MELODIC STRUCTURE AND INNER SELF IN CLINICAL IMPROVISATION

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Tiivistelmä – Abstract

This study investigates the analogies between the melodic evolution within clinical improvisation and the shifts in the core self, across the continuum of music therapy process. This investigation is facilitated by a hypothesis; that musical shifts in improvisation's structure precede psychological shifts in improviser's self during therapy.

Melodic improvisations created within the Integrative Improvisational Music Therapy (IIMT) model (Erkkilä, 2016) are investigated as proposed in the Therapeutic Narrative Analysis (Aldridge & Aldridge, 2008): certain melodic episodes from significant improvisations are analyzed with the Repertory Grid Method (Kelly, 1995) and patterns of the musical data demonstrate the client's melodic evolution. The therapeutic themes traced in other sources of data (i.e. text transcripts, diaries) are connected with client's musical development via the Theory of Analogy (Smeijsters, 2005).

Results reveal analogies between the melodic evolution and the development of therapeutic themes across the therapeutic continuum. They also confirm the initial hypothesis: the very long improvisation where the client explores almost the whole range of her melodic potentiality precedes the session where she detects and expresses the source of her distress. These results further manifest clinical improvisation's therapeutic potentiality and effectiveness within individual music therapy. Additionally, this study proposes a more musicological approach within an arbitrary musical analysis; to rather utilize musical terms than metaphors in describing the musical performance, thus presenting the musical meaning instead of interpreting it.

Asiasanat – Keywords Clinical improvisation, melody, analogy, RepGrid analysis, self
Säilytyspaikka – Depository	
Muitatietoja – Additional information

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CONTENTS

1 INTRODUCTION

Music, as another kind of language can be a means of communication and expression. Although music does not literally specify the phenomena it represents as language does, it can efficiently transmit meaning via specific rules utilizing also an original notation system, (Wigram, Pedersen, & Bonde, 2002). Music is considered a universal language, but its definition is mostly determined by the context within music is created. In the context of therapy the boundaries of music extend by far the world of sounds or the direct product of music making. In music therapy music dwells simultaneously to the process, the individual, the product and the settings, (Bruscia, 1998). In other words in music therapy "music is the human institution in which individuals create meaning, beauty, and relationships through sound, using the arts of composition, improvisation, performance, and listening", (Bruscia, 1998, p. 118).

One of the most popular and significant element of music across the world is melody (Aldridge & Aldridge, 2008). As Aldridge & Aldridge (2008) states "melodies are organic systems", (p. 18). Melody by definition is a multifarious musical element which evolves independently across time and is perceived as an interaction among tonality, contour and rhythm (Aldridge & Aldridge, 2008). These unique features render melody a valuable means of comprehending musical performance within the context of music therapy. Such a musical performance is clinical improvisation where the individual expresses freely his state of being into sounds.

The comprehension of this musical performance can enable us to comprehend psychological processes in the improviser's inner-self. Smeijsters' (2005) "Theory of Analogy" states that the processes in the improvised music are analogous to the processes in the improviser's psyche. In the event of melody being the primary element of the improvised music would lead to the expectation that any changes in melody's structures would indicate analogous changes in the improviser's psyche.

Focusing on the musical experiences suggests conducting a "semantic analysis" of "the client's experiences", (Wosch & Wigram, 2007, p. 260). The basic concept of the present semantic analysis in this study is "the theory of analogy between musical and psychological features", (Wosch & Wigram, 2007, p. 260).

Various methodological approaches have been used in the field of music therapy research aiming to reveal the abstract bridges between the two separate worlds of the client; the musical and the personal. The present study is another attempt to connect improvisation's musical analysis with the therapeutic process within a case study.

Aldridge & Aldridge (2008) focused on the evaluation of one specific element of music emanating from clinical improvisation; melody. Furthermore, Aldridge & Aldridge (2008) proposed as a central theoretical basis of clinical improvisation's musical analysis the personal construct theory by Kelly (1995) which aims in deriving specific and distinctive meanings from the data's analysis. However, clinical improvisation often involves improvising on a large variety of instruments and the emerging music doesn't necessarily result in the generation of melody. Often it results in music with very loose or no structure.

The Improvisational Psychodynamic Music Therapy model (Erkkilä, Punkanen, Fachner, Ala-Ruona, Pöntiö, Tervaniemi, … & Gold, 2011)[1] –which currently is called Integrative Improvisational Music Therapy model (IIMT), (Erkkilä, 2016)- uses a limited amount of instruments and thus the variables of the musical data are reduced and musical analysis is simplified. Moreover, the model which theoretically emerges from the psychodynamic music therapy approach advances the association between mental and musical processes.

This study intends to discover the changes of the client's psyche in her music across the therapeutic process of ten sessions. The client's emergent melodies in clinical improvisation are analyzed and connected with the progress of therapy via the client's verbal reflections according to the "Therapeutic Narrative Analysis" (Aldridge & Aldridge, 2008). Within the

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[1] From this point on the model's current name, Integrative Improvisational Music Therapy (IIMT) model (Erkkilä, 2016), will be used in the text.

context of the IIMT model, interventions as the use of one mallet is introduced in order to enhance the generation of melody and reduce the variables of analysis.

The analysis of the musical data (melodies) is conducted via the Repertory Grid Analysis (Kelly, 1995); patterns are revealed in the musical data and categories emerge which are compared to the therapeutic themes. For the segmentation of melodies criteria from the theoretical framework of the "Theory of Music Analysis" by Hanninen (2012) are utilized. Finally, hypothesis-testing and research questions aim to facilitate the relation between the client's musical processes with the psychological ones.

Besides the introduction this study consists of five chapters:

In the second chapter important theoretical concepts and terms are presented. Moreover, past research progress in the field of improvisational music therapy and clinical improvisation's musical analysis is reviewed, since it is important to provide the theoretical context within which the narrative of this case study unfolds (Aldridge & Aldridge, 2008).

The third chapter explains the clinical context within which this study was conducted, and presents the clinical approach and model which was used.

The fourth chapter includes the methodology section where study's theoretical framework and method is presented and described. Additionally, the hypothesis is presented and research questions which are investigated in the study are explored.

The fifth chapter provides a short description of the course of therapy. Various phases of the therapeutic process which are differentiated by the emerging therapeutic themes are presented.

In the sixth chapter the musical analysis' results are reported. The categories emanating from the analysis are connected with the therapeutic process. Conclusions as connected to the hypothesis and the research questions are further clarified.

In the seventh chapter results in association with previous research are discussed. Additionally, problematic areas of the study are reviewed and future possible areas of research are introduced.

2 THEORETICAL BACKGROUND AND TERMINOLOGY

2.1 Psychodynamic music therapy

Psychodynamic music therapy has its origins in psychodynamic therapy which resulted as a development of traditional psychoanalytic psychotherapy (Hadley, 2003). In this approach human psyche is explored by musical tools which provide a framework where useful constructs are created by the therapist for analyzing and interpreting behavior (Hadley, 2003).

The principles which apply to this approach are the following: a. human psyche determines human behavior which is constructed broadly b. human interaction and relationship to the world has various levels of consciousness (unconscious, preconscious and conscious) c. the patterns developed for interacting with the world originate from interactions experienced in the past in the family of origin and d. these unique patterns are replicated in the present or generalized in a basic pattern and are brought in the therapy by both client and therapist (Hadley, 2003).

Therefore, the development of relationship between therapist and client is "the most essential condition for treatment" which makes the therapeutic process an interpersonal process (Bruscia, 1998, p. 2). Primal means of communication and relation between therapist and client is musical improvising while verbal intercourse is used supplementary (Bruscia, 1998).

2.2 Countertransference in music therapy

As Bruscia (1998) states: "the dynamics of therapy is the dynamics of transference-countertransference" where transference and countertransference are "metaphors for the client therapist relationship" (p. xxii). In other words this phenomenon appears in the interaction within therapy and changes shape constantly across time, (Bruscia, 1998).

All the therapist's unconscious reactions, specifically the ones that are triggered from the client's transference apply to the term of countertransference, (Priestley, 1994). There are three ways in which countertransference is defined: "as the therapist's unconscious reaction to

the client's transference, as everything a therapist brings as a human being to the therapeutic situation, and as the therapist's replication of the past in collaboration with the client", (Bruscia, 1998, p. 67).

Considering the therapist's perspective, countertransference could be triggered among other things from environmental settings referring to the session itself or workplace of the session, (Bruscia, 1998). Manifestation of this phenomenon can arise either gradually or suddenly as the therapist "becomes aware of the sympathetic resonance of some of the patient's feelings through his own emotional and/or somatic awareness", (Priestley, 1994, p. 87).

2.3 Clinical improvisation

Clinical improvisation includes all the elements that free musical improvisation has; spontaneity, creativity, resourcefulness. These conditions are central when one creates and plays simultaneously, yet it is occasionally a process that can include sounds (Bruscia, 1987).

According to Wigram (2004): "clinical improvisation is the use of musical improvisation in an environment of trust and support established to meet the needs of clients", (p. 37). Within this free musical improvisation individuals create their own music and they simultaneously reflect some aspects of their own inner-selves (moods, feelings, attitudes) which are always true, (Wigram, 2004). Through musical interplay exploration of the client's various psyche layers is possible whereas in verbal psychotherapy these areas occasionally stay unexplored; this constitutes the distinct difference between music therapy and verbal psychotherapy, (De Backer, 2016).

The therapist accepts any kind of aesthetic or artistic music level is offered to by the client, although he/she endeavors a high aesthetic level from his/her part (Bruscia, 1987). His/her aim is to engage the client in a therapeutic level by applying the improvisational techniques and skills (Wigram, 2004). The building of an "inter-subjective musical/emotional relationship" is essential (Pavlicevic 2002, p. 3). This relationship offers the opportunity to the client to create a musical space where boundaries and new forms of expression are explored. There are many features of clinical improvisational techniques which can be viewed as interventions by the therapist, one of them being the altering or extending of the music

improvised. Pavlicevic, (2002) perceives these interventions as means to test through sound the "interactive potential of the improvisation", (p. 5). The example of the mother-infant interaction is used to describe the quality of attunement which is required between the therapist and the client within the musical context, (Pavlicevic, 2002).

The musical interventions applied during the clinical improvisation have been categorized by Bruscia (1987) who defines their therapeutic potentiality as "redirection techniques, elicitation techniques, structuring techniques, techniques of empathy and of intimacy" (p. 533-557). On the other hand, he is referring to the techniques used in improvisational therapy as not only musical but also verbal, and defines them as operations or interactions initiated by the therapist which have an immediate effect on the interaction. Hence, it becomes obvious that the therapeutic interventions used in clinical improvisation are techniques central to this dominant tool of music therapy and are always integrated in the musical skills and theoretical orientation of the therapist (Wigram, 2004).

Clinical improvisation's potentiality and effectiveness in music therapy have been one of the focuses of music therapy research in diverse clinical areas; in "neurorehabilitation (Magee & Baker, 2009); substance abuse (Albornoz 2011); cancer (Pothoulaki, Macdonald & Flowers, 2012); palliative care (Hartley 2001); mental health issues (Gold, et al., 2013; Storz, 2014); autistic spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD) (Geretsegger, et al., 2012); eating disorders (Trondalen, 2003; Robarts, 2000), forensic psychiatry care (Hakvoort, 2014) and dementia (Ridder, et al., 2013; McDermott, et al., 2013)", (De Backer, 2016, p. 113).

Particularly, improvisation had a significant effect –in two randomized control trials- on two clinical groups suffering from depression; working-age adults and on the other hand adolescents and adults with substance abuse. Adults in working age with depression, improved their anxiety, their functioning and levels of depression with improvisational music therapy as an additional treatment to standard care, (Erkkilä et al., 2011). The study showed clinical improvisation's potentiality to trigger unconscious experiences, preparing the client for expression in a symbolic level, (Erkkilä et al., 2011). The study also clarified clinical improvisation's qualities which promote important non-verbal interaction, (Erkkilä et al., 2011). In the other study adolescents and adults with substance abuse showed great

improvement "in psychologist-rated depression (HRSD)" with the addition of improvisational music therapy in their regular treatment, (Albornoz, 2011, p. 208).

In another study concerning ASD, children with autism experienced and developed emotional expression as well as affective abilities from improvisational music therapy, (Kim, Wigram & Gold, 2009). The temporal quality of musical structure and "the specific use of musical attunement" in improvisation led to these changes "in a social context", (Kim et al., 2009, p. 403). Finally, clinical improvisation's therapeutic potentiality can be found in improvisation's listening-back experience for people suffering from anorexia, (Trondalen, 2003). In this study client's "self-listening" provided a close connection of the self with time and space (Trondalen, 2003, p. 15). Thus, the listening back to her clinical improvisations facilitated the achievement of an important goal for this clinical group which is the association "between soma and psyche" via non-verbal means (Trondalen, 2003, p. 15).

Although clinical improvisation has been used for the therapy of diverse client groups with different needs and in various clinical settings, it can also be practiced with the general population to provide a better quality of life (Wigram et al., 2002). Albeit the aims of the therapy are acquirement in some extent of self knowledge using one's personal resources, the approach of the therapist does not differ (Wigram et al., 2002).

2.4 Musical analysis of clinical improvisation

Clinical improvisation apart from being a valuable therapeutic tool is also a significant source of data, important for the clinical practice (assessment, evaluation) as well as for research. The optimum method for the analysis of the musical data, especially when it comes to the music from clinical improvisation has been the constant debate almost since the outset of music therapy as a clinical practice. As Erkkilä (2007) states:

> "Some clinicians see that the connection between the worlds of actual music as and extra-musical phenomena is so weak or complex that clinicians do not actually get much benefit from analyzing the music. .… While applying the MTTB (Music Therapy Toolbox) method to clinical context, I have become convinced that the experience and interpretation are actually not so far from what is happening in the music", (Erkkilä, 2007, p. 147)

The evaluation of a music improvisation consists of analyzing the musical data using methods of interpretation in order to deduct assumptions referring to the therapeutic process. Therefore, the use also of verbal data via qualitative analysis seems unavoidable. Aldridge & Aldridge (2008) claim that: "since the musical process developed jointly by patient and therapist may be experienced as intimate, an analysis of such processes demands that a dimension of subjectivity is included in the analytical method", (p. 51).

For example, Keith (2005) in his doctoral dissertation suggested combining the method of Improvisational Assessment Profiles (IAPs) initially introduced by Bruscia (1987), with a qualitative analysis of non-musical data. The Improvisation Assessment Profiles (IAPs) are listed as "integration, variability, tension, congruence, salience, and autonomy" and their main aim is to provide an overall comprehension of client's relationships within improvisation (Bruscia, 1987, p. 409).

On the other hand, Lee (2000) attempted to discover the abstract bridges which connect two separate worlds of the client -the musical and the personal- via microanalysis of a clinical improvisation. Lee (2000) investigated the connection between musicological analysis of the musical data and interpretation of the therapeutic process, balancing between "empirical and epistemological inquiry", (p. 147-148). One of Lee's (2000) contributions in this paper is the investigation of therapeutic potentiality of music structure in one's improvisation.

Moreover, the process of analysis includes among other things the careful listening to the recorded music from the researcher or therapist using both his/her musical and therapeutic background. It is a reflective procedure as Arnason (2002) indicates; he proposed specific guidelines (six reflections) to the listening, thus integrating musical analysis with referential meaning.

Many of these various methods of musical analysis include microanalysis in their process which it can be applied to music, text or video data (Wosch & Wigram, 2007). Microanalysis is the systematic analysis of active music making within the therapeutic process; it focuses mostly on minimal changes made in the dynamics of the music or the interaction between the improvisers, (Wosch & Wigram, 2007). These minimal changes are microprocesses occurring

during a moment or a therapy event, during a clinical improvisation or a complete session (Wosch & Wigram, 2007).

In the analysis of clinical improvisation the existing methods which "can be applied to microanalysis include (among others) Bruscia (1987); Lee (1989, 1990, 2000); Nordoff and Robbins (1971, 1977, 1985); and Priestley (1975)", (Wosch & Wigram, 2007, p. 93).

The ultimate aim of the above approaches is deriving meaning from the improvised music and usually one person is responsible for performing this analysis, (Wosch & Wigram, 2007). Therefore, the problematic area of the analyzer's potential bias -either unconsciously or consciously- may arise, (Wosch & Wigram, 2007).

The validation of the researcher's qualitative analysis can be established by the Repertory Grid Analysis (Kelly, 1995). It can be combined with other methods as in Abrams (2007) study, where IAP's (Bruscia, 1987) and RepGrid are applied in the microanalysis of clinical improvisation, (Wosch & Wigram, 2007). It is also used in the Therapeutic Narrative Analysis (Aldridge & Aldridge, 2008) where the RepGrid analysis validates the discovery of the generation of melody across therapy.

The focus of this study's musical analysis is on the development of melody across the whole therapeutic process, thus the RepGrid analysis is used as proposed in the Therapeutic Narrative Analysis by Aldridge & Aldridge (2008).

2.5 Melody in music therapy

This study focuses on the client's melodies which are generated from the clinical improvisations of the therapeutic process. During the span of ten sessions, melodic improvisations (in the midi-xylophones) were the main clinical improvisations where Tina gradually developed her musical voice through our musical interaction.

Melody is a significant musical element that accompanies us through life involving memory and internal experience; it is ubiquitous and connected with our identity, (Aldridge & Aldridge, 2008). All the important musical elements like rhythm, contour and tonality are

included in this musical form and are the basic features which bring out the qualities of a musical performance. Because of the above characteristics melody can become a means of expression for individuals with no music skills, especially when improvising on easily accessible instruments like midi-xylophones.

Furthermore, melody is "an independent tone-movement that unfolds itself in the matrix of time" (Aldridge & Aldridge, p. 22). This definition reveals that melody as a form of music has certain qualities which are very useful in the assessment and evaluation of the therapeutic process as these qualities add to the therapeutic potentiality of melody. One of them is that melody is "an emergent process"; in other words when we listen to a melody we perceive "not only the now, but what was once and what is becoming", Aldridge & Aldridge (2008, p. 20). This presence of temporal continuity facilitates the observation of the development of musical structure through time; a condition very useful for the evaluation of the therapeutic process. Another quality of melody is the autonomy it has, which resembles the entirety of an organic system where form and content coincides, (Aldridge & Aldridge, 2008). Due to this quality we perceive melodies firstly in their entirety, and afterwards we are able to remember them in the following manner; rhythmic structure and tonality direct us in remembering the melodic line –contour, (Aldridge & Aldridge, 2008).

