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When Singing Is Deadly Improvising a New Reality for Music Therapists

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Résumé de l'article

Nicola Oddy and Rebecca Worden discuss music therapy and the pandemic in this contribution to the special issue.

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When Singing Is Deadly: Improvising a New Reality for Music Therapists

Nicola Oddy and Rebecca Worden

Music therapy relies heavily on improvisation to deliver metaphoric and meaningful outcomes for clients in real time.¹ Through improvisation, we can engage with an understanding of subconscious reaction to our personal world and to the world around us (Bruscia). Often musical instruments are used, but the inclusion of voice is vital for the reflection of self in this work. Sadly, research shows that talking loudly, and thus singing, aerosolizes respiratory droplets more effectively than normal human speech (Asadi et al.). Choirs have halted during these times to prevent the spread of COVID-19 and musicians who sing together are discouraged from doing so indoors, even as physical distancing restrictions begin to lift (Spahn and Richter). As a result, many music therapists have moved their sessions online.

We are both registered psychotherapists who work in Perth, Ontario within the scope of music therapy. At present, we are associated through a professional supervision group that Nicola leads and Rebecca attends.² The declaration of the global pandemic sent shock waves through the lives of many music therapists, as most of them work independently and have built their practices from the ground up. This was the case for Rebecca—when Ontario experienced a complete lockdown, all thirty of her weekly clients disappeared from her clinical practice overnight. Grasping at the banks of financial and professional stability, Rebecca was thankful that her music-centred professional supervision group survived and Nicola was grateful that she could find a way to continue leading it.

In the following conversation, we discuss how we have had to improvise a new reality for delivering and receiving music therapy services. We briefly share thoughts about changes to musical and interpersonal interaction, accessibility, and how listening has changed, and conclude by describing the improvisation of a new approach.

Musical and Interpersonal Interaction

Rebecca Worden: A big piece for me is that the quality of music is so low compared to inperson improvisation. The sound is not continuous, the volume range is limited, and bass qualities are missing. I get so frustrated with that. When I am sharing a beautiful piece of music online or joining an improvisation, I feel like the music is so removed from what it could be.

Nicola Oddy: It is also about interactive perfection. When we are together in the room and have all of the instruments available to us, there is so much that goes on between us in the laughter and tears. This range of emotion can emerge online, but it's not as likely.

RW: I find that timing is really important to me in experiential, creative interactions. The online platform takes that away. There are no opportunities to blend sounds rhythmically online.

NO: Right. A big part of being a music therapist is the entrainment or matching—being in sync with the person in their music. We just cannot do that with the delay that takes place online and that is a big barrier. Carrying on, we have to sift through our techniques to find the ones that work best.

RW: Using the pentatonic chimes worked.

NO: Yes, using the pentatonic scale has worked. Droning together, listening to shared songs, and doing completely free improvisation where there is no expectation of congruency are a few other examples. Some people have done solo improvisations online while the rest of us listened and then gave feedback. Lyric analysis still works, as does songwriting and the creation of on-the-spot song improvisation.

Accessibility

NO: One thing I notice is that it puts everybody on an equal footing.

RW: Now we can think about opening a supervision group to people who are far away. Before, when most of us met in person but one or two people joined in online, they would be in a different reality. Everyone had to wait because of glitches, disconnections, or distortions. Now we are all in the same experience and it is equalizing.

NO: If we nurtured this approach in the post-pandemic landscape, we would definitely open it up to more people who are isolated. I think of how thrilled I would have been if *my* mentor had led something like our supervision group online when I was working alone in Perth. Attendance and connection to colleagues becomes a possibility no matter where we live.

RW: If some people who travel an hour or more to attend sessions could join us online, we could meet more often and increase our consistency.

NO: Losing the travel time is a definite positive. As well, there is a comfort in being at home during sessions. In fact, I have been learning about how the pandemic puts everyone on the same footing in terms of barriers, regardless of the method of mobilization. Barriers to attending sessions are removed—or rather, everyone experiences the same barriers.³

RW: When we consider our clients though, the technology *does* have the potential to be a barrier. Many people are not able to access the technology on their own, or the online interaction is too abstract for them to understand.

Listening, and Being Listened To

NO: In face-to-face meetings, it is not that we stare into a client's eyes for extended periods, but there is *some* eye contact. Online, however, there is no eye contact at all because we are looking at each other's image rather than at the camera. I am almost getting used to the idea of someone looking down at my shoulder when we talk. In fact, when someone's eyes flash to the camera, it feels unnerving. And when we are working in, say, long-term care, the camera angle prevents us from noticing, for example, if a person is moving their foot when they usually do not. We lose the opportunity to see that because the camera is focused on their face and it eliminates the whole-body experience.

RW: So suddenly, listening becomes the only thing we can rely on. But that is a powerful thing—listening and being listened to (McMaster).

NO: It is powerful, for example, for a client to share a recorded song. When out of session, people often get distracted or start talking about something else when a favorite song is being shared.

RW: And yet, because I spend more time listening and really pushing my listening observation

skills, the online experience has become more cerebral. There are more opportunities to think about metaphors and symbolism. The listening and processing is exhausting, but rewarding.

NO: And more often, I find, the verbal becomes a useful tool when our sessions are online.

RW: Yes, a useful tool that connects us with the music we are making. It is different than talking to a verbal counsellor online because you would be relating stories, filling in details, and talking about your reactions. Within our music-centred supervision, the music is woven in. It gives us an opportunity to shift our perspective.

NO: I thought that it worked when you recorded an improvisation in advance and all of us listened together. You, in effect, improvised a new approach and did something we would never have done in a face-to-face session.⁴

RW: The experience for me was focused and full of intention. I do a lot of music-making with people, but it is all about what *they* want to hear. It was powerful to reach inside and create a total reflection of what was happening in the moment, in my body. Then to have people listen to it was validating. It helped me take the improvisation more seriously.

NO: What you did was different than when someone sits down at the piano and records an improvisation for performance.

RW: When I improvise with emotions in mind, I simply express, for example, tension, anger, or sadness. It is a sense of wanting to tap into the emotional impulse. In the case of this recorded improvisation, there was no motivation to make it sound like a finished piece. Then to have people notice things about it brought a sense of commonality and connection.

NO: In a music therapy context, it is bigger than just having the music listened to. You allowed people into your psyche, in a way. The pandemic has been very difficult for people in our field. Who would have thought that singing would ever be deadly and that we would have to invent new ways to make it possible to continue offering our services?

Notes

¹ Please refer to the Canadian Association of Music Therapists website for more information about the use of improvisation in music therapy practice: https://www.musictherapy.ca/about-camt-music-therapy/about-music-therapy/.

² Professional supervision is a requirement for all registered psychotherapists as they work through professional and personal issues that affect their working lives.

³ Maayan Ziv, founder of *Access Now* (accessnow.com), discussed this perspective during *Enable Ottawa* (carleton.ca/read/enable-ottawa-2020/), an online conference Nicola attended which highlighted accessibility during COVID.

⁴ Rebecca pre-recorded an expressive improvisation on the piano and we listened to it together as a group. Usually this is done in person during a session. Pre-recording the improvisation is a completely different experience for both the player and the listeners for a number of reasons: 1) instead of being in a state of pure expression, the improviser listens with the others and is in a state of analysis; 2) the improvisation can last for as long as the improviser wishes without concern for taking up too much time during the session; 3) the recorded improvisation can be listened to a number of times; 4) the improviser is free from the feeling of being observed during the actual improvisation; and 5) the improviser is in the comfort of their home and therefore in a more relaxed state of being.

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