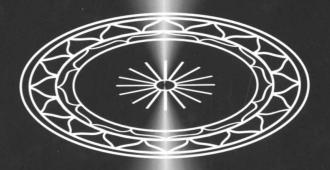
Healing Images

The Role of Imagination in Health

Edited by Anees A. Sheikh



Foreword by His Holiness The Dalai Lama

Imagery and Human Development Series Series Editor: Anees A. Sheikh



CHAPTER 6

Music, Imagery, and Healing

PAT MOFFITT COOK

The universe is a tonal harmony of many sounds—many lives interacting and vibrating together as they fill the great silence. Music's rhythm and melodies echo the eternal harmonies of the heavens. In this way music is a mirror of holy resonance: it opens transparencies in us, enlarging our horizons and helping us to feel what is beautiful and inspiring . . . it attunes us to powerful waves of life energy and to the unfathomable Source of all Good. (Hal Lingerman, cited in Brigham, 1994, p. 289)

And we must learn that to know a man is not to know his name but to know his melody. (Unknown Oriental Philosopher)

Music combined with imagery provides a conduit through which we can access images, feelings, and memories that support the healing process (Bonny & Savary, 1990; Rider, 1997; Warming, 1992). Human beings respond universally to the power of musical language, its harmonic, rhythmic, and melodic elements, without having to formally learn it (Blacking, 1990; Rider 1997). This phenomenon, believed to be intuitively understood by ancient and traditional healers, continues to motivate contemporary health care professionals to use music for stress reduction (Rosch, 2000), and pain control (Taylor, 1997), to induce altered states of consciousness and to evoke emotional catharsis for healing (Grof, 1985). A growing number of music and sound therapists now compliment Western medical interventions in the hospital and hospice settings (Crowe, 2000; Schroeder-Sheker, 1997). Music also promotes and intensifies spiritual experiences (Bush, 1995; Rider, 1997), and in some cultures it plays a significant role in the death and dying process (Gaynor, 1999; Schroeder-Sheker, 1997).

In this chapter, the ancient and cross-cultural uses of music and imagery are traced and a recent, heightened interest, in the West, in music and healing is noted. Also bases for the therapeutic efficacy of music are examined in detail and a number of methods that employ music and imagery are discussed. Finally a list of suggested music for imagery and healing is provided.

MUSIC AND IMAGERY IN ANCIENT, EASTERN, AND INDIGENOUS TRADITIONS

Healing with music and music-evoked imagery is part of an ancient therapy still practiced in many parts of the world by holy men and women, shamans, and indigenous healers. Throughout the ages, selected tones, song melodies, harmonic structures, and rhythmic patterns were discovered by healers and used as sonic remedies (Cook, 1997a). Physicians in ancient Greece prescribed music-making and singing (Bush, 1995; Rosch, 2000). Indigenous healers directed sound as energy toward (or into) a patient, negotiated with disease-causing entities, cooled fevers (Cook, 1997b), induced trance states and evoked powerful images useful in the healing process. Rouget (1985) and Friedson (1996) have done extensive research on this subject with non-Western cultures.

Among the Hindus in India, "the central act of worship is hearing the mantra or sacred sound with one's own ears and chanting the mantra with ones own voice" (Coward & Goa, 1996, p. 4). This sacred act is believed to tune a person with divine vibration, which eventually purifies, heals, and transforms. The Parama-Samhita says, "It is by mantra that God is drawn to you. It is by mantra that he is released" (Beck, 1995, p. 1). The Hindu notion of Nada-Brahman, God as divine sound, and of Nada-Yoga, the yoga of sacred sound, are an ancient science that is still practiced today. Through Nada-Yoga, practitioners achieve spiritual release, moksa (Beck, 1995). This belief forms the foundation of an ancient science and practice of healing with sound.

The ancient Indian sages studied this carefully and discerned foundational vibrations, which are expressed in the Sanskrit alphabet, in which each letter represents a particular vibration. "These foundational vibrations interact with centers of resonance which are called chakras" (Soule, 1995, p. 16). Soule teaches his meditation students that meditating, chanting, and visualizing the chakras and/or symbols associated with them, bring stability to the body, breath, mind, and emotions. Houston (1997) suggests that the person chanting is put back into a state of harmonic resonance from which he/she may have deviated. This resonance can be manipulated and generated outwardly to patients who are mentally or physically ill, affecting them in positive ways. Vibration is also referred to as energy. When practitioners intone sacred seed syllables, bijas, or sing a healing song, they place their body, mind, and soul in a desired state of vibration. "The energy patterns it sets into motion, naturally gives access to states of consciousness not available through the ordinary experience of senses" (Houston, 1997, p. 20).

Early Greek physicians used instrumental music to cure melancholy, aggression, and psychic disturbances. Pythagoras prescribed daily singing as a cathartic to cleanse emotions of worry, sorrow, and fear. Musican-physicians composed melodies to cure passions of the psyche, as well as depression and anger (Rosch,

2000). In Rome, special modal music was played as a cure for snakebites. Special songs and chants were played in curative temples in Greece, inspiring patients to wellness by altering their emotions and creating a sense of harmony (Crowe, 2000).

Medical anthropologists, ethnomusicologists, and other scholars have documented how music accompanies a wide variety of musical healing rituals led by shamans (Gouk, 2000). Community singing in many indigenous cultures provides a medium to dissolve tension and maintain a balanced society. For example, among the Raramuri (Tarahumara of Northern Mexico), the *Owiruame* (medicine man) sings to drive sadness away; for, they believe that sadness is the cause of illness (Cook, 1997a).

Central American Kuna song healer Maestro Demosdenes Ramirez sings the *Nia Ikar*, the medicine song (story) for mental illness. His patients lie beside him in a hammock and listen to song verses that retell the epic battle against one of four devils. The song evokes vivid imagery. The patients come face-to-face with their illness. Both patients and healer relive the dramatic story of their ancestor's fight against mental illness (known as the devil). The devil is overcome on the fourth day when the empowered *nuchus* (medicine dolls) capture him, burn him, and bury his ashes deep in the earth. The patients go home cured and rejoin their family and community (Cook, 1997a).

Songs invite benevolent deities to aid in healing sessions. Babaji, a Hindu *ojah* (village healer), sings to the goddess Shitala (Cool One, the goddess associated with smallpox and fevers) to help relieve a patient who is suffering from delusional fevers caused by smallpox. When Shitala's image possesses the healer's heart and he holds her in his minds eye, he transfers her divine power to the person who is suffering. Soon the fever breaks and the patient's temperature cools (Cook, 1997b).

A Peruvian patient with malignant brain tumors ingests ayahuasca, a psychotropic hallucinogenic. His mind and emotions attach themselves to a flowing flute melody followed by an intoxicating guided-imagery-journey sung by the ayahuascero (shaman). The sound of shaking rattles penetrates the patient's mind and slows his breathing and heart rate. At this point the ayahuascero performs non-invasive surgical operations with rattles and ceremonial rods. The image of the rods probing, pulling, and extracting the infirmities takes the sickness away. "The sickness can come out when we use our imaginations well," said Don Agustin (Cook, 1997a, pp. 23-27).