There are several important standards to take into consideration when assessing melodic improvisations;

"formation of certain intervals and specific pitch patterns"

"existence of a rhythmic motif, that could have a stabilizing effect"

"existence of a melodic motif"

"further continuing progression of the rhythmical–melodical motif towards an organic entity, through imitation, assimilation or innovation"

"integration of the musical–melodical elements in the patient's playing"

"formation of melodic contour, phrases and periods in relation to harmony (to the qualitative distribution of intervals)"

"expressive personal statement of the patient via musical–melodic elements articulation and musical expression including all dynamic and tempo-related nuances"

"musical interaction between patient and therapist", (Aldridge & Aldridge, p. 49)

2.6 Segmentation of melody

The initial apprehension of music is "as a whole" and then appears the capability to differentiate music into "rhythm, melody and harmony" (Aldridge & Aldridge, 2008, p. 40). Both of us -Tina and me- initiated various musical elements in our musical dialogue; i.e. rhythmic patterns or a change in the dynamics, articulation, etc.

Initially, I could detect distinct rhythmic patterns, introduced occasionally by Tina and occasionally by me. Pattern detection is a prerequisite in music and language perception; we have to be able to derive meaning of long "sequences of rapidly changing elements being produced in time", (Aldridge & Aldridge, 2008, p. 30). Following, I would detect the expression of our music. Forms of expression are always dependable on the context and basic structure of the melody (Aldridge & Aldridge, 2008). The structure of melody consists of many diverse elements like "pitch, contour, motivic aspects, interval structure, temporal–rhythmic design, articulation, dynamic properties, timbre and tonal structure" (Aldridge & Aldridge, 2008, p. 37).

Each of the above melodic elements could form a criterion for determining the start and the end of each melody. According to the "Theory of Analysis" by Hanninen (2012) segmentation criteria provide the principles for congregating musical events. Albeit the various segmentation criteria (sonic, contextual and structural) which Hanninen (2012) proposes are indented to analyze contemporary western music, they have also the potentiality to be flexible tools in the musicological analysis of improvised music as well.

Analytically, sonic criterion acknowledges every separation of sound or silence "within a single psychoacoustic musical dimension" as a reason for segmentation, (Hanninen, 2012, p.23). In other words, within this framework, "each note becomes a cluster of attribute-values; disjunctions between attribute-values define boundaries and imply segments" (Hanninen, 2012, p. 23-24). These psychoacoustic musical dimensions can be dynamics, pitch, attack-point, duration, articulation and timbre (Hanninen, 2012). I have excluded the latter dimension (timbre) as the instruments used were midi-instruments. Moreover, considering

the temporal continuity of music events that a melody consists of, I have used the sonic criteria (S_1) which assume temporal proximity.

Furthermore, when there is repetition, similarity or equivalence "between two (or more) groupings of notes within a specific musical context" then a contextual criterion justifies the reason for segmentation (Hanninen, 2012, p. 33). Periodic series of events or events resembling each other are likely identified as groups; when there are dissimilar groups, their difference creates a boundary (Ahlbäck, 2007). The sameness or difference can be either an incoherence or "a change of melodic properties such as change of pitch set, melodic direction, pitch interval size, tone/rest and duration", (Ahlbäck, 2007, p. 246). The contextual criteria provide the flexibility of constructing sub categories from selected melodic properties which are analogous to the musical material that is analyzed.

I have excluded the structural criterion from my analysis for the following reason: structural criterion is not strong enough as to imply a boundary by itself (and not in combination with one of the other criteria) simply because it "is a rationale for segmentation that indicates an interpretation supported by a specific orienting theory", (Hanninen, 2012, p. 43). The musical data of this study are not contemporary pieces of composed music and therefore are not connected with a particular theory.

2.7 The theory of analogy

Mere interpretation of the musical elements of an improvisation is inadequate without a theoretical concept as a framework.

The concept of "analogy" is a core category in music therapy (Smeijsters, 2005). All the musical elements that are utilized in music therapy "can have a symbolic meaning" and analogy offers the possibility of "this symbolization in music therapy" (Smeijsters, 2005b, p. 1102). The term analogy within the context of music therapy indicates the concepts of sameness and difference in parallel; "there is a context in which actions are different from outside life reality but the experiences that are evoked by these actions are real", (Smeijsters, 2005b, p.1101).

In his theory of analogy, Smeijsters (2005) claims that processes in the created music are analogous to the processes in the improviser's psyche and describes vividly how the inner-self is actually sounding during improvisational music therapy with the following statement:

> "When your sounds are quiet, you are quiet; when your sounds are quick, you are quick. When your sounds are strong, you are strong; when there is discontinuity in the sounds, there is discontinuity in you. The sounds do not refer to you. They do not tell something about you, but they are you. You and the musical sounds are "equal."" (Smeijsters, 2005a, p. 47)

The reasons for the fact that "musical processes sound the basic parameters of psychological processes" reside in the "basic (amodal) parameters" from which "musical processes and psychological processes are composed of", (Smeijsters, 2005b, p. 1103). These parameters - "temporal and intensity basic forms"- are also the same material for the "processes of change and development", (Smeijsters, 2005b, p. 1114).

According to this theoretical context the changes observed in the musical structure of the improvisation would be analogous to the changes of the improviser's psyche. Specifically, improviser's psyche is governed by "the mental institution or function" which is also responsible for the structure of rhythm and pitch while on the other hand, improviser's present mood is more responsive with dynamics and timbre, (Priestley 1994, p. 127-128). In other words, the constant musical change in clinical improvisation is analogous to the inter- and intra-personal psychic changes.

The importance of the contribution of this theory in music therapy is the potentiality offered in the research realm (Bonde, 2007). Another contribution is the use of the term "core self" meaning "the non-cognitive, non-verbal, felt, intuitive consciousness" which is affected during the musical interaction via the vitality affects (Bonde, 2007, p. 231). During the musical interaction both participants can experience their self in music as "it sounds the preconscious, subconscious, and unconscious layers of our psyche" (Smeijsters, 2005, p. 45). The therapist listens to his inner, intuitive self in the music created while the client utilizes his insights derived from the music for his personal growth, (Amir 1993).

Consequently, the changes in the musical forms or patterns would produce a change in the dynamic shifts of the core-self. From this perspective, the analogy between the musical structures of the improvised music to the inner-self's structure of the improviser is

investigated in this study. Concluding, the theory of analogy can be a very beneficial theoretical framework that can be used along with any current music therapy model for the evaluation and analysis of clinical improvisation.

2.8 Isomorphism in music therapy

As Smeijsters (2012b) states: "Analogy explains the musical experience by means of the isomorphism between the forms of vitality affects in the core self and the forms of musical phrases", (p. 1310).

Analogy "as a time-oriented perspective" describes how vitality affects processed in a person's core-self can be expressed by sound, (Smeijsters, 2012a, p. 247). From this angle musical forms created during improvisation would be analogous to the dynamic shifts (vitality affects) in the core self -as explained by isomorphism (Smeijsters, 2012). This isomorphism "of and correspondence between musical and psychic events" is actually considered because of the association between music and time, (Lehtonen, 1997, p. 44-45).

Isomorphism in music therapy refers to a kind of resemblance between a substantial musical structure which simulates qualities of an extra-musical event or feeling (Smeijsters, 2012). For example, the isomorphic connection between music and emotion is based on the fact that they have in common corresponding hidden structures, (Smeijsters, 2012). There have been attempts to underline the necessity of an isomorphic phenomenological comprehension between the self and the "medium of music itself", (Aldridge, 1989, p. 92). If there is an isomorphic association between biological and musical forms, then musical improvisation can become a holistic assessment of individual's well-being and health, (Aldridge, 1989).

Actually, these terms –analogy and isomorphism- express the musicality of an individual's inner life; that this life is in fact "a combination of musical parameters in phrases", (Smeijsters, 2012b, p. 1151).

3 CLINICAL APPROACH

3.1 Clinical context

3.1.1 Clinical training

It is necessary to describe the clinical context in which this study was conducted in order to clarify further the therapeutic session's clinical conditions which constitute the framework of the present research.

This therapy process was part of my clinical internship which is included in the overall training of the master's music therapy program of the University of Jyväskylä. Clinical internship takes place in the Music Therapy Clinic for Research and Training which acquires high quality technical equipments, thus providing among other potentials a high level of transparency in supervision, (Kenner, 2015). Normally the internship includes twelve sessions per week, each session of 45 min. duration, but due to practical obstacles (i.e. client's schedule) this was not possible and therefore instead ten sessions occurred. Clients' recruitment is conducted with the collaboration of different networks such as –among others-the student or public health care system, or the students' institutes (Kenner, 2015). In any case potential clients can apply for free music therapy sessions informing at the same time possible health and/or personal issues, background and reasons for applying.

Tina, a young student, 26-years-old, belongs to the non-clinic population albeit she had an objective; the reduction of anxiety and stress. In the absence of a specific issue the therapeutic approach aims in personal development via empowerment of the client, the expansion of creativity and the exploration of the client's relationship with music, (Kenner, 2015). After informing her about the principles applied to the therapeutic process as part of a research project, we both signed the necessary documents; consent form for recording and research.

The twofold role of therapist and researcher was a new experience to me which added to the already demanding training of my internship. Despite the rise of this challenge, the stable structure of the sessions within a specific music therapy model (IIMT) and the constant

supervision from the research group helped me to find a balance between these two different roles.

The focus on the present moment besides being a feature of the model (IIMT) is always a good starting point when the client does not belong to any specific clinical population and possible therapeutic issues are yet to emerge. I would always be flexible to any possible suggestions which would come from the client's initiative, following the client's current mood and applying restrictions only to the musical instruments used as suggested by the model. My professional background as a musician and music teacher influenced my stance as a therapist in the following ways: as free improvisation is always an area of expression and creativity for me, naturally I tend to be highly interested in introducing the client to this world and then I tend to easily attune with the client's musical world. Particularly, when the client has no familiarity with this means of expression, my skills as a music teacher are some of my resources in familiarizing the client gradually with music. On the other hand, having not the same skills in the verbal domain, my resources in this project was research group's feedback in supervision and my observations derived from watching the recorded video of the previous session in order to prepare for the next session.

Furthermore, I would always utilize any image, memory, sensation or thought that the client brought as material for further processing in the music or in discussion. For example, the word 'corridor' which the client used to describe the current transition phase of her life, emerged in a discussion about a diary excerpt which she brought as a reflection of a very long improvisation we had. Afterwards, I utilized this 'corridor' image as a starting point for musical imagery during the client's listening back to a musical excerpt of the same long improvisation. This invoked an image of a 'corridor as a safe place' for her, which its end signified a new start for her.

3.1.2 IIMT model

The therapeutic process of the present study was conducted according to the Integrative Improvisational Music Therapy model, (Erkkilä, 2016). The model was developed during an RCT study (Individual Music Therapy for Depression) conducted in the Music Therapy Clinic for Research and Training of the University of Jyväskylä (Erkkilä et al., 2011). There was a change in the name as the term 'psychodynamic' was replaced by the term 'integrative', in

order to describe more efficiently something that was already part of the model, (Erkkilä, 2016). The term 'integrative' as it is used in psychotherapy "combines different theories and techniques according to the needs of the clients", (Erkkilä, 2016, p. 25). Nevertheless, the psychodynamic approach is not excluded but utilized also when appropriate, (Erkkilä, 2016).

Therapist and client collaboratively build the meaning of anything emerging from the musical experience, such as emotions, images, thoughts, memories which process further verbally, (Erkkilä et al., 2011). The therapeutic setting is individual and albeit solo improvisations may occur, the improvised music is mostly duets, (Erkkilä, 2014). Additionally, necessary therapeutic tools available to the therapist are considered the musical interventions as are presented in corresponding categories by Bruscia (1987), (Erkkilä, 2014).

Other central features of the IIMT model is the focus on the present moment when is needed and the utility of "resource oriented methods" from the therapist, (Erkkilä, 2016, p. 25). A significant principle of the model is that it combines musical improvisation with verbal intercourse and from all the definitions of music therapy which Bruscia (1998) provides, this model "is closest to music in therapy", (Erkkilä, 2016, p. 26). Music within this model is substantially different from common definitions of music; it represents a primitive form of communication, having qualities that enhance "warded-off experiences", (Erkkilä, Ala-Ruona, Punkanen, & Fachner, 2012, p. 417). Occasionally, it occurs that albeit on the offset of the improvisation music may seem as a collection of sounds, gradually and as the client engages more in the improvisation, the connections between musical patterns and their symbolic meanings become clearer, (Erkkilä et al., 2012). The same event may occur by listening back to an improvisation as musical imagery is triggered by the music, (Erkkilä et al., 2012).

The eminence of music during the therapy may fluctuate according also to the client's capabilities of verbalizing the therapeutic issues, (Erkkilä, 2016). For example, music may be very eminent at the start of the process giving gradually room to verbal intercourse as the therapy progresses, (Erkkilä, 2016). This happened also in the present study where our verbal interaction gradually increased during the therapeutic process reducing simultaneously the duration of our improvisations. This shift between musical improvisation and verbal intercourse is demanding for both client and therapist, particularly when the therapist is a trainee, (Erkkilä, 2016). This occurs mostly due to the difference of the states of

consciousness these events take place; musical interaction usually involves a deeper and/or alter state of consciousness than verbalizing, (Erkkilä, 2016).

In the present study, clinical improvisation was always connected to the present moment and verbal intercourse was connected to the musical experience and what it evoked; sensations, images, memories and seldom emotions. The improvisations were recorded "either as MIDI-data, or digital audio" for being played back during the sessions for therapeutic reasons (Erkkilä et al., 2011, p. 134). This provided the opportunity for "verbal processing" of the musical experiences which are considered "to represent pre-conscious levels of processing", (Erkkilä, 2014, p. 261). Consequently, musical excerpts from the improvisations were played back for the client, who was occasionally in a meditative state, evoking more images, which then led to mental processes. These images were explored verbally and further associated with new improvisations, thus leading to personal revelations about possible therapeutic issues.

Finally, the type of instruments used -"a mallet instrument (a digital mallet midi-controller), a percussion instrument (a digital midi-percussion), and an acoustic djembé drum" identical for both therapist and client- provided convenience for a client with no musical skills and simultaneously enhanced the research process as the variables were reduced; (limited variety of instruments and emergent midi musical material for analysis), (Erkkilä et al., 2011, p. 134).

4 METHODOLOGY

4.1 Action research model

The present research design attains elements from action research model in the following ways: a research team enhanced the process by supervising, thus sharing reflections and influencing the course of the therapy and research. The collaboration of members who are simultaneously "insiders" to the research case is a significant quality of this approach, (Given, 2008, p. 6). The members of the research team may include a researcher, a music therapist and an observer who collaborate for the improvement and development of therapeutic interventions and goals (Wheeler, 2005). The cycle of action and reflection is a typical activity of the research team in action research, (Kirkland, 2013).

4.2 Single case study design

The present study is a case study which uses the triangulation approach; it combines not only different kinds of data but also different methods for data analysis. The sources of data collection are various (musical data, transcriptions, diaries, video recordings) which enable for various insights into the phenomenon under investigation, increasing study's credibility, (Given, 2008). The analysis is focused on deriving meaning from the musical data; particularly the client's improvised melodies. This has a constructivist approach as the aim is the comprehension of musical experience also from the client's perspective, (Given, 2008). For that reason repertory grid method is applied. The analysis is conducted within the research design of "Therapeutic Narrative Analysis" (Aldridge & Aldridge, 2008) which involves a hermeneutic approach; "it is based on understanding the meaning of what happens to us in the process of therapy and how we make sense of the world", (p. 64). The definition of meaning within this context is flexible as "meaning is relative, open to interpretive freedom and transformation", (Given, 2008, p. 501).

Besides research questions this case study includes a hypothesis, which attempts to reveal the connection of the client's musical and psychological processes in the chronological

continuum of the therapy. Therefore, this study attains features of the qualitative-naturalistic hypothesis-testing single-case design (Wheeler, 2005) and integrates the following principles: "The researcher has an idea of relationships between events but does not influence practice by experimentation. He or she describes the events as they happen naturally" (Wheeler, 2005, p. 442).

4.3 Hypothesis and research questions

The hypothesis of this study is that during a therapeutic process shifts in the musical structure of the improvised melodies would precede shifts of the client's psyche. Albeit hypothesis testing usually belongs to a more positivist research approach, the psychodynamic framework of this study allows the form of such a hypothesis since musical experiences are considered to occur in a pre-conscious domain, (Erkkilä, 2014). The following research questions aim to further explore and establish this hypothesis:

1. How improviser's musical structure and the core self emerge in the improvised melodies?

Based on the client's reflections and images invoked or connected to the improvised music, analogies between music and core self are examined, according to the principles of analogy (Smeijsters, 2012).

The theory of analogy is music centered; in other words seeks to discover "the how and why of music therapy" by firstly investigating the music, (Smeijsters, 2012a, p. 228). Musical experiences are explained as sensing "the vitality affects[2] in the core self" which then resonate as musical phrases, (Smeijsters, 2012a, p. 228). There is equivalence between an individual's vitality affects and musical phrases, because they both "are processed by the same parameters" (Smeijsters, 2012a, p. 230). These parameters are rhythm, tempo, form and dynamics which generate not only the music but the experiences within oneself as well as the communication between individuals, (Smeijsters, 2012).

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[2] The description of vitality affect by Stern (2000, 2004) is "the temporal, dynamic and kinetic process within which our experiences unfold", (Smeijsters, 2012, p. 230).

By analyzing these parameters the present study intends to discover the connections between the musical experience and the lived experience in the present moment. By tracking the simultaneous evolution of these experiences these connections become more transparent. The changes in the musical tempo, rhythm, form and dynamics across time are investigated by the analysis of the client's improvised melodies within significant moments of the clinical improvisation. Then the temporal evolution of the melody is revealed via the investigation of patterns in the musical data which emerge during the RepGrid analysis. On the other hand the client's images, sensations, memories and emotions which are induced or processed in the music are traced in the transcriptions and diaries of the sessions. In other words, the temporal development of psychological processes is investigated in the session's transcriptions and according to the therapist's and client's reflections. Finally, these psychological processes are linked in the therapeutic temporal continuum with the musical processes.

2. How the constant rearrangement of the self is detected in the musical structure of the improvised melodies?

The isomorphism between musical and biological form renders improvisational music therapy a valuable means for a holistic assessment of the improviser's well being, (Aldridge, 1989). In other words, the improviser's tendencies in playing and/or limitations in different musical features (rhythm, structure, melody) reveal the ways he/she experience his/her being in the world, (Aldridge, 1989). Since in the present study the musical structure refers to melodic structure, the investigation of the evolution of melody indicates a simultaneous capturing of the analogous process taking place in the improviser's core self.

The here-and-now which is always the starting point of a musical improvisation even if it is theme-based, manifests the constant change in the lived experience, since as Heraclitus (544-483 BC), quoted it is not possible to step in the same river twice. Musical experience has the same basis; the only permanent thing is constant change. Within that perspective the evolution of melodic structure manifests simultaneously the improviser's inner evolution. For example, discovering and developing a certain rhythm, pattern or musical form when afterwards altering it or abandoning this musical feature altogether, signifies a rearrangement in terms of choice. In other words, it sheds light to a process of rearrangement within the improviser's core self.

4.3.1 Therapeutic Narrative analysis

The term free improvisation may seem to exclude theoretically musical structure from its context while seeming to include release of emotion and self-expression. Nonetheless, when expression is realized by musical form, then we realize that "a structure has been imposed on the emotion that gave birth to the musical sounds" (Priestley, 1994, p. 127).

