech is the best show man puts on.
But we suspect the watching Gods perceive that the order in which this amazing set of tricks builds up to a great climax, has been stolen--from the Universe!

Nature and language are inwardly akin.

(Another relation) is the one between Mantric art and nature. On its highest level the mantram becomes a manifold of conscious patterns, contrived to assist the consciousness into the noumenal pattern world--whereupon it is in the driver's seat. It can then control and amplify a thousandfold forces which that organism normally transmits only at unobservable low intensities. We hear the mantra as song pattern". (p.330)

Bateson is concerned about the loss of systems which remind us of our relation to Nature.

"We have lost the core of Christianity. We have lost Shiva, the dancer of Hinduism whose dance at the trivial level is both creation and destruction but in whole is beauty. We have lost Abraxas, the terrible and beautiful god of both day and night is Gnosticism. We have lost totemism, the sense of parallelism between man's organization and that of the animals and plants. We have lost even the dying God". (p.17)

In his latest book, Mind and Nature, Bateson attempts to train the mind to use patterning in all contexts.

Patterning also re-introduces the issue of creativity. The unconscious strives to create patterns out of formlessness. Sinnott (1959) says that:

"...the ability to integrate and organize a pattern out of formlessness is an achievement which rational thought, being somewhat removed from its primitive being source and bound with habit and convention, may be incapable of doing...the reason that such a frontal attack often fails seems to be that the free association present in the unconscious, is blocked

in various ways and the really creative new relationships therefore are not seen". (p.113)

Bateson also discusses reluctance of logic to employ effective patterning.

"...logic is a poor model of cause and effect. I suggest that it is the attempt to deal with life in logical terms and the compulsive nature of that attempt which produce in us the propensity for terror when it is even hinted that such a logical approach might break down". (p.120)

Even though Bateson mourns the loss of Shiva, he does see hope for the future, if we are able to learn from the past. "There is at least an impulse still in the human breast to unify and thereby sanctify the total natural world, of which we are." (p.18)

2) The Metaphoric Mind

In the past five years, studies on the unique functions of the left and right hemispheres of the brain have thrown some light on the more mysterious areas of human consciousness. The most basic discovery is that the two hemispheres represent two separate and distinct modes of

consciousness. The left represents the logical analytical, verbal, linear functions such as language. The right represents the more intuitive, wholistic, relational, artistic functions such as musical perception. Although these two modes have been recognized for centuries in philosophy, religion and some of the esoteric psychologies (The I Ching being the most popular example), the new studies confirm a physiological distinction as well. This empirical evidence liberates the psychological disciplines to take the right brain or the metaphoric mind, more seriously.

"An impersonal, objective, scientific approach, with its exclusive emphasis on logic and analysis, makes it difficult for most of us even to conceive of a psychology which could be based on the existence of another, intuitive, "gestalt" mode of thought".

(Ornstein, 1972, p.96)

Deikman (1971) describes the nature and function of the right "mode" or side:

"...the receptive mode (right brain hemisphere) is a state organized around intake of the environment rather than manipulation. The sensory-perceptual system is

the dominant agency rather than the muscle system, and parasympathetic functions tend to be most prominent. The EEG tends toward alpha waves and baseline muscle tension is decreased. Other attributes of the receptive mode are diffuse attending, paralogical thought processes, decreased boundary perception, and this mode would appear to originate and function maximally in the infant state. The receptive mode is gradually dominated, if not submerged, however, by the progressive development of the striving activity of the action mode.

...developmental preference for the action mode has led us to regard the action mode as the proper one for adult life, while we have tended to think of the more unusual receptive states as pathological or regressive".

(p.69)

Instead of considering the left brain hemisphere the major mode and the right brain hemisphere the minor mode, studies now show both sides are major in that a person needs both

sides to function. Different tasks and situations may require that one or the other mode take temporary dominance, but in the end there is balance.

Bogan (1969) comments on distinctive features of each hemisphere:

"The right hemisphere recognizes stimuli (including words), apposes and collates this data, compares this with previous data, and while arriving at different results. The right is a more diffuse as opposed to the left which is more discrete". (p.109)

Other general categorizations are interesting:

	<u>Left</u>	<u>Right</u>
Bruner	rational	metaphoric
Levi-Strauss	positive	mythic
Price	analytic	synthetic

"Over thirty years ago, Dide (1938) espoused a right hemisphere superiority for "kinesthetic" function. Luria considered "the right hemisphere dominant with respect to certain mental processes including music...he has published a case of a composer whose best work was done after he was rendered aphasic by

by a massive stroke in the left brain hemisphere". (Bogan, 1969, p.194)

Although some research was done in split-brain studies this long ago, there has been an eclipse of the split-brain view until recently. Bogan accounts for the lack of interest in the split-brain phenomena to an increasing preoccupation of neurologists with the peculiarities of the left hemisphere, the dominant side, which diverted them from a more comprehensive view. Orstein (1972) considers each hemisphere to be the major one, depending on the mode of consciousness under consideration.

"If one is a wordsmith, a scientist, or a mathematician, damage to the left hemisphere may prove disastrous. If one is a musician, a craftsman, or an artist, damage to the left hemisphere does not interfere with one's capacity to create music, crafts or arts, yet damage to the right hemisphere may well obliterate a career". (p.54)

For present purposes the fact that the brain is split is not of great interest. However, the fact that certain human characteristics, preferences, and activities have been identified as functions of the brain is important. This new empirical evidence provides an entrance for con-

cepts of esoteric psychology, into modern Western clinical circles. For it may soon be proven that human perception which has up until now been labeled as "vague", e.g., intuition or artistic sensitivity, lives in the brain as a cognitive function. As mentioned earlier, this reassures psychologists and permits them to "look at" these functions. The right brain hemisphere is the focus of attention in the present study. In further describing the right hemisphere Deikman says:

"The receptive mode is not a "regressive" ignoring of the world or a retreat from it--although it can be employed for that purpose--but is a different strategy for engaging the world, in pursuit of a different goal...This different mode of perception is characterized by a sense of unity of the person with his environment". (p.71)

Deikman also voices the theme of connecting. In an experiment which increased right brain hemisphere activity through Yoga concentration, Deikman reports that subjects perception of a vase changed in the following ways:

- 1) an increase in the vividness and richness of the vase percept (for example

they described it as "luminous,
more vivid");

- 2) the vase seemed to acquire a kind
of life of its own, to be animated;
- 3) there was a decrease in the sense
of being separate from the vase,
e.g., "The vase and I were merging";
- 4) a fusing and alteration of normal
perceptual modes, e.g., "when the
vase changes shape, I feel this in
my body".

Subjects claimed to have learned something but could not specify what it was. "I've experienced...new experiences, and I have no vehicle to communicate them to you. I expect that this is probably the way a baby feels when he is full of something to say about an experience or an awareness and he has not learned to use the words yet". The experience was ineffable in the sense of not being suited for verbal communication, not fitting the customary categories of language of the action mode (left brain hemisphere)."
(p.75-76)

Intuition may be a function of the right brain. There is a connection between intuition and symbol relevant to the present study.

"...it was Jung's concern and indeed the very point of parting with Freud, to show that intuition and emotion and the capacity to apperceive and create by way of symbols are basic modes of human functioning, no less so than perception through the sense organs and through thinking".

(Whitmont, 1979, p.18)

Assagioli (1971) assigns the following characteristics to intuition: "It is immediate and direct, not mediate and progressive as is thinking. It is synthetic or holistic, i.e., it is an immediate comprehension of the whole". (p.338) Whitmont identifies the right hemisphere as the symbolic mode and links myth, image and intuition:

"...a cognitive mode which our rational development has tended to by-pass; the symbolic mode, which in the historical development of the human mind is found to be the active element in the formation of recurrent mythological images...the images transmit a know-

ledge of a sort, not through the intellect but through the effect of the image upon feeling and intuition, thus mediating another, perhaps deeper or profound kind of knowing than the intellectual one". (p.34)

Bateson points out an even deeper relationship between the right hemisphere and symbol:

"...with the dominant hemisphere, we can regard such a thing as a flag as a sort of name of the country or organization that it represents. But the right hemisphere does not draw this distinction and regards the flag as sacramentally identical with what it represents". (p.31)

Another important consideration concerning the symbolic mode is its tendency toward artistic perception, mentioned earlier as a type of aesthetic understanding by Bateson. Teaching of the traditional psychologies include work in the tacit language of that mode (right hemisphere), including body movement, music, spatial forms, sounds, crafts, dreams, and stories which function as word pictures. (Orstein, 1972, p.163) This classification would unite myth and music.

Alajouanine reported as early as 1948 that:

"Ravel, struck down at the peak of his career, lost 'analytic recognition' of musical notation and piano playing at sight were grossly disabled; on the other hand, melodic, rhythmic and stylistic sense were unimpaired and playing or singing from memory was largely retained".

(Bogan, 1969, p.106)

Bogan (1969) quotes Hecaen, Ajuriaguerra and Angelergues suggesting that right hemisphere represents a pre-verbal mode of communication. It follows that art may also represent a pre-verbal or more primitive level of communication, primitive here meaning prime and basic. Both Bob Samples (1976) in The Metaphoric Mind and Joseph Chilton-Pierce (1971) in The Magical Child present the view that the development of Western consciousness has suffered from an over-emphasis on the left-brain hemisphere functions and therefore both society and the individual have been deprived from many contributions of right-brain hemisphere benefits. They both claim that present value systems encourage the child to under-develop the right brain and thus over-develop the left. In traditional cultures, the metaphoric mind has been put to more effective use. The

Navaho leave us many arts, crafts and songs to support this idea. Because of recent studies, we are able to formulate a kind of new psychology, when in fact we have created a new way of stating old knowledge.

Beyond these general considerations the split-brain studies have particular relevance to the present study for the following reasons:

1) Use of the death-rebirth myth in music for healing represents a relational mode of understanding. The four areas discussed in this section (the regenerative experience, symbolic healing, nature as healer and teacher and the importance of patterns) all require relational insight. For example:

How does nature relate to death-rebirth?

How do I relate to nature?

How do I relate to death-rebirth?

How do we (both nature and I) relate to patterns?

How do patterns relate to "us"?

In other words the healing resulting from use of the death-rebirth myth depends on relational connections, a path to healing. As we have seen both in the discussion on symbolic healing and split-brain studies, those relations go beyond the psyche into the physical encompassing the whole person. One theory describes the left brain hemisphere as pertaining to a conscious level and the right,

the unconscious level (Orstein). If this is the case, the Music Therapy session may be thought of as a type of dream, which delves into the unconscious state on a conscious level.

2) The right side of the brain can be a valuable resource for growth and healing. In other words, in therapy, intuition can be as important as logic. Making music can be as helpful as verbal language, especially since music communicates certain ideas or "thoughts" or feelings which are difficult to describe accurately in verbal language.

3) Finally, for ultimate benefit of both society and the individual, both sides of the brain should be developed. If according to Samples, Chilton-Pierce, Arguelles, Orstein, Eiseley and many others across disciplines, the concentration on logical, scientific analytical endeavors has dominated the recent history of our development, the time is now approaching to balance with the relational, intuitive, artistic endeavors.

Ornstein (1972) points the direction for the future:

"We are just at the first moments of this new synthesis, from which an extended concept of man is beginning to emerge. Two major results for the future are:

- 1) two major modes of consciousness exist in man and function in a complementary manner;
- 2) the concepts of "normal" and "paranormal" are in process of change.

3) Review

In review, one of the premises of the Music Therapist is that the inherent qualities and processes of music can be applied and effective in therapy. It has been shown that the myth of death-rebirth itself can be a healing agent. A review of the literature has illustrated the feasibility of this approach both in current psychology and in ancient cultures. Within music there is a recurrent process of tension/resolution on many levels. In establishing a connection between the death-rebirth myth and the process of musical tension/resolution, the Music Therapist is provided with many possibilities for application and results in the therapeutic environment. Chapter one described the need for alternate approaches, in fact, artistic approaches, to therapy. Chapter two has described some of the significant elements of the ways of the past in relation to current healing techniques and some recent developments which serve to re-affirm traditional values in the area of growth, survival, change, adaptation, healing and prevention. In a sense this section

has developed a non-medical rationale for implementation of the arts therapies. Campbell says that through the arts we are introduced to the mysteries. Chapter three will show how music can be one vehicle, through its tension resolution processes, for healing which may not only lead to mysteries but is a kind of magic in itself.