These examples point out that music combined with imagery is used to intercept the course of mental and physical illnesses by the ancient and traditional healers. The music forms a multi-layered canvas that invites both patient and healer to paint images upon it—cultural myths, symbols of illness and wellness, and powerful remedies—drawn from imaginal realms. The healer resounds sonic remedies, and at the same time, he improvises musically and intuitively based upon the spontaneous revelations that emerge from the patients' psycho-spiritual

and psychosocial experiences of pain and suffering. It is evident that the practitioners in these systems do not separate the mind, body, and spirit; for, they believe that the human being is a tripartite unity. Music by its very nature encourages and helps to reveal and stimulate this relationship. It supports "the unification of breath, rhythm, and tone of the human body. . . . It patterns and reinforces the powers of listening, attention and memory (emotions) for people of every culture" (Campbell, 1991, p. 243). It is noteworthy that ancient and traditional music therapy practices share common approaches and are considered precursors to contemporary music-centered therapies.

RECENT WESTERN INTEREST IN MUSIC AND HEALING

The therapeutic efficacy of music now commands recognition in Western medicine, alternative health care, and special education. A substantial body of historical information has provided background for contemporary research and for new applications of music-centered therapies. "Today modern technologies allow us to analyze, produce, and reproduce musical processes much more precisely than ever before" (Rosch, 1 2000, p. 10). As a result, a wide range of music disciplines are available for different patient populations and for individuals interested in sound and music tools for health-maintenance at home.²

Clinical studies in music therapy and music in medicine have measured changes in mood and emotional responses to musical elements, such as pitch, rhythm, and melody (Maranto, 1992; Radocy & Boyle, 1997; Rider, 1997). Researchers have assessed the effects of stimulating and sedative music on anxiety and arousal (Radocy & Boyle, 1997) and have demonstrated how elements in music affect physiological changes in blood pressure, heart rate, body temperature, and brain wave states. They have examined the effects of music as a psychotherapeutic agent for improving self-concept and promoting self-expression (Aigen, 1998). Bonny's research indicated that guided imagery and music helped listeners access archetypal roots and experience transpersonal realms (Bush, 1995).

Interdisciplinary research in the health sciences continues to help refine music and imagery modalities. Music-centered therapists now can better assess client responses during music-enhanced imagery sessions. Music and imagery techniques alone or in combination with other medical interventions can address mood-related performance, psychosomatic illnesses, and immune responsiveness. In music-evoked or music-enhanced imagery techniques the listener experiences visual, auditory, olfactory, noetic, and body imagery as well as emotions, thoughts, and memories (Wrangsjo & Korlin, 1995).

Bonny theorizes that quieting music combined with imagery specifically relieves pain by producing the pain-relieving peptides that affect brain responses. Rider (1997) says that a patient learns to develop mental images of pain, "a red-hot, bubbling mass for example, when music that matches the image," either by its mood or musical properties, is played (Pinkerton, 1996, p. 17).

Music is a temporal art. Its sounds are organized cumulatively through time in rhythm. Its effects are experienced from within and without, and it has the power to stimulate the intellect and emotions (Tusler, 1991).

WHAT CONSTITUTES THE THERAPEUTIC POWER OF MUSIC?

This section will define musical elements and explain how they help make music therapeutic.

Pitch

The highness or lowness of a sound, pitch, is determined by the frequency of vibrations, the number of vibrations per second. Pitch is any periodic frequency between 20 and 20,000 Hz (normal human hearing range). A pitched note can be used to help listeners focus on general (lower, middle, upper) or specific (i.e., forehead, heart, shoulder) areas in the body. A resonating tuning fork or a vowel sound toned by a therapist can be directed at tight muscles and pressure points on the body. This form of "sound acupressure" on body meridians is said to break up stagnant energy and to stimulate the flow of energy or *chi*.³

Mid- to high-pitched sustained notes played on Tibetan *tinkshas* (hand bells) and singing bowls (metal bowls that produce rich overtones) are used in Eastern and Western meditation practices to help focus one's attention on a single point. With the eyes closed, images can arise from the subconscious, bubble up, present themselves to the listener, and move on.

High-pitched, fast-tempo instrumental music, as opposed to low, can stimulate a more alert state in listeners. Tomatis, the French physician and specialist in otolaryngology, uses filtered music through an electronic device to treat auditory disorders. He discovered that high-frequency sounds supply more concentrated nervous influx and thus increase the effect of charging the brain. Tomatis researched the use of high-frequency sounds for the purpose of increasing energy levels, of restoring the ears' ability to process auditory information, and of helping to motivate the unmotivated (Leeds, 2001; Madaule, 1994; Radocy & Boyle, 1997).

¹ Paul J. Rosch, M.D. is editor-in-chief of the Newsletter of the American Institute for Stress in Yonkers, New York.

²Three good resources for further investigation into music tools for home use are Campbell (1992, 1997), Leeds (2001), and Bush (1995).

³ Wind Records produces and distributes Chinese healing music performed by the Shanghai orchestra. Their recording entitled "Cancer" as well as other recordings are based on sound acupressure.

Bonny designed a series of surgery tapes called "Music Rx. for Hospitals" (1979). For recovery room music, she utilized "Spring," a movement in Vivaldi's "Four Seasons." Bonny's research indicated that patients who listened to classical music performed on higher-pitched instruments (i.e., violins and flutes), came to a conscious state more easily and quickly than those patients who did not listen to music in the recovery room.

Visual images, thoughts, and body sensations change with music performed in different registers (bass, baritone, alto, and soprano). Therapists use imagery scripts that suggest that listeners imagine colors and shapes that seem to resonate with pitch registers.

Siberian composer Mourashkin discovered that he could write and record musical compositions that brought him relief from severe and chronic pain caused by a traumatic car accident. Rhythmically energetic music laced with interesting high-pitched random sounds captured Mourashkin's attention, drawing his focus away from his acute pain. Mourashkin's album "Points of Light" is used in the United States today for pain control, anxiety, and stress reduction. His recordings are part of a series called "bio-energetic" music (Mourashkin, 1997).

The lower-pitched instruments more easily resonate with the body. Low-pitched large percussion, brass, or stringed instruments penetrate physical tension. Low to mid-range melodies that are rich in overtones connect strongly with the physical body, such as David Darling's cello piece, "Only One Wish," on his album "Eight String Religion" or any of the six Bach cello suites.

Interval

The distance from one pitch to another or intervals are classified as perfect consonances (unisons, perfect fourths, perfect fifths, and octaves), imperfect consonances (major and minor thirds and sixths), and dissonances (seconds, sevenths, and all diminished and augmented intervals). Interval ratios determine how two or more notes played simultaneously sound. In theory, the number of possible musical intervals is unlimited. But for musical evocation, the simpler acoustic intervals are most often used. "They appear so natural that without external help it is vocally almost impossible to get away from them" (Danielou, 1995, p. 12).

Consonant sounds are most accurately detected by the human ear and reproduced by the voice. The ear hears and decodes consonant properties of interval ratios far better than dissonant ones. Thus, in part, tuning systems for musical instruments grow out of human perception and ability to process sound information and the desire to accompany the voice and ear. Consonant harmony requires less work for listeners (Danielou, 1995). This phenomenon is important in selecting music for healing. In general, consonant music creates an atmosphere of safety, familiarity, and organization. For example, Bill Douglas's choral arrangement of "Deep Peace," a well-known Celtic poem, suggests and mirrors

harmonious relationships with the external and internal world. This same musical mirror can amplify and exaggerate psychological and physiological disharmonies in a listener in the midst of such sonic organization and balance.