The most appropriate method of analysis in order to report in a descriptive way what happened during the therapeutic process in terms of melody is the "Therapeutic Narrative Analysis" (Aldridge & Aldridge, 2008). Besides the fact that it is a flexible method, applicable to any music therapy orientation it is also a method which provides a consistent framework for the analysis of melodies emerging from the therapeutic process utilizing the Repertory Grid Method by Kelly (1995).

The process of analysis involved the following stages:

1. Listening to the ten sessions "in one sitting" and the formation of an index of all the sessions is the first step (Aldridge & Aldridge, p. 90). The index enabled a more structured listening of the sessions. I marked for each session firstly the following: the instruments (malletKAT Pro or djembé drum) and whether one or two mallets were utilized, if our improvisations were theme-based, and which of the two players started and ended the improvisation. Secondly, I noted some features of the musical data that were dominant (i.e. if the client used the pedal, or if there was a stable or chaotic rhythm). Thirdly I noted comments about the music both from the therapist's personal diary and the client's reflections.

2. A second listening of the process (see Table 1) resulted in the selection of notable sessions according: a. to the musical material (improvisations on the mallet Kats; preferably the ones where one mallet is used) and b. to the therapeutic material (theme-based improvisations and improvisations which the client associated with mental and psychic processes in her reflections).

Analytically, I selected the following improvisations;

From the 3rd session I selected the malletKAT improvisation because of the client's initiative (she starts the improvisation for the first time) having a theme derived from her memories of sailing in the Caribbean Sea and because there is the use of one mallet.

From the 4th session I selected the malletKAT improvisation because the theme was 'frustration' and albeit the client didn't start the improvisation, she nevertheless concluded the improvisation. Additionally one mallet was used.

From the 5th session I selected the only improvisation on the malletKAT as it was the longest (40'35'') and it was theme-based ('sailing in the sea'). This improvisation induced a significant reflection from the client about her life's current phase.

From the 8th session I selected two malletKAT improvisations; the first was a client's solo using one mallet and it was theme based ('facing an uncomfortable situation'). The second was a malletKAT improvisation theme based ('find the solution to change this unfriendly environment'), where actually the client discovers musically a way through the difficult situation and concludes the improvisation. One mallet is used again.

From the 9th session I selected the malletKAT improvisation which was theme based ('a pattern which the client tries to alter') where one mallet is used and there is a definite conclusion from the client.

From the 10th session I selected the malletKAT improvisation which was theme based ('the new start/out of the corridor'), one mallet is used and at the end the client closes the melody of the therapist onto the therapist's instrument.

3. A third listening of the improvisations on the malletKATs resulted in the "further selection of certain episodes as material for analysis and interpretation", (Aldridge & Aldridge, p. 90-91).

This stage involves two procedures happening at almost the same time; the selection and segmentation of the melodies. The therapeutic angle of these criteria consists of: a. the level of interaction between client and therapist; (client's musical initiative and rhythmical

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entrainment) which caused the generation of melody and b. the distinction of the pivotal moments in the clinical improvisations where something interesting in the music occurs.

Table 1 Index of the second listening

SESSION/ IMPROVISATION	IMPROVISATION'S THEME / WHO STARTS AND CLOSES / NUMBER OF MALLETS USED	DISTINCT MELODIC FEATURES	COMMENTS
3rd/No 2	"Sound of the whales" / Therapist starts /one mallet	Therapist accompanies, melodic motifs, stable beat	Client verbalizes her difficulty to start
4th / No 1	"Frustration"/ Therapist starts / Client closes /one mallet	Melodic/rhythmic motifs	Client says that it was a release.
5th / No 1	"Sailing in the sea" / Client starts / two mallets (used in the middle of the improvisation).	Very long with various parts: chaotic, with high / low density, fast/slow tempo, dialogue / monologue	Client very engaged in playing/ reluctant to conclude
8th / No 1	"facing an uncomfortable situation" / one mallet	Solo / chromatic intervals / atonal or minor mode	From client's reflection: a situation where she is trapped and she has no space between her and the others.
8th / No 2	"Find the solution to change this unfriendly environment" / one mallet used / Therapist starts; (role play: the environment) / Client closes	Chromatic pitch contour	From client's reflection: she tried to create this space by opening the register of the notes played (she was pointing to the keys she played).
9th/ No 1	"pattern she want to escape from" / one mallet used / Therapist starts; (role play: the pattern)	Use of pedal / melodic motifs / harmony	From client's reflection: reconciliation between different parts of her body/ the music was delicate, caring.
10th / No 1	"The new start out of the corridor" / Client starts and concludes/one mallet	Dialogue / partly chromatic / initiative from client	From client's reflection: image of a garden, river she crosses alone; the new start.

The nature of the musical material (continuous music with almost no musical pauses) makes their segmentation quite a demanding task. The musicological angle of this stage refer to the segmentation of the melodies according to criteria (sonic and contextual) based on the "Theory of Analysis" by Hanninen (2012) which determine the beginning and end of the melodies. These segmentation criteria facilitate the validation from another colleague which is required due to the subjectivity of this procedure. Therefore, after selecting the episodes I sent the material to Nerdinga Letulė (doctoral student and member of the research group) to confirm my analysis of this stage.

4.3.2 Criteria for melodic segmentation

The selection of the episodes proposed in the Therapeutic Narrative Analysis by Aldridge and Aldridge (2008) is an arbitrary process based on the intuition of the therapist to trace the generation of melody by distinguishing the "significant moments in therapy" (p. 91). Nevertheless, I consider the segmentation of these melodies also a musicological task. I listened to both melodies which formed the episode (therapist's and client's), but I applied segmentation criteria only to the client's melodies. As the focus of the analysis is on the client's melodic evolution, melodic segmentation pertains to client's melodies. Nevertheless, as these melodies generated from our mutual improvisation the listening includes both of our melodies. Furthermore, since this phase of the analysis requires validation from a colleague I considered necessary to apply more concrete criteria for segmentation.

I selected the segmentation criteria which applied to the nature of the musical data (monophonic music from midi instruments) and to the characteristics of the melodies (tonality, rhythm and contour). Therefore, I selected the criteria (sonic and contextual) from the "Theory of analysis" by Hanninen (2012) which refer to these three dimensions of melody; tonality, rhythm and contour.

Specifically, from the sonic criteria (see Table 2) I used the following values; pitch, duration, dynamics, articulation and rest. From the contextual criteria (see Table 3) I constructed the following subtypes; pulse, rhythm, tonality and pitch contour. According to Hanninen (2012) "contextual subtypes include, but are not limited to"; "pitch contour", "sets of pitch-classes", "pitch intervals", "scale-degree ordering and rhythm", (p. 36). It is in the individual judgment of the analyst to determine different subtypes or criteria, (Hanninen, 2012).

TABLE 2 Sonic criteria for the segmentation of melodies

"S criterion"	"Segments by"
"S1-pitch"	"Pitch interval between events that are temporally adjacent"
"S1-duration"	"Duration (in beats or seconds) between attack points of events that are temporally adjacent (duration can include sustain and rests)"
"S1-dynamics"	"Dynamics, between events that are temporally adjacent"
"S1-articulation"	"Articulation between events that are temporally adjacent"
"S1-rest"	"Rest between events that are temporally adjacent" (Hanninen, 2012, p.29)

The selected episodes were named according to their chronological order (i.e. Episode 1, Episode 2, etc). Sonic criteria assume a separating position while contextual criteria assume relation between musical events (Hanninen, 2012). In the following musical examples previous or successive music is demonstrated clarifying the boundaries.

TABLE 3 Contextual criteria for the segmentation of melodies

Contextual subtypes*	Description and comments
C pitch contour	Change in pitch contour (and intervals)
C rhythm	Rhythmical patterns
C pulse	Change in the pulse (present or absent)
C tonality	Strong key center

*these subtypes indentify "a musical space in which association occurs" (Hanninen, 2012, p. 35)

Analytically, the melodies of the episodes were segmented as follows:

Episode 1: The sonic boundary of duration indicates a change between attack points in the domain of rhythm. A rhythmic pattern starts and this grouping (three quarters/two eights) creates a boundary. This pattern is created also in the domain of pitch contour; there is a significant intervallic change. The change of the time signature (from 2/4 to 4/4) also evokes change in the pattern; from a quarter and two eights to four eights, (see musical example 1).
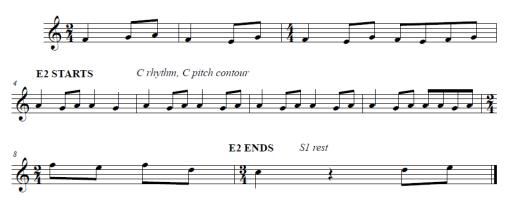
MUSIC EXAMPLE 1 Segmentation of Episode 1

Episode 1 starts when there is a change of the duration of notes and a stable pattern (three quarters/two eights) is established, $(S_{1\text{-duration}})$. Additionally, there is a change of the pitch contour, and there are also rhythmic patterns $(C_{\text{rhythm}}, C_{\text{pitch contour}})$. Episode 1 ends when the sequence ends and the rhythmic pattern discontinue (C_{rhythm}).

The beginning of Episode 2 is the beginning of a melodic sequence, which creates a boundary in the domain of both pitch and rhythm. At the same time pulse accelerates. The silence which signifies the quarter rest indicates an acoustic boundary, (see musical example 2).
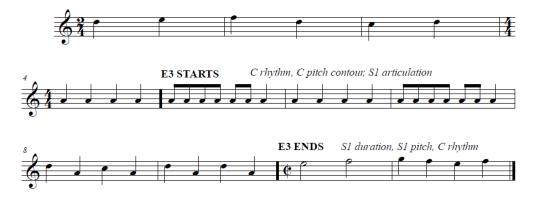
MUSIC EXAMPLE 2 Segmentation of Episode 2

Episode 2 starts when a sequence starts and there is change in pitch contour $(C_{\text{rhythm}}, C_{\text{pitch contour}})$. Episode 2 ends when there is a musical pause and there is a discontinuity of the beat $(S_{1\text{-rest}})$.

In the beginning of Episode 3 there is a rhythmic motif of two bars which signifies a change in pitch contour and rhythm. Also the articulation is staccato.

The end of the episode is indicated by a change in the duration between attack points (semi-quarters instead of quarters) and the abrupt closure of the sequence, (see musical example 3).

MUSIC EXAMPLE 3 Segmentation of Episode 3

Episode 3 starts when there is change in pitch contour (melody stays in A pitch), a new rhythmic pattern and a persistent staccato beat appears (C $_{pitch\ contour}$, C $_{rhythm}$, S$_{1\text{-articulation}}$). Episode 3 ends with the discontinuity of the rhythmic pattern, (C $_{rhythm}$, S$_{1\text{-duration}}$, S$_{1\text{-pitch}}$).

The beginning of a rhythmic pattern of three bars indicates a segment from previous events, and the start of Episode 4. The discontinuity of sound (rest) with the simultaneous intervallic change creates a boundary, (see musical example 4).

MUSIC EXAMPLE 4 Segmentation of Episode 4

Episode 4 starts as a rhythmic pattern appears, the beat is stable and fast and the pitch contour is around pitch E, (C $_{pulse}$ C $_{rhythm}$ C $_{pitch\ contour}$). Episode 4 ends at the rest and when the pitch contour changes (C $_{pitch\ contour}$, S$_{1\text{-rest}}$).

Episode 5 starts with the beginning of a staccato rhythmic motif in a specific range (A-G) throughout almost the whole episode.

The change in the register and the appearance of rhythmic motifs create sonic and contextual boundary, indicating the episode's end, (see musical example 5).

MUSIC EXAMPLE 5 Segmentation of Episode 5

Episode 5 starts with the staccato ($S_{1\text{-articulation}}$), the intervallic change of (A-G) (C $_{\text{pitch contour}}$, $S_{1\text{-pitch}}$) and the rhythmic patterns (C $_{\text{rhythm}}$). Episode 5 ends: the pitch contour goes above the A boundaries (C $_{\text{pitch contour}}$) and the duration of notes change (from quarters to eights) ($S_{1\text{-duration}}$).

Episode 6 starts with the beginning of a scale in the first two bars which then continues with variations in the same rhythmic pattern (four quarters and eight eights). The end of a rhythmic sequence (measure 10) and the beginning of another (measure 11) creates a contextual boundary, (see musical example 6).

MUSIC EXAMPLE 6 Segmentation of Episode 6

Episode 6 starts with the change of rhythm (4/4) (C $_{\text{rhythm}}$), pitch contour (C $_{\text{pitch contour}}$), duration of notes (from eights to quarters) ($S_{1\text{-duration}}$). Episode 6 ends when rhythmic pattern discontinues, notes duration changes from quarters to eights, ($S_{1\text{-duration}}$).

Episode 7 starts when a melodic line appears with the simultaneous use of pedal. The melody closes in a long note in B pitch, (see musical example 7).
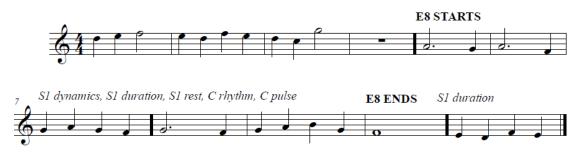
MUSIC EXAMPLE 7 Segmentation of Episode 7

Episode 7 starts with the change in the duration of notes ($S_{1\text{-duration}}$), pedal ($S_{1\text{-articulation}}$). Episode 7 ends with the change in the duration between attack points, ($S_{1\text{-duration}}$).

After a musical pause a new melodic line starts signifying the start of Episode 8. The melody's distinct musical features are loudness and emphasis on the beat.

The melody concludes in a long note (F), (see musical example 8).

MUSIC EXAMPLE 8 Segmentation of Episode 8

Episode 8 starts with a sforzando[3], pause in the pedal and loudness ($S_{1\text{-dynamics}}$). The duration of notes changes ($S_{1\text{-duration}}$), there is a distinct beat, (C_{pulse}) and a new rhythm appears (3/4) C_{rhythm}). Additionally, melody starts after a musical pause ($S_{1\text{-rest}}$). Episode 8 ends with a long note ($S_{1\text{-duration}}$).

The beginning of a sequence which consists of a motif developing in two measures creates a boundary with the previous melodic line and hence indicates the beginning of Episode 9. This melodic motif's different variations eventually stop at measure 14 and then a harmonic accompaniment begins at measure 15 which signifies the episode's end, (see musical example 9).

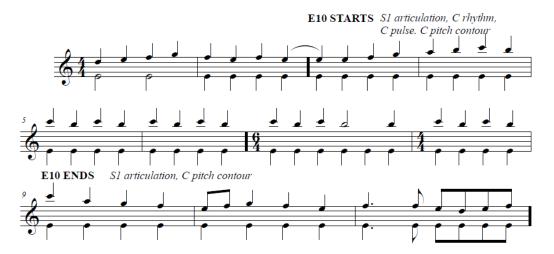MUSIC EXAMPLE 9 Segmentation of Episode 9

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[3] Sforzando: "Direction that a note or chord be strongly accented or played in a 'forced' manner", (Kennedy & Bourne, 2004, p. 668)

Episode 9 starts: rhythmic pattern starts (C $_{rhythm}$), specific harmony (key specified) (C $_{tonality}$), distinct beat (C $_{pulse}$), staccato (S $_{1-articulation}$) and notes have a specific duration (S $_{1-duration}$). Episode 9 ends: duration of notes changes (S $_{1-duration}$).

The melodic line's ascending with the simultaneous use of pedal signifies the start of Episode 10. The melody gradually descends at measure 9 with the simultaneous change in the articulation (staccato) indicating the episode's end, (see musical example 10).
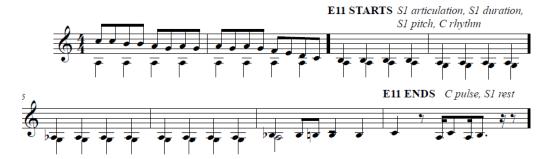
MUSIC EXAMPLE 10 Segmentation of Episode 10

Episode 10 starts: pedal starts (S $_{1-articulation}$), a steady beat (C $_{pulse}$), a rhythmic pattern (C $_{rhythm}$), and pitch contour is around C, (C $_{pitch contour}$). Episode 10 ends: pedal stops (S $_{1-articulation}$), pitch contour changes (C $_{pitch contour}$).

The melodic line after its gradual descent arrives to a pattern of four quarters within a specific pitch range and this is the start of Episode 11. The episode ends when after a gradual slowing down of the tempo it arrives into a musical pause which at the same time functions as a sonic boundary, (see musical example 11).

MUSIC EXAMPLE 11 Segmentation of Episode 11

Episode 11 starts: Staccato ($S_{1-articulation}$), duration of notes changes ($S_{1-duration}$), intervallic pitch changes abruptly ($S_{1-pitch}$), and a rhythmic pattern begins, (C_{rhythm}). Episode 11 ends: rallentando[4] (C_{pulse}) and pause (S_{1-rest}).

After an abrupt change in the density of notes at measure 1, Tina starts playing dynamically in random pitches and with random pulse. The episode's end comes when a rhythmic pattern emerging from the previously chaotic part, at measure 5, is shaped.

MUSIC EXAMPLE 12 Segmentation of Episode 12

Episode 12 starts*: the four notes (quarter duration) are not the only criterion for segmentation ($S_{1-duration}$) but also the abrupt change; in the duration of notes (high density), in pitch (small intervals between notes) ($S_{1-pitch}$), the absence of rhythmic patterns (C_{rhythm}) and of key center (atonal) ($C_{tonality}$). Episode 12 ends when there is change in all the above criteria.

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[4] Rallentando: "slowing down, gradually", (Kennedy & Kennedy, 2012, p. 735).

Episode 13 starts dynamically with a rhythmic sequence and with the change in the articulation; that is the use of pedal. This sequence gradually dissolves at measure 6 indicating the end of the episode, (see musical example 13).
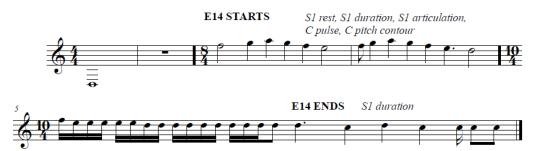
MUSIC EXAMPLE 13 Segmentation of Episode 13

Episode 13 starts: Change in the duration of notes ($S_{1-duration}$), use of pedal ($S_{1-articulation}$), starting of a rhythmic pattern (C_{rhythm}), establishment of a steady pulse (C_{pulse}), and a strong tonal center ($C_{tonality}$). Episode 13 ends: Change in all the above criteria.

After a musical pause, a melodic phrase appears indicating the beginning of Episode 14. The use of pedal is abandoned and the phrase starts hesitantly in free tempo. The melodic phrase descends and stops temporarily in pitch C which at the same time creates a sonic boundary, (see musical example 14).