CHAPTER III

APPLICATION OF THE MYTH TO MUSIC

Stream of consciousness
 Wending through open space
 Leaf-like cascading over around
 through pebbles
 Rocky surfaces submerged
 Water surface mirrors green
 trees blue sky
 Swirling in the reflection of God's country.

Cast ashore, wind dried and tumbling over sweet smelling
 earth, inhaling the warm sun, dancing death to urban
 stress birth painfully to the spirits of well-being the
 spirit of self-destruction cries out for revenge.

But the natural self spirals deeper into itself, reborn
 cast adrift again to challenge the natural element on
 its own terms.

Not to win but to succumb successfully
 Being one, strong in that natural partnership.
 Transcending self.

Patient poem to
 Pink Floyd's "Echoes"
 (Dept. of Psychiatry, U.B.C., 1977)

A. Relationship Between Death-Rebirth Myth and Tension-Resolution in Music

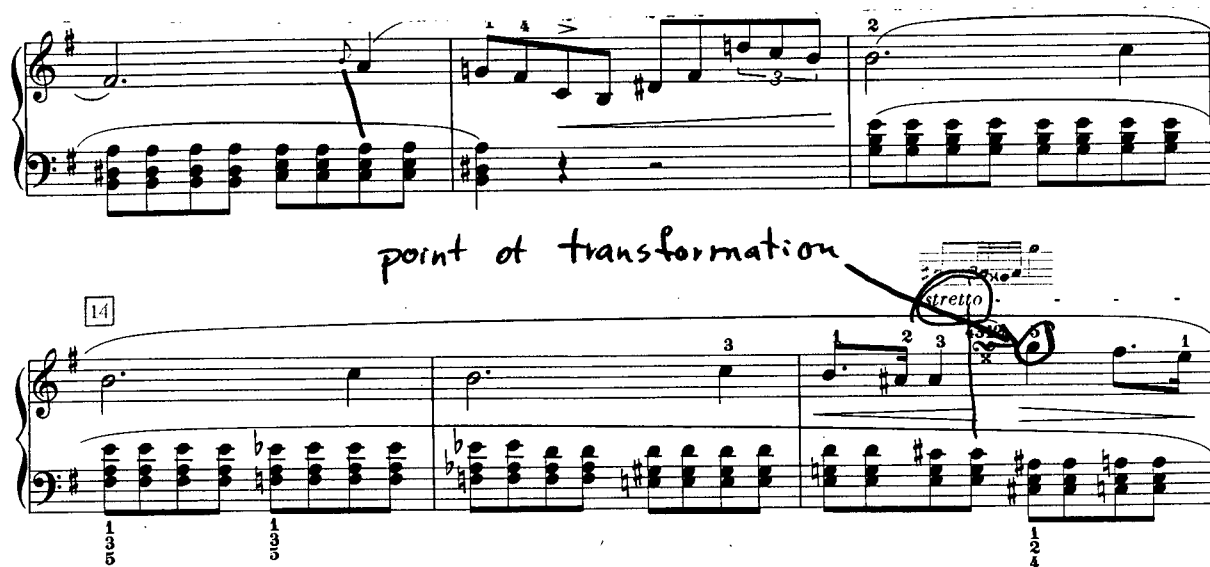
The relationship between the Death-Rebirth Myth and Tension-Resolution in music is one of reflection. The music reflects the myth and visa versa. In practical terms, the music serves as a vehicle for the myth, placing the myth in time and space by providing it with a living, symbolic form. This can happen through the structure of the music. Music expresses the myth by making it available through sense perception. In a way it solidifies myth and gives it a workable form. In this way myth travels to us through music.

One of the basic considerations in musical composition is the concept of tension and resolution. Most musical compositions contain the process of tension and resolution within all the elements. One or several of the components of the piece "build up" to a climax point, then resolve. This is also the pattern taken by many life situations. We experience a type of transformation through a peak level of intensity. This life movement can be applied to any number of circumstances as discussed earlier. Each day can be considered a series of transformations through our various activity, or as the many overlapping motifs in some musical piece. One's entire life might have one major transformation. Or both of

these circumstances may happen simultaneously. There may be many peaks, climaxes, transformations within one life.

The idea that a type of giving over or loss must occur, in order for change or growth to be accomplished, constitutes the connection to myth. The musical symbol serves as an example of regeneration, renewal, building and transformation. It does not deny the passion inherent in these encounters. Rather it acknowledges the tensions of pain, anger, hate, melancholy, confusion, frustration, hurt, despair and the resolution of joy, love, fulfillment, clarity, hope. Musical encounters allow the passion or feeling to become externalized, therefore providing form.

One initial example will illustrate. A composer who clearly manifests the death-rebirth myth through musical tension and resolution is Chopin, especially in his Etudes and Preludes. His Prelude in E minor (selection #1 on tape), provides a simple example. The tension-resolution process in melody builds and resolves once in the Prelude. The music builds to one point of transformation, one climax, in which death and rebirth occur in the same moment. The movement changes from moving away from the tonal focus to a point which leads toward tonic.



At the point of transformation, one chord, or one moment in time and space, there is a resolution of the tension produced by the previous 15 measures.

Levi-Strauss discusses the relationship between music and myth within the context of structuralism. In an article on "The Homology of Music and Myth: Views of Levi-Strauss on Musical Structure" (Hopkins 1977), he states: "Music and myth, while both untranslatable into terms other than themselves, are basically structural, the component parts of each are infinitely convertible, each within its own sphere. Each contains a basic dichotomy, theme, counter theme, both of which can be inverted, rhythmically distorted, modally transformed or presented

in a new timbre". (p.250) In Mythologies (1971), Levi-Strauss singles out four fields as being efficacious for structural analysis (language, mathematics, music and myth). He further singles out music as being most clearly related to myth in this respect.

The point made by Levi-Strauss in reference to the dichotomies existing in music and myth are particularly relevant to the death-rebirth myth. Music and myth both acknowledge and accept paradox. The point of transformation in Chopin's E minor prelude represents both death and rebirth in the same chord, moment or space. Both exist together and become one another. For at the moment of rebirth another death has in fact begun.

Another interesting observation noted by Levi-Strauss in the Homology article and which I have observed myself is that these mythical, musical patterns often manifest themselves despite the avowed intention of the composer. (p.254)

Levi-Strauss's example of this lack of intention is Ravel and his classic "Bolero", a repetitious building of tensions and resolutions. It is known that Ravel never took the piece seriously, considered it "empty of music" (Hopkins, p.254) and was extremely surprised at its popularity. This brings up the possibility of myth travelling through composers without their knowledge. Myths can be reflected in music without intent on the part of the com-

poser, i.e., not only program music contains myth. Rather the structure and patterns of the music are available to communicate myth. Although Levi-Strauss does not discuss this possibility, he considers the relationship between music and myth one of analogy within their common structural patterning. He is interested in the pattern-forming nature of the mind. Patterning again becomes an important consideration.

2) Patterns in the Elements of Music

The link between human patterning and musical patterning is stated by Terence McLaughlin in Music and Communication (1970):

"...the first step in explaining the meaning of musical patterns is the fact that they are translated in the brain into general lingua franca of all other patterns--mental patterns such as grief, expectation, fear, desire and so forth, and bodily patterns such as hunger, pain, retention, sexual excitement, any of the tensions associated with a raising of the adrenalin level in the blood--and the corresponding resolutions--allow us to see the similarities between the musical patterns and those more personal ones."

which form the constant undercurrent
of our thought". (p.87)

Patterns form the basic organizational structure of music. Hindemith (1952) and Meyer (1956 and 1973), as well as McLaughlin (1970) discuss the importance of patterning both in composition of music and the subsequent effects of music. All three also emphasize the essential element of tension-resolution as it develops in the patterning process.

McLaughlin identifies pitch, time and volume as the key modes which utilize and communicate tension-resolution patterns. Within these three modes we experience the elements of music: melody, harmony, rhythm, meter, timbre, dynamics and texture. In a musical composition these modes often inter-relate, setting up complex crossings of patterns. The following is a description of each mode and how it communicates the pattern of tension-resolution. Musical examples, referred to as "selections" are included on a cassette tape enclosed with this document.

a) Pitch Tension --Pitch tensions include melody (intervallic tensions and resolutions) and harmony (tonal tensions and resolutions). An intervallic tension represents the distance between two or more consecutive notes. A tonal tension represents the distance between two or more notes played simultaneously. Both of these tensions seek eventual resolution. In general melody

seeks a resolution of returning to the tonic note, after building a series of "near" resolutions by returning to other tones in the tonic chord, such as the third or fifth. The tonal tensions seek some combinations of the tonic chord as a resolution. Meyer (1973) calls these pitch patterns "archtypical patterns" or "traditional schemata". He refers to the series of unresolved tensions "unconsummated" until they do in fact resolve to tonic.

A need for ultimate resolution builds as the false resolutions to a third or fifth, or other steps on a scale build more and more tension and anticipation. This may occur over the length of an entire piece, i.e., a melodic line would never return to tonic until the end of a piece. Or it may occur in the form of repetition of motifs, phrases, or a rondo or bar form, i.e., a resolution to tonic comes many times.¹

An example of both intervallic tension-resolution and tonal tension-resolution and the interplay between melody and harmony is illustrated by Yusef Lateef's "Lowland Lullaby" (selection #2 on tape). It is basically a simple duet between flute and bass. It provides slow melodic movement by the flute and harmonic movement by bass, each return separately several times to tonic, but culminate in a tonal resolution with the flute and bass both returning to tonic simultaneously. This is the point of transform-

¹ Atonal music does not follow these tendencies. However, quite often, atonal music does invent equally predictable rules which build tension and strive for resolution, e.g., Schoenberg's tone row.

ation, a death and rebirth in the same moment.

b) Time Tensions--Time tensions are realized through tempo and meter, divisions of even duration.

McLaughlin suggests that there is a universal tendency towards simple time units of two, three and four steady beats. (1979, p.38) He then concludes that any departure from the normal pulse of the music comes as a point of tension, e.g., when there are five, seven or eleven beats in the bar, syncopated rhythms (where an expected accent is displaced) and cross-rhythm effects. The possibilities for creation of tension become even more complicated with the interplay between pitch and time.

Another consideration in the creation of time tension not discussed by McLaughlin, but studied by Jilek (1971) and Neher (1962) and others, is the effect of rhythmic repetition in production of a trance state or altered state of consciousness. This possibility is also discussed by George Leonard in The Silent Pulse (1978) and William Johnston in Silent Music (1974).

The physical effects of music, associated to a great extent with rhythmic tensions, have been documented by many. Helmholtz (1862); Seashore (1938); Revesz (1954); Ludin (1967); Rosenboom (1976) and others. These studies are many and varied, but agree on the following conclusions on the physiological effects of music:

- 1) increase or decrease in metabolic rate;
- 2) increase or decrease in muscular energy;
- 3) acceleration or deceleration in breathing
and increase or decrease in its regularity;
- 4) a marked but variable effect on blood
volume, pulse and blood pressure;
- 5) a lowering of the threshold for sensory
stimulation of different modes.

The repetition of a rhythmic pattern can suggest a type of transformation through a trance like state. In other words, tension is created not so much through deviations in regularity of beat as suggested by McLaughlin, but rather through a contrast between a normal functioning state of consciousness, experienced prior to adjustment to repetitious rhythmic patterning, and different or altered state of consciousness produced by that particular rhythmic pattern and its repetition. To simplify, a person maintains a regular or normal state of consciousness. Through experiencing repetitious rhythmic patterning, one travels to and through an altered or transformed state of consciousness. At a certain point the music ends, the rhythmic, trance-inducing stimulus removed, and a person returns to their normal functioning state. This can constitute a death-rebirth or transformative experience.

Musical examples of this type of rhythmic activity

are obvious in Haitian (selection #4 on tape). However these rhythmic repetitions are also communicated through rock and roll, soul music, disco music and jazz. Specific examples of this kind of time tension are Donna Summer's "I Feel Love" (selection #4 on tape) and Art Blakey's "Tobi Ilu" (selection #5 on tape). Donna Summer illustrates both McLaughlin's idea through syncopation, and the trance-like effect, through the simultaneous repetitious rhythm. Blakey combines African musicians with studio jazz musicians to provide an example of the trance-like repetition.