Dissonant music (in the West more than the East) generates feelings of tension, chaos, and conflict. Dissonance suggests conflict, stretches and stresses time, and anticipates release. Harmonic tension stimulates energy, serves as a catalyst for stirring emotions, and is used to match mental confusion, negative moods, and experiences of physical pain (Danielou, 1995). Dissonant music is used in music-evoked imagery sessions to encourage problem solving.

Melody

It is a series of tones of different pitches arranged in a rhythmic pattern. The melody is also thought of as the tune or theme. Melody is perhaps the most expressive element in music, possibly because melodies were first created by the human voice.⁴

Our experience has taught us that melody tends to invite inner dialogue. Melody leads the way and takes listeners on a journey into a personal story. It becomes the voice of the listener. If the melody is bold and confident, so can the inner voice be. If the melody wanders, feeling unsure of itself, a similar feeling can overcome the listener. A melancholy tune evokes sadness and can enhance imagery associated with grief and loss. If the melody is harmonized in a minor key, it can elicit regret or remorse. It can bring up memories and feelings of the past. Melody is easily stored in our memories. In music-enhanced imagery sessions, a minor or major melody sung by a woman or man, or played by an instrument in a specific register, can evoke the voice of a mother, father, child, or partner. The timbre of the instrument creating the melody can express unevenness, anger, rawness, and attitude.

Familiar music can be chosen to help an ill person visualize himself/herself in earlier times of wellness. Research indicates that the brain records and responds to familiar tonal material (Taylor, 1997). Melody can be utilized in therapy to connect listeners with people, places, and eras.

Volume and Intensity

This refers to how loud or soft a sound or music piece is performed or played (decibels, amplitude of vibrations). Loud volume drowns out other environmental sounds and often a person's thoughts. Low volume helps quiet listeners and accompanies reflective moments or efforts to fall asleep. Soft music can feel inviting, mysterious, while loud music is strong and sometimes imposing.

⁴ For further reading on melodic foundations, review chapter six in Radocy and Boyle (1997).

Grof, the originator of "Holotropic Breath Work," combines the consciousnessaltering effect of breath with evocative music, which is played very loudly. This psychotherapeutic process evokes personal, archetypal, and transpersonal visual imagery and can lead to therapeutic effect through spontaneous body movements (Grof, 1985).

During an interview for the *Noetic Sciences* video entitled "Of Sound, Mind and Body," music therapist Barbara Crowe explained that, when a loud repetitive sound is presented to the ear, the sound travels via the auditory nerve and enters at the lowest level of the brain. Then the sound stimulus enters and arouses a structure called the Reticular Activating System (RAS). RAS is an alert system for the cortex. It assigns meaning to incoming sensory information. A loud repetitive drumbeat, for example, causes the RAS to send out a constant signal to the cortex. This signal masks the sensory input from other senses, decreasing activity in the left brain. This allows other forms of cognition and problem solving to emerge from the right brain, the seat of our mythology. We can use this to access deeply buried psychological materials, and, in Jungian terms, archetypal symbols and images, in a psychiatric setting. It has also been discovered that because of music's ability to affect the arousal functions of the RAS system, the brain focuses on an incoming music stimulus instead of pain. In other words, the music distracts patients from pain sensations (Taylor, 1997).

Rhythm

This is the organization of pitch or musical tones in time. Rhythm includes beat, pulse, meter, tempo, as well as long- and short-note values. Rhythm has to do with all musical timing. It is a common factor in all cultures and remains the most important factor in musical organization.

There are many ways in which rhythm affects us. When we hear rhythm, we begin to entrain to it (Leeds, 1997). This affects our cardiorespiratory rhythm. This rhythm is a result of "complicated interactions between several populations of respiratory neurons located in the lower brain stem" (Koepchen, Spintge, & Droh, 1992, p. 47). Therefore, music entrains our heart rate, blood pressure, and muscle movement. This bidirectional process is the very reason rhythm is one of the most effective musical elements in sound and music therapy. Our biological rhythms will entrain to a presented external tempo or musical beat, thus controlling biological and mental functions through the central nervous system (Koepchen, Spintge, & Droh, 1992).

Rhythm is a complex phenomenon. It is much more than pulse, periodicity, or movement. Different rhythms control and influence our state of consciousness and physiology. For this reason, music's rhythmic element can be used as therapy for relieving stress and anxiety and inducing sleep.

Shamans enter trance states associated with healing on the sound of a shaking rattle or the steady beat of a drum. They experience visions and gather diagnostic

information for those who are sick (Achterberg, 1992; Kalweit, 1992) of the past and the present, and they continue to travel to other realms on the beat of a drum or repetitive shaking of a rattle.

On the Suquamish Indian reservation in Poulsbo, Washington, Steve Old Coyote leads sweat lodges weekly for young members of the reservation. He teaches songs and drumming to the youth. "It keeps our young people out of trouble," Steve said. "The music we make in the sweat lodge encourages them to talk about their problems. We share our dreams and visions about the future. Our song meetings support teenagers who are dealing with alcoholism and drug addiction. The beat of the peyote rattle and water drum matches our heart beat. It connects us and heals us for the time being" (Cook, 1997a, p. 83).

Spintge and Droh (1992) have conducted research on the effect of neuro-vegetative rhythmicity on stress and relaxation. Music therapist and composer Janalea Hoffman (1995) composes and produces musical recordings based solely on the relationship between the body rhythms and musical tempo for the purpose of regulating heart rate. Hoffman says that "the listener's heart responds to the external stimulus of the slow, steady beat of the music and her/his heart rate begins to synchronize. Hoffman's rhythmic music synchronizes a heart beating at 70 or 80 times per minute to slower tempos, gradually decreasing the rate to 60 and 50 beats per minute. Her tapes for Parkinson patients and children include music-enhanced guided imagery scripts.

Strong, percussionist and sound healer, recorded "Calming Rhythms" for use with autistic children and by individuals who are coping with high anxiety and aggression. The drumming sounds from his compact disc make use of shifting gravity, where the stress of the beat takes place. This prevents habituation and boredom and engages the mind in the music. Therefore listeners listen longer and can shift the attention to the music instead of to feelings of anxiety, for example.

Psychotherapist and author of *The Healing Power of the Drum*, Friedman, conducts drumming workshops in hospitals for adults and children with cancer to help them feel more energy, life inside themselves. Thaut has investigated the effect of rhythmic music or a simple drum pattern on motor coordination of Parkinson patients. He reports that a significant number of patients have walked 50 percent faster at the end of studies than at the beginning (Leeds, 2001).

Rhythm provides a structure and a sense of security. It organizes time and space. Music therapist Nancy Houghton described one of her clients during a sound therapy training at the Open Ear Center in Washington: "Charles, struggling with a stroke-induced shuffle-walk, sensed the metered cadence of a march I played. He recalled his military days, he saw himself able to walk, and then blended his gait with the beat."

⁵ Dutch scientist Christian Huygens discovered in 1665 that two pendulum clocks placed side by side would entrain, synchronize (Hoffman, 1995).

