

Formalising and flow. Some comments to Kenneth Aigen: "Social interaction in jazz: implications for music therapy", *Nordic Journal of Music Therapy*, vol 22 (3), 2013, pp. 180-209.

Official NJMT page which includes Aigen's own summary:

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by Carl Bergstroem-Nielsen (DK)

Let's discuss interaction forms in music therapy!

Aigen's article invites discussion by proposing a new kind of music-centered view of music therapy. It takes down borders between what is clinical and not - by keeping a closeness to musical terms *and* at the same time to terms dealing with human interaction. Various musical styles and procedures may be powerful tools when you understand what they do with and for the musicians.

Unfortunately, the article is only available to those who subscribe, or are near a library doing so (including, however, remote access), or who would be willing to pay a substantial price for a copy. And the journal itself is not the medium of such a discussion. Therefore, I will attempt a short, selective summary of the article here, in order to bring out at least some, if just a tiny, platform to have a broad discussion from. Then I will present my own view of free improvisation which I think should also be considered a major music form of relevance to music therapy.

Reference should, of course, ultimately be made to the article itself. I hope the summary could serve as an appetiser.

A short summary of Aigen's article

There are "parallels...between the challenges faced by jazz musicians ... and those faced by therapists and clients in the music therapy setting", Aigen states in his summary (p.180). On the basis of his own research, especially Aigen (2002/2005) and frequently quoting Berliner (1994), this is worked out.

A very essential point is that jazz musicians work with "always musical personalities interacting, not merely instruments or pitches or rhythms" (Aigen p.184 quoting Monson (1996)). This is so on the background of improvisation and the absence of a text as that in classical music prescribing details. Usually, musicians do not derive their material from a given text, but provide their own proposals. Communication is directly between people, and there is an emotional attunement. The interaction can even even take the form of regular negotiation in order to arrive at a groove. As it appears in the literature, groove is as much a feeling of common dynamism as it is a rhythmic pattern. Aigen speaks of a prominent conversational aspect of the music. One important meaning of this among other possible ones is the collaboration going on in the rhythm section and their joint efforts not only to create a background accompaniment, but also actively to both support and challenge the soloist. This is apparent in the use of fills, but also in much more discreet and subtle ways.

Aigen mentions free improvisation referring to Sutton (2002) who analysed conversational aspects, comparing it to everyday communication.

The conversational aspect is important, but also supplemented by a "time-keeping" aspect. According to Aigen, this has parallels to the music therapists' job to "balance responsive interaction with the need for providing an ongoing structure and containment, in both its musical and psychological dimensions" (p.190). The music will also have "compositional", cohesive qualities. This is comparable to the "structured, compositional profile" for which Nordoff-Robbins music therapy is known (p.198).

Among players' roles are found the "basic player" providing rhythms and harmonies when needed and thus a "stable orientation point" (p.194). Aigen goes on to describe specific qualities of single instruments as bass and drums.

In these and more ways, jazz practise offers ways of interaction and joint creation that could be taken to more conscious therapeutic use. It could be added that the notion of an opposition between "just music" and "clinical musicking" could be regarded as artificial and unnecessary (p.183). Clients are also often motivated by the music "itself". Clinical terms do not have to exclude musical ones.

Free improvisation as the medium of Stream of Consciousness

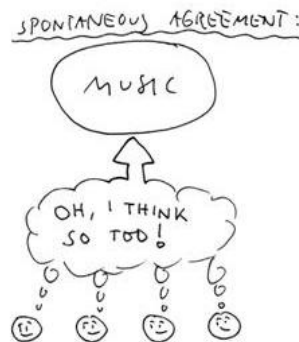
When active music therapy started to spread in the seventies and became cultivated at new educational institutions, it was exactly inspired by the improvisational movements in music at the time, not least in experimental music.

Jazz could seem to be especially well suited to apply formalised properties to the therapy music. Because of its "compositional" qualities mentioned by Aigen, its insistence on "time-keeping" and the fact that certain stylistic and formal elements must be present. Solos are prominent, and they make marked demands on the soloist. Jazz musicians are known, among European freeimprovisors, to place great weight on their personality and on a recognisable, "personal sound". Although maybe an extreme example, Lewis (1996) thus speaks out sharply against any self-forgetting attitude as practised in indeterminate music and asserts passionately the "birthright" to have a subjective history.

Jazz, as almost any other popular music, has its hierarchies. Bandleaders may exchange musicians in their bands with others. By comparison, freeimprovisors are often known by their own names in ad hoc conjunctions with the ones they play with. Within their context it might indeed happen that a novice did not appear as such and could in lucky cases mingle perfectly with trained players. In jazz this is much less probable. Inspiration may in the context of freeimprovisors count more than what you have learned. There is no theory at all you have to learn, while in jazz you must at the very least know the tunes you play, and knowledge of music writing and harmony etc. is usually considered valuable. Freeimprovisors act directly to each other and can even less hide behind a text as is the case in jazz.

Their music form is egalitarian, and it is the medium of stream of consciousness and free associations. Important: also collectively. It thus has the power to open up for the full conversational aspect. This includes those spontaneous processes impossible to

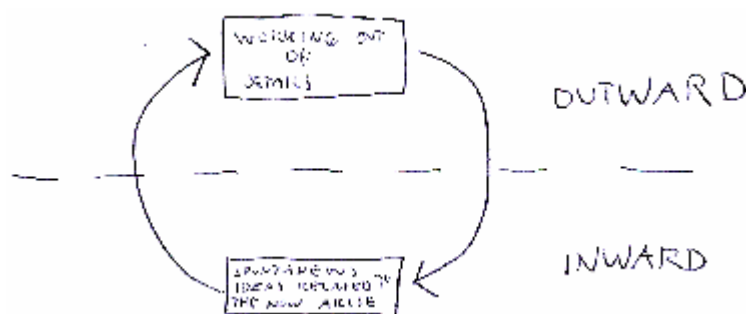
formalise. Think, for example, of what happens when someone tells a joke and the others laugh. Or if something said by another person evokes vivid associations with the others. Then, the collective association process turns dramatically over in milliseconds. The picture below is from Bergstroem-Nielsen (2003).



Such a phenomenon was described independently by several authors. Nunn (1998) calls it "catalyst"; in the terminology of Lutz (1999) it is named "communication 2" ("a common musical reaction to an individual idea"); and finally Walduck (1997) calls it "ice-breaking". This is just one instance of an impulse having significant consequences.

Nunn (1998) takes the impulse to the foreground of his general analytic considerations. Stockhausen (1971) saw being open to the unpredictable as essential for his "intuitive music" and thus became critical of "cliches" in both jazz and classical music. Sansom (1997) elaborates on the concept of "self-invention" coined by improvisor Eddie Prévost. In Sansom's view it implies "Letting the music go in and out of control; its dynamism between intention and creativity..." (p.64).

Sarath (1996) describes the inner process going on in the musician. The conscious attention oscillates between the impulses emerging and their being working out.



And here, Sarath introduces the ingenious idea of "cognitive event cycles". The less predictable the musical process is, the more of these "event cycles" take place per time unit and the greater is the "interactive and inventive capacity" of the given music.

These are some hints suggesting what free improvisation is about - seen from an interactional, theoretical perspective.

Now it's your turn!

What are your experiences and your view of free improvisation in relation to music therapy? And of still other kinds of music from an interactional or even some other relevant perspective? Please write at www.facebook.com/voicesmt ...

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