MUSIC AS A MEANS OF MENTAL DISCIPLINE

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It was a great honor and pleasure to me to receive an invitation from your enthusiastic secretary, Mrs. E. Clarke Slagle, to address your honorable association about the work which I have felt it my duty to undertake in the institutions of this country, namely, the marshalling of music as an ally with the therapeutic forces battling for the restoration of the equilibrium, physical and psychical, of our disabled fellow men.

I fear that the pleasure this time will all be on my side and the trying part of this number of the program all on yours, for the reason that you as an American scientific gathering will have to listen to a Dutchman trying to express himself in a language more or less foreign to him, on a subject of which the surface is hardly scratched. But he promises you that should you come to Holland to express yourself in Dutch about any of your interesting topics, he would accord you a welcome commensurate with that he enjoys today.

To place ourselves at once into our subject, I feel it my duty to reveal to you that some of the thoughts which prompted me to apply music as a means of bringing about mental discipline in abnormals originated after reading an address on mental discipline as a means of combatting nervous disability, which was delivered several years ago at The Hague by the illustrious Dutch psychiatrist, Dr. F. J. Soesman, to whom I refer with great admiration and thankfulness for the inspiration given.

1 The pictures used to illustrate this article represent the work of the Director of the Committee for the Study of Music in Institutions as carried on at the Central Islip (New York) State Hospital for the Insane.

Read at sixth annual meeting of the American Occupational Therapy Association held at Atlantic City, September 25-29, 1922.
Dr. Soesman defines as a mentally healthy person one whose power of resistance is at least in equilibrium with the internally and externally destructive forces preying upon his well-being. Any program of mental hygiene, according to Dr. Soesman, has to satisfy four demands:

1. Research to determine the destructive elements.
2. Influence of these elements on the etiology of the diseases.
3. The elimination of these influences.
4. The increase of the power of resistance of the threatened individual.

Music as a means of enforcing mental discipline is a subject primarily concerned with the last item.

The human being is a storage battery of various energies, which not only contend for mastery among themselves, either to the benefit or detriment of the health of the human being, but which taken in total have to wage still another battle and have to succeed or to succumb as a fighting unit in a successful or unsuccessful adjustment to a partly cooperating, partly antagonistic environment.

Harmonious integration and coöperation is a first essential in order to bring about a successful adaptation to the environment. It all comes down to the development of a well-balanced, integrating, harmonious self.

What part can music play in this battle?

Take the other side, that of the mentally and morally inadequate. What else do they suffer from than an incongruous, incoherent, heterogeneous personality, which prevents them from making a successful, happy adjustment to the environment? Why do we finally segregate these people and why do we lock them up? Because they are so out of balance and self-control that they injure society just as much as they do themselves.

When does a person lose his mental balance? He loses his mental balance as soon as the satisfaction of his primary blind instincts, aiming at a merciless self-assertion, drive him to antisocial actions. As soon as he loses a beneficial mastery over himself and his primary-conditioned instincts, as soon as he ceases to feel, think and act as a well-integrated and functioning unit,
and as soon as his physical and mental energies in their discharges
seek and find abnormal outlets, which tear the individual to
pieces by allowing one part of the personality to outlive the
others, like a vampire, at the expense of those parts, then a
yawning abyss separates him from normal society, and isolation
from the world is the usual outcome.

Any type of therapy, including a musical one, deserves the
title of therapy only when it strives for the following goals:
(1) The re-integration of the personality, thus fitting the self
into a harmonious entity, self-controlling and nicely in balance.
(2) Integration of the personality in normal society, finding a
normal adjustment to his fellow men.

Has music such a power, and to what extent?
Experience proves that music has a decidedly beneficial
behavioristic influence on the average prisoner or patient.

We are already beyond the stage of proving this. What we
now are heading for is a just definition of the exact nature and
precise function of music in this respect.

My first statement in this regard is: Music, or organized
sound with more or less aesthetic qualities, is a sensory stimulant
which produces physical as well as mental reactions, as reflected
in the modified conduct of some of the physically and mentally
disabled, to such an extent that we may safely say: music leads
them to a momentary, more or less fuller, integration of self and
a normal adjustment to environment.