Rhythm and tempo are capable of revving us up or calming us down. Assiogoli called rhythm "the primordial and fundamental element of music" (Friedman, 2000, p. 40). Most researchers in this field will agree that rhythm is the element which has the most intense and immediate influence on human beings because it affects directly both the body and the mind.

Timbre

It is the tone color or quality of the sound an instrument produces. Each instrument has a unique timbre as a result of its harmonic content. The harp sounds different than a bell, for example, even when the same pitch is played. The size and shape of an instrument and the way it is played create its unique timbre. This is the reason our ears can discriminate between instruments.

A timbre can enhance a mood, become the attitude of a listener in a guided-imagery session. In a music and imagery session, instruments with different timbres in musical composition are played to evoke attitudes, feelings of strength, or compassion. In their book *Music and Your Mind*, Bonny and Savary (1990) present a researched music repertoire and the mood each selection may elicit from a listener. Timbre reveals the nature of the individual voice of an instrument. It intensifies perceptions of color and creates musical texture.

Duration

It is the length of time any one element is sustained. The duration an instrument sustains a note or a harmony produces responses that are useful in music and imagery sessions. Short tones are thought to suggest movement. On the other hand, long-held notes or chords can cause anticipation, a sense of suspension, or the opposite, relief from movement. Long-held tones can induce a meditative state in some listeners, and for others they may cause them to "space out" or lose interest in the music and imagery process.

Orchestration and Texture

They refer to the arrangement of instruments in a musical score. The combinations of musical instruments and their unique timbres and rhythms create texture. Musical orchestration and the texture it creates affect the size of the sound container. A score can call for solo instruments or full orchestras. An orchestra creates a large container. This can be daunting for someone who needs containment and safety. If a listener lacks confidence or requires a more intimate container, a solo instrument, a duet, or a quartet would be more suitable. Different orchestrations and textures are more suitable for different moments in a therapeutic process (Bonny & Savary, 1990).

MUSIC, IMAGERY, AND HEALING

"Music creates a continuity and connection in the various states of consciousness, and when used therapeutically, creates a continuous carrying wave that helps the subject move through difficult sequences and impasses" (Grof, 1985, p. 386). Campbell delineates six elements which he considers "essential for the successful process of integration of music, imagery and healing" (Campbell, 1991, p. 245-252).

- Music modifies the environment. Music may be specifically selected for its ambient effect, to calm a frantic emergency room, to stimulate movement and mood in a geriatric setting, or to organize the study habits of students.
- Music modifies our relationship to time and space. Classical or baroque
 music can serve to order our movements and thoughts and to enhance our
 learning process. Impressionistic or new age music may serve to stretch
 our perception of time and reality, allowing space for imagery and release.
- Effective visualization incorporates both the concrete and the metaphorical. Music may allow one to flow from a position of impasse into more fluid thinking. An individual stuck in a concrete thought process may move into forming more creative associations through properly chosen music.
- 4. Imagery incorporates the emotional along with the visual. For thought to be a true image, sensory qualities must be introduced. Music operates on a multi-modal level in which we hear and feel our world. Music facilitates the creation of pathways between the inner and outer worlds, stimulating healing of the psyche and the physical being.
- 5. Music can effect physical and mental curation, which is known as physioaudiation. Therapist-led or client-created imaging can lead to the reduction of stress, increased concentration, and other desirable effects. Music aids in repatterning the mind and may lead to emotional, physical, mental, or spiritual benefits.
- For effective healing, integration and grounding must occur. Campbell states, "For grounding, select music that is solid, that has a beat. Music for integration needs to impart the feeling of safety—of connectedness to self and to the environment" (Campbell, 1991, p. 251).

The Bonny Method of Guided Imagery and Music (GIM)

GIM is a psychotherapeutic one-on-one process with a "guide" (facilitator) who assists a "traveler" (client) on a music journey into a dreamlike associative state. The facilitator encourages the traveler to respond verbally with any impressions, images, and thoughts that come to mind while listening to Western classical music. She/he records these impressions on paper or with a tape recorder for review and discussion with the client after each session.

During a GIM session, clients listen in a relaxed state and either lie down or recline in a chair. A music and imagery session can last from 30 minutes

to an hour. The process evokes imagery from "metaphoric levels of the psyche while uncovering feelings and facilitating release" (Bush, 1995, p. xi). "The music is selected to pace clients through different states of emotional awareness and remembrance so as to reach a peak experience; then the client is gradually returned to a safe, quiet and relaxed state" (Campbell, 1991, p. 250). The guide then helps the traveler to integrate his/her imagery experience through discussion or artwork.

The Bonny Method was developed by Helen L. Bonny. She began her work at the Maryland Psychiatric Research Center in the late 1960s, with Walter Pahnke and Stanislov Grof. Bonny found that by combining relaxation and imagery techniques with carefully selected music programs "she could produce therapeutic results with alcoholic and psychiatric patients which had been previously attainable only through the use of drugs" (Jarvis, 1988, p. 69).

GIM has proven itself an effective therapeutic strategy for the following reasons. 1) Music is a nonverbal medium that contains emotional suggestions. 2) Music affects the center of the brain and the limbic system and controls emotional responses (pain and pleasure) and involuntary processes (blood pressure, body temperature). 3) Music activates stored tonal memory, which can then evoke images and memories from the past. 4) Music stimulates peptides and causes the release of endorphins. 5) "Listening to music while identifying with evoked mental images induces a state of synchronization of the music, feelings and images, breath, and pulse rate. When this entrainment occurs, it increases the joint effect on the body/mind for healing" (Bush, 1995, p. 25).

Pickett works with the GIM technique to heal delayed Post Traumatic Stress Disorder. She reported this case study in the *Association for Music and Imagery Journal* (1995): The course of W's treatment spanned over 12 music sessions.

This 28-year-old business man sought relief from his fear of losing emotional control or physically hurting someone. His goals were to uncover unimaginable hidden feelings caused by childhood sexual abuse by a Catholic priest in third grade and to recover memories before his adoption at age 9. Together with Pickett, he sought to heal the child and the grown man. Then he felt he would be able to gain control and adapt solutions to his emotional stresses and fears now.

The music sessions enabled him to image himself in those childhood years. Successive sessions with appropriate music brought up rage, feelings of abandonment, and a grieving period. These initial sessions helped him finish the work he needed to do with his biological father. He made internal peace with both his mother and father and the priest. His progress motivated him to join a weekly therapy group.

In 12 sessions, the client accepted his anger and as a result gained more control over himself and his feelings. He stopped drinking, enjoyed a renewed interest in his sexual life, and became more productive at work. "He experienced a healing of his own internal self-representation of trauma" (Pickett, 1995, p. 99). The music provided a canvas, a container to support and promote this process as W. resolved the hurt and angry feelings. His solutions arose

spontaneously in his imaginative process and in tandem with the classical music selected for him." (Pickett, 1995, p. 99)

GIM is being used with a large variety of patient populations in the United States and Europe.⁶

Cross-Cultural Music and Other Music with Imagery Techniques

In our experience, clients often respond better to relatively unfamiliar cross-cultural music than to familiar Western music (Cook, 2000). The following case history illustrates this point.