- c) c) Volume Tensions -- Volume tensions and resolutions are perhaps the most obvious to hear. They take the form of dynamics timbre, texture in a piece. Dynamics are manifested in the p,pp,ppp,pppp (degrees of softness) and f,ff,fff,ffff (degrees of loudness) or crescendos and diminuendos. A simplified example of how the tension may build and resolve would be

f,ff,fff,ffff, p,pp,ppp,pppp

The 4f represents the point of transformation. The dynamics of a piece are rarely this simple and again usually constitute a series of dynamic tensions and releases. The more subtle effects of volume come through the interpretation of timbre or color and texture of a piece. These elements are often left to the discretion of the artist playing the piece.

An example of volume tension and resolution, which

also illustrates the interplay between pitch, time and volume, is Samuel Barber's "Adagio for Strings" (selection #7 on tape). It is a long piece which gradually builds in volume to one extremely intense peak with full strings in unison (adding the pitch element, a change in direction toward tonic) in a full fortissimo. Barber strikingly employs a full rest after this intense climax before savouring the resolution in degrees of softness. This piece communicates the death-rebirth myth in dramatic form.

It is extremely difficult to disengage the complex webs of musical patterning. However, I hope these few examples will illustrate the possible connections between mythic form and musical form through the one myth of death-rebirth and one of the important aspects of musical form, tension-resolution.

As McLaughlin (1970) perhaps overstates, but with an important element of truth:

"The ability to extract the important pattern from a wealth of extraneous detail, to see the essentials of a situation stripped of superficial differences, and to generalize from experiences is a key to the whole coherency of our mental life". (p.89)

In this regard the musical elements of tension-resolution become symbolic representations of some of the

most basic life processes. They provide a reminder of our common and profound collective condition. The processes described in part IIB of this paper are remembered and experienced symbolically within music. The music, as the vehicle to myth, becomes as well the bridge between the preventative and curative powers of myth and the concrete situations of life.

B. Music As A Vehicle for Healing

Sufi Inyat Khan (1971) tells us:

"...health is a condition of perfect rhythm and tone. And what is music? Music is rhythm and tone. When the health is out of order, it means the music is out of order" (p.87) ...

In all the occupations of life where beauty has been the inspiration, where the divine wine has been poured out, there is music. But among all the different arts, the art of music has been specially considered divine, because it is the exact miniature of the law working through the whole universe". (p.2)

This summarizes the Sufi philosophy regarding the healing powers of music. Music is life and health, a reflection

of the grand scheme, divine itself. Many ancient cultures have used music as a healer. Certain processes and qualities inherent in music have healing potential. Beyond the organizational aspects of music outlined above (and the tension-resolution process is only one of the organizational aspects which are applicable) there are more general considerations into the healing powers of music as used in Music Therapy.

The first is magic, or mystery, or perhaps the divine and spiritual aspect of music so often ignored in a clinical setting. The magical side of music compliments the clinical side. Unfortunately the words magic (in the anthropological sense) mystery, divine and spiritual do not get a positive response in clinical settings. However there are other places within our culture where such concepts are accepted. The most obvious example is within a religious context. It's acceptable to hear voices, or speak in tongues in some situations. In others, places, of course, hearing voices or speaking in tongues becomes a symptom and a sign for increase of medication. To the Nahavo, music is both a vehicle to and a celebration of our divine collective nature. The Indian does not know that the magic of music will bring healing instead he trusts that it will. The cultural difference emerges in the distinction between known and unknown.

Anthropologist Malinowski (1948) tells us we find magic

wherever the element of chance and accident and the emotional play between hope and fear have a wide and extensive range. We do not find magic whenever the pursuit is certain, reliable and well under the control of rational methods and technological processes. Within our cultural context, one of the vehicles for magic is religion and for science, therapy. This separation between religion and therapy has taken us to our present unmagical state. Within the various therapeutic methodologies sanctioned by the scientific orientation, magic is denied for the following reasons: 1) it cannot be observed; 2) it often cannot be analyzed or understood; 3) it often implies spiritual or psychic functioning levels; 4) it cannot be defined; 5) most important, it takes us to levels of depth for which there are no word symbols. No matter how illusive, it is still there. Music affects most people subjectively. It can also affect people objectively, but within the subjective reactions the magic is found. It conveys symbolic meanings which are difficult to describe in verbal language and are intimately tied to our emotions. In some ways, the symbolic meanings of music are similar to verbal language, but one difference is the immediate power of music to move on an emotional level. It directly affects our feelings, those human reactions which reside in the sub-

jective parts of man's being, perhaps part of right brain hemisphere activity.

A second characteristic often neglected in music therapy is the aesthetic nature of musical experience. Music fulfills man's need for beauty, and can satisfy his search for meaning in the world. Many administrators, doctors, teachers, nurses, therapists, and some music therapists do not realize that aesthetic experience can have a preventative and curative effect. They do not value the use of arts in therapy. Sometimes they have not been encouraged by society to develop their own artistic drives. Occasionally they may pursue artistic endeavors in their private lives, but classify art as play¹ and therapy as work, therefore leaving out this important vehicle for healing. One of the basic premises for the music therapist is that everyone is an artist, but society dictates that the living, working stuff of art is for "the artist", a person removed and specially trained. In many older cultures, leisure time was not a time for meaningless activity. Leisure time was time given to aesthetic experiences such as playing or listening to music. When native and traditional cultures made music, danced and costumed, they were usually performing rituals necessary for the health and well-being of the community, coming together to express their beliefs and

¹. Play is used here in the broader sense not as in the concept of Play Therapy.

feelings about life. These activities were intimately tied to man's search for meaning. "The average Navaho male spends 75% of his time in ceremonials and rituals". (Campbell)¹ Our culture does not maintain these aesthetic values for the average man or the patient in the psychiatric ward, or the cerebral palsied child. Many of our treatments ignore the problem of man's search for meaning, only encouraging the return of alienation. These methods deal with changes on a superficial level, only what is seen, or can be observed by an outsider. Often behavior is a reflection of one's inner being. But it cannot be assumed that it is the total picture of man, or the only part to which to respond.

Aesthetics tends to be somewhat neglected. It's difficult to define and resides in that grey right hemisphere. Aesthetic experiences are unique and personal. Aesthetics is interdisciplinary and crosses lines or values, beliefs, personality qualities, perception skills, education, attitudes. But through aesthetic experience it is possible for each man to find his own frame of reference for the universe. Through valuing beauty, one can find ways of absorbing strength from the world in which one lives. In a music therapy session, the tunes or expressions may not always sound beautiful to a critic; however, the music therapist

¹ Quoted from Joseph Campbell's class lecture U.B.C., Wednesday, September 19, 1979.

hears these expressions as profound representations of human experience. Through the profundity comes beauty--an artist's symbolization through sound of the basic elements which make up life experience--pain, sorrow, joy, sadness, loss, rebirth. It accepted with this attitude, such primitive expressions can form the foundation for a positive attitude toward life for a person disabled in any way. The client and therapist work together to create and experience beauty. They find symbolic forms, patterns, shapes, textures in improvised music which convey significant meanings. They hear healing themes in recorded pieces which transfer to life outside the music therapy session.

The third healing consideration in music therapy sessions is the natural ability of music to provide experiences in the creative processes. As mentioned earlier Jung considered creativity one of man's basic instincts. It can be implied from his theory that all men not only have the potential to develop creativity in some area, to some degree, but also that everyone has a drive to be creative which must be satisfied. This drive can create products beneficial both to the individual and to society if the proper channels are discovered. If the creative instinct is not used or properly channeled, it can have a harmful effect on both. Even though music may not be

the natural vehicle for everyone's creativity, it can be an experimental ground in which to try out creative processes and apply them to a powerful medium. Creative processes can be applied to anything. The music therapist can provide opportunities for a person to try alternatives in problem-solving, have corrective experience in communication and learn about new sources of regeneration and enrichment and develop new skills. The music therapist combines resources for maximum benefit to all, or in other words, creates the most beautiful art work. All participants engage in a journey to discover the right sound quality, shape or color which describes and symbolizes an important part of the beings in the session and which other kinds of symbols cannot adequately describe and communicate. The good therapist leaves adequate space and time for the clients to fulfill their own creative processes as part of the creation. Many therapists and methods presume they have all the knowledge about where and how a person must be healed. Most forms of therapy dictate exactly the way a person must alter behavior, attitude and mood to conform with the culture. Within creativity there is a way to adapt to the culture and express one's uniqueness, if clients have a safe place in which to experiment.

CHAPTER IV

THE MUSIC THERAPIST AS A RITUALIST

If music provides a vehicle for the myth, ritual creates a context for any subsequent mythical, musical event. As the guide or leader in this situation, the Music Therapist then must become a ritualist. Before discussing the skills necessary for the music therapy ritualist, the phenomenon of ritual itself deserves some consideration.

At its most basic level ritual is defined as a prescribed form or method for the performance of a religious or solemn ceremony. From the tone of this definition we can assume that ritual would be a serious and meaningful event. Beyond this, one interesting relational interpretation is provided by Kapferer (1979). He relates the ritual performance to the cultural and social context, which in fact would be the object of a music therapy session. Ritual without carryover into the practical concerns of day-to-day life would hold little meaning. Kapferer discusses the transformational process within ritual:

"...many rituals derive their power to transform identities and contexts of action and meaning, which are located

in the mundane order of everyday life, though effecting transformations within the organization of their performance..." (p.3)

Kapferer concludes that "ritual dialectically and transformationally relates to the realities which are built around it, and which continue in their processes after the completion of a ritual performance." (p.3)

Of course this is the intended result of a Music Therapy session, that through symbolic associations and performance of some type, clients will become transformed not only within the context of the ritual or session, but situations in their lives.

Another important point made by Kapferer is that "The transformation of a context must involve a transformation of its constituent elements. This is effected by these elements being related in ways different from their relation in a context in which they were previously constituted". (p.4) In terms of a Music Therapy session this may mean a rearrangement of constituents, an addition or subtraction of constituents, changing the quality of certain elements. The ritual provides a different perspective as well as new information. The key to this simultaneous or contingent transformation is found in objectification of problems, or illness, or

even more specifically an externalization. Problems or illness receive a concrete form through performance.

This idea of transformation of context through the power of ritual relates directly to the mythical, musical framework as outlined above, since the death-rebirth myth rests at the base of transformation.

As a ritualist the music therapist must develop respect for both convention and spontaneity. The ritual provides a basic structure which should be specific, reassuring and supportive, but not inhibitive to the individual needs of the participants. The human spirit at its most basic level desires to be healed. A person will identify with the healing elements of music and ritual and venture towards growth and transformation. Music is only a reflection of man himself. In this sense music will not violate the impulses of man but provide instead, a framework from which to make choices.

Music is a resource pool. It contains many things--- images, patterns, mood suggestions, textures, feelings, processes. If selected, created and used with respect and wisdom, the clients will hear what they need to hear in the music, and use the ritual as a supportive context.

The Music Therapist as ritualist must also develop respect for:

- 1) his/her own personality resources

- 2) those of the client
- 3) processes inherent in music
- 4) processes inherent in structure offered
- 5) silence
- 6) time
- 7) space
- 8) and history

In addition, the ritualist must develop confidence in self, others and the process of growth; flexibility and adaptability; empathy; strength; knowledge; humility; enthusiasm, humour and warmth.

A. The Shamanic Characteristics of the Music Therapist

For the sake of liberation, the Music Therapist can be considered a Shaman. There are many references to the psychotherapist as Shaman. Jerome Frank says:

"At first glance, the dramatic and emotional activities of the Shaman appear to have nothing in common with the detached, quietly competent ministrations of the modern physician".

(Kiev, 1964, p.7)

But looking more closely, there are many:

- 1) He derives his healing powers from his status and role within the sufferer's society.

- 2) He is an evoker of healing forces.
- 3) A mentor.
- 4) A role model.
- 5) A mediator between the sufferer and his group. (p.8)

In general his task is to help the patient, whether African tribesman or North American stockholder to mobilize his psychological and spiritual as well as bodily resources. Especially important for healing is the element of faith and trust placed in the therapist/shaman by the patient. Studies in the placebo effect (Shapiro, 1964) have shown us how important faith really is. But in addition to the similarities between the psychotherapist and the shaman, the music therapist as a shaman is also an artist/music maker.

Areas shared between the shaman and the music therapist would be the following:

- 1) Both work with a magic phenomenon or art which is not totally understood.
- 2) Both work in professions having responsibility to oversee the health of the community, preventative and curative.
- 3) Both require the faith and trust of their communities in order to achieve results.
- 4) Both learn their skills and rely on their own

judgement and intuition about when and where to apply them. They serve an apprenticeship and receive inspiration leading to insight about their work.

