Health-musicking through Dalcroze Eurhythmics

Ana Navarro Wagner

ABSTRACT

Émile Jaques-Dalcroze was a Swiss music pedagogue who advocated the use of musical activities to develop different human qualities such as consciousness, personality, temperament, the subconscious, the muscular and nervous system, imagination, thought, behaviour, action, confidence, concentration and freedom of spirit. Many of his statements and intuitions are fully recognised in certain contemporary music therapy approaches, theories and practices. The aims of this article are to: acknowledge the presence of health and wellbeing in Jaques-Dalcroze’s understanding of Eurhythmics; discuss the contributions the method has made and does make in therapeutic or wellbeing contexts; and to develop an understanding of current Eurhythmics practice from the perspectives of contemporary music therapy theory. The article begins with a discussion of the ‘health-musicking’ concept and goes on to use vignettes of the author’s practice as a Eurhythmics teacher and music therapist to illuminate the argument. A second section relates the theory of communicative musicality to improvisation practices through a health and wellbeing lens. Finally, the conclusion exposes diverse ideas on how to carry out a Eurhythmics practice through a health and wellbeing perspective.

KEYWORDS

Dalcroze Eurhythmics, music therapy, musicking, health-musicking, sociocultural, health and wellbeing, communicative musicality, improvisation.

Ana Navarro Wagner is a music teacher at a primary school in Barcelona, Spain. She holds her Dalcroze Certificate from L’Institut Joan Llongueres and has worked there as a Eurhythmics teacher for six years. She completed her MA in Music Therapy at Aalborg University (Denmark).

Email: berebomito@yahoo.com

“In my judgement, all our efforts should be directed to training our children to become conscious of their personalities, to develop their temperaments, and to liberate their particular rhythms of individual life from every trammelling influence” (Jaques-Dalcroze 1921: xii)

DALCROZE EURHYTHMICS

Émile Jaques-Dalcroze (1865-1950) was a Swiss pianist, conductor and composer. In 1892 he started teaching harmony and solfège at the Geneva Conservatory and found that students had a very poor rhythmic accuracy and no aural experience of the music they performed. He realised music theory was taught as an abstraction with no relation to the sounds, feelings and motion they represented. He thought that, in order to develop rhythmic feeling, ear training and emotional consciousness, the whole organism had to be addressed through the muscular and nervous system. He had his students walk and clap different tempi and rhythmic values, move spontaneously,
react to musical signals and improvise rhythmic patterns in group work. He would improvise music according to students’ reactions and react according to their improvisations. This way, the music created was always relational. In 1905 he presented his Eurhythms games or exercises: rhythmics (experience of pulse, rhythm, meter), solfège (ear training), and improvisation (creative development). The basic principle was to teach music through movement experiences so as to improve creative performance. He described it this way:

“The object of the method is, in the first instance, to create by the help of rhythm a rapid and regular current of communication between brain and body...The creation in the organism of a rapid and easy means of communication between thought and its means of expression by movements allows the personality free play, giving it character, strength and life to an extraordinary degree” (Jaques-Dalcroze 1913: 14).

Jaques-Dalcroze’s ideas were contemporary to the pedagogical renovation initiated by pedagogues like Johan Heinrich Pestalozzi (1746-1827), who claimed the importance of making theory come after practice, John Dewey (1852-1952), who believed in ‘learning by doing’ and Maria Montessori (1870-1952), who maintained that the child should develop its natural abilities and initiatives through play. Jaques-Dalcroze died in 1950, but lived to see his method develop in public schools, opera and theatre schools, music conservatories and in therapeutic work with blind, deaf, mentally and physically handicapped people (Caldwell 2012).

When analysing Jaques-Dalcroze’s writings, it seems that the last thing he was preoccupied with was music, but the first thing he was occupied with was music itself. That is, his preoccupation was the human being; his occupation was music. The term preoccupation comes from the Latin preoccupatio, meaning, “a seizing beforehand”. Jaques-Dalcroze (1921) takes possession beforehand of consciousness, personality, temperament, the subconscious, imagination, thoughts, behaviour, action, confidence, the muscular system, the nervous system, concentration and freedom of spirit, and uses music as a means to address these human qualities. This resembles many contemporary music therapy theories: using music as a means to an end. However, most music therapists focus on the music in order to facilitate change. Ansdell affirms that “We can and do certainly use music as a means, but paradoxically its help often only arrives when it is seen and experienced first and foremost as and end itself” (Ansdell 2015: xvii).

Jaques-Dalcroze started with music and ended with music, but in the middle he addressed the human being. He started investigating from the lack of musicality of his students, he rediscovered the importance of an holistic approach to the person (body, mind, emotions and sociability) and he went on to create a way of using music to help people achieve their integral potential. As he states:

“The aim of all exercises in Eurhythmics is to strengthen the power of concentration, to accustom the body to hold itself, as it were, at high pressure in readiness to execute orders from the brain, to connect the conscious with the subconscious, and to augment the sub-conscious faculties with the fruits of a special culture designed for that purpose. In addition, these exercises tend to create more numerous habitual motions and new reflexes, to obtain the maximum effect by a minimum of effort, and so to purify the spirit, strengthen the will-power and install order and clarity in the organism” (Jaques-Dalcroze 1921: 62).