MUSIC EXAMPLE 14 Segmentation Episode 14

Episode 14 starts: change in the duration of notes ($S_{1-duration}$), not stable pulse (C_{pulse}), no pedal ($S_{1-articulation}$), pitch contour ($C_{pitch\ contour}$), and no rhythmic patterns (C_{rhythm}). Episode 14 ends: the four notes (C) make a sonic boundary ($S_{1-duration}$).
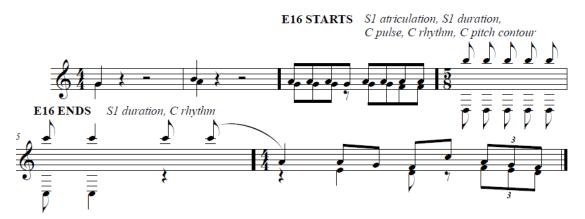
After a chaotic melodic event in terms of tempo and pitch contour, Episode 15 emerges with the formation of a staccato rhythmic melody at measure 3. The rhythmic pattern of eight eights stops at measure 5, indicating at the same time the end of the episode, (see musical example 15).

MUSIC EXAMPLE 15 Segmentation of Episode 15

Episode 15 starts: duration of notes (eights) ($S_{1\text{-duration}}$), staccato ($S_{1\text{-articulation}}$), rhythmic pattern (C $_{rhythm}$), scale (C $_{pitch\ contour}$). Episode 15 ends: discontinuity of the duration of notes makes a sonic boundary ($S_{1\text{-duration}}$)

Episode 16 starts after a musical pause at measure 2. Then a harmonic melody in a rhythmic pattern of eight eights begins to develop. The gradual intervallic opening comes to an end at measure 5 indicating the end of the episode, (see musical example 16).

MUSIC EXAMPLE 16 Segmentation of Episode 16

Episode 16 starts with: legato[5] ($S_{1\text{-articulation}}$), change in the duration of notes (eights) ($S_{1\text{-duration}}$), a stable rhythm (C $_{pulse}$), a rhythmic pattern (C $_{rhythm}$) and change in the pitch contour (ascending) (C $_{pitch\ contour}$). Episode 16 ends: change in the duration of notes and the rhythmic pattern, ($S_{1\text{-duration}}$, C $_{rhythm}$).

Tina's solo opens with a rhythmic motif in C pitch which establishes key center and signifies at the same time the start of the Episode 17. The episode closes with a long note in pitch C at measure 7. This long (in duration) note is simultaneously a boundary comparing it to the musical events that follow; the appearance of four groups of eights at measure 9, (see musical example 17).

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[5] Legato: when notes are "bound together", (Kennedy & Kennedy, 2012, p. 529).

MUSIC EXAMPLE 17 Segmentation of Episode 17

Episode 17 starts with the simultaneous start of client's solo. Episode 17 ends: the long note creates a segment ($S_{1\text{-}duration}$).

Episode 18 begins with a rhythmic pattern of eight eights at measure 2. This comes to an end at measure 6 with a long note of pitch C, (see musical example 18).

MUSIC EXAMPLE 18 Segmentation of Episode 18

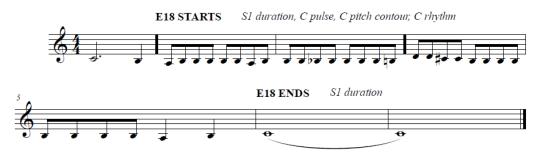Episode 18 starts: with a group of eights ($S_{1\text{-}duration}$), an acceleration of the beat (C_{pulse}), a change in the pitch contour ($C_{pitch\ contour}$), and the beginning of rhythmic patterns (C_{rhythm}). Episode 18 ends: when duration of notes changes ($S_{1\text{-}duration}$).

Three semi quarters at measure 2 create a boundary between Episode 19 and the previous musical events. Episode's ending coincides with the end of the improvisation at measure 3, (see musical example 19).
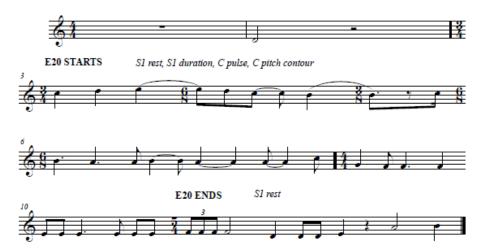
MUSIC EXAMPLE 19 Segmentation of Episode 19

Episode 19 starts: duration of notes changes ($S_{1\text{-}duration}$). Episode 19 ends: end of the piece, musical pause ($S_{1\text{-}rest}$).

Episode 20 starts with Tina playing alone after a long musical pause; the melody develops ad libitum[6] without staying in a specific tempo (see measure 3). At the end of this melodic development there is another musical pause at measure 10 which signifies the end of Episode 20, (see musical example 20).

MUSIC EXAMPLE 20 Segmentation of Episode 20

Episode 20 starts: after a musical pause (S_{1-rest}) there is a change in the duration of notes ($S_{1-duration}$), no stable pulse (C_{pulse}), and pitch contour changes ($C_{pitch\ contour}$). Episode 20 ends: after a musical pause (S_{1-rest}).

Episode 21 starts with the beginning of a melodic period which evolves in a rhythmic pattern at measure 5. The end of this episode coincides with the end of the improvisation, (see musical example 21).

MUSIC EXAMPLE 21 Segmentation of Episode 21

Episode 21 starts: After a long duration of notes ($S_{1-duration}$) there is the start of a new rhythmic pattern (C_{rhythm}). Episode 21 ends in the end of the piece.

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[6] Ad libitum: "at will with regard to rhythm, tempo", (Kennedy & Kennedy, 2004, p. 10)

After a musical pause a melodic phrase appears hesitantly at measure 2 within unspecific beat; the start of Episode 22. Then the musical phrase concludes in the beginning of a new musical event which has a distinct beat and specific tempo (3/4). This creates a contextual boundary between the two musical events indicating at the same time the end of Episode 22, (see musical example 22).

MUSIC EXAMPLE 22 Segmentation of Episode 22

Episode 22 starts: when duration of notes and pitch contour changes ($S_{1\text{-duration}}$, $C_{\text{pitch contour}}$), and pulse is unstable (C_{pulse}). Episode 22 ends: after a long note (S duration), pitch contour changes (descends lower) ($C_{\text{pitch contour}}$), and a different rhythm starts (C_{pulse}).

The beginning of Episode 23 coincides with the beginning of a rhythmical melody in specific pitch intervals. The episode ends when the rhythmic pattern of the melody discontinues, and is followed by an ascending melodic line, (see musical example 23).

MUSIC EXAMPLE 23 Segmentation of Episode 23

Episode 23 starts: rhythmic pattern starts (C_{rhythm}), with a specific pitch contour ($C_{\text{pitch contour}}$), duration of notes changes ($S_{1\text{-duration}}$). Episode 23 ends: rhythmic and intervallic pitch pattern ends (C_{rhythm}, $C_{\text{pitch contour}}$, $S_{1\text{-pitch}}$)

Episode 24 begins with a rhythmic pattern which consists of two measures in tempo 6/4 and 2/4. The end of the episode is indicated by the change between attack points at measure 8 and 9, (see musical example 24).

MUSIC EXAMPLE 24 Segmentation of Episode 24

Episode 24 starts: rhythmic pattern discontinues (C_{rhythm}), there is a change in the duration of notes ($S_{1\text{-duration}}$). Episode 24 ends: rhythmic pattern discontinues (C_{rhythm}), duration of notes changes ($S_{1\text{-duration}}$).

4.3.3 Repertory Grid method

These twenty four episodes are the focus of the investigation and they are the objects (elements) upon which the RepGrid performance is based, (Tan & Hunter, 2002). The element's comparison which represents the element's interpretation by the analyst leads to the elicitation of constructs, (Tan & Hunter, 2002). Then the differences and similarities between elements and constructs are revealed from links, (Tan & Hunter, 2002). In the present study the linkage is a 7-point scale which was used to rate all elements above all constructs. This provided enough space for discrimination without creating problems in the visual examination of the grid, (Tan & Hunter, 2002).

In other words using the "Repertory Grid method" based on the "personal construct theory" by George Kelly (1995) the elements (episodes) are compared and certain bi-polar constructs are elicited (Aldridge & Aldridge, 1996, p. 226). Then, after "positioning elements along construct scales" a matrix is generated and is called a repertory grid (Abrams, 2007, p. 94-95). The matrix formation presents inter- relations among all elements and constructs depending on the relative levels of difference and similarity, (Abrams, 2007).

A common technique for the constructs' elicitation is "the standardized form of triad elicitation", (Aldridge & Aldridge, 1996, p. 228). Three randomly selected episodes were compared according to "two that are similar and one that is different" (Aldridge & Aldridge, 1996, p. 228). For example, I compared the following episodes: Episode 19 to Episode 15 and Episode 7. Episodes 15 and 7 shared a similarity which simultaneously differentiated them from Episode 19. From this comparison two opposite poles of a construct were elicited; 'tonal center' versus 'no tonal center' (see Table 4).

TABLE 4 Eliciting the poles of constructs

DIFFERENCE	NO TONAL CENTER
	E 19
	E 7
	E15
SIMILARITY	TONAL CENTER

In the same manner all the remaining episodes were compared and twenty two constructs were elicited (see Table 5).

Afterwards, all the episodes (melodies) were set in a position between each construct pole. The episodes (melodies) were ranked in connection with the bi-polar constructs.

Although Aldridge proposes "an ordering of relative position" for the ranking of episodes (melodies), I used a seven-point scale instead for the following reasons: a 7 point scale enables testing "whether the elements really are in the range of convenience of all the constructs-and thus if the grid has been constructed correctly" (Easterby-Smith, 1980, p. 10). On the other hand, ranking may have an impact on the differentiation between elements which actually share no difference (Tan & Hunter, 2002). However, it is important to mention that the scale's points in relation to the construct poles are supplied "as reference points only, and are not intrinsically related to the meaning of the polar attributes", (Abrams, 2007, p. 98). Additionally, I considered ranking an impractical solution because of the large size of the data.

Although I was quite familiar with the musical material, and I had memorized the 24 melodies, instead of rating every melody separately in chronological order I followed the technique proposed by Aldridge (1996): I rated first every pair of melodies -from the triads used for the elicitation of constructs- which shared a similarity and afterwards the remaining melodies of the triads.

TABLE 5 The 22 constructs elicited from the 24 episodes

Tonal center	No tonal center
Staccato	Pedal
Free tempo (a piaccere)	Strict tempo
Pulse present	Pulse absent
Playing in narrow range of pitch	Playing in wide range of pitch
High density of notes	Low density of notes
Precise pulsation	Imprecise pulsation
Linear melodic development	Vertical melodic development
One melodic phrase	Variations of melodic motifs
Musically supported	Solo
Low register	High register
Rhythmic patterns	No rhythmic patterns
Initiative after a musical pause	Induced from previous music
Dialogue	Monologue
With accompaniment (two mallets)	Without accompaniment (one mallet)
Tempo accelerates	No deviation in tempo
Small intervals	Large intervals
No finale	Clear finale
Underlying harmony	No underlying harmony
Development of pitch contour	Fixed pitch contour
Chromatic pitch contour	Diatonic pitch contour
Fluctuation in dynamics	Flat dynamics

As the elicited constructs were mainly musical qualities (i.e. "free tempo" versus "strict tempo") and not metaphors describing the music, the technique above enabled me to rate the melodies according to one another, thus staying close to the idiomorphic musical nature of the data.

On account of the large size of musical data (24 elements and 22 constructs) a computational analysis was necessary as the emerging grid was also large and there was limitation of time (Easterby-Smith, 1980). I utilized the 'OpenRepGrid on air' (http://www.onair.openrepgrid.org/) which is an online free software suitable for conducting this analysis. I used it to generate the 'Bertin display' and the dendrograms of clusters and elements (see graphic 1 and 2).

GRAPHIC 1 AU/BP values of clustered Elements

In order to conduct cluster analysis I downloaded and installed the pvclust package which is "included in CRAN packages", (Suzuki, & Shimodaira, p. 1540). CRAN is "the official R package archive", whereas R is "a free software environment for statistical computing and graphics", (Suzuki, & Shimodaira, p. 1540).

The RepGrid construction "is a whole that transcends the sum of its individual parts (i.e. the elements and constructs) in both scope and depth, and as such can help provide important insights about a given phenomenon beyond what the parts alone may reveal" (Abrams, 2007, p. 94-95). The emerging grid shows patterns in the data, connecting certain elements and constructs together according to the percentage of their shared similarity.

This process of constructing a RepGrid, may reveal musical characteristics which seem "unrelated, disparate, or paradoxically opposed on their surface as closely aligned in the scheme of the construction" and vice versa (Abrams, 2007, p. 95). Even though certain distortions may happen during the construction an overall distortion of the grid is improbable (Abrams, 2007).

Therefore, the RepGrid structure can be a reliable source for acquiring valuable information about an improvisation (Abrams, 2007).

GRAPHIC 2 AU/BP values of clustered constructs

Cluster dendrogram with AU/BP values (%)

5 CASE OF TINA

5.1 Session divided in two parts

The therapy process was supervised by a research group administered and supervised by Jaakko Erkkilä in the Music Therapy Clinic for Research and Training of the University of Jyväskylä.

These ten sessions were part of a larger research plan which utilized the IIMT model and a breathing-pace intervention before the start of each session. Different members of the research team had their individual plan as to various research goals. Additionally, the research team observed, enhanced and supervised the therapeutic process, thus integrating aspects of action research and naturalistic inquiry in its role (Wheeler, 2005).

The selection criteria of the client were her availability and wish to receive music therapy, as well as her consent to participate in a research study. The potential clients filled an application with the reasons for applying for free music therapy sessions. Tina was selected from that list of possible clients who were recruited for the music therapy students' internship.

At the beginning of each session an intervention (pace breathing or music listening) would be introduced by Olivier Brabant (doctoral student). Therefore, during the first 15' min. of each session both client and therapist (Tina and me) had a 10' min. relaxation; either with pace-breathing or music listening alternately. Olivier was leading this part, guiding Tina and me in filling certain assessment scales and conducting a creativity test also with Tina. During this time and for the rest of the session we were both wearing a heart rate monitor for the assessment of our heart rates.

Even though the first part of the session was conducted by Olivier and I was more in the background, I usually made attempts to monitor Tina's current state of being by asking her about her preference of the two kinds of relaxation or just about her mood. One of my aims was to facilitate the transition from the first part to the second part, which had duration of 45' min.

5.2 Starting point of therapy

Tina applied for free music therapy sessions in order to reduce nervousness, stress and to improve well-being and her relationship to music; she acquired no musical skills but enjoyed music in general and she also showed particular interest in participating in a research project. She had previous experience with art therapy which was inconclusive; she dropped out of therapy as she felt that there was no progress and she had nothing further to gain from the process.

The first instrument which I introduced to her was the midi-xylophone (malletKAT pro). Initially, Tina expressed verbally reservations about free musical improvisation; "I just really don't know what to do!" (whole excerpt Appendix 1, quote number 1). Then she expressed doubts about free improvisation by wondering how I was going to follow her since I wouldn't know what she was going to play; "… if I don't have any structure, how can you know what I'm doing, because I'm gonna be unpredictable". She also expressed her aversion to dissonance: "… it sounds stupid to do something that doesn't sound right" (whole excerpt Appendix 1, quote number 2, quote number 3).

During the course of therapy some themes emerged in reflections either after improvising or listening to improvisation excerpts and consequently have a strong connection with the musical performance. A short description of them in chronological order will facilitate their integration with the results of the musical analysis in the conclusions' part.

As this study is hermeneutic in its core and the focus is on musical performance, the following therapeutic themes are presented as emerging from the sessions' transcriptions and video recordings from the analyzer's perspective. Therefore, rather than applying a strict content analysis or rather than investigating codes in the transcripts and diaries, I traced within the course of therapy the issues which we worked together and which were strongly connected with our musical performance.

5.2.1 Therapeutic themes

The following themes are certain issues which Tina expressed during these ten sessions and which were invoked by the music. These issues manifested either via bodily sensations,

feelings or mental processes during different phases of the process. These themes are the criteria which determinate the various periods of the therapeutic process. Additionally, changes (when occur) are reported with their manifestation.

Initiation into clinical improvisation (sessions 1, 2, 3 and 4):

This phase was a kind of initiation into free improvisation, as Tina was not familiar with playing music at all. Albeit her improvisations were not short her nervousness towards playing was obvious, especially at the start of the improvisation. During the 3rd and 4th session she commented on that difficulty in the following manner: "It's always a bit awkward to start, I don't know" and "I really don't like to start.... I don't like the start" (whole excerpt Appendix 1, quote number 4 and 5).

Loneliness and transition phase (sessions 5, 6, and 7)

After a very long improvisation in the 5th session, she mentioned a change in her mood:

> "When I'm not really motivated I don't really.... cook or eat too much. But now at the end I was like... uh ... actually I'm gonna stop by the shop to buy something so that I can cook something to eat" (whole excerpt Appendix 1, quote number 6).

Furthermore, this improvisation generated the following reflection which she wrote in her diary, later on that day:

> "I guess I am in phase 3.5 of my cultural choc. After the honey moon (1), the negative feelings towards the host country (2), the adaptation phase (3), now I am in adaptation phase part 2 (3.5). I feel like I wanted to have a firm grip on what was happening in my immediate environment at first (3). And now, I just feel like letting the environment take a grip of myself (3.5). I do not want to be active but it is not out of laziness; it is more as if I feel like a participant-observer. I am observing myself as a participant of my life-experiment. I feel like letting things be, and not dashing through my daily journeys".

Reflecting on this excerpt from her diary -during the 6th session- she described her current state as a transition phase: "I'm kind of walking through a corridor". According to her, the ideal outcome of this phase would be a new start: "Like a kind of new skin" (whole excerpt Appendix 1, quote number 7). In her reflection of an improvisation with djembé's she referred to pains that are bothering her and were the starting point for the improvisation: "I have these aches in my back and my head… It's been there for a while". She also mentioned the loneliness she felt during my musical pauses: "I didn't like it when you stopped. …

because I felt... I felt alone", (whole excerpt in Appendix 1 quote number 8). She referred to the loneliness arising in an individual setting –during the 7 session- and connected it with bodily tensions:

> "I still have these tensions, they are somehow stuck some places within me. … I took my jacket and I was standing next to the teacher. And then I said spontaneously, "oh, I still have this idea". And there, suddenly, I felt this tension. … I know that suddenly I'm kind of alone, on my own, expressing my idea", (whole excerpt in Appendix 1, quote number 9).

In the same session and after listening to a musical excerpt (Episode 10 of the 5th session's improvisation) she envisioned 'the corridor' as her safe place.

Being trapped and creating space (session 8)

During the 8th session the listening back to a musical excerpt -of the improvisation in the 5th session- generated a solo improvisation which Tina described as such:

> "So that's me who is trapped, and I have no space between me and the others. … And when I feel panic or trapped, it's because my boundaries are set by the others and I don't have space. So I wanna kind of.... [showing with her body, putting her hands around herself], like kind of close myself and become like a ball so I can get space", (whole excerpt in Appendix 1, quote number 10).