Josef (pseudonym), a German professor teaching at an American University, participated in a "Cross-cultural Music in Healing" weekend workshop at the Open Ear Center, and he then asked me, a GIM facilitator, for a series of private music and imagery sessions. His work also included home sound exercises.

Josef was divorced and estranged from his two teenage daughters. He was soft-spoken and had a noticeable tremor in his left hand. He filled his teacup only half way to avoid spilling. He felt that his life was empty. He had lost his self-confidence and spent a tremendous amount of energy suppressing a lifetime of anger.

Josef's first session indicated that the melodic and consonant harmonies of Western classical music were not sufficient to empower him or to connect him with his authentic voice, which he so desperately needed. He was too familiar with this music repertoire and the sounds of Western classical instruments. It was more productive, in his case, to use music with which he had little association.

For Josef's second session, I guided him through an East Indian breathing technique and suggested several body positions that felt natural to him, if the need arose to move. The music selection that day began with Boris Mourashkin's "Points of light" followed by an Australian didjeridu recording, and the Tibetan Buddhist chants of the Gyoto Monks. The didjeridu stimulated sensations in his bones. "I can feel my bones vibrating; the music is inside me," Josef reported.

Just minutes into the Tibetan chanting, Josef clasped his chest and struggled to speak. He gritted his teeth, holding back long-held emotion-filled words. The resonant deep-penetrating voices of the monks gave Josef courage to speak. He spontaneously spewed impressions as they emerged from his psyche. For the next 15 minutes he wept, stuttered, and shouted painful memories of childhood, dominated by images of his father. "My father refused to become a Nazi soldier," he said. "They black-listed him so he couldn't find work. He became depressed and an alcoholic. He often beat me. I was so afraid of him."

⁶For further investigation of the Bonny Method of Guided Imagery, review Bonny and Savary (1990), Bush (1995), and *The Journal of the Association for Music and Imagery*, volume 1-4.

In later sessions, Josef forgave his father and visualized embracing him. Josef found strength in the voices of the Tibetan monks. I prescribed a daily breathing and sound meditation for Josef to do at home. Lying down for 15 to 30 minutes, he rested a Tibetan singing bowl on his abdomen, struck it, and allowed the vibration to penetrate his abdomen. Immediately afterward, he sat upright in a chair and intoned the "OOO" sound for 10 to 20 minutes. The release, he said, brought him so much internal freedom that he telephoned his estranged daughters and asked them to meet him upon his return to Germany.

The day before his departure, he came by to say goodbye. He requested a full cup of tea. "Pat look," he said, picking up his cup in his left hand. The tremor was gone. Two years later a letter arrived with a photo of Josef with his two daughters and a new wife. He wrote that he was happy and life felt full again. He continues to work with his singing bowl, toning and listening to his collection of Tibetan Buddhist chanting.

In his book Sounds of Healing, Gaynor (1999, p. 16), an oncologist, describes how "chanting, listening to music, playing bells and hand cymbals, wind gongs, drums, whistles, etc., and toning can positively affect our minds as well as our physiology." Gaynor and other sound healing practitioners accept the principle underlying all sound healing modalities, that "there is a tendency toward harmony in nature, which researchers confirmed is indeed a universal rule" (Gaynor, 1999, p. 16).

Gaynor integrates crystal singing bowls into his medical practice. One of his patients, George, who was having a recurrence of lymphoma, was instructed by Gaynor to practice a sound meditation using his voice, a crystal singing bowl, and specific images of himself healthy, before his diagnosis. One night while practicing, George let out a low moan that originated in his abdomen. He asked Gaynor if he thought that it was a coincidence that that was where his lymphoma had started and then recurred. Gaynor did not consider it a coincidence. Like many other case histories Gaynor mentions, both doctors and patients feel that they may not have fended off another recurrence without the conscious use of vibration and imagery for deep healing (Gaynor, 1999).

The Power of the Human Voice

One of the primary instruments in sound healing and music therapy is the human voice. The voice is our center of creativity and empowerment. It is perhaps our greatest personal healing instrument. Stimulating internal sensations by making nonverbal sounds (moaning, wailing, keening) or humming, toning, chanting, or singing can affect mood, breathing, heart rate, and physical balance.

Toning the EEE sound, rich in higher overtone frequencies, can help dissipate a headache. Facilitators instruct people to combine tone with color or tone with a visual image. An individual is sometimes instructed to visualize the head pain and use the vowel sound to match its intensity. Campbell says, when you are tired, toning "EEE" is invigorating. He suggests that using a higher pitch is energizing.

To resonate your whole body, intone "OOO." Choose the most natural pitch for your voice and tone the vowel (Campbell, 1987). Fill your body with the color of OOO to help you increase your ability to resonate more. Sound therapists, like the Indian sages and practitioners of Nada-Yoga, claim that toning a specific vowel sound can resonate different parts of your body and helps you focus on that area. From any physical resonating location, a sensation, a story, or an emotion can emerge, freeing memories and healing old wounds. It promotes the realization that a person is over-stimulated or cannot feel parts of himself/herself. "How long have I been numb here?" a man asked at a Campbell workshop.

Even if someone is not performing a daily practice of toning, these experiences often take place during sessions with a sound therapist. Techniques such as vocal scanning, overtone chanting, toning, humming, and singing in a group can produce an experience or resonance and movement of energy in the body and mind. A depressive mood can be uplifted. The vibration causes individuals to twitch, shake, release emotion, laugh, or enter into deep meditative states. Practitioners and patients report visual impressions entering their mind's eye when they tone.

A sound therapy prescription can be toning specific vowel sounds or chanting bija mantras for a period of time to facilitate a return of resonance to the voice and body. Visualizing color and "seeing" parts of the body facilitates connecting to physical areas.

The Tomatis Method and Auditory Stimulation Programs

Methods of auditory stimulation use filtered music to accentuate and deliver, through earphones, a range of frequencies that stimulate auditory processing networks in the brain. Preliminary listening tests measure a person's ability to perceive and process air- and bone-conducted sound frequencies between 125 and 8000 hertz without distortion. For physical, social, or psychological reasons, listening can become distorted, obscured, impaired, or shut down. This important fact helps practitioners understand that not all persons hear or listen to music in the same way. Some individuals cannot process frequencies, music, or voices as others do. People can choose not to listen to music presented in a therapy session. In many cases individuals cannot process voices even though they hear well.

"Listening involves far more than the passive physical act of picking up sounds at random," says psychologist and listening therapist Paul Madaule. "It requires the ability to actively attune the ear to a particular sound signal, with both the intention and the desire to understand and communicate" (Madaule, 1994, p. 9).

The aim of the Tomatis Method is to reeducate the ear via an auditory training device called the Electronic Ear. The device presents sounds via music (Mozart and Gregorian Chant) that have been modified (filtered) so that they can be boosted to the higher frequency range (Gilmore, Madaule, & Thompson, 1989). Auditory processing difficulties and listening problems can complicate or cause

Attention Deficit Disorder (ADD), depression, poor communication and social skills, and speech problems. Poor listeners often have poor auditory memories and have difficulties in receptive and expressive language skills. The program is also used with autistic children and brain-injured patients.

Tomatis-based programs are gaining wide international acceptance. Among organizations adopting Tomatis' theories and techniques are the Berard Method: Auditory Integration Training, Listening Fitness Training Program, Open Ear Listening and Learning Program, and The Listening Program.