5) Both are dynamic personalities in that they are energetic and vigorous. Whether shy, gregarious, conservative or eccentric, they are still participating in activities initiated by themselves.

6) Both heal themselves by participation in their shamanistic art, either prior to or engaging in their vocation.

7) Both offer rituals and ceremonies intimately connected to myth and various art forms--music, dance, costume, color, etc.

B. The Artist

The Music Therapist is an artist by token of musical ability. But the value of the artistic nature of the musician within a context of ritual transcends technical and interpretive competence. As an artist, the ritualist has a certain way of perceiving the world which can be useful in healing and therapy. The sensual perceptions of the artist allow the ritualist to guide the ceremonies and activities into profound representations of myth and life.

Kapferer mentions the value of objectification or externalization in the transformation of context. The

Music Therapist both externalizes and guides others to externalize feelings, thoughts, situational dilemmas, personality dynamics into musical form. The music is immediate and constantly changing.

As an artist the Music Therapist is a resource combiner, experimenting and playing with alternatives. Grinder and Bandler (1976) in The Structures of Magic hypothesize that therapy is merely being exposed to alternatives. The artist draws together all the resources and materials which will create a music therapy ritual. These resources would include everything which can be in the room at the time of the creation of the work of art: the personality qualities of all persons in the session, the environmental qualities of the space, the time of day, materials used (whether instruments, paints, record player or other), skills of all persons in the room, attitudes, cultural trends, history, beliefs, feelings, philosophies. In this situation the ritualist/artist becomes a facilitator.

One of the most essential qualities of the Music Therapist as artist is musical sensitivity. The ability to explore sound and silence freely and encourage ritual participants to do the same is essential. The artist should be able to hear and interpret unspoken moods, trained in both the form and flexibility of his instrument, able to combine his skills in unconventional ways,

aware of the infinite variety of the language of music. He/she must use music as a meeting ground, a place in which to step outside conventional roles and patterns.

If the Music Therapist considers him/herself an artist, fulfilling his/her own creative instincts, and each music therapy session as a work of art, most probably clients will be inspired to follow suit. If this transfer is accomplished, the clients also become artists involved in creative processes. If allowed to be artists, it is possible that participants accomplish their own healing.

C. The Visionary

If the Music Therapist does assume the character and role of the ritualist/artist then Campbell and Arguelles as mentioned above would imply the responsibility of vision as well. For the artist takes some initiative in the unfolding of the future through vision. This vision constitutes a plan, a scheme, a method of facilitating transformation of individuals and the culture itself. Within the present paper, the vision takes the simple form of belief in the value of myth. There are an infinite number of possibilities for other visions. Vision endows the Music Therapist with passion, conviction and moral responsibility, a sense of destiny and purpose, charismatic leadership qualities, an essen-

tial role in the evolution and improvement of culture and society. The presence of alternatives is a sign of vision. Vision has some unspeakable spiritual quality which is hard to define but can be heard within the music of the artist, a Chi (Chinese Vital Breath).

The visionary must be strong, yet subtle; clear yet undogmatic; the visionary must also respect the visions of others.

D. Initiation and Transformation

The Music Therapist as Ritualist requires a particular type of training. This training is not necessarily available within the present academic institutions offering training in music therapy. Briefly the Music Therapist as ritualist/artist/ visionary must receive the following:

- 1) Experiences in all the various musical rituals presently available and encouragement to create new rituals dictated by the situational needs of each unique therapeutic environment. A trainee must personally experience the power of music and ritual.

- 2) Knowledge and skills in as many disciplines as possible, especially, Music Therapy, Music, Philosophy, Psychology, Religious Studies, Anthropology, History, Creative Arts, etc. Equally important is a knowledge of one's own personal resources even before training

begins.

3) Experiences in the field, i.e., in therapeutic environments, from the onset of training. This gives the trainee many levels of understanding, which can be guided by clients, other Music Therapists and professionals.

There must be a balance between the technical skills and information, and the character and personality who can accept and use the magic.

At the core of the musical, mythical framework as presented here is transformation. The ritualist must embrace transformation before and during rituals which present this process to others. If a prospective Music Therapist applicant has not experienced some type of transformative experience prior to training, this process is required during initiation. Again we are reminded of the shaman. Arguelles contrasts rigorous training and receipt of a diploma with purification and transformation. He then says:

"The shaman and the yogi, the sorceress and the priestess, all derive their strength from an initiatory death and rebirth experience they must each undergo before they can truly be themselves. It is this transfigurative experience that endows

them with their unique vision. In traditional societies this experience was highly valued and the right to undergo it was safeguarded religiously. But modern techno-historical society abolished the right to vision as well as the ritual for gaining it with a fearful self-righteous vengeance, thus ensuring its own fantastic rise to power but also sealing its own doom. In denying the validity of the vision and the vision-quest, modern society denied itself any rebirth short of apocalypse - an event its own shamans and visionary prophets, exiled to the sidelines, have continually foretold and prepared for". (p.288)

He further notes that often those who do choose the path of transformation for training are labelled deviant.

The transformation of the trainee may be slight or extreme, but deep insight and understanding of the transformational process must occur, if he or she is to affectively employ the mythical, musical framework.

CHAPTER V

SYNTHESIS AND CONCLUSIONS

Synthesis

As Arguelles speaks of our self-destructive urges toward apocalypse, Jerome Frank (1978) in his book Psychotherapy and the Human Predicament, predicts the form of this eventual disaster as nuclear destruction and the cause, a type of social disease called technology. In Ivan Illich's words, we have heard this social disease called licentious technology. Because of this rampant technology, we are faced with the daily possibility of nuclear disaster, controlled by the emotions of political risings and fallings. While this cloud hangs over our daily lives, a fact which Frank sees in direct relation to the state of our mental health, we observe the simultaneous disappearance of fellow life on earth through the increasing disappearance of plant and animal species, including human species, all around us. The sick and distressed ones in our population are in direct relation to this situation. They are part of our essence. They are a reflection and intensification of our own collective condition.

The point is that something has gone wrong and, in

Grinder and Bandler's words, what are the alternatives? What does the structure of magic have to offer a sick culture, a culture which Joseph Campbell has claimed "Is on the way out"?¹

One clue is suggested in the word magic. As Malinowski said above, we find magic where we do not have control of the elements of our lives. In this situation, perhaps we think we have control, by virtue of our intellectual arrogance, when in fact we do not.

Another clue is provided by Gabriel Marcel, existential philosopher: "What I think we need today is to react with our whole strength against that dissociation of life from spirit which a bloodless rationalism has brought about". (Sykes, 1964, p.656) Marcel suggests that we have overdosed on mind, consequently leaving too much spirit behind.

The question for some is: Where have we gone wrong? The question used in the present document is: What have we left behind? In this situation of lack of balance, which elements of knowledge can we re-integrate into today's life in order to re-establish balance? The particular context used to address the question here is the therapeutic environment. But as stated earlier, these settings are only a reflection of the culture at large; and the people within those settings, reflections of the individuals outside. These relationships have

¹ Joseph Campbell, lecture, University of British Columbia, September, 19, 1979.

been noted by Jerome Frank (1978). Any alternatives would apply to us all.

The first question asked in Chapter II is: What has been left behind by overuse of the medical model? The two predominant areas in this section are a lack of spiritual freedom, which might even be called a negation of spirituality, and a dearth of creativity, which from most artists' view is related to spiritual negation.

Here again we find the word spirit. Spirit implies mystical, magical and religious experiences. Unfortunately the medical model has virtually ignored this side of the nature of man. Some interpretations of psychoanalysis have gone one step further and labelled religion as neurosis. This has created unfortunate inadequacies in health care. The word religion, derived from the Latin re-, "back" and lingare, "to bind", means in its broadest sense "a binding back together". The opportunities for healing aspects of religion are obvious within this definition. As Sandner says of the Nahavo: "Religion, medicine and art are inextricably intertwined in an astonishing unity of purpose". (p.4) And Marvin Harris: "It is clear that art, religion and magic satisfy similar psychological needs in human beings...They seek to penetrate behind the facade of ordinary appearance into the true cosmic significance of things". (p.583)

A more formal definition states that religion is the mixture of beliefs, attitudes, emotions, behavior, etc., constituting man's relationship with the powers or principles of the universe. This may or may not imply some function of deities. However it assuredly does imply a seeking of ontological structures and frameworks which relate man to the broader universe. Frankl calls this man's search for meaning, and identifies this search as the essential ingredient in mental health or illness.

The primary aspect of creativity which emerges as a consideration in healing is acknowledgement and utilization of paradox, being able to accept and use mixed feelings or contradictory circumstances for growth and change.

The Death-Rebirth Myth and its infinite number of analogies in life of course is one example of such paradox. Again, effective ritual contexts for this myth have been left behind. Although there are some cultural rituals which, wittingly or unwillingly, employ this myth and other myths, there are not enough to reassure us or remind us of the basic ever-constant patterns of life, which Campbell calls the elementary forms or human constants. Within the therapeutic settings, there are even less mythical rituals because of certain scientific, as opposed to spiritual, orientations mentioned in

Chapter II. The anticipated product of ritual based on the Death-Rebirth Myth is transformation, growth and change.

If we are able to consider this process in ourselves as a reflection, and part, of the world and universe around us, ontological questions are answered, and added strength and resources received. Similarly if we view the environment and fellow life around us as a reflection of and part of ourselves, healing or prevention is reciprocal. What Frank refers to as the "threatened suicide of humanity through poisoning of the environment" (p.19) will be less likely to occur.

In order for this association to develop between man and nature, which surrounds him and is in him, connecting patterns must be appreciated. As Chief Sealath says above "All things are connected. Whatever befalls the earth befalls the sons of earth". (Greenpeace Chronicles, p.5).

Perhaps the metaphoric mind can see this vision more clearly than the logical mind.

Music is only one vehicle in this framework, but it does provide easy access because of the inherent healing processes in music:

- music reflects nature

- forms and structure of music provide symbolic order
- music provides a framework from which to make choices
- music acknowledges both suffering and joy
- music is profound
- music is both an existential reality and is timeless
- music is a place to be alone
- music is a place to be together
- music provides high motivational stimulation
- music stimulates man's emotions, intellect and body
- music provides a relational context for man
- music is a preverbal or primitive perception and thus broadens the possibilities for communications and eliminates boundaries
- music reflects all the impulses of man
- music captures form and goes beyond form to spirit.
- music is flow and vibration and therefore reminds man of his earliest existence
- music is a sensuous perception
- music has an immediate effect

- music can provide a social context
- music can be centering or disintegrative
- music is a resource pool of images
- music is process and product
- music is liquid and solid

Unfortunately some of the processes inherent in music which can be used for healing have been ignored entirely because of strictly clinical orientation. In general these are:

- 1) Music contains magic
- 2) Music is an aesthetic experience and therefore conducive to patterning
- 3) Music can introduce and develop creative processes.

The Music Therapist as ritualist provides a context for the transformative experiences of mythical musical forms. In order to function in this role the music therapist must be not only clinician but also magician, artist as well as scientist and a visionary for the individual and the culture. He/she must understand and know the process of transformation personally in order to encourage others in this endeavor.