In the second improvisation -of the same session- she played a reaction to the above uncomfortable situation: "I was like kind of… creating points to keep the space open", (whole excerpt in Appendix 1, quote number 10). A djembé improvisation followed where I musically invited her to 'confront' me in conversation. In her reflection afterwards she described how she envisioned this meeting to be a circle of people creating a dancing space where they danced in turns -resembling the same way that we played in turns. She emphasized the way she embodied the music instead of playing the music: "I was the music, like the music was, I was the music, the music took shape. Instead of playing something, I became what I'm playing... I WAS the music", (whole Appendix 1, quote number 11).

The frustration from a vicious cycle and attempt of reconciliation (session 9)

During the 9th session she processed further the tension in her throat which appears during individual intercourse, and which is also connected with fear; this forms a vicious circle she cannot escape from:

"I mean it always happens because of a conversation, or a conversation that… I can't talk because I'm not able to, because the throat goes tight and tighter and at some point. … that I don't feel secure, but it's hard to say the feeling. I just feel panic. … And I'm annoyed because I can't get out of this pattern…", (whole excerpt in Appendix 1 quote number 12).

For the first time she was very emotional in her verbalizations. The above reflection followed a musical improvisation in the midi-xylophones as an exploration to the tension in her throat. She reflected upon it as a reconciliation of different parts of her body: "I was thinking about a reconciliation. … Between the different parts of my body I would say", (whole excerpt in Appendix 1, quote number 13). She then expressed her frustration in her fruitful attempts of reconciliation between parts of herself that annoy her: "I think I feel a lot frustration, I think it's one of the top emotions I feel, if that's an emotion" (whole excerpt in Appendix 1, quote number 14).

Ready for a new start and fear of being emotionally affected (session 10)

During our review of the whole therapeutic process in the 10th session she mentioned that she will keep the 'corridor' image and described her current state as being out of the transition face and ready for a new start: "I will keep the corridor image. … I think I am already out of the corridor. … I took the boat, the rowing boat to go to the other side. And from there, that's the end, the new start", (whole excerpt in Appendix 1, quote number 15). She also commented on her aversion to being dependent on others and overruled by emotions: "I don't want to be dependent on others. …Especially not affected... emotionally. … I can accept my emotions but I don't want my emotions to overcome my own reason, my self", (whole excerpt in Appendix 1, quote number 15).

5.2.2 Countertransference

During the course of therapy countertransference was evident in our interactions. This manifested in the verbal domain and increased during the supervisions where I shared my reflections with the research team and which followed immediately after the sessions. The following citations are from the therapist's form which I used to fill in after every session;

Session 1: "Nervousness and negative mood during verbal interaction" (whole form in Appendix 2, number 1).

Session 2: "Nervousness while trying to reflect after the improvisations" (whole form in Appendix 2, number 2).

Session 4: "Difficulty in asking questions. In verbal interaction I have the feeling of intruding. I am repeating myself", (whole form in Appendix 2, number 3).

Session 7: "I have a nervousness when proposing or suggesting, feeling of clumsiness" (whole form in Appendix 2, number 4).

Supervision brought this issue into my awareness, thus helping me to work on it. Watching back the sessions and observing our interaction aid me in reducing this communication difficulty. More importantly, it helped me comprehend Tina's barriers in interaction.

6 RESULTS

6.1 RepGrid analysis

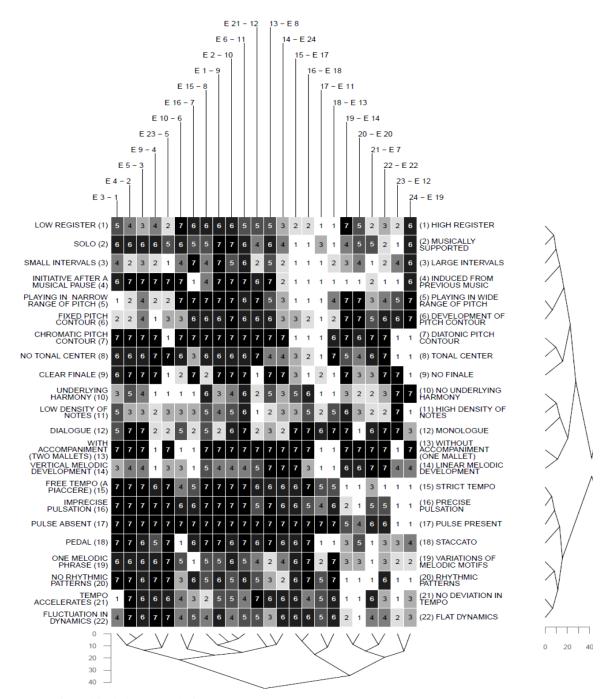After conducting a hierarchical cluster analysis a matrix was generated (see figure 1).

FIGURE 1 Hierarchical cluster analysis

As this computer analysis does not explain anything about the grid or give additional information which is not provided by the grid, an interpretation of the grid is necessary in order to come to any results, (Easterby-Smith, 1980). As we can see in the matrix certain constructs' poles were swapped and connected according to their similarity level. This generation of the clustered constructs -which was based on personal ratings- is followed by the categorization of constructs; a "central figure of qualitative research", (Aldridge & Aldridge, 2008, p. 95). In the categorization of constructs the labels of the categories are as close to musical qualities as possible and metaphors when utilized stay close to the musical events.

6.2 Categories

The clarification of the categories' meanings is a significant step towards their further interpretation, (Aldridge & Aldridge, 2008) (see Table 6). In this study the elicited constructs are actual musical qualities which were generated from the variety of the musical data and this seems to have a more formalistic musicological approach.

Nevertheless, these musical qualities do not originate from the musical notation as such – which is only one musical attribute- but from the improvisations of both therapist and client which are musical events. The term "episode" is utilized within this context; "it is an event, incident or sequence of events that forms part of a narrative", (Aldridge & Aldridge, 2008, p. 64).

Although musical terms are used, the attention is not on technical elements only, and the aim remains still the discovery of the conditions which facilitated the emergence and development of melody. Within this rationale musical meaning and its analysis is not about translating "meaning into words, but rather to attend to the conditions of its emergence", (Cook, 2001, p. 190). Furthermore, the musical analysis is actually the structural analysis of the "material trace and of the expressive codes that inform it", (Cook, 2001, p. 190). Therefore, musical meaning becomes autonomous and another musical agent, just like musical structure, (Cook, 2001).

This perspective of musical analysis allows for another manner of musical comprehension; by attuning to music's emergent attributes musical meaning is regarded as one of them, (Cook, 2001).

TABLE 6 Categorization of clustered constructs

CONSTRUCTS	CATEGORIES
High register / Musically supported / Large intervals	Active with support
Induced from previous music	Interaction
Playing in wide range of pitch / Development of pitch contour	Unfolding
Diatonic pitch contour / Tonal center / No finale	Creating space
No underlying harmony / High density of notes / Monologue	Introvert
Without accompaniment / Linear melodic development	Extending
Strict tempo / Precise pulsation / Pulse present / Staccato	Determination
Variation of melodic motifs / Rhythmic patterns	Searching
No deviation in tempo / Flat dynamics	Inflexibility

Consequently, the musical terms used as constructs are independent attributes of this specific music (groups of episodes) and they were created within a specific musical performance. As such, they carry information about the musical performance which the labels of the categories attempt to express.

Inflexibility

The immovable dynamics and tempo of the music are expressed by the label 'inflexibility'. Dynamics refer to the "gradations of volume" (Kennedy & Kennedy, 2012, p. 283). Tempo refers to the "speed at which a piece of music is performed", (Kennedy & Kennedy, 2012, p. 891). The etymological definition of 'inflexible' is something that is "without variation and is unalterable", (Collins, 2016). In this case inflexibility communicates the tendency of the musical performance towards an unalterable environment in the domain of expression and

rhythm. Paradoxically, clients with no musical skills often impose on themselves and within improvisation very rigid musical structures (Priestley, 1994).

Searching

The musical motif (from the perspective of both melody and rhythm) is the shortest autonomous and comprehensive character in musical structure, (Kennedy & Kennedy, 2012). Melodic or rhythmic motives can be the only structural element of a melody, in which case the melody is characterized as rhythmical, (Kim, Chai, Garcia, & Vercoe, 2000).

One of the criteria for the improvisation's assessment is "the progression of the rhythmical-melodical motif towards an organic entity" (Aldridge & Aldridge, 2008, p. 49). Rhythmical and melodic sequences were a frequent structural form which shaped and purveyed our musical performance. This constant shaping and supplying of the musical structure gave an investigating effect to the performance.

Determination

'Staccato' is a manner of playing by shortening the length of a sound and further detaching one sound from its next-in-line, (Kennedy & Kennedy, 2012). On the other hand, pulse refers to rhythm; to the periodic sequence of beats, (Collins, 2016). Sometimes, distinct articulation (staccato) in combination with rhythmic austerity brought Tina's melody into the forefront of the musical performance, thus revealing a determinate stance towards improvising.

Extending

Even though the use of one mallet was adopted during most of the therapeutic process, there were some improvisations where Tina had both mallets at her disposal in order for the process to be facilitated by preventing possible unconscious resistance from her. Nevertheless, the majority of the improvisations (including the ones where both mallets were available) involved the use of one mallet and consequently the absence of accompaniment. This condition sometimes favored the formation of melodic phrases in a linear development. This development of melodic motifs to larger forms of contour, like phrases or periods could also

be rephrased as the extending of melodic elements. Within the context of improvised music the focus once again is on the action which generates the melodic feature.

Introvert

The etymology of the adjective 'introvert' originates from the Latin verb 'vertere' which means 'to turn' and the prefix 'intro, (FineDictionary, 2016). It can indicate the inward shift towards oneself. On the other hand, the word 'monologue' specifies the solitary actor's speech during performance, (Collins, 2016). There were specific moments where Tina played alone, random pitches in high density. At these moments there was absence of any kind of harmony; music's vertical dimension, (Kennedy & Kennedy, 2012). Additionally, the interaction was also absent during these musical monologues leading her to a turn towards herself.

Creating space

Tina's melodic lines (pitch contours) which used a specific musical material (diatonic) had also a solitary pitch as a basis (tonal center). This musical material is produced by playing on the lower key row of the instrument. The improviser's simultaneous playing in this area produces consonance and practically eliminates dissonance. The above musical features coincided with the absence of a musical conclusion. Even though there is not an obvious connection between pitch spectrum and musical form, within these improvisations the improviser's need to play in a familiar zone where dissonance is unlikely to occur, connects with the need to take no decisions regarding musical form. Thus, it offers a musical space where consonance and inconclusive structure ensures that from her part every musical possibility will stay open. This distinct musical space represents the improviser's current needs.

Unfolding

The verb 'to unfold' is synonymous to the verbs 'develop' and 'expand', (Collins, 2016). This literally overlaps with the development of the melodic line (pitch contour). The development is facilitated by the expansion of the musical range, which provides a variety of musical material for the improviser's creative potential.

Interaction

Musical pauses (breaths) are rare in the present musical data. The most frequent scenario during improvisation was the deduction of a new musical event from previous musical events. This musical continuity was induced by both therapist's and client's sides. Therefore, interaction as an influence or shared action (Collins, 2016), explains besides the performers' mutual musical interaction, also the interaction between the improviser's musical features.

Action with support

'Interval' in music represents the distance between pitches which in case of the melody are in consecutive order (Collins, 2016). On the other hand, 'register' represents a certain area of pitch class[7] which share similar domain of frequencies. The preference of the high register with musical leaps (large intervals) instead of musical steps, suggests an active musical presence. This preference doesn't appear in Tina's solo parts but coexists with our mutual playing.

6.3 Episodes

The computational analysis (RepGrid) generated clusters of episodes according to their level of similarity across the twenty two constructs (figure 1).

Ten groups of episodes –as indicated by the matrix- are given labels with the same manner as with the constructs (see Table 7). These different categories demonstrate the various important periods of the therapeutic process for the evolution of melody (Aldridge & Aldridge, 2008). In order to follow the musical progression across the therapeutic process, the episodes' categories are positioned in a chronological order, (see Table 8). Afterwards, constructs' categories and episodes' categories are linked together in the same chronological order, (see Table 9).

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[7] Pitch class: "a way of grouping pitches by some relation of equivalence", (Kennedy & Kennedy, 2012, p. 704).

TABLE 7: Clustered groups of Episodes

EPISODES	CATEGORIES
E19 + E12	EXPERIMENTING
E22 + E7	DEVELOPMENT
E20 + E14	SELF-CONFIDENT
E13 + E11	INITIATIVE
E18 + E17	SOLO
E24 + E8 + E21	LEADING
E6 + E2 + E1 + E15	DEPENDENCY
E16 + E10	EXPRESSION
E23 + E9	COMMUNICATING
E5 + E4 + E3	BLENDING IN

TABLE 8: Episodes in chronological order

Episodes in chronological order	Categories	Sessions
E23 + E9 / E22 + E7	Communication / Development	5th +10th session
E24 + E21 + E8	Leading	5th +9th +10th session
E20 + E14	Self-confident	5th +9th session
E18 + E17 / E19 + E12	Solo / Experimenting	5th +8th session
E16 + E10 / E13 + E11	Expression / Initiative	5th session
E15 + E6 + E2 + E1	Dependency	3rd +4th +5th sessions
E5 + E4 + E3	Blending in	3rd +4th sessions

TABLE 9: Integration of Episodes and Constructs

CONSTRUCT CATEGORIES	EPISODE CATEGORIES	Sessions
Active with support	Communication	5th+10th session
Interaction	Development	5th+10th session
Unfolding	Leading	5th+9th+10th session
Creating Space	Self-confidence	5th+9th session
Introvert	Solo	8th session
Extending	Experimenting	5th+8th session
Determination	Expression Initiative	5th session
Searching	Dependency	3rd+4th+5th sessions
Inflexibility	Blending in	3rd+4th sessions

'A short description of each process' phase follows -as indicated by each category of the clustered episodes- and at the same time is connected with the corresponding construct category. Each description is accompanied with short excerpts of the episodes in musical notation.

'Blending in' (Episodes 3, 4, 5) and 'Dependency' (Episodes 1, 2, 6, 15)

In this first phase belong episodes (1, 2, 3, 4, 5, and 6) from the 3th and 4th session of the process and one episode (E15) from the 5th session. These episodes are under the categories of 'inflexibility' and 'searching'. The musical features which characterize the episodes are similar to the ones under these categories; the rhythmic and melodic motifs, the strict articulation (staccato), and the absence of fluctuation in dynamics, (see musical example 25). In terms of musical interaction the rhythmical melodies are blending in each other; one motif

is the inductive for the other. This makes the melodic lines dependent to one another, (see musical example 26).

MUSIC EXAMPLE 25: Rhythmical and melodic motifs

Client's rhythmical melody includes either only one pitch (measure 11) or intervallic patterns (measure 15-16).

MUSIC EXAMPLE 26: Blending in

Occasionally the two melodic lines -client's and therapist's- shared the same register (i.e. measure 3, measure 5)

'Initiative' (Episodes 11, 13) and 'expression' (Episodes 10, 16)

During the 5th session where the improvisation had duration of approximately 40 min. new melodic features were generated and developed. From this perspective these episodes belong to the same phase of the therapeutic process; the second phase. Episodes 11 and 13 arise from Tina's initiative (see musical example 27).

MUSICAL EXAMPLE 27: Initiative

Regardless my long musical pause at measures 1-4, the client introduces a completely different harmonic melody on her own initiative at measure 5. Episode 13 also starts suddenly loudly and expressively on client's initiative at measure 14 and after some harmonic intervals in free tempo which seemed to lead to the improvisation's closure.

In episodes 10 and 16 Tina uses the pedal (which generates sustained pitches) and the tempo and dynamics have fluctuations (expression), (see musical example 28). Another common musical feature of these episodes is the presence of harmony and the use of two mallets.

However, these episodes fall under the category of 'determination' which involves opposite musical features than the ones described above; staccato and strict tempo. I believe that this may indicate a certain bias from the analyzer's perspective during the elicitation of the constructs which may suggest that all the constructs do not apply to all the elements. Further arguments are presented in the discussion section, where also other weaknesses of this analysis are explored.

MUSIC EXAMPLE 28: Expression

In both Episodes 10 and 16, the client develops a harmonic line in a gradually wider register at measures 1-2 and measures 10-13.

'Experimenting' (Episodes 12, 19)

Episodes 12 and 19 have both no tonal center -chromatic pitch contour- and no stable meter and they were created in session 5th and 8th correspondingly.

Specifically, episode 12 is chaotic in terms of pitch, contour and rhythm. These new elements -chromatic pitch contour and the constant change of meter- highlight the improviser's inclination to experimentation (see musical example 29).

Additionally, these episodes fall under the category of 'extending'. Albeit the fact that during episode 12 two mallets were available for the client, the episode's melodic development is linear and a musical accompaniment is absent just like the musical performance of episode 19 where one mallet was available. Finally, the absence of melodic motifs and the constant melodic evolution demonstrates the improviser's tendency to extend further the melodic features.

MUSIC EXAMPLE 29: Experimenting

In episode 19 the client's melodic line constitutes of almost randomly selected pitches in various durations and with no stable rhythmic meter (see measures 1-6). On the other hand, the regular repetition of a short melodic motif by the therapist provides some harmonic and rhythmical structure. The excerpt from episode 12 is a client's intensive and dynamic solo very in various random pitches and rhythmic motifs using both mallets but developing one melody.

'Solo' (Episodes 17, 18)

Episode 17 and 18 (see musical example 30) are excerpts of a theme-based improvisation - 'facing an uncomfortable situation'- where Tina performs alone. These episodes belong to the category 'introvert' and literally coincide with the term 'monologue' as she performs alone attempting to create a response towards a problematic situation. In other words, she turns into her inner-self in order to discover the resources which will help her face this uncomfortable situation.

MUSIC EXAMPLE 30: Solo

The narrow register, the small intervals and the strict rhythm add to the agitated expression of this melody.

'Self-confident' (Episodes 14, 20)

During Episodes 14 and 20 melodic periods are shaped, (see musical example 31).

MUSIC EXAMPLE 31: Self-confident

Tina's performance is in the foreground and within a loose rhythmical structure her melody is constantly evolving with no definite conclusion. These qualities also fall under the category of 'creating space'. This demonstrates how consonance and indefinite form can provide her a secure space where she can create with self-confidence.

Additionally, both episodes share a strong diatonic musical material.

'Leading' (Episodes 8, 21, 24)

Episodes 8, 21 and 24 come from sessions 5, 9 and 10 correspondingly. During these improvisations Tina introduces musical ideas and I follow her; in other words she is leading musically, (see musical example 32).

MUSIC EXAMPLE 32: Leading

Therapist's melodic line in both episodes is echoing –see measure 4 and measure 13- or complementing –see measure 6 and measure 19- the melodic motifs of the client. The client explores by herself the melody's potentiality by playing the melodic phrase in different rhythmical variations at measures 1-7. A similar but looser exploration in terms of pitch contour occurs in the beginning of episode 14.