"Encounters in a person's life can detrimentally affect the desire to listen, and thus communicate," says Madaule. At birth we have the desire to listen, says Tomatis. A difficult birth, separation from a parent, physical health problems at an early age, severe or frequent ear infections, or a traumatic event shut down our desire to listen and participate.

Candidates enrolled in any of the above programs undergo up to 100 hours of auditory training. The programs combine other therapies with auditory training programs. These include counseling, voice work, art therapy, and occupational therapy. Functional, emotional, and relational issues are dealt with through daily social activities, creative writing, painting, and drawing, while listening to filtered music (Leeds, 2001; Leeds & Wise, 2000; Madaule, 1994). A case history follows:

Alex was 9 years old when he took part in a Tomatis Program in a San Diego learning center. The family had already sought help from a number of other therapies. He was failing in school, was on probation for poor behavior, and lacked language and social skills. His pediatrician had prescribed three medications for ADD, aggressive behavior, and sleep problems.

When Alex was 5 he barely survived a car accident. He was thrown through the windshield and flung onto the pavement 20 yards in front of the car. Flesh was scraped off the left side of his face, and he suffered injuries to his forehead. It took five surgeries to reconstruct his face. The trauma from the accident and surgeries caused Alex to withdraw from the world. By the age of 7, he was labeled ADD, had the reputation of a bully and misfit at school and at home.

When I tested Alex, he looked like a normal 9-year-old. Though faded, three scars had earned him the name of "scarface" among peers.

The surgeries had been a success, but Alex did not see it that way. He imagined himself as ugly and rejected. He made little eye contact and even less conversation. Weeks before starting the auditory stimulation program, his pediatrician had decided to wean Alex from dexidrine and ritalin with close observation.

For the first 4 days in the program, Alex kept to himself, guarded his territory, and remained unfriendly. During this time he received auditory stimulation, and was instructed to paint daily. On the fifth and sixth days he exhibited more interest in the other children in the room.

Seven days into the program, Alex began to awaken as a result of the sound stimulation. He was conversational with teachers' aides and spent more time than usual completing his required daily painting.

Alex drew a large oval head on an 11-inch by 17-inch sheet of art paper. He painted it red, like dripping blood. He divided the head with a track of black stitches. Then he lettered his name at the top. Alex smiled when he handed his "art" to me at the end of the listening period. He described the face of his worst enemy in words.

Alex told his mother that he felt happy. She reported that he was compliant all day and went to bed without the usual struggle. He was affectionate and for the first time initiated authentic contact with her. The next morning he complimented one of his classmates on his "awesome" new tennis shoes. The boy returned the compliment by inviting Alex to play monopoly with him and two other classmates. Alex reached out and met with success.

Over 2 nonconsecutive months, Alex listened to modified music with headsets for 2 hours each day, read positive stories, or hummed into a microphone with filtered music in the background. He painted on art paper, images that arose each day as the frequency stimulation shifted. He painted with brighter colors, in more detail, and often included other children with him in his pictures. His negative self-image changed to a positive one. He was constructing a new self-image, taking a chance and was attracting friends. His grades rose from Ds and Cs to Bs and As, and his teachers sent home positive comments about his behavior. A year later, Alex was medication free and was doing well socially and academically.

Clients who participate in the Tomatis Method programs, Open Ear Listening Program, and Listening Fitness Programs are required to write daily comments about their listening experience. These include thoughts, feelings, and kinesthetic responses to the sound stimulation. Most clients report better posture, more active dreaming at night, awareness of colors, sounds, and smells, and a desire to paint or draw with vibrant colors. These dreams and drawings are many times "spring-boards" in counseling sessions.

Robert Monroe

In 1950 Robert Monroe began investigating the connection between electronically produced audio patterns and brain wave rhythms. He used "pulsed audio stimuli to create an electrical frequency following response (FFR) in the brain, evoking psychological and mental states in direct relationship to the original audio wave forms" (Monroe Institute, 1995a, p. 3). In 1975 Monroe patented a sound technology called "Hemi-Sync." It combines sound frequencies, embedded at very low volume in an audio program of music and guided imagery. These embedded binaural beats stimulate a "whole-brain state," one in which both hemispheres are synchronized. This technology is used to induce concentration, alertness, positive imaging, release, relaxation, and sleep.

The whole-brain state aids the individual to be receptive to new information and can lead to higher levels of performance. A person entering a whole-brain state, via sound and music, becomes more receptive to therapeutic imagery scripts.

Monroe realized that if individuals could simulate and sustain this hemispheric synchronization for longer periods, they could train themselves to reproduce these states at will, and thus gain access to innate abilities to heal, via healing types of imagery.

Since the 1970s, numerous Hemi-Sync recorded series have been developed that support different patient populations and facilitate self-help programs. These include pain control, concentration, surgical support series, energy walk, and the positive immune program. Each program blends slow-moving simple harmonious music and imagery narrations. Research results confirmed that individuals could free themselves of negative cognition, solve problems, improve learning capacity, increase relaxation, and induce sleep.

With the use of a Hemi-Sync tape series called "Positive Immune Program," HIV-infected patients learned to boost innate immunity, augment energy levels, and produce positive emotional and physical states. Many individuals using the eight-tape program are able to "fall asleep by intent and to use sleep for restorative purposes, reduce stress, and increase relaxation" (Monroe, 1995a, p. 4). A half-hour listening period is prescribed each day and can be repeated when necessary. The guided imagery script and suggestions facilitate the listener's ability to experience a range of imagery from different colors and the visual and kinesthetic experience of them to a journey through the T-cells in the body. Affirmations and "resonant tuning" (toning with other voices on each tape) are included from time to time to encourage a patient and shift negative to positive cognition and reduce internal dialog.

Methods of perception are suggested to direct a listener toward therapeutic goals. He/she may experience physical sensations of rising and falling, rocking or tingling, vibrations, twitches, or pressure. Visual imagery is directed by a woman's voice on each tape, always supported by music and binaural beats. This helps in visualizing parts of the body and moving through them more easily (visually, kinesthetically, or auditorily).

For example, in tape #3 entitled "Living Body Map," the facilitator asks the listeners to see or feel themselves as pure energy, as a nonphysical map—the body is outlined by sparkling, white light. Then the listeners practice changing the white light to red, representing their circulatory system; blue, the nervous system; yellow, organs and the glandular system; and orange, muscle and bone structures.

Auditory perception manifests as voices, buzzing sounds, tones, and auditory impressions from emerging visualizations. Patients learn auditory and visual cues that strengthen their ability to experience positive images, sensations, and states of relaxation. The images become guides, and are perceived by listeners based on their ability to call them forth. On tape #7, a woman's voice directs patients to communicate with an individual cell that serves as a representative for all the helper cells. It is called a "Journey Through the T-Cells." Following this powerful imaging experience and training, patients can achieve three outcomes: 1) a sense

of personal control; 2) states of relaxation, restorative sleep, and a positive immune response; and 3) emotional balance during difficult periods.