Conclusion

This thesis does not represent a purely systematic approach. Rather it represents a synthesized group of

ideas which become alive within the use of the Death-Rebirth Myth in Music. It is a framework to be suggested rather than imposed within certain sessions within certain therapeutic environments when deemed appropriate by the music therapy ritualist. The thesis strongly advises a pervasive change in present systems of therapy - a move to implement creative arts therapies. It suggests the feasibility of employing music as one of the vehicles for healing, in particular, the Death-Rebirth Myth. It also suggests certain qualifications necessary in initiation and transformation of Music Therapists creating ritual contexts for the mythical, musical structure. On a broader level it suggests an equal emphasis on art and science, a learning from, and incorporating of, certain traditional ideas within our present situation, a binding back to nature. Music and myth are suggested as only one of the means through which to return to these considerations. Sufi Inayat Khan says:

"Music is the harmony of the universe in microcosm; for this harmony is life itself, and in man, who is himself a microcosm of the universe". (Hamel, 1976, p.212)

BIBLIOGRAPHY

- Apel, William. Harvard Dictionary of Music, Cambridge Mass.: The Belknap Press of Harvard University Press, 1969.
- Arguelles, Jose. The Transformative Vision, Shambhala, Berkeley and London, 1975.
- Arieti, Silvano. Creativity: The Magic Synthesis, New York: Basic Books Inc., 1976.
- Assagioli, Robert. "Psychosynthesis: A Technique for the use of Intuition", Psychosynthesis: A Manual of Principles and Techniques, Hobbs, Dorman & Company, 1971, In Ornstein ed., The Nature of Human Consciousness.
- Bateson, Gregory. Mind and Nature, New York: E.P. Dutton, 1979.
- Becker, Ernest. The Denial of Death, New York: The Free Press, 1973.
- Bogan, Joseph. "The Other Side of the Brain: An Appositional Mind", Bulletin of the L.A. Neurological Societies, 34, No.3. In Ornstein ed., The Nature of Human Consciousness.
- Bony, Helen & Savary, Louis, Music and Your Mind, New York: Harper and Row, 1973.
- Camp, John. Magic, Myth & Medicine, New York: Taplinger Publishing Co., 1974.
- Campbell, Joseph. Hero of a Thousand Faces, New York: Pantheon Books, 1949.
- Campbell, Joseph. The Masks of the Gods: Primitive Mythology, New York: Viking Press, 1959.
- Chaplin, J.P. Dictionary of Psychology, New York: Dell Publishing Co., 1968.
- Chilton-Pierce, Joseph. The Magical Child, New York: E.P. Dutton, 1977.

- Cross, Milton & Ewen, David. The Milton Cross New Encyclopedia of the Great Composers and their Music, Garden City, New York: Doubleday & Co., 1953.
- Deikman, Arthur J. "Bimodel Consciousness", Archives of Psychology, 25, December, 1971, 481-489. In, Ornstein ed., The Nature of Human Consciousness.
- Dimmitt Church, Cornelia. "Myth and History as Complementary Modes of Consciousness", In Myth and the Crisis of Historical Consciousness, eds., Lee W. Gibbs & W. Taylor Stevenson, Missoula, Montana: Scholars Press, 1975.
- Dooling, D.M. "The Dangerous Passage", Parabola, Vol. 4, Fall 1976.
- Eiseley, Loren. Night Country, New York: Chas. Schribner's Sons, 1971.
- Eiseley, Loren. The Star Thrower, New York: Times Books, 1978.
- Eliade, Mircea. The Myth of the Eternal Return, New Jersey: Princeton University Press, 1954.
- Eliade, Mircea. Rites & Symbols of Initiation, New York: Harper & Row Publishers, 1958.
- Frankl, Viktor E. Man's Search for Meaning, Boston, Beacon Press, 1959.
- Frank, Jerome D. Psychotherapy and the Human Predicament, New York: Schocken Books, 1978.
- Freud, Sigmund. A General Introduction to Psychoanalysis, New York: Boni and Liver right, 1920, In Pickering, The Creative Malady.
- Garfield, S. & Bergin, A.E. Handbook of Psychotherapy & Behavior Change, 2nd ed. Toronto: Wiley & Sons, 1978.
- Gordon, Rosemary. Dying and Creating a Search for Meaning, London: The Society of Analytical Psychology Ltd., 1978.

- Greenpeace Chronicles, Vancouver, British Columbia, November, 1979.
- Grinder, John & Bandler, Richard. The Structure of Magic, Vol. 1 & 2, Palo Alto, California: Science and Behavior Books, 1976.
- Halpern, S. Tuning the Human Instrument, Palo Alto, California: Spectrum Research Institute, 1978.
- Hamel, Peter Michael. Through Music to the Self, Wiltshire: Compton Press, 1976.
- Harris, Marvin. Culture, People, Nature, New York: Thomas Cromwell, 1971.
- Helmholtz, H.L.F. On Sensations of Tone, 1862 Trans. Ellis, 4th ed. London: Langmans, Green & Co. Ltd., 1912.
- Hillman, James. Re-visioning Psychology, New York, London: Harper Colophon Books, 1975.
- Hindemith, Paul. A Composer's World, Boston: Harvard Press, 1969.
- Hopkins, Pandora. "The Homology of Music & Myth: Views of Levi-Strauss on Musical Structure", Ethnomusicology, Vol. 21: 2 May 1977, p.p. 247-261.
- Illich, Ivan. Medical Nemesis, Toronto: Bantam Books, 1976.
- Jilek, Wolfgang. Psychohygenic & Therapeutic Aspects of The Salish Guardian Spirit Ceremonial, M.A. Thesis, University of British Columbia, 1972.
- Johnston, William. Silent Music, New York, London: Harper & Row Publishers, 1974.
- Jung, Carl. Symbols of Transformation, Princeton, New Jersey: Princeton University Press, 1956.
- Kapferer, Bruce. "Mind, Self, & Other in Demonic Illness: the Negative & Reconstruction of Self". American Ethnologist, Vol. 6 #1, February, 1979.

- Kapferer, Bruce. "Ritual Process and the Transformation of the Context", Social Analysis - No.1, Adelaide, S.A.: University of Adelaide, February, 1979.
- Keleman, Stanley. Living Your Dying, New York: Random House Press, 1974.
- Keyes, Laurel Elizabeth. Toning: the Creative Power of the Voice, Marina Del Rey, California: Devorss & Co. Publishers, 1973.
- Khan, Inayat. Music, Lahore, Pakistan: Sh. Muhammad Ashraf, 1971.
- Kiev, Ari. Magic, Faith and Healing, London: The Free Press, 1964.
- Koestler, Arthur. The Act of Creation, New York: The MacMillan Co., 1964.
- Langer, Susanne K. Form & Freedom, New York: Chas. Scribners Sons, 1953.
- Larsen, Stephen. The Shaman's Doorway, New York, London: Harper & Row Publishers, 1976.
- Leonard, George. The Silent Pulse, New York: E.P. Dutton, 1978.
- Levi-Strauss, Claude. Structural Anthropology, Garden City, New York: Doubleday Books, 1967.
- Linklater, Kristin. Freeing the Natural Voice, New York: Drama Book Specialists Publishers, 1976.
- Luce, Gay. "Biological Rhythms", Biological Rhythms in Psychiatry & Medicine, National Institute of Mental Health, 1970. In Ornstein ed., The Nature of Human Consciousness.
- Lundin, Robert W. An Objective Psychology of Music, New York: The Ronald Press Co., 1967.
- Malinowski, Bronislaw. Magic, Science & Religion, Garden City, New York: Doubleday Books, 1948.

- May, Rollo. The Courage to Create, New York: W.W. Norton & Co. Inc., 1975.
- McLaughlin, Terrence. Music and Communication, London: Faber & Faber, 1970.
- Mead, Margaret. Ruth Benedict, New York, London: Columbia University Press.
- Meyer, Leonard B. Emotion & Meaning in Music, Chicago, London: University of Chicago Press, 1956.
- Meyer, Leonard B. Explaining Music, Chicago, London: University of Chicago Press, 1973.
- Moerman, Daniel E. "Anthropology of Symbolic Healing", Current Anthropology, Vol. 20, H1, March 1979, p.p. 59-80.
- Neher, Andrew. "A Physiological Explanation of Unusual Behavior in Ceremonies Involving Drums" in Human Biology, Vol. 34, #2, p.p. 151-161.
- Neumann, Erich. Art and the Creative Unconsciousness, Princeton, New Jersey: Princeton University Press, 1959.
- Ornstein, Robert E. The Nature of Human Consciousness, San Francisco: W.H. Freeman & Co., 1973.
- Ornstein, Robert E. The Psychology of Consciousness, San Francisco: W.H. Freeman & Co., 1972.
- Parabola, "The Nature of Death", Vol. 2 #1, Winter 1977.
- Pickering, George. The Creative Malady, New York: Dell Publishing Co., 1974.
- Reik, Theodor. The Haunting Melody, New York: Farrar, Strauss, Young, 1953.
- Revesz, G. Introduction to the Psychology of Music, University of Oklahoma, Norman, 1954.
- Rogers, C.R. "Towards a Theory of Creativity" (1954), ed. Vernon, P.E., Creativity, Penguin Books, Middle Sex, 1970.

- Rosenboom, David. Biofeedback and the Arts, Vancouver, Aesthetic Research Institute of Canada, 1976.
- Rothenberg, Albert. "Creative Contradictions", Psychology Today, Vol.13, June, 1969.
- Task Panel Reports Submitted to the Presidents Commission on Mental Health, Vol.IV, 1978.
- Samples, Bob. The Metaphoric Mind, Don Mills, Ontario: Addison-Wesley Publishing Co., 1976.
- Sandner, Donald. Navaho Symbols of Healing, New York, London, Harecourt Brace Jovanovich, 1978.
- Schafer, Murray A. The Tuning of the World, Toronto: McClelland & Stewart, 1977.
- Schimmel, Annemarie. "Die & Become", Parabola, Vol.3, #2, May, 1978.
- Seashore, C.E. Psychology of Music, New York: McGraw Hill, 1938.
- Shapiro, A.K. "Factors contributing to the placebo effect, their implications for psychotherapy", American Journal of Psychotherapy, 18: 73-88, 1964.
- Sinnott, E.W. "The Creativeness of Life", Creativity, ed. Vernon, P.E. Middlesex: Penguin Books, 1970.
- Solomon, Philip & Patch, Vernon D. Handbook of Psychiatry, Los Altos, California: Lange Medical Publications, 1974.
- Sontag, Susan. Illness as Metaphor, New York: Farrar, Straus & Giroux, 1978.
- Strupp, Hadley, Gomez, Schwartz. Psychotherapy for Better or Worse...an Analysis of Negative Effects, New York: Jason Aronson, 1977.
- Steindl-Rast, Brother David. "Learning to Die", Parabola, Vol. 11, #1, Winter, 1977.
- Stent, Gunther S. "Limits to the Scientific Understanding of Man", Science, 187: 1052-57, 1975.

- Storr, Anthony. The Dynamics of Creation, London: Secker and Warburg, 1972, In, Pickering, G., The Creative Malady.
- Sullivan, J.W.N. Beethoven, His Spiritual Development, New York: Vintage Books, 1960.
- Sykes, Gerald. Alienation, The Cultural Climate of our Time, New York: George Braziller, 1964.
- Szasz, Thomas S., M.D. The Myth of Mental Illness, New York: Harper & Row Publishers, 1974.
- Szasz, Thomas S., M.D. The Sacred Symbol of Psychiatry, New York: Basic Books Inc., 1976.
- Weckman, George. "Believing Myth as Myth", Myth the Crisis of Historical Consciousness, ed. Lee W. Gibbs & W. Taylor Stevenson, Missoula, Mont.: U.S.A. Printing Dept., 1975.
- Van Genner, Arnold. The Rites of Passage, Chicago: Chicago University Press, 1960.
- Vernon, P.E. Creativity, Middlesex, England: Penguin Books, 1970.
- Whitmont, Edward C. The Symbolic Quest, Princeton: Princeton University Press, 1969.
- Whorf, Benjamin Lee. "Language, Mind, Reality", J.B. Carroll, ed. Language, Thought & Reality: Selected Writings of Benjamin Lee Whorf, Cambridge, Mass: The MIT Press, 1956. In, Ornstein ed., The Nature of Human Consciousness.
- Willems, Edgar. "Introduction a la therapio musicale", in Schweizerische Muzikzeitung, Vol.3, 1963.

APPENDICES

APPENDIX A

APPENDIX A

CAPILANO COLLEGECOURSE OUTLINE

TERM <u>FALL 1979</u>	COURSE NUMBER <u>MUSIC 242</u>
INSTRUCTOR <u>CAROLYN KENNY</u>	NAME OF COURSE <u>MUSIC & THE CREATIVE</u>
	<u>ARTS</u>

OBJECTIVES OF COURSE:

- General:** To develop an appreciation and understanding of the relationship between Music, Dance and Art in the therapeutic environment.
- Instructional:**
1. To develop an articulate rationale for implementation of the Creative Arts Therapies.
 2. To appreciate the unique resources of each of the arts (Music, Dance, Art) and the related implications for their therapeutic use;
 3. To understand how to use in conjunction with music in therapy sessions, to increase potential for growth and change;
 4. To learn specific techniques of combining the arts in therapy with music as a primary tool;
 5. To develop observation skills in noticing which particular art medium will create the most effective vehicle for the client;
 6. To learn specific techniques of guiding groups through creative arts therapies sessions with music as a base.