Furthermore, the musical range is almost an octave and pitch contour is changing as explained in the category 'unfolding' where these episodes belong to.

'Development' (Episodes 7, 22) and 'communication' (Episodes 9, 23)

The final phase of the therapy includes episodes from the 5th and 10th session: in episodes 7 and 22 Tina creates autonomous musical periods, thus developing her musical skills, (see musical example 33). In episodes 9 and 23 she creates an accompaniment to my playing; musical communication, (see musical example 34). Episodes 7 and 22 are represented by the category 'interaction'.

MUSIC EXAMPLE 33: Development

In Episode 7 client's melodic period evolves independently from the therapist's which either accompanies (see measures 1-5) or complements the melodic material, (see measures 11-13). In Episode 22 the therapist randomly reflects the client's melodic development providing a harmonic base, (i.e. measures 19-20, 22-23).

On the other hand, episodes 9 and 23 are represented by the category 'action with support'. Both of these categories lead to a similar conclusion; firstly, interaction is the suitable condition for Tina in order to develop her melodic features and secondly communication is facilitated by support in order to enhance her musical presence.

MUSIC EXAMPLE 34: Communication

In Episode 9 therapist and client construct collaboratively a musical event based on harmonic and rhythmic patterns, (i.e. measures 2-5). In Episode 23 the client's melodic descend (see measures 18-28) creates a harmonic base line which functions as an accompaniment to the therapist's melodic line.

6.4 Conclusions

In this section the musical analysis' results are integrated with the therapeutic themes of the fourth chapter and conclusions derived from this integration are presented.

Musical analysis showed a significant shift in terms of melodic features in the 5th session where Tina developed almost her entire musical material and utilized elements of it in the improvisations of the following sessions. In other words, the therapeutic process is divided in two periods in terms of musical evolution:

The first period involves sessions 1-4 and the second involves sessions 5-10 -with the standpoint of the 8th session where Tina's solo takes place (see figure 2).

FIGURE 2: Temporal integration of musical categories and therapeutic themes

Analytically, during the first period (sessions 1-4) the obscure form of the melodies (category 'blending in') and the inflexible melodic structure (category 'inflexibility') expresses her nervousness towards musical improvisation which is also verbalized in terms of her difficulty to start the musical interaction. On the other hand, as the gradual increase of the improvisation's duration indicates (see Table 10) this initial period familiarized Tina with this new means of communication and expression and enabled her to engage deeply in the music during the 5th session's very long improvisation (40'35''). During this improvisation a musical

shift occurred as ten of the overall twenty four episodes emerged, each of them involving unique musical features demonstrating this change.

TABLE 10: Duration of the Mallet Kat's improvisations (sessions 1-5).

Session	1	2	3	4	5
Duration	6'10'', 8'24''	9'06''	7'53''	14'32''	40'35''

Tina experimented in all the musical parameters of rhythm, form, contour (category 'expression') and she had the initiative in most of the episodes (category 'initiative'). The 5th session is also a standpoint for the therapeutic process as it generated the diary excerpt revealing the 'transition phase' she was going through.

Afterwards, the results showed that there is not a linear musical evolution in terms of temporal continuity; rather the new melodic elements (of the 5th session) kept supplying the melodic material of the following sessions. During the rest of the sessions (6-10) and as the episodes' categories indicate she extended further the melodic qualities which first emerged in the 5th session. At the same time she processed further the 'transition phase' until finally closing it, as was indicated by her reference to her readiness for a new start in the 10th session. Analytically, this 'transition phase' was explored further in the 7th session by listening to a musical excerpt from the 5th session, in other words, episode 10. During the 10th session she described her current state as being out of this phase and ready for a new start which she has envisioned within the improvisation.

Moreover, the emotional opening during the 9th session where she reflected on the source of her frustration -her failed attempts to reconcile different parts of her body ('vicious cycle')- was a peak point in terms of the therapeutic process; it indicated a shift as she tried to mentally process and express simultaneously the cause of distress. This shift occurred after the similar important shift in the musical performance of the 5th session. These two shifts (one in the verbal domain, the other in the musical domain) when locating them across the temporal continuum of therapy manifest how the earlier intense musical process was followed afterwards by a similar intense psychological process.

Summarizing, the analogy between the two experiences (musical and psychological) is obvious in the following ways:

There is an analogy between: a. the melodic evolution which started during the 5th session until the 10th session and b. the mental processing of the 'transition' phase which she described after the 5th session's improvisation, until the 'exit' from it as she reflected during the 10th session.

On the other hand, there is an analogy between: a. the unique musical material of the 5th session, which was processed further during the 8th session -(categories 'extending', 'introvert')- and b. the reflection about the 'frustration from a vicious cycle' as well as the 'attempt to 'reconcile different parts of her body' during the 9th session.

Consequently, Tina's opening in the 5th session's musical performance is analogous to the emotional opening of the 9th session's reflections. Therefore, as the musical performance's shift preceded the emotional opening (psychological shift) this study's hypothesis seems to be confirmed. Finally, a significant contribution to Tina's further mental and emotional processing had certain bodily sensations (aches in head and back and tension in the throat) which were invoked during or after clinical improvisation, by her musical experience.

7 DISCUSSION

The role of musical experience within an individual therapeutic setting has been constantly and still is an essential topic of music therapy research; particularly the potentiality and effectiveness of clinical improvisation. A central goal of this area of research is the unveiling of the various mechanisms with which music contributes in therapy. Naturally, the achievement of this goal reinforces music therapy's effectiveness, since music is the primary therapeutic tool in this kind of therapy.

The present study investigated clinical improvisation's therapeutic potentiality and effectiveness within a case, taking into consideration not only previous findings but also the optimal conditions which these studies formulated as suitable for this kind of research. Additionally, the theoretical framework of this case-study is grounded also on the ecology of concepts and ideas which were defined from previous music therapy research. Consequently, the following concepts which stem from previous music therapy research formed the framework of the assessment, analysis and evaluation of the present study's data:

Melody's independence and entirety was presented in the Therapeutic Narrative Analysis (Aldridge & Aldridge, 2008) demonstrating melody's potential in the comprehension of musical performance within improvisational music therapy. Having melodies as musical data enhanced the assessment and evaluation of free improvisations, including simultaneously all the features from the musical performance. On the other hand, the therapeutic settings as formed within the IIMT model (Erkkilä, 2016), which was created in a RCT study for depression (Erkkilä et al., 2011), were optimum for generating melodic improvisations. Playing on identical midi-xylophones, utilizing music as a symbolic means of expression and communication, both combined with reflection and mental processing in the verbal domain, provided the optimal conditions for deploying melody's therapeutic qualities. Similarly, the other essential aspect of the model –meaning the listening back to the improvisations-enhanced the creativity and further processing of the emergent therapeutic issues. All the above formed the suitable setting for investigating the melodic evolution of the client in the course of therapy.

For the analysis of the musical data, previous research in music therapy (Aldridge & Aldridge, 2008 and Abrams, 2007) has shown the benefits of the Repertory Grid Analysis (Kelly, 1995) in the validation of qualitative research which is hermeneutic in its core. The present study added in that part a musicological approach (the segmentation of melody) trying at the same time to stay close to the musical performance and the concept of 'episode' as presented in the Therapeutic Narrative Analysis (Aldridge & Aldridge, 2008). A secondary aim of the analysis was to stay as close to the musical features as possible while avoid metaphors in describing the musical performance. As explained in the results section, music has many attributes, one of them being musical meaning; within this perspective the elicited constructs as well as the categories of both constructs and episodes were nothing more than musical features (i.e. tempo, articulation etc). This promoted the association between constructs and elements and clarified further their connection. It is also in accordance to the design of the grid in terms of that if elements are considered objects, then constructs are the qualities of the objects (Easterby-Smith, 1980). In this study elements were melodies and constructs musical features.

Nevertheless, the inconsistency in the association between certain episodes' categories (initiative and expression) and the constructs' categories (determination), as reported in the results section, may indicate a weakness in the grid's design. There can be several explanations for this:

Firstly, this may be due to the type of linkage between constructs and elements which in the present study was rating. Although rating has many advantages which I presented in the methodology section, it does not provide the same level of discrimination on constructs as ranking does, (Easterby-Smith, 1980). Secondly, another reason may be the fact that the link between element and construct in whatever form, shows the interpretations of the individual who performed the rating, (Tan & Hunter, 2002). From this perspective this could indicate a bias as the analyzer and therapist is the same person. Thirdly, another explanation for this inconsistency may be the nature of the constructs being very permeable (i.e. the presence or absence of pulse), while literature indicates against the excess in the permeability of a construct, (Fransella et al., 2004). However, the nature of the musical material eventually determined the nature of the elicited constructs. Due to this determination the constructs represented better the elements (improvised melodies).

Still and regardless the weaknesses mentioned above, the overall matrix was not distorted and provided insights of the melodic evolution across the whole process. In order to be distorted it would have taken a systematic design to be engineered towards that end by the analyst, (Abrams, 2007). Therefore, the RepGrid method can be a valuable tool in constructing the continuum of a musical performance within a therapeutic process. The revealing of patterns in the musical material provides an overall view of the music's gradual transformation across therapy. In that way it is a useful tool for the validation of the researcher's interpretations as to the musical events of the clinical improvisation and how these evolve in the temporal continuum of therapy.

In order to discover the effectiveness of clinical improvisation in the course of therapy this study aimed to reveal the client's melodic evolution as connected to the shifts in her core-self across the continuum of the therapeutic process. The connection between psychological and musical processes was facilitated by some features of the integrative approach of the therapy design (IIMT model): the present moment as a starting point for musical performance and the listening-back to some excerpts of the improvised music. These enhanced a self-monitoring of the client's current state (both physiologically and psychologically), facilitating at the same time verbal reflections and further mental processes. Moreover, they enabled the further progressing of the musical material via images and bodily sensations. Therefore, verbal reflections remained tightly attached to musical events, either invoking them or emerging from them. The close relation between these two different experiences (musical and verbal) in the course of therapy indicates an isomorphism between them. This is in accordance with the concept of "regarding the identity of a person as a musical form that is continually being composed in the world", (Aldridge, 1989, p. 91).What further reinforces the existence of isomorphism between musical and psychological events is music's relation to time (Lehtonen, 1997).

The integration of the results of the analysis with the therapeutic issues as appearing from the other sources of data (video recordings, transcripts etc) was attainable by embracing the concept of analogy as presented in the Theory of Analogy by Smeijsters, (2005). According to the results, shifts in the musical performance preceded the shift in therapy. Although causality between clinical improvisation and therapeutic evolution was not proven by the present study,

this temporal relation may indicate such a connection. Mainly, the results direct towards the isomorphic relation between music and self within clinical improvisation.

Albeit the complexity of these phenomena (musical and lived experience in therapy) may allow only a hermeneutic, constructivist approach in research, the Repertory Grid Analysis (Kelly, 1995) provides the potential of broadening the research scope beyond a case-study. The possibility of comparing grids with identical constructs in order to investigate the differences or similarities between them, (Easterby-Smith, 1980) enables the researcher to explore musical evolution within different music therapy processes. Furthermore, within the theory of analogy (Smeijsters, 2005) certain clinical groups may use certain musical parameters to express themselves during musical performance. In this case the methodological tool of Repertory Grid Analysis (Kelly, 1995) may offer valuable insights in the improvisation of these clinical groups revealing simultaneously the nature of the musical material created.

Finally, in terms of future implications I believe that improvisational music therapy has vast potentials for researching effectiveness of clinical improvisation as a therapeutic tool. It is a research area of great significance because it can give prominence to the fundamental feature which differentiates music therapy from all the other therapies; that is music.

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Appendices

Appendix 1 - Whole excerpts from the sessions' transcriptions

Quote 1

Ourania   do you want us to start playing with something and then talk about it and you can ask me anything? TC   00:28:09.534 - 00:28:18.571

Charlotte   I just really don't know what to do! TC   00:28:18.464 - 00:28:28.368

Ourania it doesn't matter because I will give you instructions and we can play together so you don't have to worry. And these are a very simple instrument that is why I thought you could start with them. Either these or the drums. I don't know which would you like first to play percussions, to play some rhythm with me or these (mallet-kats) TC   00:28:22.054 - 00:28:47.569   (1.86)

Ourania   and um... we use these mallets. you can experiment. To see the sound. TC 00:28:49.431 - 00:29:04.040

Therapist comments   I could feel her nervousness and so I introduced her with two mallets and not one, as I have planned in the first place. TC   00:28:59.900 - 00:29:00.000 (3.94)

Quote 2

Ourania   ok, if you want we can play again, and um... You can start so that I can just accompany you. TC   00:41:06.420 - 00:41:28.625   (0.12)

Charlotte   how can you accompany me, when I'm doing, like.... uh... how to say?! TC 00:41:28.754 - 00:41:45.050

Ourania   I can see what you are playing and I can fit my playing exactly. Because now I didn't do that. TC   00:41:44.161 - 00:41:53.466

Charlotte   yeah, but if I don't have any structure, how can you know what I'm doing, because I'm gonna be unpredictable. TC   00:41:49.858 - 00:42:02.922

Quote 3

Ourania   so your feelings were.... while we played you know, these notes that don't go together, the dissonance thing. TC   00:39:43.364 - 00:39:55.760   (3.29)

Charlotte   That's the feeling… like… you kind of like.... (Khhhh....) hold back...Uh I'm doing something wrong. (Smiling) TC   00:39:59.058 - 00:40:10.538 (0.04)

Ourania   Yes. Holding back you mean! TC   00:40:10.580 - 00:40:14.761

Charlotte   Yes because it sounds stupid to do something that doesn't sound right. TC 00:40:14.490 - 00:40:31.218

Quote 4

Ourania   Ok so close your eyes, and try to focus on that beach and your friend sailing in the Caribbean and… when you have this image in your head, you can… at any time you can start. TC   00:24:13.519 - 00:24:48.724   Ourania   and I will join you. TC   00:25:02.280 - 00:25:04.119   Charlotte/Ourania   It's always a bit… I think the last time… It's always a bit awkward to start, I don't know. TC 00:25:09.652 - 00:25:17.885

Ourania   Do you want me to start? TC   00:25:17.561 - 00:25:22.637

Charlotte/Ourania   uhmmm.. Yeah. TC   00:25:21.458 - 00:25:23.333

Quote 5

Ourania   well we can play that frustration if you like. The way that you feel after the creativity test. TC   00:37:08.400 - 00:37:28.106

Charlotte/Ourania   Yes ok. TC   00:37:12.900 - 00:37:19.920

Charlotte/Ourania   I really don't like to start.... I don't like the start.   TC
00:37:46.034 - 00:37:55.931

Quote 6

Steps   first improvisation on malletkats started TC   00:23:57.600 -
00:24:01.361   Steps   first improvisation on malletkats ended (40
minutes long) TC   01:04:31.342 - 01:04:37.703

Ourania   HUH... how was it? TC   01:04:44.628 - 01:04:50.763

Charlotte/Ourania   (smiling)... It was good. TC   01:04:50.420 - 01:04:56.572
(0.04)

Charlotte/Ourania   Yes it was TC   01:04:56.617 - 01:05:03.486

Ourania   it was a very long improvisation. TC   01:04:59.540 - 01:05:06.820

Ourania   how do you feel? TC   01:05:11.510 - 01:05:16.850

Charlotte/Ourania   uh... I feel good. Yeah. TC   01:05:12.330 - 01:05:17.367

Ourania   you feel good?! In comparison to when you came? TC
01:05:17.420 - 01:05:20.567   Charlotte/Ourania   (smiling)...this morning when
I came here, I felt I don't have any appetite and didn't have food in the fridge. I was thinking
uh when I go home I would eat something. Because when I'm not like ... depending on my
appetite I can tell if I am like... like ... motivated or not. And when I'm not really motivated I
don't really.... cook or eat too much. But now at the end I was like... uh ... actually I'm gonna
stop by the shop to buy something so that I can cook something to eat. TC
01:05:20.973 - 01:06:19.572

Ourania   Interesting. So now you are more motivated! TC   01:06:18.975 - 01:06:25.344

Charlotte/Ourania   Aha! TC   01:06:22.749 - 01:06:26.452   (0.05)

Quote 7

Charlotte/Ourania   so I kind of feel like… I feel like I'm just in this transition phase. When I'm kind of walking through a corridor. And I'm just observing that "uh... ok, that's ok, it's fine". TC   00:30:16.290 - 00:30:33.743

Ourania   uh, in the end of the corridor, what do you want to have? TC 00:30:33.575 - 00:30:44.278

Charlotte/Ourania   I don't know. TC   00:30:42.070 - 00:30:48.267

Ourania   what would be ideal for you? TC   00:30:48.804 - 00:30:53.731

Charlotte/Ourania   Just like… starting like again. TC   00:30:56.108 - 00:31:07.040

Ourania   A new start? TC   00:31:02.750 - 00:31:07.050

Charlotte/Ourania   Yeah. Like a kind of new skin. TC   00:31:07.890 - 00:31:21.520

Quote 8

Steps   D-jembe improvisation ended TC   00:37:01.200 - 00:37:03.399

Charlotte/Ourania   [quietly] I could continue.. TC   00:55:30.223 - 00:55:33.374

Ourania   Say again?!