Sense satisfaction is one of the sensory goals of consciousness.
Music appeals so vividly and so intensely because it satisfies the
auditory sensory craving of the most elementary human being
as well as of the more socialized, refined one. The hospital
teaches us, every day, that we can appeal with music to many a patient
who does not show interest in any other stimulant except food.

Very simple music with the striking rhythm and plain con­
struction of the kindergarten type is found to be one of the most
successful, fascinating stimuli to all types of regressed minds,
as well as the infantile and childish minds and even to persons
with developed musical instincts.
What does music more than this? This is my second point. It stimulates to action, it prompts to temporary rejection of abnormal habits, it overcomes inhibitions, it causes sound to be interpreted in terms of reality. It does these things so convincingly that many a patient absolutely discards his abnormal actions; for a while he leaves his prison of fantasy and joins with an appearance of pleasure in the happy singing or dancing of a kindergarten ditty, even when he has fancied himself to be the incarnation of the Lord, or the Prince of Wales. To illustrate: The singing or acting of “Good Night, Ladies” has done for many a praecox, manic, psychopath, senile, or other type of patient that which medication, treatment of whatever type, or segregation has seemingly failed to achieve. The mere jingling on a “tin can” piano of such real miracle tunes has brought about the flocking together of many of the insane, who had indulged in anti-social behavior, apparently unable to show any prolonged purposive thought or action. Music causes these people to concentrate themselves absolutely, to the disciplining of their own and others’ attention, to the making of an efficient use of all the forces dominant within them, often more than expected, surrendering their personal peculiarities to a well-chiseled, coördinated effort in the direction of sociability.

Here it was music which opened the sluices of normal energy display, which energy was intelligently employed by personal will, driving these unfortunates to a sudden normal adjustment, to an efficient rational self-expression. And their singing, dancing and acting were not in the least degree below the behavior of the so-called normal.

I will now state my third point, a fact which since biblical times has been applied by every vice organization, but in more modern times has been overlooked by a great part of the medical world.

This point is that music as a sensory stimulant awakes emotional desires and prompts the individual to seek supplementary sensorial experiences. That is the reason why we find music utilized in those various resorts where food, liquor, human flesh and all methods of excitements are for sale. Music accentuates
all the temptations and cravings to the \( n \)th degree and compels to mental and physical action.

This is the immense dual power of music: it can push one along and down the path of perdition, and it can also start one on the ascending road of salvation. It is in this regard that music shows its greatest therapeutic potentialities. It is these we wish to utilize. Take as an example the woman resolved not to go in to the next dance. She hears the first strains of a fox trot and she is on her feet before she realizes it. Look for instance at the man who objects to signing up for the navy or contributing to the liberty loan. As soon as the band intonates “The Star-Spangled Banner” away he goes to the desk and signs up almost before he really knows what he is doing. It is just this way with innumerable patients. There was my old, senile, gray, patient-friend, Mrs. Olivia, let me call her. She had just emphatically declared to me that she was not going to dance or sing or do anything for me, because I had offended her very seriously by not shaking her hand first, as I entered the ward. She kept herself tight in her armchair as the music started and then clenched her teeth to be even more sure. But two bars of a Creole folksong were sufficient to bring her to her feet; she jumped up with a snarl, and joined the group of singing dancers, unable to resist the inviting rhythm.

Music, then, incites the display of energy. Therefore my point of view is: inasmuch as it is the aim of occupational therapy, in general, to get the patients busy, use music as a general stimulant to make the patients do all kinds of work themselves. Do not submit them to the passive enjoyment of beautiful strains solely, but utilize the favorable mental situation created by the music and do not let it slip by. Do not expose them to wonderful concerts only, which stir up all kinds of emotions and desires and plans with no directive purpose and no outlet in reality, as such conditions are more apt to depress. Our object is to bring music to the hospitals as an activity by the patients for the patients.