COURSE CONTENT:

- I. Music & Color
 - A. Overview - Rationale for Creative Arts Therapies Concept
 - B. Synaesthesia - the integration of sense perception, emotion & intellect.
 - (1) Music & Color - Painting, Drawing & Poetry
 - (2) Music, Color & Movement - the Mask (intro. to video usage)
- II. Music & Dance:
 - A. Qualified quest leaders in Dance Therapy
 - (1) Movement with the child
 - (2) Movement with the adult and elderly
 - B. Combining music, movement, color, sculpture in a resource pool to explore death/rebirth theme in music.
- III. Music in a Different Perspective:
 - A. Rhythm - a Life Force in Music & Dance
 - B. The Human Vibration - voice, the cello, the bass combined with color, shape poetic word
 - C. Nature as Healer & Integrator of the Arts

NOTE: Classes will be primarily experiential and discussion time with some lecture.

APPENDIX B

Questionnaire - Music 242

- 1) Were you initially able to experience a feeling of "nothingness"?
- 2) What theme did the music communicate to you?
- 3) Were you able to connect to the musical theme as a symbolic metaphor of some stage or situation in your life?
- 4) Did you experience regeneration or renewal through your musical encounter?
- 5) Did you experience a "building" feeling?
- 6) Did the musical experience have "meaning" for you?
If yes, briefly describe.
- 7) Can you describe the qualities in the music which "inspired" you?
- 8) If other materials inspired you, what were they?
- 9) Any further comments?

APPENDIX C

Discussion of Questionnaire

The following is a brief interpretation of the purpose of items used in questionnaire (Appendix B):

- 1) Were you initially able to experience a feeling of "nothingness"?

The "nothingness" is meant to simulate the death portion of the myth. A person ventures to the lowest state, a state of numbness, before a rebirth or insight can occur.

- 2) What theme did the music communicate to you?

This question seeks the death-rebirth theme or some analogous growing theme.

- 3) Were you able to connect to the musical theme as a symbolic metaphor of some stage or situation in your life?

This question seeks evidence that there has been a conscious connection between symbol and concrete life situation so that symbolic healing or at least clear insight has occurred.

- 4) Did you experience regeneration or renewal through your musical encounter?

This question tries to find out if a sort of rebirth did in fact occur.

5) Did you experience a "building" feeling?

This question asks several questions:

a) did you feel "creative", i.e., creating a product?

b) did you feel in control of building?

c) did your building of product transfer into a building "feeling" inside--a suggestion for personal growth?

6) Did the musical experience have "meaning" for you?

This question has two purposes:

a) to encourage the participant to identify meaning and its importance in growing

b) to serve as a second check on identifying any function of the death-rebirth theme.

7) Can you describe the qualities in the music which "inspired" you?

8) If other materials inspired you, what are they?

9) Any further comments?

Questions 7,8,9, are open-ended and seek information beyond or outside of the death-rebirth myth.

APPENDIX D

Appendices D, E, and F include description of sessions and results of general evaluative questionnaires on use of the Death-Rebirth Myth in Music with second year Music Therapy students of Capilano College, Vancouver, B.C. The study was conducted as part of a required course for Music Therapy trainees called Music and the Creative Arts. (see course outline in Appendix A) Within this course students are encouraged to use and develop Music Therapy techniques which incorporate a variety of art media, using music as a base in all activities. The combination of more than one art form, i.e., music and movement, music and color, music and poetry, music and sculpture, increases:

- 1) the possibilities for symbolic association and identification;
- 2) the intensity of the experience, which strives toward greater levels of depth.

Students agreed to participate in three Music Therapy sessions using the Death-Rebirth Myth. They had been introduced to the concept in their first year studies. However the focus of these three sessions was

experiential as opposed to academic. The myth theory was not re-explained nor mentioned during the session. Rather the myth was suggested through the two influences mentioned in this thesis introduction and elaborated upon throughout Chapters II & III. If the myth and music framework is imposed upon a group the results will be questionable in light of the discussion in Chapter IIA. It was merely available in a trusting and supportive ritual form. If people are ready to hear and use the death-rebirth concept, they will. If not, they may have different associations with thematic content. Or they may not be inspired to use the situation at all at that particular moment. Sessions were related in the following ways:

- a) They all employed the death-rebirth myth as described in the body of this thesis.
- b) They built from a solitary experience in the first session to a mixture of solitary and group experience in the second, to a group experience in the third session.
- c) Increasing demands and expectations were placed on the participants to verbally describe and share their feelings and insights within the group. The leader did not direct questions to participants during discussion in the first session, maintaining

an atmosphere of playfulness. A few questions were asked during the second sessions. Questions in the third sessions were directly related to verbalizing therapeutic insight. Even though sessions employed the same philosophical theme, different materials and methods were used for each session. The basis for this variety is that within a group, different people will be able to effectively use different media and different degrees of structure, e.g., one person may be able to employ movement better, another color.

Students were given a questionnaire to document their experience of each session. (see Appendix B) The twofold purpose of the questionnaire was:

- 1) to evaluate the effectiveness of the use of Death-Rebirth Myth in Music
- 2) to teach students how to recognize thematic content in Music and its usefulness in therapy.

It should be noted that the first two questionnaires were given to students to take home and return the following week. (Classes met once a week) The last questionnaire was filled out in the class directly following the session. Several students commented that this made a difference in the type of answers since the symbolic experience or metaphor stayed with them several

days and only later did they receive insight about what it meant in terms of the broader picture of their lives and personalities.

The data includes:

- 1) description of the sessions;
- 2) results of student questionnaires;
- 3) brief discussion of results.

Description of Session I - November 13, 1979.

The first session combined music with sand-sculpture. Each student was provided with a large, deep tray, filled with dry sand and a large glass of water. They were asked to find a spot in the room which was comfortable and private; and to sit in that spot placing the materials in front of them on the floor.

Instructions were: "Breathe deeply, experience the quiet. Relax, let yourself find a feeling of nothingness in the quiet. When the music begins, play with the dry sand, experiencing its texture, temperature and movement. Play as long as you wish. When you are ready, add water to the dry sand and begin to build something out of or in the sand. Think of the music as coming into the sand through your hands".

Music used was a 21 minute selection entitled Hergest Ridge by Mike Oldfield. (selection #8 on tape)

After the music was over, students were asked to slowly complete their sand sculptures and come together in a circle for discussion. One person started describing his sculpture and each in turn selected another student they would like to hear from. Each participant was given as much time to describe their work as they wished. If someone could not find words to describe their sculpture they were not persuaded to do so.

Results of Questionnaire I

Fourteen out of fourteen questionnaires were returned.

Table of Responses for Yes-No Items

Question	Yes	Partially	No
1 (nothingness)	8	3	3
3 (connect)	10	-	4
4 (regeneration)	11	2	1
5 (building)	12	1	1
6 (meaning)	10	2	2

Table of Responses for Items 2,7,8,9.

There were multiple responses on all questionnaires in items 2,7,&9 and some in item 8.

Question 2: What theme did the music communicate to you?

The following responses were mentioned a total of three times each on the questionnaires:
exploration, playfulness, movement, floating, building, fun.

Two times each:
secret, mysticism, travelling.

One time each:

hiding, connections, moving up, music had only a subtle influence, no awareness of the music, pain, space and openness, the onset of genesis, strength.

Question 7: Can you describe the qualities in the music which "inspired" you?

The general comment: "The music was part of the whole, rather than a focus", was mentioned a total of four times.

"Spiritualism" was mentioned a total of three times.

"Playfulness" was mentioned a total of two times.

The following responses were mentioned one time:

flowing, melting, joyous, painful, space, a drone, swelling, security, comfort, trust; permission to explore, develop and change, lightness, unobstrusiveness, none.

Question 8: If other materials inspired you, what were they?

"Sand" was mentioned a total of twelve times.

"Water" was mentioned a total of five times.

"Sun in the room" was mentioned a total of four times.

Question 9: Any further comments:

The following are direct quotes of 12 responses to this question.

- I was very moved by the total experience-- sand and music creation. It was positive and energy-- giving.

- I loved doing this activity. The experience of building parts of me in the sand has stayed with me and brought some "hidden" parts of me closer to the surface.

- The feeling evoked by the sand - the touch of its coolness, the memories consciously and unconsciously were called up through that touch played a big part in the experience. They helped to lead into myself - to forget and find myself.

- The sand! I have never felt so drawn to and connected with any other material to date. It was all-consuming. The music was both incidental and yet fundamental to my experience. Incidental because I was already one with the sand; fundamental, as I was aware of some aspects of it (e.g., floating sequence) which directly influenced the way I interacted with the sand.

- My sand sculpture was "Intermingling, Boundaries, the Sea".

- My piece was "Mountains and Valleys".

- I'm sure the music inspired me in some ways, but I think it was more unconscious than conscious as it didn't stand out as much to me as the sand.

- I was into myself too much. The only time I really heard the music was right at the beginning and after I had destroyed my first sculpture.

- More time for meditation before the music.

- I feel we should have spoken more about our sand creations as a class. People would have commented on others works and maybe shared some symbolic commonalities which people expressed. What do these images mean and how do they relate to us in our life right now? It seemed we never shared collectively and thus the experience was somewhat isolating--a sense of overvaluing something like this contributes to the fear of sharing more openly or confidently. The sense of private and exclusive was dominant and I wish we could have gotten beyond that.

- My words for my piece were: Paths coming from different places converging together to go up to the mountain peak. A cave to shelter in and holes to hide in, from life, but a path leading out to the mountain.

- Interaction was almost non-existent. To my thoughts, a large part of the potential of this exercise was lost through lack of attempt for mutual understanding of one another's work. Had the group decided to feed back impressions, fantasies to one another, I believe that a greater sense of simply being human might have occurred.

Discussion of Results of Session I:

It is obvious that the sand became a powerful vehicle for most participants. The music took a secondary role, if any for some people. In this particular activity, the music was intended to be used as a subtle, shaping influence which people could travel into and out of when so inclined, but which would not inhibit any unique interpretations or forms which might emerge outside of the musical suggestion. It was meant to create a dream-like affect. The experience was intended to be a solitary, introspective task, but with room left in discussion for as much sharing as desired by participants.

Most people were able to experience a regenerative, building, meaningful feeling from the session with sand and music.

APPENDIX E

Description of Session II - November 20, 1979.

The second session used shadow dancing in combination with musical improvisation. A large theatrical spot light was reflected onto a blank, white wall. All other lights were turned off. A variety of musical instruments were set up in an orchestra form. Instruments included timpani, bass drum, bongos, 2 pianos, bell tree, gong, flutes, cello, string bass, violin, silver flute, guitar and tambourine. Students were also encouraged to use their voice in musical improvisation. Instructions were as follows:

"Form two groups. Those who feel like being alone, and those who feel like being together. Those of you who are "together-feeling" form groups of pairs, threes or larger amongst yourself. Today we work with the shadow. Become aware of your shadow side--perhaps the dark side or secret side of yourself--whatever "shadow" suggests. Each person or group will have a turn creating a shadow dance. Start from a state of stillness or nothingness. Select a person or persons from the group to improvise to you dancing. If you wish you may tell them which instruments to play. Instrumentalists follow the dance or dancers, reflecting their movement in your

music. If you need more of a musical direction, think of making an "undulating" sound.

The goals for the second activity were similar to the first. It was hoped that though the shadow and music, people would experience a symbolic or metaphoric death-rebirth, which they could identify with some specific situation or personality characteristic. This activity encouraged more of a group or person-to-person interchange.

Each shadow dance and improv was discussed by the performers immediately after the piece was completed. Group members were encouraged to share feelings of what it meant for them.

Results of Questionnaire 2

Ten out of twelve questionnaires were returned:

Table of Responses for Yes-No Questions 1,3,4,5,6.

Question	Yes	Partially	No
1 (nothingness)	7	-	3
3 (connect)	5	1	4
4 (regeneration)	7	1	2
5 (building)	7	3	-
6 (meaning)	10	-	-

Table of Responses for Items 2,7,8,9.

There were multiple responses on question 2.

Question 2: What theme did the music communicate to you?

The following responses were mentioned a total of three times on the questionnaires:
mystery, spooky, wind.

"Playful" was mentioned one time.

The following responses were mentioned once:
struggle between two parts of myself, chaos, joy, togetherness, death-rebirth, struggling, testing, expanding, freedom, joy, peace, no contact, aggression, distance, irritation, love, present but with-held; the music was me. It simultaneously enveloped me and was absorbed by me.

Question 7: Can you describe the qualities in the music which "inspired" you?

There was one response each for Question 7.