TC   00:55:32.250 - 00:55:36.972

Charlotte/Ourania   I said I think I could continue for hours. TC   00:55:34.777 - 00:55:38.201

Charlotte/Ourania   I don't feel bad. TC   00:55:39.912 - 00:55:42.667

Ourania   how do you feel? TC   00:55:41.070 - 00:55:47.063

Charlotte/Ourania   .... long pause. I don't know, I just feel good. TC 00:55:46.779 - 00:56:07.731

Charlotte/Ourania   Yeah. TC   00:56:17.536 - 00:56:21.768

Ourania   What was your starting point? TC   00:56:22.625 - 00:56:27.140

Charlotte/Ourania   I have these aches in my back and my head… It's been there for a while. TC   00:56:24.980 - 00:56:30.471

Ourania   How long? TC   00:56:29.180 - 00:56:31.883

Charlotte/Ourania   uh... I started to notice them around 2013 TC   00:56:36.234 - 00:56:52.478

Ourania   AHA! TC   00:56:50.498 - 00:56:54.371

Charlotte/Ourania   I think they were quite bad when I noticed them, because I was too tensed, completely, in my body. And when I kind of tensed, then it started [pointing to the back of her neck], and I have tried to make them go away with [not clear]. TC 00:56:53.422 - 00:57:12.546

Ourania   How did you try to do that? TC   00:57:11.220 - 00:57:14.973

Charlotte/Ourania   uh... it's kind of my thing. TC   00:57:14.203 - 00:57:20.123

Ourania	What em....? TC	00:57:17.220 - 00:57:21.745

Charlotte/Ourania	Like… therapy or something. TC	00:57:20.617 - 00:57:26.841

Ourania	Ah OK! How do you feel? Are they still there after playing? TC 00:57:26.409 - 00:57:33.105

Charlotte/Ourania	Yeah. TC	00:57:28.200 - 00:57:34.513

Ourania	If you can spot a difference before and after, what would it be? TC 00:57:34.634 - 00:57:41.136

Charlotte/Ourania	uhm...um... regarding the points, not really. They kind of, suddenly they come strong, and then they leave... Otherwise maybe playing makes me feel more, straight and present. TC	00:57:40.920 - 00:58:35.507

Ourania	Present? OK! TC	00:58:35.055 - 00:58:38.755

Charlotte/Ourania	Yeah. TC	00:58:36.820 - 00:58:38.355

Ourania	How did you feel in the music? TC	00:58:41.335 - 00:58:50.375

Charlotte/Ourania	It's hard to say, I don't really know. I know I like it, I can do it forever. I mean, if we have to stop I could still continue. But I can't really say it makes me feel happy, it doesn't make me feel sad, it doesn't makes me feel something special, I just... TC 00:58:49.772 - 00:59:17.336

Ourania	aha! TC	00:58:52.678 - 00:58:55.053

Ourania	(smiling) TC	00:59:00.497 - 00:59:02.871

Ourania	But you said you feel present, I think it's quite… strong! TC 00:59:09.968 - 00:59:23.253

Ourania   So because, so you weren't the observer? Or you were? TC
00:59:28.350 - 00:59:42.561

Charlotte/Ourania   uhm.. No. TC   00:59:42.882 - 00:59:50.029

Ourania   you weren't observer now, that we played? You were more present? And
how did you feel about our dialog, how does that feel? TC   00:59:44.700 -
00:59:59.570

Charlotte/Ourania   well... I didn't like it when you stopped. TC   00:59:58.982 -
01:00:03.299

Ourania   You didn't like it!!! At all??? When I paused it? TC   01:00:02.800
- 01:00:08.464

Charlotte/Ourania   Yeah TC   01:00:04.550 - 01:00:09.417

Ourania   Why, do you think? TC   01:00:09.060 - 01:00:12.159

Charlotte/Ourania   because I felt... I felt alone. TC   01:00:13.456 - 01:00:20.481

Ourania   because you felt alone? TC   01:00:18.620 - 01:00:22.386

Charlotte/Ourania   um... Yeah. TC   01:00:23.140 - 01:00:30.209

Quote 9

Charlotte/Ourania   Yeah, uhm, but then I can't tell why! Like yesterday I was in class, and
the teacher was asking about something, if we wanted to talk about during the class, this new
class we have. I had this idea but I wasn't sure how to formulate it, to put words on it. So I
didn't talk about it, because I couldn't find words. But the thing is, if I would have done that
in front of everybody and talked, I could have done that without any problem. I could have
even said something even if I didn't really know what I was saying, if I was with everybody.
Because I feel that if the other people are there, it makes it more safe or something. And then

the class was finished and I still had this idea in my head, but I still didn't know how to put words on it. I was about to go out, I took my jacket and I was standing next to the teacher. And then I said spontaneously, "oh, I still have this idea". And there, suddenly, I felt this tension. TC   00:46:48.433 - 00:48:23.012

Ourania   in your body? Where did you feel that? TC   00:48:21.588 - 00:48:30.049

Charlotte/Ourania   In the throat... yeah throughout… even when I was a kid...it's always the throat, yeah, I would say from here to here [moves her hand from her solar plexus to her jaw]. TC   00:48:25.625 - 00:48:43.417

Ourania   Yes. Sometimes, when playing with music, like last time you said that… when I didn't play you felt lonely. Sometimes um... things happen within the music that we have it in real life, so the process is like… if you stop feeling lonely when you are playing alone, it would have some effect on your everyday life. So it's like when you navigate the boat and you have to make quick decisions, so when you learn to do that in the sea that somehow um... projects into your everyday life. For example, you said that you navigate the boat, so I can imagine that you can make decisions very quickly and your minds work in many ways and you can see the problem from all around. So if we can um... go to the djembes and you can build the tension in your throat and maybe you can have, actually, the thing that happened yesterday in the music, where I can be the teacher and you can try to say something to me. TC   00:48:44.811 - 00:50:37.490   Charlotte/Ourania   Because I know it's something… I know that suddenly I'm kind of alone, on my own, expressing my idea. And for a reason I don't know... TC   00:50:38.219 - 00:51:18.484

Quote 10

Charlotte/Ourania   So that's me who is trapped, and I have no space between me and the others. When I'm alone and I can do my things then I don't care, because I have space to do both. And when I feel panic or trapped, it's because my boundaries are set by the others and I don't have space. So I wanna kind of.... [showing with her body, putting her hands around herself], like kind of close myself and become like a ball so I can get space.   TC 00:32:37.987 - 00:33:44.290

Ourania   So the ball gives you more boundaries? TC   00:33:21.038 - 00:33:26.974   Charlotte/Ourania   Yeah it gives me more space. It's the only answer I can find, because that's when I panic, because there's no space, but I only panic when I'm alone and there's a boundary set by someone else.

Charlotte/Ourania   because if I'm ... or if I'm...if there's someone else... and I know what I can do, or I know the environment, or something, I can take this space to evolve, I can settle by myself, but if I'm in a unfamiliar place or something, and I don't have the space to evolve, and the others are close to me, or I'm in a position where I can't evolve, that's when I panic. I always need this space, like I know I'm able to back off. If I feel that I'm too surrounded or.... yeah.... if I can't, that's the position I don't like to be in. TC   00:33:45.074 - 00:34:45.044

Charlotte/Ourania   em...(throwing up her shoulders)... I kind of imagined, when you get this feeling of being trapped, kind of the vision, like a dark thing is coming, [showed it on the malletkats with playing few notes] this was it… like stretch out to hold the walls, (holding her hands up) like "nooo...I'm keeping my space". Yeah! TC   00:46:29.288 - 00:47:18.091

Ourania   Did you manage to do that? TC   00:47:17.517 - 00:47:22.401

Charlotte/Ourania   Yeah I was like kind of… creating points to keep the space open. [Keeping her hands up and pointing on the keys of the malletkat to demonstrate how she was creating those points] TC   00:47:18.738 - 00:47:31.537

Quote 11

Ourania   Do you want to try a little bit with djembes? This thing? To have the dialogue? You know the role play that we tried before. You can test that also in there TC 00:50:36.267 - 00:50:51.459

Charlotte/Ourania   OK! TC   00:50:49.702 - 00:50:52.665   (36.58)

Ourania   OK I will start and em... when I stop you will come and say something to me, and don't worry about the time, I will give you a signal in the music to show you to stop. TC 00:51:29.250 - 00:51:50.819

Steps   the Djembe improvisation started TC   00:51:47.419 - 00:51:50.021
(405.36)

Steps   The Djembe improvisation ended. TC   00:58:36.182 - 00:58:38.610
(11.05)

Charlotte/Ourania   I kind of feel I was like a.... There were people that gather together, making a round, and there's a space in the middle [she pointed to the round surface of the Djembe] where people go dancing. TC   00:58:49.662 - 00:59:05.347

Ourania   Yes! Like you were dancing. TC   00:59:03.500 - 00:59:07.269

Charlotte/Ourania   Like, you know… Like in turns. Like we are doing. TC 00:59:05.841 - 00:59:19.682   (1.46)

Charlotte/Ourania   I was the music, like the music was, I was the music, the music took shape. Instead of playing something, I became what I'm playing... I WAS the music. TC 00:59:21.144 - 00:59:48.023

Ourania   So you were in the music? TC   00:59:41.045 - 01:00:00.842
Charlotte/Ourania   I WAS the music.

Ourania   You WERE the music. Uh. Yes! I felt like that. Dancing was very accurate, what you said.

Ourania   So did you do this... uhm....? TC   01:00:03.137 - 01:00:09.257

Charlotte/Ourania   yeah because... I could feel like for example, when you started playing, it was kind of like, OK, there all these people and the circle, and you are playing, so you are in the middle, doing it. And I know that it's gonna be my turn, and I don't want to go in because

I feel scared, because I'm not familiar with that and I kind of feel like, I was preparing myself, because I knew I was gonna go. So even if I wanted to be like "No! [I don't want to go]", I was telling myself, OK, [showing the Super-woman pose] that I can do it. TC 01:00:08.617 - 01:01:12.300

Ourania   Do this [imitating the pose]? Yes! (Smiling) TC   01:00:49.635 - 01:00:59.042

Charlotte/Ourania   So I was going to be pushed in, so I managed to go in confident and not like that [showing with her body hesitating].

Ourania   Yes you played very good! TC   01:01:09.496 - 01:01:16.454

Charlotte/Ourania   So I was trying to go confident, and don't have that… kind of… TC 01:01:15.321 - 01:01:28.782

Ourania   So it worked, OK very nice. Thank you! TC   01:01:28.771 - 01:01:35.902

Quote 12

Charlotte/Ourania   yeah I mean it always happens because of a conversation, or a conversation that… I can't talk because I'm not able to, because the throat goes tight and tighter and at some point… I know

that if I continue to talk and I kind of loosen my throat, the next step is that I cry. So I cry a lot (laughing)... since I was small. I think crying is just a way of re…   TC 00:22:56.014 - 00:25:54.752

Ourania   Releasing. TC   00:23:35.730 - 00:23:38.731
Charlotte/Ourania   Yeah, because that's how it happened. Because when I was a kid and I used to cry… I remember in school people used to make fun of me because I was crying. so that's when I started to, instead of crying, I remember like closing my throat kind of ... I remember doing it really really hard, like concentrating really hard not to cry. So instead of

crying it all went in my throat. So it's like this huge ball in my throat. I don't have this ball that I used to have before, now it's never as strong. But I remember that it used to be very strong, it would hurt a lot. And that was because I couldn't cry, then all my tears went here [pointing at her throat]. But then like... yeah now I don't want to cry, so I'm trying to find another way, which is not crying, but not keeping it into my throat. So yeah now actually lately I have learned how to breathe, so I think that's the answer... Because when I was doing this I realized that I was not breathing, and a few years ago I started to do different things, and someone told me you are not breathing, and since then I went to a breathing session thing and I was like, this is really boring, but one time there, I was just breathing and suddenly everything was just… I was… I was feeling fine but suddenly I had to cry, and I cried and I cried. I didn't know what was happening but I just had to let it go, because I guess… I think… I started to breathe again, because... well I was breathing to keep me alive but I don't think I was really breathing... But now I think that's the solution, the breathing.

Ourania   So from last year you tried to have the solution or when did that change? TC 00:25:55.392 - 00:26:42.284

Charlotte/Ourania   No that's been for few years, you know it's a long process. TC 00:26:01.371 - 00:26:06.194

Ourania   And during the time that you're here, and you go through all these phases, being in a foreign country… Because you mentioned observing the environment and all these things… Do you connect this, holding your breath or… to that? I mean, did it…? Because you said now that sometimes you also have a sore throat. It didn't go away.

Charlotte/Ourania   Yeah, no it's still like… Now it's like less, it's not as present as it was before. Now I can have a better control on it. I try not to go against it, but to kind of accept it. And now I like to try to breathe. I like to breathe deeply to make it go, but it doesn't always work. That's why last time I was thinking maybe, you know, the other thing, to think I'm strong [showing the "super-woman" pose], to think that this is a protection shield. So to keep it away from me. That's like, you know, I have to coordinate. TC   00:26:40.215 - 00:27:20.820

Ourania   Yes. So this is uh... the new thing. And can you connect some, uh... when you have this feeling, I mean, what's the emotion? TC   00:27:17.713 - 00:27:32.378   Charlotte/Ourania   No.... I don't know... but once I was talking to my osteopath, I was talking about this time when I uh... I had like a ... it was kind of stressful because I was going somewhere and I was really exhausted physically, and out of breath, and I went to the train station I had my big big bag pack and I wanted to leave it at the train station, and my bus would leave at midnight, so I wanted to leave my bag there. I went to the counter and suddenly I realized that… actually the train station. I had asked this woman if I could leave my bag there the day before, and she said "yeah yeah no problem"... so I came with my super big backpack, super heavy and came there like in the afternoon and said can I leave my bag here? And suddenly I realized that the train station closes at 10 and I had my bus at 12. So I went there and said that I wanted to leave my bag here and you said I can leave my bag here but it seems that actually you are closing at 10 and she didn't tell me that [raised her voice, getting emotional remembering the moment, talking much faster and stronger]. So I was really upset. And at that point like… yeah it was like... [bitter smile]... it...I went to talk to the lady, and I was super upset and there I cried and I was like .... But I'm upset because I cry [29:03- Charlotte started crying in the session]. TC   00:27:33.584 - 00:29:03.101

Ourania   Yes, so you don't know if you are upset because... [Deep sigh from Ourania, deep breath].... Yeah [nodding] TC   00:29:02.140 - 00:29:10.539

Charlotte/Ourania   [still crying] yeah...

Ourania   Yeah.... No no, I can understand you. TC   00:29:11.998 - 00:29:25.306

Charlotte/Ourania   So... What I wanted to say… I was talking to my osteopath who I know, and I don't want this to like… I don't want this to happen (her voice is very broken , she can't talk clearly because of crying)... It annoys me, why do I react like that? Because in the end I don't give a shit, it doesn't matter, like it's not such a huge big deal, I just found another solution and that's fine. And the thing is that I don't care about it, but I can't help myself to… it was like such a strong reaction but at the same time I don't care, I really don't care! I was then super annoyed, but at the same time I was like, you know… I just found another… I just left it in the restaurant next door, and it was fine, but... And I know, my osteopath was saying

"yeah how did you feel?" And I said I don't know. She said "did you feel like you were kind of…?" uhm.... I just said I wanted someone at that point to say "it's ok!".... So she said you just wanted someone to secure you, and I said, yeah I just felt like a kid... So I told you already, that I don't feel secure, but it's hard to say the feeling. I just feel panic. TC 00:29:05.449 - 00:31:13.300

Ourania   So... it's like... what I have been hearing from you, it's like, one part of you, yes, of course, thinks that it's OK that you can have another solution, and you are able to do that. But another part of you has this reaction, these feelings, these emotions that come from inside you. TC   00:31:11.725 - 00:31:42.606

Charlotte/Ourania   TC   00:31:39.053 - 00:31:40.403

Charlotte/Ourania   Yeah I know that it must be uhm... it must be something from when I was younger. Maybe I didn't have enough… just people to just tell me it's gonna be OK. But I know, I know it's gonna be OK. So I don't know like.... And I'm annoyed because I can't get out of this pattern, which is really... I can't move forward, it's like retaining me backwards, I feel like I'm not totally free! TC   00:31:40.940 - 00:32:24.738

Quote 13

Ourania   uhm... Can you spot a feeling that was in the music? TC 00:41:50.931 - 00:42:01.664

Charlotte/Ourania   em...   TC   00:41:59.777 - 00:42:10.005
Charlotte/Ourania   I couldn't spot a feeling, but I was thinking about a reconciliation. TC 00:42:11.292 - 00:42:23.106

Ourania   Reconciliation? Of what? TC   00:42:18.597 - 00:42:27.675

Charlotte/Ourania   Between the different parts of my body I would say. TC 00:42:25.857 - 00:42:34.725

Ourania   How do you feel after this reconciliation? I mean is it different before and after? Did it have any effect? TC   00:49:34.797 - 00:49:47.049

Ourania   Because you tried to make friends with this part that annoys you, that's why. Did it work somehow or not? TC   00:50:07.424 - 00:50:18.607

Charlotte/Ourania   No, it's not going to work. TC   00:50:19.850 - 00:50:25.066

Ourania   (smiling) TC   00:50:24.797 - 00:50:25.966

Charlotte/Ourania   but I mean it's the first step, but if I'm not open it's not... TC 00:50:25.609 - 00:50:37.138

Ourania   I think it's a very good step. TC   00:50:34.009 - 00:50:47.261

Charlotte/Ourania   but it's not new... TC   00:50:38.223 - 00:50:46.490
Ourania   You tried to reconcile in the past?

Charlotte/Ourania   Yeah.

Quote 14

Ourania   OK. TC   00:50:47.450 - 00:50:49.050
Charlotte/Ourania   That was very very frustrating. TC   00:50:49.696 - 00:50:57.622

Ourania   That's an emotion, frustration!!! TC   00:50:56.220 - 00:51:02.212

Charlotte/Ourania   I think I feel a lot frustration, I think it's one of the top emotions I feel, if that's an emotion. Because I feel like, I think a lot, in relationship I have to others, about disappointment. But then, disappointment, I feel it like frustration. TC 00:51:01.366 - 00:51:42.414

Quote 15

Ourania   From this process, things that you take for yourself and bring it home? TC 00:28:21.024 - 00:28:31.345

Charlotte/Ourania   uhum! TC   00:28:27.360 - 00:28:30.955
Charlotte/Ourania   It's funny because I think um... I will keep the corridor image. Because em.... this is like the third image I have.... I don't know how to explain but there is a place in my mind, it's kind of my place, it's like a safe place. And there is another one I have, this other one I think I created when I was doing the art therapy and I still have it.   TC 00:28:34.320 - 00:29:20.191

Ourania   That's very nice.... And em... so now that you are going home, you are maybe going to open the door of the corridor? TC   00:29:21.178 - 00:29:36.334

Charlotte/Ourania   I think I am already out of the corridor. TC   00:29:35.159 - 00:29:49.293

Ourania   Yes. Would you like to play that? TC   00:29:38.403 - 00:29:46.438

Charlotte/Ourania   I can, but it's like a phase, and I just got out.

Ourania   Yes. We never played, I think, the new start. TC   00:29:47.476 - 00:29:58.923   (1.06)

Ourania   Now that you said this phase is over and there is a new start in front of you, would you like to explore that? Maybe there would be something to take with you also? TC 00:29:59.986 - 00:30:27.810

Charlotte/Ourania   uhm... Yeah. TC   00:30:26.224 - 00:30:28.200

Ourania   and you can use the pedal TC   00:30:34.787 - 00:30:56.463

Steps   the improvisation started TC   00:31:16.288 - 00:31:22.055
Steps   improvisation ended (Charlotte hit a key on Ourania's side to make the ending)

TC   00:38:48.764 - 00:38:53.985

Ourania   [laughing]... You had to do that? TC   00:38:54.064 - 00:38:58.750

Charlotte/Ourania   [laughing].... Yeah why not, it's the last time!   TC 00:38:56.970 - 00:39:01.362

Ourania   [laughing] To conclude, at some point. That was nice, I liked it very much! TC   00:39:02.255 - 00:39:17.554

Charlotte/Ourania   You know the movie "The secret garden"? TC   00:39:20.240 - 00:39:24.274

Ourania   em... No! But tell me about it. TC   00:39:23.384 - 00:39:32.248

Charlotte/Ourania   You can look it up. It's about two kids who live in this old and really big mansion. TC   00:39:24.755 - 00:39:28.116

Charlotte/Ourania   It's an old movie but it's not from long time ago. The children discover a secret garden and em... The garden is abandoned. I don't know, I had this image now. The secret garden… going out of the garden...