Naturally they like performances of any type, and one should not be mistaken as to their critical qualities. These appear to
be developed very keenly: it is true that they adore, they enjoy and even live in the most meagre attempts of their handicapped fellows, be these attempts vocal, dramatic, instrumental, or of whatsoever type.

I found the physically handicapped craving for all kinds of stunts for which they seemingly had the least capacity. But nature is wiser than we are. It prompts man to overcome his handicaps. And I do not know of a more dance-craving friend than my dear William the Turk, who was brought to the hospital at a time that he was not able to keep his physical balance. This fellow just craved to act and dance “Good Night, Ladies!” and he now leads the others. As I said, here nature points to the way, for such expressions of over-compensation may be therapeutic indicators.

By satisfying the craving for pleasurable sensory experience, music furthermore improves the feeling tone, and may intensify the sensation of happiness. The satisfaction of participation in these pleasurable activities stimulates the desire to have these activities repeated again and again. In many types of insanity the prognosis given in text books of their tendencies, i.e., by concentrating feelings, thoughts and actions where it was supposed they could not do it, has been negatived by their paying intelligent attention to folk, art and operatic song, even when their writings and speech production showed the most incoherent and disconnected fantastic ideas, many executing the details of the musical work with great precision from whom no effort would have been expected according to the prognosis. It is a matter of fact, that I have often experienced less good behavior, more lack of self-control and mental discipline among my normal professional singing groups than among my eccentric institutional friends.

I found, from a musically technical point of view, group singing to be the most practical and fruitful form of music-making in the wards. Group singing was used with the piano accompaniment either of myself or of a patient. Nearly everybody has a voice good enough for group work. The principal object is to work up a coöperation as general as possible. I
always welcome individual soloistic effort, even if inefficient, providing it is not an expression of egotism which would drive a patient to make a fool of himself. This sometimes threatens to happen, but there are ways to curb such happenings. Although I also welcome any kind of effort of higher artistic level, this consideration is always secondary, because it is the mental effort which counts, and often the artistic rendition of a number is therapeutically of much less importance on account of previous routine and training than a crude attempt to reach out for a new achievement.

Psychopathic patients, for instance, are often very talented, but also very unreliable; they need skilful management and continuous regulation. While they often reach very great aesthetic results either individually or as a group, it is nevertheless the group activity which is the most beneficial to the greatest number of patients, on account of its own inspiring dynamic value; and also because it is possible to have through group work, individual patients perform a certain thing which they would never undertake alone. The first contact with the patients being a group contact, the individual ripe for personal work emerges from it in a natural manner.

The fourth point to be made is this: While the musical activity may be in many instances a constructive stimulant, in acute cases keeping up the fighting spirit, it also works in many cases of a hopelessly chronic nature as a soothing, beneficial stabilizer, a very God-send.

In this respect music causes two widely divergent reactions, each beneficial in its own way.

It is a pathetic but at the same time very satisfactory experience to see and hear groups of old chronics in great happiness, participating in our musical frolics. Also to these unfortunates music is, as Stephen Phillips so wonderfully expresses it:

"The creator of a land of lovely chords
Where life no longer jars, nor jolts, nor frets, but glides."

How about the disciplinarian influence of music on group behavior? It stopped fighting in the dining-room, as also in
the ward, between two antagonistic ladies, who were prevented only by the interference of their attendants from engaging in a boxing match; as soon as I started the music they smilingly assumed their characters as partners.

Dr. Soesman in his address pointed to the fact that mental discipline often may start with bodily discipline. That this is true is proven by the Swiss system of military drill. This army exercises its recruits for five and a half months in a physically exact and precise way. Experience has proved that the corresponding mental effect of these physical drills is closely analogous and beneficial. Mental discipline, consequently, can be induced by music, even if this is only primitive rhythmic handelapping. This is what I often ask for. It means the least demand of mental effort in obtaining coöperation. I demand from my patients, as far as possible, exact response, the same as from normals, and the music helps me to secure it à l'instant, in self-restraint as well as in positive expression.