- spooky voices and cello.
- the music supported me and allowed me to throw away things.
- the tensions and releases in the music affected me along with the silences and breaks. The instruments very much matched my mood and feelings. I felt as one with the music.
- gentleness and warmth in the flute sound, cello and bass.
- beginning and exploring sounds, of flute, dancing and twirling of percussion. I felt the driving energy of the congo right through me. The music was for me and in me at the same time--my body became one with it.
- an interflow between dances and musicians.
- I was struck by a sense of support.
- the polarities of sound produced by flute/tone bass and guitar/bongos. The long breath of the flute inspired me, calmed me and opened me. The bongos instigated movement-agitation and direction.

- perfection otherwise because it did not disturb my flow.

... it was a stretching feeling, the interaction between the music and my shadow, urging growth, building.

Question 8: If other materials inspired you, what were they?

There was a total of seven responses to Question 8.

"Shadow" was mentioned four times.

"Interaction with others" was mentioned three times.

Question 9: Further comments?

The following are direct quotes from ten responses to this question.

- loved it.

- I felt I could let loose and be supported by the music.

- I found this to be extremely powerful activity and the things which happened were meaningful. Playing for others to move also had a great amount of meaning for me which was extra to my own moving. It was not an easy activity for me to do, but was beneficial. At one point, I almost didn't complete the activity, but am glad that I decided to do so, and finished for myself. I felt a lot of support from the music in that I trusted people playing for me and heard their support.

- My regret with this activity is that I did not find a way to complete my encounter with my own shadow. I was very aware however, of how exhilarating and complete it was for many other people, and feel excited at the possibility of using it in my practicum with adolescents.

- This activity was one of the most exciting I have ever taken part in. I have never given myself over to movement and music in such a free way, in my life--a truly treasured moment.

- The dance between myself and my partner merged together. I was more aware of the shadows than the music. Sometimes the music was more inhibiting than calling out and I seemed to be working against it.

- I feel that "nothingness" is a lot to ask for. Would it be possible to approach the state you are interested in by other means? e.g., awareness of breathing, fantasy, etc.

- I would like to have danced alone in retrospect, in relation to my own shadow. It seems to require some guts to look at yourself so directly.

- Words from the dance: sorrow, covering, need, forgiveness, strength. It was especially wonderful to play for and with you, Carolyn. It will be a memory treasure of you.

- The most powerful for me was the oneness with the music. I chose the people to play and directed them to instruments that expressed what I had to say at that moment. It was a complete and total expression, with the music and my shadow as one.

Discussion of Results of Session II:

The musical improvisation added a new dimension to the sessions. Whereas a recorded piece selected by the leader for its strong suggestion of death-rebirth, in a sense guides the results, the musical improvisation provides more freedom. The two key words in the instructions which suggested the death-rebirth direction were 1) to the dancers, find a state of "nothingness"; 2) to the instrumentalists, let your music "undulate". This new dimension is reflected in the questionnaires, so that thematic content reflected greater variety. The musical improvisation, also added a feeling of closeness between shadow dancers and instrumentalists, a feeling of respect, nurturing, sharing, understanding, mutually creating. Comments on the questionnaire re-

flect an increase of demands and tension. This may have come from attitude of the leader, seriousness of the media, or a willingness on the part of some group participants to use the session for personal growth. Certainly, the shadow is a powerful medium. Inclusion of the gong and string bass also may have suggested a deeper level or dimension of experience. Students had not had much experience with the cello and string bass in particular.

Several students mentioned dealing with a split in their personalities. Some mentioned coming face to face with dark personality characteristics, which they feel resistant to change. In a sense they engaged in a confrontation with some shadowy side. The application of the death-rebirth myth here is that something must be lost, or greatly transformed in order for new growth to occur.

APPENDIX F

Description of Session III - November 27, 1979.

The third and final session combined group movement with pre-recorded music.

Students participated in a warm-up in which they were encircled by a large material rope. They moved as a unit to some of the lighter quicker Chopin Etudes. Then lights were dimmed. This activity was used both as a warm-up and to provide a playful give and take task. Instructions for the main activity were as follows:

"Form a circle on the floor, head to the inside, each person in the curling leaf position, but holding hands with those on either side. Relax. Take even, normal breaths. Empty your mind of all thoughts. Find a feeling of stillness or nothingness. Imagine yourselves as one seed under the ground if you wish. Only be aware of the warmth in the hands on either side. When the music begins, think of it as coming along the floor and into your body as nourishment. Let the music move you, only when you are ready and as slowly as you wish, in your own time. Keep your eyes closed and continue to hold hands with the people on either side".

During the movement, people were encouraged to move in their own time, slowly, gradually. They moved

as one unit, some "growing" slower, some more quickly. Chopin's Etude in A flat major was played three consecutive times. After the third time, a brief period of silence and stillness followed. Then students were asked to come to a sitting position in the circle when they were ready. Each person was given paper and colored pen of their choice. The Etude was played again twice and people were asked to try to capture their feelings in poetic form--either in connection with previous movement or from the new listening.

Participants were then asked to share their poems or any other feelings about the activity.

At the end I paired the students up, using their comments as a guide. The activity seemed incomplete for some. The two criterion for pairing were:

- 1) People who shared a common feeling. They would have a time of no restriction which had been dictated through group movement.
- 2) People who would share a balance and learn from each other through their different qualities.

Students were asked to sit on the floor back to back, arms joined as a starting position. Again they moved to the A flat Chopin Etude.

Results of Questionnaire III

Sixteen out of sixteen questionnaires were returned.

Table of Responses for Yes-No Items 1,3,4,5,6.

Question	Yes	Paritally	No
1 (nothingness)	14	-	2
3 (connect)	14	-	2
4 (regeneration)	14	2	-
5 (building)	12	3	1
6 (meaning)	12	1	3

Table of Responses for Items 2,7,8,9.

There were multiple responses on items 2 and 7 and some on item 8.

Question 2: What theme did the music communicate to you?

"Growing" was mentioned a total of five times on the questionnaires.

The following responses were each mentioned one time:

flowing cycles and circles, flight and flying, soaring; rising, falling, like an ocean with waves coming in; circles in repetition with a strong directional undercurrent, struggling to be free vs. comfort, nurturing of contact and warmth; calmness, swirling birth, lightness and solidarity, death-rebirth, relaxation, tender feelings, love, seclusion and breaking away, connected and alone at the same time.

Question 7: Can you describe the qualities in the music which "inspired" you?

"Lifting and falling" was mentioned a total of five times.

The following responses were each mentioned a total of three times:

fluid, crescendos, flowing, building.

"Balance" was mentioned a total of two times.

The following responses were each mentioned one time:

gathering and expanding, introspective, gentle/ assertive, deep bass bringing vibration through the floor, spaciousness allowed for high sensitivity of touch, the quiet ending soothed me, repetition, contrast between high and low tones, color in music, lightness.

Question 8: If other materials inspired you, what were they?

"Other peoples hands" was mentioned a total of eight times.

"The exercise itself" was mentioned a total of three times.

The following responses were each mentioned one time:

writing a poem, darkened lights, sun.

Question 9: Further comments?

The following are direct quotes from nine responses to this question.

- I found sharing my poem harder than the rest of the activity.

- I wish the music had been longer.

- My image was of fallopian tubes, leading to the nourishing hands, another way to get full.

- I was aware of giving and taking.

- It was difficult to bring myself out of the curled position, so I was glad to be holding hands. That contact stopped me from losing connection with other people. I was shaky and warm; introspective.

- This activity was not introspective for me as others had been. It was very meaningful and fulfilling to experience the sensation of balance and oneness with the music, my partner and myself. My body felt bigger, extended.

- I like the idea of moving together, in a circle--the suggestion to keep in touch with others all the time restricted me. On the other hand, it is a life situation which occurs often.

- The activity seemed disjointed--in sense of connection with each other and experience of music. My paired movement, on the other hand, was a very pleasurable experience. I think the writing enabled me to leave a past experience clearly.

- The more I am successful in experiencing these sessions with a deeper, pre-verbal consciousness, the more difficult I find it is to call it up and back to surface, linear thought. I feel contented for the most part to let the experience root deep and take its time coming up. The scratches on the record were irritating and disruptive.

Discussion of Results of Session III

The table on page 166 indicates the highest degree of positive response for Session III. Many people were able to experience a feeling of growing, whether in a sense of moving with the flow or struggling to maintain one's own identity under the pressure of group movement. Several mentioned the feeling of being split and having to make decisions about whether to assert one's own movements, or conform with the group movement.

Most experienced a sense of renewal. The theme of ability to accept nurturing or new life from others' activity was prevalent.

Conclusions

In reference to the three sessions in Appendix D, E, & F, certain qualifications should be made about this particular group. They were music therapy students who are being trained to be particularly receptive and imaginative with music. They were in a student-teacher relationship with the leader. Even though this course is offered in an experiential, not an academic way, these two considerations would have some affect on the results.

The three sessions were designed in escalating degree of demand on participants. In general the first session allowed people to be totally introspective and alone; the second allowed a choice about being alone or part of a group, the last was a group task.

Pre-recorded music was selected for suggestion of death-rebirth through musical contrast and patterning.

From the questionnaire results, most people were able to use music and other resources as a vehicle for personal insight and healing. The death-rebirth myth takes many forms throughout the responses. Imagery and analogy to life situations or personality conflict are manifested in a great variety of description. The level of intensity varies from session to session and

from person to person. In general, the first session was more playful than the last. The music used in the first session was more subtle and less demanding than the music used in the last.

In any case this documentation presents three examples of using the death-rebirth myth in music and subsequent results from immediate or short-term participant feedback.

APPENDIX G

This section documents three Music Therapy sessions (Appendices G,H,&I), at University of British Columbia Dept. of Psychiatry, Day Treatment program, conducted by Elizabeth Moffitt, Music Therapist.

The day treatment program at U.B.C. accepts patients who agree to participate in therapy programs five days a week from 9-4. It is an on-going program in which new patients are admitted to the continuing group as others are discharged. These people are not disturbed enough to require institutionalization, but still in need of intensive therapy. The program uses a variety of treatment techniques including Psychotherapy, non-verbal groups, Music Therapy, Chemotherapy, Recreation Therapy and Occupational Therapy. Ninety-minute Music Therapy sessions are provided once a week. Patient attendance is required.

The following music therapy reports were provided by Ms. Moffitt in co-operation with me to document the death-rebirth myth in music and its effectiveness in therapy. She agreed to conduct three music therapy sessions using the death-rebirth myth.

Session I - September 10, 1979.

Description of Session I.

1) Participants were asked to write down one main area they were working on personally in the day program, either for that hour/day or more generally, for their time in the program.

2) They were asked to imagine physically being able to shake off, push away, kick away, confront, etc., this part of themselves, or to accept it in such a way that it would no longer be a problem.

3) In a circle, each person took a turn at moving in the above way, while all others in the circle reflected or imitated the movement. Pre-recorded music used was "Get Away" by Earth, Wind and Fire and "Respect Yourself" by Aretha Franklin.

4) The group listened to "Adagio for Strings" (selection #7 on tape), by Samuel Barber. The group was asked to imagine themselves either as a seed or a fetus or any early life form laying on the floor, feeling the surroundings, noticing sounds, emotions, visuals, etc., and then allowing the music to soak in, moving if they felt like it.

5) The group heard the record a second time, while writing down images, feelings, memories, etc.

6) The group had a short discussion period in which they shared their feelings and poems. (see poems attached)

7) They then did shoulder massage in pairs.

General Results:

There was much laughter, high energy, playfulness, and physical expansiveness in the movement part. Reactions to the Barber "Adagio" had the usual split between death and loss images, and inner strength, life force and connection with natural processes.

Specific Results:

1. Patient E., diagnosed schizophrenic: A few weeks ago, this lady felt that if anyone so much as talked to her she would die. This poem to me, is a beautiful statement of her growth.

TO GAIN MORE CONFIDENCE

As a seed under the ground I felt alone,
darkness was all around and I had no friends.
Gradually as I sprouted out of the ground I
began to see how beautiful the world was.
I saw the sun it was warm and good, I saw
the trees swaying in the breeze, the clouds
rolling in the sky all of nature was so
friendly and it felt so good just to be there.

2. Patient J., diagnosed adjustment reaction:

This was her first day in the program. She is a quiet, shy woman, having recently had one leg amputated; perhaps herself at the stage of just beginning again.