Ourania   So they share a secret place? TC   00:40:27.731 - 00:40:34.323

Charlotte/Ourania   That's my story. Then at the end, there is a new start. But you don't have to understand… TC   00:39:30.543 - 00:40:49.743

Ourania   No... No... No... I want to. Please! So you connect this to how we played? TC 00:40:42.263 - 00:40:52.844

Charlotte/Ourania   I had the em... I was thinking, like... so if I am going out of this, out of this corridor in this big house, if I go out, it's summer and I would like to explore through the garden, and then I came to this river. I took the boat, the rowing boat to go to the other side.

And from there, that's the end, the new start. This basically made me think of "The secret garden" that I used to watch when I was a kid. TC   00:40:50.272 - 00:41:35.778

Ourania   So are there people waiting for you on the other side? TC
00:41:36.209 - 00:41:43.265

Charlotte/Ourania   [laughing]... no, not at all! TC   00:41:40.608 - 00:41:47.072

Ourania   You don't want to? OK.

TC   00:41:47.572 - 00:41:52.221

Charlotte/Ourania   [laughing] TC   00:41:48.555 - 00:41:54.831

Ourania   So you are a lonely traveler? You said that before. TC
00:41:53.169 - 00:42:02.088

Charlotte/Ourania   I don't want to be dependent on others. TC   00:42:00.832 -
00:42:07.251

Ourania   uhum... TC   00:42:03.010 - 00:42:05.823

Ourania   but to share something? TC   00:42:06.533 - 00:42:11.999

Charlotte/Ourania   Of course, but not dependent. Especially not affected... TC
00:42:10.100 - 00:42:22.976

Ourania   to affect? TC   00:42:20.866 - 00:42:25.913

Charlotte/Ourania   Yeah, emotionally. TC   00:42:23.940 - 00:42:28.971

Ourania   uh... not to be dependant emotionally? TC   00:42:26.681 -
00:42:36.241

Charlotte/Ourania   Yeah! TC   00:42:29.700 - 00:42:32.596

Ourania   So you don't want others to affect your emotions but I think you also... Do you affect other people's emotions? TC   00:42:38.106 - 00:42:52.158

Charlotte/Ourania   Yes, but I don't want to be dependent on… I don't want to be driven by my emotions. TC   00:42:50.010 - 00:43:00.230

Ourania   Yes... so... TC   00:42:58.584 - 00:43:03.678

Charlotte/Ourania   I can accept my emotions but I don't want my emotions to overcome my own reason, my self.

Ourania   I understand. TC   00:43:16.983 - 00:43:21.840

Charlotte/Ourania   I don't want my emotions to make me lose control, so I don't want to be dependant. I want to be able to control myself. That doesn't mean having no emotions, just to be able to accept my emotions

than to control. To make them like circulate, and not destroy, or overcome me. TC 00:43:04.296 - 00:43:42.363

        Charlotte/Ourania   They can live but they don't have to be too much, like excessive. TC   00:43:43.667 - 00:43:54.816

Appendix 2

Therapist's form, number 1

MUSIC THERAPIST'S SESSION NOTES

Client identification number :	
Session number:	1
Date:	03/03.2015
Therapist:	Ourania Liarmakopoulou

Initial discussion

Topics of initial discussion	Interested in trying new things, wants to improve well-being, to reduce nervousness and stress. She enjoys music but doesn't play any instrument, wants to improve her relationship to music. She had art therapy in the past, and drop out after 5-6 sessions as she thought she got what she wanted and she didn't feel supported or guided during the process.

Improvisations

1. improvisation

Instruments	☒ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☒ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☒ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☒ Neutral (2)	☐ Positive (3)

2. improvisation

Instruments	☒ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☒ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☒ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☒ Positive (3)

3. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	

	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

4. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

Musical expression (add bodily aspect as well)

a) Emotional loading of the client's musical expression (therapist's own interpretation if the client did not comment on it):

Not loaded (1)	☐
Neutral (2)	☐
Loaded (3)	☒

b) Interaction between the client and the therapist while improvising?

Not much interaction (1)	☐
Somewhat interaction (2)	☒
Very interactive (3)	☐

Verbal expression

Emotional loading of the client's verbal expression

Not much interaction (1)	☒
Somewhat interaction (2)	☐
Very interactive (3)	☐

b) Interaction between the client and the therapist while talking?

Not much interaction (1)	☒
Somewhat interaction (2)	☐
Very interactive (3)	☐

Overall emotional mood of the session (strength of the emotion is also important)

a) Which, if any, of the following emotions characterized the client's mood in the session:

| Joy (1) ☐ | Sadness (2) ☐ | Anger (3) ☐ | Fear (4) ☐ | Tenderness (5) ☐ |

b) Anything else about the client's mood in the session?

| Akwardness |

Levels of emotional processing

a) Did the client name the emotions felt?	Yes (2) ☐	No/Not sure (1) ☒
b) Did the client understand the meanings of the emotions felt?	Yes (2) ☐	No/Not sure (1) ☒
c) Did the client show ability to regulate the emotions felt?	Yes (2) ☐	No/Not sure (1) ☒

Central contents of the session

a) What of the improvisations should be further analysize and for why?

Impro		Reason?
1	☐	
2	☒	She was more expressive, more engaged and she released tension during the playing.
3	☐	

4	☐	

b) What was the most important theme of the session and for why?

c) What kind of countertranseference reactions you had in the session?

Nervousness and negative mood during verbal interaction

d) Could you perceive any signs of improvement or recovery of the client in relation to his/her illness? If yes, what kind of signs?

At the initial assessment she complained about nervousness. During the second improvisation she sighed and after the playing she remarked being more relaxed than before.

e) Did you feel that you could help the client? Do you see the music therapy as appropriate for the client at the moment?

She expresses herself vividly via music; hence music therapy is appropriate for her.

Free field

What else would you like to say?

She is questioning free improvisation, as she does not comprehend at the moment how one can improvise music without previous learning.

Therapist's form number 2

MUSIC THERAPIST'S SESSION NOTES

Client identification number :	
Session number:	2
Date:	10.03.15
Therapist:	Ourania Liarmakopoulou

Initial discussion

Topics of initial discussion	Interested in trying new things, wants to improve well-being, to reduce nervousness and stress. She enjoys music but doesn't play any instrument, wants to improve her relationship to music. She

	had art therapy in the past, and drop out after 5-6 sessions as she thought she got what she wanted and she didn't feel supported or guided during the process.

Improvisations

1. improvisation

Instruments	☒ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☒ Yes (2)	
	What was the topic?	Talk about her week with sounds	
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☒ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☒ Neutral (2)	☐ Positive (3)

2. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☒ Djembes (3)
Theme based	☒ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☒ Positive (3)

3. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	

Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

4. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

Musical expression (add bodily aspect as well)

a) Emotional loading of the client's musical expression (therapist's own interpretation if the client did not comment on it):

Not loaded (1)	☐
Neutral (2)	☐
Loaded (3)	☒

b) Interaction between the client and the therapist while improvising?

Not much interaction (1)	☐
Somewhat interaction (2)	☐
Very interactive (3)	☒

Verbal expression

Emotional loading of the client's verbal expression

Not much interaction (1)	☒
Somewhat interaction (2)	☐

Very interactive (3) ☐

b) Interaction between the client and the therapist while talking?

Not much interaction (1) ☒

Somewhat interaction (2) ☐

Very interactive (3) ☐

Overall emotional mood of the session (strength of the emotion is also important)

a) Which, if any, of the following emotions characterized the client's mood in the session:

| Joy (1) ☐ | Sadness (2) ☒ | Anger (3) ☐ | Fear (4) ☐ | Tenderness (5) ☐ |

b) Anything else about the client's mood in the session?

She looked tired or preoccupied

Levels of emotional processing

a) Did the client name the emotions felt?	Yes (2) ☒	No/Not sure (1) ☐
b) Did the client understand the meanings of the emotions felt?	Yes (2) ☒	No/Not sure (1) ☐
c) Did the client show ability to regulate the emotions felt?	Yes (2) ☒	No/Not sure (1) ☐

Central contents of the session

a) What of the improvisations should be further analysize and for why?

Impro		Reason?
1	☒	We improvised using one mallet. She mentioned about spots in her body that "open" while playing and energy flows.
2	☒	She connected the improvisation with three memories (1. A friend of hers was dancing capoeira, 2. In summer in Australia, where she was camping in the woods one day she did body percussion, 3. The djembe group she used to watch in secondary school. She was more energetic; also she acknowledged that fact herself.
3	☐	
4	☐	

b) What was the most important theme of the session and for why?

Memories elicited during improvisation

c) What kind of countertranseference reactions you had in the session?

Nervousness while trying to reflect after the improvisations.

d) Could you perceive any signs of improvement or recovery of the client in relation to his/her illness? If yes, what kind of signs?

She was less nervous during the whole process and reflected more on her feelings.

e) Did you feel that you could help the client? Do you see the music therapy as appropriate for the client at the moment?

She remarked music as being more valuable interaction than conversation.

Free field

What else would you like to say?

During the second improvisation I sensed that she was listening more attentively to my playing comparing to all the previous improvisations. She stopped abruptly after a rhythmic change from my part, and when I asked her about it she said that she made a mistake

Therapist's form number 3

MUSIC THERAPIST'S SESSION NOTES

Client identification number :	
Session number:	4
Date:	24.03.15
Therapist:	Ourania Liarmakopoulou

Initial discussion

Topics of initial discussion	Interested in trying new things, wants to improve well-being, to reduce nervousness and stress. She enjoys music but doesn't play any instrument, wants to improve her relationship to music. She had art therapy in the past, and drop out after 5-6 sessions as she thought she got what she wanted and she didn't feel supported or

	guided during the process.		

Improvisations

1. improvisation

Instruments	☒ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☒ Yes (2)	
	What was the topic?	Frustration	
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☒ No (1)	☐ Yes (2)	
Emotional atmosphere	☒ Negative (1)	☐ Neutral (2)	☐ Positive (3)

2. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☒ Djembes (3)
Theme based	☒ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☒ No (1)	☐ Yes (2)	
Emotional atmosphere	☒ Negative (1)	☐ Neutral (2)	☐ Positive (3)

3. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	

Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

4. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

Musical expression (add bodily aspect as well)

a) Emotional loading of the client's musical expression (therapist's own interpretation if the client did not comment on it):

Not loaded (1)	☐
Neutral (2)	☐
Loaded (3)	☒

b) Interaction between the client and the therapist while improvising?

Not much interaction (1)	☐
Somewhat interaction (2)	☐
Very interactive (3)	☒

Verbal expression

Emotional loading of the client's verbal expression

Not much interaction (1)	☒
Somewhat interaction (2)	☐

Very interactive (3)	☐

b) Interaction between the client and the therapist while talking?

Not much interaction (1)	☒
Somewhat interaction (2)	☐
Very interactive (3)	☐

Overall emotional mood of the session (strength of the emotion is also important)

a) Which, if any, of the following emotions characterized the client's mood in the session:

Joy (1) ☐	Sadness (2) ☐	Anger (3) ☒	Fear (4) ☐	Tenderness (5) ☐

b) Anything else about the client's mood in the session?

She looked sometimes irritated

Levels of emotional processing

a) Did the client name the emotions felt?	Yes (2) ☒	No/Not sure (1) ☐
b) Did the client understand the meanings of the emotions felt?	Yes (2) ☒	No/Not sure (1) ☐
c) Did the client show ability to regulate the emotions felt?	Yes (2) ☒	No/Not sure (1) ☐

Central contents of the session

a) What of the improvisations should be further analysize and for why?

Impro		Reason?
1	☒	We improvised using one mallet. She said it was a release.
2	☒	She said that the djembes were more playful instruments than the Mallet Kats.
3	☐	
4	☐	

b) What was the most important theme of the session and for why?

The frustration, the feeling of being "stuck".

c) What kind of countertranseference reactions you had in the session?

Difficulty in asking questions. In verbal interaction I have the feeling of intruding. I am repeating myself.

d) Could you perceive any signs of improvement or recovery of the client in relation to his/her illness? If yes, what kind of signs?

e) Did you feel that you could help the client? Do you see the music therapy as appropriate for the client at the moment?

Free field

What else would you like to say?

Therapist's form number 4

MUSIC THERAPIST'S SESSION NOTES

Client identification number :	
Session number:	7
Date:	14.04.2015
Therapist:	Ourania Liarmakopoulou

Initial discussion

Topics of initial discussion	Interested in trying new things, wants to improve well-being, to reduce nervousness and stress. She enjoys music but doesn't play any instrument, wants to improve her relationship to music. She had art therapy in the past, and drop out after 5-6 sessions as she thought she got what she wanted and she didn't feel supported or guided during the process.

Improvisations

1. improvisation

Instruments	☒ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☒ Yes (2)	
	What was the topic?	The corridor (a safe place-transition)	
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☒ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☒ Neutral (2)	☐ Positive (3)

2. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☒ Djembes (3)
Theme based	☐ No (1)	☒ Yes (2)	
	What was the topic?	Interaction with the teacher-(role playing)	
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☒ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☒ Positive (3)

3. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	

Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

4. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

Musical expression (add bodily aspect as well)

a) Emotional loading of the client's musical expression (therapist's own interpretation if the client did not comment on it):

Not loaded (1)	☐
Neutral (2)	☐
Loaded (3)	☒

b) Interaction between the client and the therapist while improvising?

Not much interaction (1)	☐
Somewhat interaction (2)	☒
Very interactive (3)	☐

Verbal expression

Emotional loading of the client's verbal expression

Not much interaction (1)	☐
Somewhat interaction (2)	☐

| Very interactive (3) | ⊠ |

b) Interaction between the client and the therapist while talking?

Not much interaction (1)	☐
Somewhat interaction (2)	⊠
Very interactive (3)	☐

Overall emotional mood of the session (strength of the emotion is also important)

a) Which, if any, of the following emotions characterized the client's mood in the session:

| Joy (1) | ☐ | Sadness (2) | ⊠ | Anger (3) | ⊠ | Fear (4) | ☐ | Tenderness (5) | ☐ |

b) Anything else about the client's mood in the session?

| She seemed tired and in the first part bored. |

Levels of emotional processing

a) Did the client name the emotions felt?	Yes (2)	☐	No/Not sure (1)	⊠
b) Did the client understand the meanings of the emotions felt?	Yes (2)	☐	No/Not sure (1)	⊠
c) Did the client show ability to regulate the emotions felt?	Yes (2)	☐	No/Not sure (1)	⊠

Central contents of the session

a) What of the improvisations should be further analysize and for why?

Impro		Reason?
1	⊠	It was a theme based improvisation, reflecting on an image invoked while listening to a previous session's improvisation. There was interaction
2	⊠	It was a dialogue, and she confronted me with strength and dynamics. She was able to release much tension
3	☐	
4	☐	

b) What was the most important theme of the session and for why?

The loneliness that characterize her life (the image of the corridor, her safe place). The difficulty she has in individual interaction (the dialogue between her and a teacher).

c) What kind of countertranseference reactions you had in the session?

I have a nervousness when proposing or suggesting, feeling of clumsiness.

d) Could you perceive any signs of improvement or recovery of the client in relation to his/her illness? If yes, what kind of signs?

She verbalized her difficulty in individual intercourse. She attempted to overcome that in the musical dialogue with the djembes.

e) Did you feel that you could help the client? Do you see the music therapy as appropriate for the client at the moment?

She creates vivid images from music, thus finding another media to express her emotions because she has difficulty in verbalizing them.

Free field

What else would you like to say?

She express her doubt about how improvisation can help her, but she is very good in transitions, and this helps her to reflect upon her difficulties.

Therapist's form number 5

MUSIC THERAPIST'S SESSION NOTES

Client identification number :	
Session number:	9
Date:	28.04.15
Therapist:	Ourania Liarmakopoulou

Initial discussion

Topics of initial discussion	

Improvisations

1. improvisation

Instruments	☒ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☒ Yes (2)	
	What was the topic?	Break the pattern that frustrates her. Therapist would play the pattern and the client would try to modify it. It turn out to be a reconciliation between different parts of the client's body	
C played alone	☒ No (1)	☐ Yes (2)	
Did you listen?	☒ No (1)	☐ Yes (2)	
Emotional atmosphere	☒ Negative (1)	☐ Neutral (2)	☐ Positive (3)

2. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

3. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	

Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

4. improvisation

Instruments	☐ Malletkats (1)	☐ Handsonics (2)	☐ Djembes (3)
Theme based	☐ No (1)	☐ Yes (2)	
	What was the topic?		
C played alone	☐ No (1)	☐ Yes (2)	
Did you listen?	☐ No (1)	☐ Yes (2)	
Emotional atmosphere	☐ Negative (1)	☐ Neutral (2)	☐ Positive (3)

Musical expression (add bodily aspect as well)

a) Emotional loading of the client's musical expression (therapist's own interpretation if the client did not comment on it):

Not loaded (1)	☐
Neutral (2)	☐
Loaded (3)	☒

b) Interaction between the client and the therapist while improvising?

Not much interaction (1)	☐
Somewhat interaction (2)	☒
Very interactive (3)	☐

Verbal expression

Emotional loading of the client's verbal expression

Not much interaction (1)	☐
Somewhat interaction (2)	☐
Very interactive (3)	☒

b) Interaction between the client and the therapist while talking?

Not much interaction (1)	☐
Somewhat interaction (2)	☐
Very interactive (3)	☒

Overall emotional mood of the session (strentght of the emotion is also important)

a) Which, if any, of the following emotions characterized the client's mood in the session:

| Joy (1) | ☐ | Sadness (2) | ☒ | Anger (3) | ☒ | Fear (4) | ☐ | Tenderness (5) | ☐ |

b) Anything else about the client's mood in the session?

frustration

Levels of emotional processing

a) Did the client name the emotions felt?	Yes (2)	☒	No/Not sure (1)	☐
b) Did the client understand the meanings of the emotions felt?	Yes (2)	☒	No/Not sure (1)	☐
c) Did the client show ability to regulate the emotions felt?	Yes (2)	☒	No/Not sure (1)	☐

Central contents of the session

a) What of the improvisations should be further analysize and for why?

Impro		Reason?
1	☒	An attempt to recon ciliate with a part of herself that frustrates her was attempted
2	☐	
3	☐	
4	☐	

b) What was the most important theme of the session and for why?

The disclosure of how emotions frustrate her. The disclosure that she is in a process of realizing that many mistakes of the past was because she didn't express her wishes.

c) What kind of countertranseference reactions you had in the session?

Feeling the loneliness and the pain while she was verbalizing this.

d) Could you perceive any signs of improvement or recovery of the client in relation to his/her illness? If yes, what kind of signs?

The disclosure and the verbalization of her ailments was a new thing. She reached out to the therapist

e) Did you feel that you could help the client? Do you see the music therapy as appropriate for the client at the moment?

Music associated with images helps to reflect more precisely and process the source of client's troubles

Free field

What else would you like to say?

Her disclosure came as a pleasant surprise to me.