Health care practitioners throughout the United States recommend the Hemi-Sync "Surgical Support Series" for selected patients preparing for surgery or surviving a traumatic injury. The tapes offer a blend of music, embedded sound signals producing the whole-brain state, guided imagery and "exercises that reinforce the minds ability to escalate the physical, mental and emotional components of the total healing process" (Monroe, 1995b, p. 2). The tapes assist in the maintenance of a positive attitude and in the promotion of states of relaxation. Effectiveness is not dependent on whether the patient is conscious or unconscious. Reported outcomes have included less anesthesia for surgery, stable blood pressure, quick return to consciousness in the recovery room, less need for pain medication, feelings of empowerment, and the belief in positive outcomes from their surgery.

Music stimulates physiological changes by affecting brainwave states. Through measuring electrical impulses in the brain, neuroscientists have measured four bioelectric brainwave states, the beta, alpha, theta, and delta states. These states can be influenced by sound pulses within a musical composition, by a solo instrument, or by electronically generated pulses that match the frequencies of each of the brain states. The brain is stimulated to match the pulse of the music or entrain itself to their rhythm, a phenomenon known as "acoustic brainwave entrainment" (Cook & Thompson, 1999).

Brain waves are produced by the electrical activity of the brain cells. They can be measured with the electroencephalograph (EEG). The frequencies of these electrical waves are measured in cycles per second, or hertz (Hz). Brain waves change frequencies based on neural activity in the brain. They are closely tied to changes in mind or consciousness. Brainwave measurement shows that our states of mind fall into four general classes: beta (30-13 Hz), alpha (13-8 Hz), theta (8-3.5 Hz), and delta (3.5-0.5 Hz) (Cook & Thompson, 1999).

A music and imagery session can be enhanced by selecting music that enhances a specific brainwave state. For example, sound and music that entrain beta brainwaves arouse listeners, stimulate linear thinking, and enhance productivity. The mind is focused and active in beta. Beta brainwaves are also associated with anxiety. Alpha brainwaves produce a quiet, inner, and reflective mental state. The alpha state is easily accompanied by therapeutic imagery scripts and relaxation techniques. Theta brainwaves are found in waking and sleeping states. In sleep they are associated with dreaming. In waking states, deep insight and creativity are possible. Intense visualization, mental images, and emotional resolutions or insights are possible. Theta can be used in music-centered therapy sessions to help clients change core self-defeating behaviors. The delta brainwave state is associated with deep sleep, with the lowest metabolic rate, the lowest blood pressure, the lowest body temperature, and the slowest heart rate. It is a state of recuperation and physical healing (Cook & Thompson, 1999).

CONCLUDING REMARKS

Music combined with imagery facilitates healing. Music becomes an empty canvas on which to paint mental images. "Imagery from the right brain emerges in clusters of life-related metaphors, each encoded with significant symbolism" (Bush, 1995, p. 31). Musical elements have the ability to shift our state of consciousness to cause our critical faculties to recede.

Music-evoked imagery sessions allow us to override censorship. Once we relinquish control, images appear spontaneously. In an altered state of consciousness, experiences emerge from the unconscious. In a therapy session, this can lead to the completion of unresolved issues and the reintegration of disconnected and dissonant parts of ourselves. Music-enhanced imagery allows the mind to present material that helps reframe negative experiences and thinking into healthy connections and insights. Music has the ability to evoke and enhance visual imagery; therefore, it has developed into a vehicle, a medical technology for controlling voluntary and involuntary processes ranging from stress-management to facilitating self-transformation.

Interdisciplinary research in acoustics, music psychology, psychoimmunology, and psychology is providing new perspectives reinforced by empirical data that support the evolution of music in healing. Music with imagery provides a conduit through which we can access images, feelings, and memories that support the healing process. We respond universally to the power of a musical language and its harmonic, rhythmic, and melodic elements without having to learn it.

Therapists and sound healers access an individual's musical preferences, tolerances, cultural background, and overall sensitivity prior to prescribing musicenhanced or evoked imagery. Depending on the nature of the therapeutic intention, music may be chosen to mirror feelings, called the "iso" principle, or to oppose and challenge them. The therapist evaluates what the desired effect of the music session will be: to nudge the listener off a stuck position, to create an open, safe place to access disturbing memories, to cradle and support feelings of belonging, or to induce relaxation and a regulated heart and breath rate.

In a one-on-one process between a facilitator and client, imagery emerges while listening to music in a specific body position, or while being guided through a therapeutic visualization script. The challenge for the sound or music therapist in this case is to work with client-reported imagery as it is taking place to facilitate appropriate movement toward a therapeutic goal and to assess the type of imagery the client is reporting. This process can be likened to practices of indigenous healers, who evoke imagery through singing, drumming, and movement, while encouraging their patients to sing back their problems and report their visions, auditory images, hallucinations, and dreams.

The conscious use of music is a valuable service to both patient and health care professionals. Music and imagery assists the patient and their caregivers when

anxiety, fear, confusion, denial, loneliness, boredom, depression, and pain become obstacles to finding physical, psychological, and spiritual wellness. Music has the ability to stimulate or contain varied experiences and support the patient in the healing process.

MUSIC SUGGESTIONS FOR IMAGERY AND HEALING

When choosing music to accompany imaging, it is important to set a specific length of time, ranging between 5 and 30 minutes. It is important to have a tablet and pen at hand to record any thoughts or images that may arise while listening. These images can be written down while listening or immediately afterwards.

For those who enjoy painting and sketching, it may be fruitful to have art materials nearby. Also, exercises should be done in a safe and comfortable environment, away from disturbances.

To prepare for a music and imagery experience, it is helpful to take a moment to focus on breathing, to take several deep breaths, and to relax.

Music for Relaxation and Imagery

Advanced Brain Technologies Music for Relaxation
Albinon Adagio

Arcangelos Chamber Ensemble Hearts of Calm
J. S. Bach Lute Suites

Don Campbell The Mozart Effect, II

Pat Cook and Jeffrey Thompson Music for Healing the Body
Brainwave Symphony, "Alpha"

David Darling Musical Massage, balance

Bill Douglas Deep Peace

Janalea Hoffman Therapeutic Drumming
Vyass Houston Songs to Shiva (sacred songs)

Vyass Houston Gayatri Mantra: The Sound of Light

David Ison The Musical Body Tape Series
Daniel Kobialka When You Wish Upon A Star

Monroe Institute Deep 10 Relaxation

Joseph Nagler Rejuvenation

Oruc Guvenc & Tumata Rivers of One: The Rast Makam (Traditional Sufi Healing Music)

Pachelbel Canon in D

Stan Richardson Shakuhachi Meditation Music

Will Seachnasaigh Dreamings: Aboriginal Healing Didjeridu

Vivaldi

Music for Concentration and Learning

These musical selections can be played in the background while studying or writing.

Tommaso Albinoni

Arcangelos Chamber Ensemble

J. S. Bach

Oboe concerto in B-flat

Music for Concentration

Prelude and Fugue in G major

Don Campbell Mozart Effect I, Strengthen the Mind.