Music of the preponderantly aesthetic type, with its varying shadings, sudden changes and outbursts, sudden or gradual lapses and relapses, and folk dances with their strictly defined bodily movements, tend to the education of the rational will and are a school of mental discipline. How beautiful is it to see many of these extreme individualists join and try to execute the various mental as well as physical exercises!

I will close with mentioning a psychological characteristic of music which I regard as being of the greatest importance for mental therapy.

We know that sensory impressions never enter our consciousness singly, but rather as groups or constellations of varying feeling tones. These experiences bury themselves more or less and most of them are after a while seemingly forgotten. Music—melodies, chords and rhythms—registered for once in the mentality, acts when sounding again, even after years, as a powerful memory incitor, a veritable psychic lever. The strain of a formerly heard composition of any type, from a whistled tune to a symphony, may bring about the sudden recollection of the most intricate detailed experiences with their original effects, these
believed to be long dead and buried, but all at once, like a veritable "Jack in the box," jumping into consciousness again and overpowering us, often with a feeling-intensity, surging through the complex, reviving once cherished ideals, wishes, desires and their concomitants, varying in clearness and intensity, some vague, some well defined, but all with their definite effect. And it does not end with that. These old associated and interwoven mental elements, rolling into consciousness like a sudden tide, carry along with them others of pleasurable or displeasurable qualities, all bound by common ties, causing and enabling the self to live again in the setting of youthful experiences, where reality was still contacted by them. And the miracle happens: energies, long believed to be exhausted, are noticed activating, rejuvenating the self again, proving by this that they have been only hemmed in. Here we tap another therapeutic source, of which mankind makes a great but more or less unconscious use and which may be utilized to a greater extent in the various attempts at restoring the mental equilibrium of many a patient.

A few days ago I had the privilege of presenting what I would like to call a complex-inciting, or complex-indicating melody to a dementia praecox patient. It was a great sight to study the overt reaction in the attitude of the patient, amazing to study the change of the facial expression from the meaningless and the silly, from an aimless gazing, into an expression of deep thought: emotional enervation, confusion, struggle, and effort followed by conflict, and finally crowned by an absolute clearing after an outpouring of recollections. Although it is premature to make definite statements, it appears that music will be developed to be of analytic value, a decided power to help overcome abnormal repressions and to aid the normal tendencies to assert themselves.

While on this subject, I should like to state that artistic (including musical) tendencies represent to me aesthetic sublimations of the libido, psychic manifestations of the creative energy working within us. Thus we see that the sexual and the artistic instincts are closely allied, and they may include also religious impulses. Artistic activities, then, with their pleasurable effects are outlets for the overflow of the creative energy massed in an individual.
If hemmed in, this energy might cause havoc within the individual and produce those impossible persons whom we often encounter in the half-way talented psychopaths and delinquents, who are an admixture of everything, but are nothing in special.

It seems to me, furthermore, that artistic activities aim at supplementing life and the environment with that degree of completeness which seems the goal of all efforts, of which perfect beauty, be it in abstract or concrete form, is the outward expression.

Perhaps it is not too much to assert that in many a case of insanity we deal with the creative energy gone astray, lost in itself. And that artistic activities as means of occupation will function preventively as well as curatively, by directing the creative energy in its flight from disagreeable reality towards a goal of pleasing reality, in the form of artistic creations and artistic occupations, which are really concrete compromises of fancy and reality, but none the less realities.

In such a way is art, as in music, a means of the self reaching into the unfathomable depths of creation, often conjuring up energies of such a dynamic force that in their expression the frail individual, storing these tremendous powers, is sacrificed. Its products seem almost superhuman, hence the mythological origin of sacred and divine nature attributed by classic antiquity to the fine arts.

Finally, music is a wonderful evangelist. It creates spheres of personal and social happiness, of contentment, delicious feelings, wonderful thoughts, new hopes and joys, which turn the mind in friendly fashion toward the one who brings this music. Consequently, he who actually brings the music has a key to the innermost room of many a soul, has a disciplinarian baton in hand, and the greatest possible opportunity is afforded him of assisting hospital authorities in their work of reclamation, helping many of the patients to make at least a beginning with mental discipline.