GAIN SELF CONFIDENCE IN ALL AREAS

The seed is planted with loving care
The sun and the rain they are there
And the flowers that began the same
protectively circle and care
But the seed remembers the cold
of life before
and cries not to grow
Just to be in nothingness
no more pain no more ache
no more life
Gently the flowers give
their happiness away
so that the new seed
may forget the pain
and grow warm in their sun
the seed quivers
and begins again.

3. Patient T., diagnosed bipolar affective disorder: She was extremely creative in her movement, perceptive of herself and others. Her third drawing incorporates life-death symbols for her.

TO PUT SOME STRUCTURE INTO MY LIFE

I wish I could be as I am
But I am learning that others are telling me
that it is like this.
But I will always look at it this way.

4. Patient S., diagnosed schizophrenic - acute psychotic episode: She can be quite scattered and delusional. She described her writing as being split into two aspects. There are lots of elements here which I think can represent birth (spirituality, idealism) and death (pain, pessimism, hopelessness and aloneness) to her.

GAIN SELF CONFIDENCE

becoming more sociable
having a steady adult level

don't you change
turn time can't we all do that together
don't you know we can't go back but we can
push on.

no, no, no, only now and
when can we change
never, its too late,
go back, can't go back

We'll try real
hard and
make it
work.

So let's live,
be definite,
say fine,
answer back
right away.

Everyone thinks
 differently
 give it time
 for um unan
 -swered questions
 no one person thinks the
 same as I myself do.

No one no one no one no one
 the truth
 Its not forgotten
 its not to be discarded
 its to be recognized
 and to be realized plus
 love, vitality and oneness
 needs to be there.

be there
 will you always
 come to my rescue
 says the girl maiden
 to the boy brave

hurt, drawn, criminal, timeless, pessimistic,
 irrelevant, distinguished, ancient, oriental,
 lord, wishful thinking, no one, no one.

5. Patient B., diagnosed personality disorder -
 manic/depressive: She is a very bright, powerful young
 woman with severe mood swings. She entered the session
 by saying she'd had a headache for 4 days and didn't
 think she could do much today. Soon she became very
 lively in the movement part with laughter, agitated and
 fast body movement. She hid under the table while
 listening to the Adagio and left the room half way through
 the second listening. During discussion, she said she
 had felt very low listening to the music and angry at
 God for causing death and leaving people behind to suffer
 for loved ones and angry at the music for having such an

effect on her being that one minute she was really high and the next really low. She called it "morbid music", and asked how she could survive like that.

TO OVERCOME MY ANXIETY AND DEPRESSION
AND BEING SO MOODY

Let me out of this
because it's driving me crazy,
and if I don't get out of here,
I'm going to die,
and there won't be a parade,
just a lot of relieve,
Because you can't go on,
If life won't let you,

It seems so stupid,
That a feeling can
overcome you,
How do you in touch
with your feelings?
I guess you really can't
How do you get rid
of something you can't
put your finger on?
Is there a way out?

6. Patient J., diagnosed depressive neurosis:

This was his first day in the program.

EXPRESSING MY FEELINGS WITH CONFIDENCE

The seed has it's properties and message to
grow in a harsh world around a struggle so
difficult to live and easy to die
it continues to fight for it knows why.

It uses the elements in short supply
with no question or doubt but just to try
to survive and flourish day to day,
and flower and pass on the process this way.

7. Patient G., diagnosed depressive neurosis:

He is a very quiet, shy, intense and intelligent man.
His poem speaks of life and death, mysticism and conflicts.

TO GAIN SELF CONFIDENCE AND LEARN
TO RELATE TO PEOPLE

Man cold
child cold
Superman? Is torn into clouds
The sun rises and brings death to darkness
The warmth of the womb. Growth hot, vital
strong.
There is an end. Slowly they become stronger
moving to meet themselves. Alone, independent,
attached by the pulse.
My mind wanders at wonders. A pearl, heavy with
layered coatings man his life.
There is a vision that comforts a return to
the womb, warm, throbbing, enduring. The
residual warmth cools slowly in the head.
The joining of lives, braids our collective
soul.
Cold, empty blackened husk, its germ
shrivelled and burnt.

APPENDIX H

Session 11 - September 17, 1979.

Description of Session 11.

- 1) The group moved spontaneously in a circle to French Canadian Fiddle music. (warm-up)
- 2) People then paired up and initiated or reflected each other's movements.
 - a) with lively large movements
 - b) with eyes closed, in slower movements to celtic harp music.
- 3) Participants were asked to find their own space, and while standing, accept the music and imagine the years are rolling back slowly, until you become a fetus or a baby again. Let your body get smaller until you are lying on the floor. Notice memories and feelings, physical and emotional. Music used was a) Psychologically Ultimate Seashore (sounds of sea) and b) Sound of Main Artery of the Mother from Lullaby from the womb.
- 4) With partners from 2B above, rock each other to the music and in child's voice, ask for exactly what you want from your "parent". Music used was "Mood" by Roberta Flack and Donny Hathaway and the slow movements from Vivaldi's Trio for Guitar, Violin and Clavican, Concerto in D. major.
- 5) With the same partner, members were asked to sculpture their partner, as if they were clay, into some position of strength or symbolic of some other quality they admire. Music used was Pachelbel's Canon.

General Results:

This was a powerful session for everyone, in one way or another. It was quite unusual that people ran out of the session. This time four left clearly being faced with their usual tactic's when repressed feelings were stirred up. Many surprised themselves with their capacity to give and to receive. Others were reminded of early life experiences and feelings which hopefully can be used for their present understanding.

Specific Results:

1. Patient B and C., diagnosed personality disorder - manic/depressive: For #1 both came in very energetic and led circle activities - very happy - good group feeling - lively participation and organization. 2B was extremely difficult for B. - "I can't slow down, I don't like being touched, I'm getting angry with myself - I'm not doing this". She did keep trying, stopping and starting several times. In discussion, she said she felt like dying; that she couldn't remember anything from age 10-14 years (too many drugs). Since her father died three years ago, she felt really mixed up. She didn't want anyone to come near her. She said she felt she was "going to bits"--no hope. She said she felt sad but don't want to think about why.

2. Patient S1., undiagnosed: Had memories of being locked in an attic when she was 3 years old. She also remembered being hit, waking up in hospital. She was so frightened she left the room, returned, then left again. After talking to myself and other staff, she returned for the rocking. We later discussed her writing down her memories and feelings for her family to share with trusted group members. She has very strong deter-

mination to confront herself and work through her fears.

3. Patient Go., undiagnosed: He didn't want to remember the past 10 years and left the room twice, saying "this is crazy stuff". When confronted about his escapes and withdrawal from activities, he denied that anything had any significance for him. "This is too abstract for me". Yet he is very intellectual and very closed off to his emotions and has little body awareness.

4. Patient L., undiagnosed: She is usually very speedy. Today she slowed down and enjoyed being in a mother role.

5. Patient L., diagnosed obsessional neurosis: He felt suddenly angry during the rocking and hit both hands on the floor saying "I'm mad". He didn't know why but continued with this theme through fantasy and writing.

6. Patient Ge., diagnosed schizophrenic: This was his first day. He said he clearly felt what it was like being in his mothers womb--fearful, panic-stricken and angry. "She is an evil person". He didn't want to be rocked--but rather wanted to meditate, trying to give himself necessary nourishment. He had a fear of being touched.

APPENDIX I

Session III - September 24, 1979.

Description of Session III.

1) Warm-up - Two circles danced simultaneously-- one energetic, one slower. People asked to shift from one circle to another. Music was improvised on tam-bourine, drums and xylophone.

2) Prone relaxation and listening to Wagner's Prelude to Lohengrin. Patients were asked to allow feelings, images, memories to come from the music.

3) Individual paintings to the same music (see xerox).

4) Discussion - 3 words to describe the feelings from each painting.

5) Musical improvisation from paintings and discussion.

General Results:

Excellent use of both circles by many people; lots of energetic musical improvisation, laughter, clapping at the end. It was a good physical release for more quiet activity to follow. Generally, people were free with the paints using bold bright, colors. The paintings generally seemed to show life-death forces through the divisions and color use.

Specific Results:

Most patients chose not to verbally describe their art work. Three did comment:

1. Patient S1., diagnosed schizophrenic, acute psychotic episode: She left the room several times in tears after painting her "mother's red blood" on the paper.

2. Patient C., diagnosed character disorder:

She said her painting represented "angry, trapped, hurt".

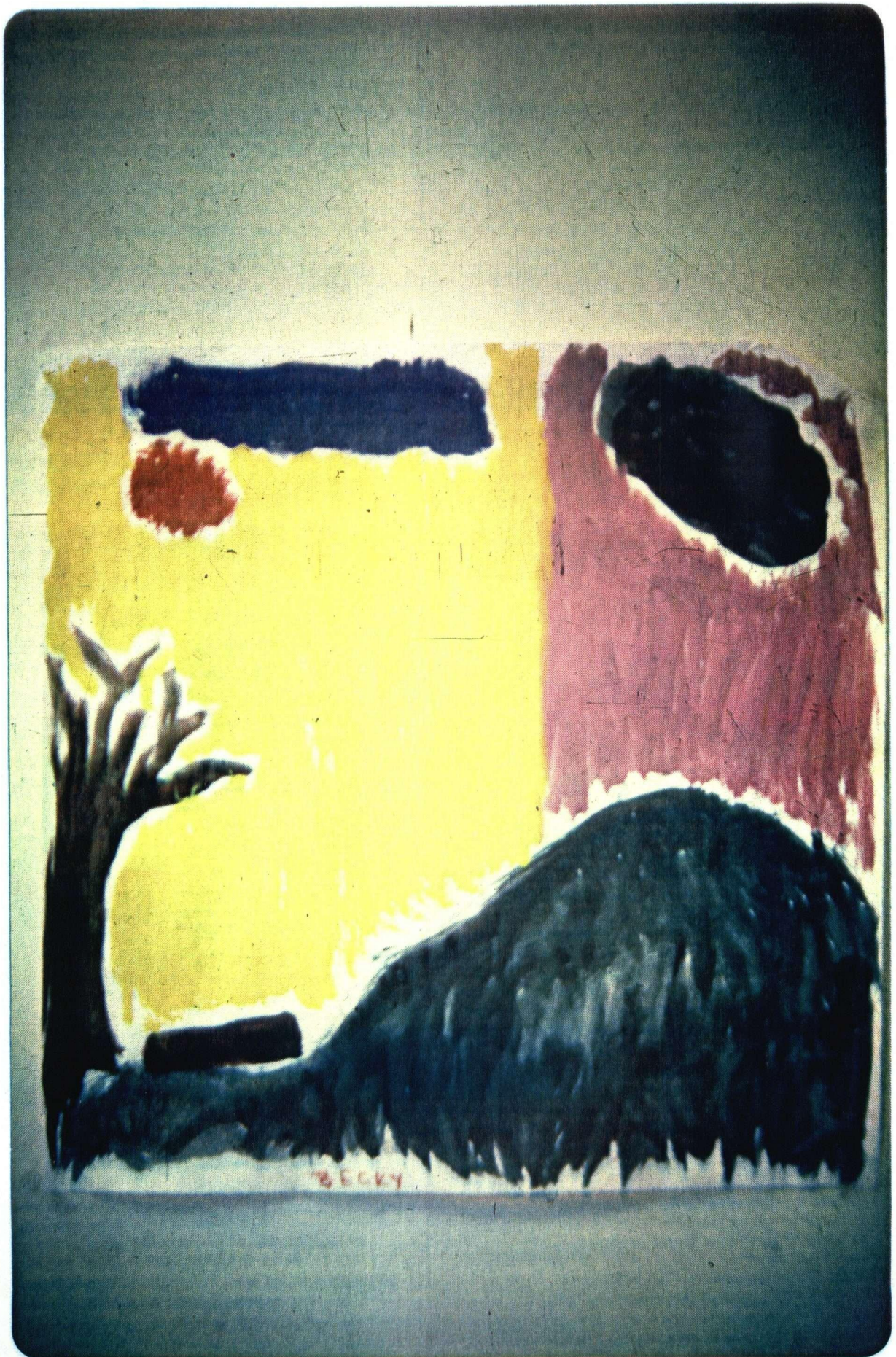
3. Patient V., diagnosed acute schizophrenic reaction: She described her painting as symbolizing serenity and growth.

Patient paintings were photographed on 35mm slides and are presented here in color xerox. The original paintings which were approximately 13x15 in size, were returned to patients, at their request.





EUGENE







MARIE









VIVIAN