III Unlock the Creative Spirit

Gregorian Chant Any recording available
Hayden Cello Concerto in C, Moderato

Mendelssohn Octet

Monroe Institute Einstein's Dream
Monroe Institute Baroque Garden
Monroe Institute Concentration

Mozart Concerto no. 5 in A major for violin

Symphony in D major Five Concerti for Flute

Music to Match and Calm Anxiety

Arcangelos Chamber Ensemble Relaxation

Bhaskar Chandavarkar The Elements, Fire Corelli Concerti Grossi

Philip Glass Pruit Igoe, from Koyaanisqatsi

Hebrew Traditional Hatikvoh

Holst Mars, The Bringer of War

Boris Mouraskin Points of Light
Jeff Strong Calming Rhythms
Vivaldi Mandolin Concertos
Glen Velez Rhythms of the Chakras

Music Sets for Multiple Use in Imagery and Healing

Cook and Thompson Brainwave Symphony
Thompson Brainwave Suite
East Indian Composers The Elements
Don Campbell The Mozart Effect

Don Campbell The Mozart Effect for Children
Relaxation Company Music for Health and Balance Series

Monroe Institute Positive Immune Series
Monroe Institute Surgical Support Series
Andrew Weil Sound Body and Sound Mind

David Ison Relaxation Company Musical Body Series
The Yoga of Sound

REFERENCES

Achterberg, J. (1992). Drumming, shamanic work and healing: An interview by Don Campbell. In D. Campbell (Ed.), *Music and miracles*. Wheaton: Quest Books.

Aigen, K. (1998). Paths of development in Nordoff-Robbins music therapy. Gilsum: Barcelona Publishers.

Beck, G. L. (1995). Sonic theology. Delhi: Motilal Banarsidass Publishers.

Blacking, J. (1990). How musical is man? Seattle: University of Washington Press.

Bonny, H. L. (1978). GIM Monograph 1: Facilitating GIM sessions. Baltimore: ICM Books.

Bonny, H. L. (1979). Music Rx for surgery (Pamphlet). Baltimore: ICM Books.

Bonny, H. L., & Savary, L. (1990). Music & your mind: Listening with a new consciousness. Barrytown: Station Hill Press.

Brigham, D. D. (1994). Imagery for getting well. New York: Norton.

Bush, C. A. (1995). Healing imagery and music. Portland: Rudra Press.

Campbell, D. G. (1987). The roar of silence. Wheaton: Quest Books.

Campbell, D. G. (1991). Music: Physician for times to come. Wheaton: Quest Books,

Campbell, D. G. (1992). Music and miracles. Wheaton: Quest Books.

Campbell, D. G. (1997). The Mozart effect. New York: Avon Books.

Cook, P. M. (1997a). Shaman Jhankri and Nele: Music healers of indigenous cultures. Rosyln: Ellipsis Arts.

Cook, P. M. (1997b). Sacred music therapy in north India. In M. P. Baumann & L. Fujie (Eds.), Music and healing in transcultural perspectives. Bamberg: The University of Bamberg.

Cook, P. M., & Thompson, J. (1999). Brainwave symphony booklet (with compact discs).
Rosyln: Relaxation Company.

Cook, P. M. (2000). Crosscultural music in healing. Open Ear Journal, 28(1), 193.

Coward, H., & Goa, D. (1996). Mantra: Hearing the divine in India. New York: Columbia University Press.

Crowe, B. (2000). The profession of music therapy in the United States. *Open Ear Journal*, 28(1), 170-173.

Danielou, A. (1995). Music and the power of sound: The influence of tuning and intervals on consciousness. Rochester: Inner Traditions.

Friedman, R. L. (2000). The healing power of the drum. Reno: White Cliffs Media.

Friedson, S. (1996). Dancing prophets: Musical experience in Tumbuka healing. Chicago: Chicago Press.

Gaynor, M. L. (1999). Sounds of healing. New York: Broadway Books.

Gilmor, T. M., Madaule, P., & Thompson, B. (1989). *The Tomatis method*. Toronto: The Listening Centre Press.

Gouk, P. (2000). Musical healing in cultural contexts. Aldershot: Ashgate.

Grof, S. (1985). Beyond the brain: Birth, death and transcendence in psychotherapy. New York: State University of New York Press.

Hoffman, J. (1995). Rhythmic medicine: Music with a purpose. Leawood: Jamillan Press.

- Houston, V. (1997). Sanskrit: Planetary language of sonic healing. *Open Ear Journal*, 21(2), 19-21.
- Jarvis, J. (1988). Guided imagery and music (GIM) as a primary psychotherapeutic approach. *Music Therapy Perspectives*, 5, 69-72.
- Kalweit, H. (1992). Shamans, healers and medicine men. Boston: Shambala.
- Koepchen, H. P., Spintge, R., & Droh, R. (1992). Physiological rhythmicity and music in medicine. In R. Sprintge & R. Droh (Eds.), *MusicMedicine*. St. Louis: MMB, Inc.
- Leeds, J. (1997). Sonic alchemy: Conversations with leading sound practitioners. Sausalito: InnerSong Press.
- Leeds, J. (2001). The power of sound: How to manage your personal soundscape for a vital, productive and healthy life. Rochester: Healing Arts Press.
- Leeds, J. & Wise, A. (2000). The making of sound body, sound mind. *Open Ear Journal*, 28(1), 183-184.
- Madaule, P. (1994). When listening comes alive: A guide to effective learning and communication. Norval: Moulin Publishers.
- Monroe Institute. (1995a). Positive immune booklet. Faber: Interstate Industries, Inc.
- Monroe Institute. (1995b). Surgical support series booklet. Faber: Interstate Industries, Inc.
- Maranto, C. D. (1992). Music in the treatment of immune-related disorders. In R. Spintge & R. Droh (Eds.), *Music medicine*. St. Louis: MMB, Inc.
- Mourashkin, B. (1997). Bio-energetic music. Open Ear Journal, 20(1), 2-8.
- Pickett, E. (1995). Guided imagery and music: A technique for healing trauma. *Journal of the Association for Music & Imagery*, 4, 93-101.
- Pinkerton, J. (1996). The sound of healing. Brooklyn: Alliance.
- Radocy, R. E., & Boyle, J. D. (1997). Psychological foundations of musical behavior. Springfield: Charles C Thomas Publisher, LTD.
- Rider, M. (1997). The rhythmic language of health and disease. St. Louis: MMB, Inc.
- Rosch, P. J. (2000). The stress reduction effects of music. Open Ear Journal, 28(1), 8-11.
- Rouget, G. (1985). Music and trance: A theory of the relations between music and possession. Chicago: University of Chicago Press.
- Soule, D. (1995). The sound in inner resonance. Open Ear Journal, 12(4), 6-9.
- Spintge, R., & Droh, R. (Eds.). (1992). Musicmedicine. St. Louis, MMB, Inc.
- Schroeder-Shekar, T. (1997). Music for the dying. In J. Leeds (Ed.), Sonic alchemy.

 Sausalito: InnerSong Press.
- Taylor, D. B. (1997). Biomedical foundations of music as therapy. St. Louis: MMB Music, Inc.
- Tusler, R. L. (1991). Music: Catalyst for healing. Alkmaar, The Netherlands: Drukkeriji Kriigsman.
- Warming, P. (1992). Psyche and sound. In D. Campbell (Ed.), *Music: Physician for times to come* (pp. 230-241). Wheaton, IL: Quest Books.
- Wrangsjo, B., & Korlin, D. (1995). Guided imagery and music as a psychotherapeutic method in psychiatry. *Journal of the Association for Music & Imagery*, 4, 79-80.

Clinical Applications