In these examples we see that Jaques-Dalcroze presents the goals of his method not in terms of music, but of the development of the human being. In this way, we can understand his aims as a concern for health and wellbeing. The aims of this article are to: acknowledge the presence of health and wellbeing in Jaques-Dalcroze’s understanding of Eurhythmics; discuss the contributions the method has made and does make in therapeutic or wellbeing contexts; and to develop our understanding of current Eurhythmics practice from the perspectives of contemporary music therapy theory. The article begins with a discussion of contemporary music therapy concepts and goes on to use vignettes (shown in italics) of my own practice as a Eurhythmics teacher and music therapist, to illuminate the argument. A second section will relate the theory of communicative musicality to improvisation practices through a health and wellbeing lens. Finally, the conclusion will expose diverse ideas on how to carry out a Eurhythmics practice through a health and wellbeing perspective.

MUSICKING FOR HEALTH AND WELLBEING

In 1998, Small argued that “There is no such thing as music. Music is not a thing at all but an activity, something that people do” (Small 1998: 2).
According to him, music can only be understood as action and interaction in social and cultural contexts. Therefore, to music is a verb and making or responding to music is musicking. Using Small's formulation, we can say that it is not music as a 'thing' that is at the core of Dalcroze Eurhythmics, so much as musicking, music as relational action. Through this concept, we understand that what are actually constructed as meaningful in music making are all the relationships that surround and arise with musical actions. The first assumption that Dalcroze Eurhythmics shares with the music therapy field is the consciousness that music making exceeds mere acoustic events. According to Bachmann (1998), Jaques-Dalcroze was able to verify the positive outcomes that Eurhythmics had on behaviour as well as on reflexivity, memory, personal expression and contact with others.

Music's ability to promote healing and wellbeing has been valued in many cultures and throughout history (Gouk 2000; Horden 2000; Saarikallio 2012). Cultural assumptions and practices define what 'music' and 'health' mean in each context, but aspects of music making and healing or wellbeing are almost always linked to each other in some way. A recent sociocultural turn in music therapy literature has permitted the foundation of a relatively new practice with its related conceptual framework: Community Music Therapy. According to Stige and Aarø (2012), defining Community Music Therapy is not easy because of the different contexts of contemporary practice and because of the pressure that conventional clinical music therapy still exercises over the definition. Stige (2002) points out that, in order to understand how music 'works' in context, music therapists need to relate to other disciplines such as anthropology and ethnomusicology. Stige and Aarø also argue that the word “therapy” can be very controversial depending on the context in which it is used, so they defend a more broad perception of it, such as “care” or “service” (Stige & Aarø 2012: 14). They understand Community Music Therapy as ‘health-promoting musicking’, more focused on promoting health than on curative interventions. Dalcroze Eurhythmics could very well be understood as health-promoting musicking, as we will discuss further on.

MacDonald, Kreutz and Mitchell, in their publication Music, Health & Wellbeing (2012), offer another conceptual framework where music education and music therapy overlap with two other fields: everyday uses of music and community music. Theoretically, it is an interdisciplinary blend of different disciplines such as music psychology, ethnomusicology, music sociology, public health, neuroscience, music therapy and music education. This framework allows a broad understanding of the different layers of relationships (intrapersonal, interpersonal, environmental and cultural) – and their qualities – that arise through musicking participation. These authors state that, for example, attending piano lessons or singing in a choir might have secondary benefits related to health and wellbeing in physical, mental and social aspects. The contrary is also possible whereby a client who attends music therapy might acquire music skills or develop a certain technique of instrumental playing (Habron 2014).

If we blend these two approaches under a broad frame of ‘health-musicking’ (Stige 2002), a new understanding of what might be happening in a Eurhythmics lesson can be offered. Not only are pupils learning music notation, body consciousness or behaviours that improve their learning skills, they are also creating a set of intrapersonal and interpersonal relationships that allow them to construct an image of themselves which is related to their sociocultural background. A ‘health-musicking’ frame can help a Eurhythmics teacher offer the experiences pupils need in order to develop wellbeing processes in their contexts. As Jaques-Dalcroze stated:

“Education must no longer confine itself to the enlightenment of pupils in intellectual and physical phenomena. It must conduce to the formation of character, assuring to children the consciousness both of their weaknesses and of their capacities, and rectifying the former as it strengthens the latter, while enabling them to adapt themselves to the exigencies of the new social order” (Jaques-Dalcroze 1921: 189).

In this sense, we could say that Jaques-Dalcroze's occupation was musicking: creating and experiencing different layers of relationships that emanate from musical beings through musical actions.