And how inexpensive is a well-organized musical service compared to the results netted, compared to other hospital expenses, running into the thousands with less obvious results. What is
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there necessary? Simply a number of song books, a piano in the ward, in the big hospitals a small orchestra, and the development of assisting staff members from among the employes.

I would hardly have dared to open my mouth and claim your attention, had I not known that I speak in the name of thousands of patients, to whom melodies are winged messengers directly from fairyland, blessing them with a new peace and happiness, for whom the musical hour is an emotional oasis in the monotonous desert of institutional life. Let it be our calling to bring the glad tidings of music to those who need it most—more than many of the concert and theater goers—to those who are confided to our care and attention in the hospitals, whose only hope for life is often depending on us, many of whom are doomed to die in the limited confines of these institutions. Let us go to them and help those we can to a possible future mental equilibrium in normal society, and help the others to a resignation within the institutions, through our music, which as Carlyle sings, "takes us to the verge of the Infinite and gives us one glimpse beyond."

SUMMARY

Mental disorder is a lack of balance between internal and external contending individual and environmental forces.

Occupational therapy aims to restore this equilibrium through readjustment by means of mental and physical work.

Music as a sensory stimulant incites discharges of mental and physical energy, causing certain patients in a state of mental unbalance to make a temporary adjustment by which the normal balance may in time be restored.

Music helps to overcome inhibitions. It helps to bring the mental self-control necessary for reactions of normal self-adjustment. It tends to replace abnormal by normal mental habits, it turns introverts back to the environment. It is a psychic lever, reawakening old energies, stimulating latent forces, and creating new hopes and energies. It reinforces resisting power, helps to prevent, in some cases, tendencies to deterioration, and it produces in many a hopeless case contentment, peace, and even joy in resignation.
CONCLUSION

Music, in the struggle for the restoration and maintenance of individual and group mental discipline is a practical and inexpensive instrument, which may be used as an essential factor in the therapeutic program of every modern sanatorium and hospital.

Editorial note. The following bibliography is of interest in connection with Mr. van de Wall's paper.


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Rogers, James Frederick: Music as medicine. Musical Quarterly, iv, 365, July, 1918.


Committee for the Study of Music in Institutions
Cooperating with
Occupational Therapy Division
of the
NY State Hospital Commission

Charts
of
Musical Organization
in
State Hospital Service
as partly operated in
Central Islip Hospital
Dr. G. A. Smith, Superintendent

by
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Bureau Occupational Therapy

Musical Division

Central Islip

Superintendent

Medical Staff

Med. Admin. Occupational Therapy Nursing

Musical Service

Musical Director

Patients Personal Material Admin. Organization Med. Staff Occup. Therapy
Occupational Therapy


MUSICAL DIRECTOR

Patients

Med. Staff

Advisory

 Personnel

Artistic

Players

Activity Material

Leaders

Orchestra Band

Institution

Board

Concert

Dancers

Orchestra

Press,

Anglophones

Stage

Vocal

Specialized

Platforms

Property

Material

Organization

Administration

Routine

Correspond.

Research

Records

Occupat. Therapy

with Musical

See Chart III

Preparations

Material

Space

Assignment

Class Assignment

Dinner

Assistance

Consultation

Musical Training Course

Group Word

Concert

Concert, Play

Piano solo

Music Classes

Snow Falls Class

Sustained,

Training Assistant

Conferences

Extra-All Soft

Playing

Concert, Talent

Programs

Pianoles

Concerts

Performances

Carillon

Training

Music or

Some Math
III

Musical Director
↓
PATIENTS
↓
TYPE A
1st Approach: Community Singing
↓
TYPE B
2nd Approach: Musical Word Meetings

Socially

Aesthetically

Generally

Actively

Passively

Singing
Playing
Dancing
Reciting
Acting

TYPE C
3rd Approach: Special Classes

Musical Instruction
Choral
Sight Reading

Social Music Instruction
Sociable relations discussed as contained in folk singing course

Patients assigned
Class B = C

Yearly

Special Cases

Medical Staff

Occupational Therapy
Non-Musical