MUSICAL BEINGS

Jaques-Dalcroze declared that “The laws of musical expression originate in the human organism, born of the observation of the natural course of our physiological life” (Jaques-Dalcroze 1921: 56). Music begins in the body as an experience, because being (in) one's body is already a musical experience (Bowman & Powell 2007). Ansdell, 94 years later, within the context of how music helps in music therapy and everyday life, affirms the same:
Musical bodies

Vignette 1: A group of 4-year-olds in a Eurhythmics lesson at a village school in Barcelona. It is carnival and there is great excitement. The teacher asks about their costumes and how their characters move: fly/jump/crawl/walk/gallop/hop? Are these movements fast/slow, heavy/light, stiff/flexible? One of the pupils moves like a lion. He starts flinging his arms, then decides to crawl, then stands up, appearing lost, not knowing what to do. After a few seconds of moving around in silence, the teacher improvises on the piano to accompany the movements she has observed, using a steady beat and a cyclic music pattern. With the music, the pupil's movement becomes more defined and solid, as if the music made him feel secure. Now, the teacher asks the others if they can copy him. The teacher picks out different characters in order to work diverse motor skills through rhythmic values, dynamics, articulations and tempi. All the children experience being accompanied by music and imitating each other's movements.

In this vignette, the four-year-old children are still developing basic motor skills. Using music to support a type of movement can help them develop their sense of balance, laterality, gross and fine motor skills (Bachmann 1998; Jaques-Dalcroze 1921; Llongueres 2002; Nivbrant Wedin 2015). How rhythm and music are helpful for motor development has been researched in the discipline of music therapy.

From a Western, medical perspective, the emphasis is placed on physiological and biological changes that clients experiment when relating to musical stimulus, such as breathing cycles, metabolism, pulse rate, fatigue levels, muscle reflexes or pain perception (Madsen et al. 1966; Standley & Moore 1995; Thaut 2000; Weller & Baker 2011). Neurologic Music Therapy is currently developing many clinical practices in the therapeutic use of music for cognitive, sensory and motor dysfunctions related to neurological diseases. Recent studies demonstrate that certain rhythmic stimuli can help recover function in people who have experienced stroke, traumatic brain injury, spinal cord injury, multiple sclerosis and Parkinson's disease (Lagasse & Thaut 2012; Thaut et al. 1996, 1997, 2007). A basic technique used in these practices is 'Rhythmic Auditory Stimulation' (RAS), which consists of offering a musical-rhythmic stimuli so that clients can synchronise their movements to the pulse or rhythm. According to Lagasse and Thaut (2012), “the auditory system communicates precise and consistent interval-based temporal information to the brain, which directly influences the organization of motor output in relation to time and space” (Lagasse & Thaut 2012: 156). This way, clients can improve gait parameters (step cadence, velocity, symmetry of stride length) and organise certain movements in temporary structured patterns. In the RAS technique, rhythm is used, therefore, to help mobilise and structure movement. Jaques-Dalcroze stated the same:

"Muscles were made for movement, and rhythm is movement. It is impossible to conceive a rhythm without thinking of a body in motion. To move, a body requires a quantum of space and a quantum of time" (Jaques-Dalcroze 1921: 39).

Recent research studies demonstrate that long-term exercise interventions with Dalcroze Eurhythmics can improve gait performance and balance as well as reduce both the rate and risk of falling in at-risk elderly community-dwellers (Bridenbaugh & Kressig 2010; Herrmann et al. 2011; Kressig et al. 2005). Eurhythmics exercises, adapted for elderly people, feature various multi-task exercises performed to the rhythm of improvised piano music and mainly challenge gait, balance, memory, attention and coordination. Trombetti et al. (2010) report the results of a randomised controlled trial conducted in Geneva showing that Dalcroze Eurhythmics practice can improve gait performance under single and dual-task conditions, balance and reduce significantly post-intervention fall risks.

Musical behaviours

Vignettes 2 and 3: A Eurhythmics teacher is in a special needs school in England. There are five five-year-old boys with an Autism Spectrum Disorder and their caregivers. The teacher proposes different melodies to develop diverse motor activities: jumping, standing still, walking forward, walking backward, standing up, sitting down. After the music lesson, the caregivers comment that whenever they want to incite a certain reaction, like standing up in order to go...
somewhere, they find it very helpful singing those melodies.

A group of seniors in a Eurhythmics lesson in Geneva. Some present dementia problems and are in a bad mood. The teacher asks them to walk around the room following the improvised piano music. Suddenly, the improvised melody becomes a well-known song for the seniors. Most of their faces lighten up and they start singing. The quality of their gait changes immediately.

In these examples we observe how certain musical stimuli help reinforce motor performances and emotional moods. From a behavioural perspective, music therapists address a certain behaviour that needs to be changed. This perspective is related to a short-term, structured and directive way of approaching a certain aspect of the client. Any form of music is used as a stimulus and reinforcement of a specific non-musical behaviour. An example of this approach is Steele’s program to modify uncooperative behaviour (Steele 1968; Steele, Vaughan & Dolan 1976) or reinforcing sucking behaviours in premature infants (Standley 2000). Navarro (2010) demonstrated that music, as a physical agent which is transmitted through sound waves, can induce specific modifications in the behaviour of neuronal precursors of rat embryo brains. These modifications actually help cellular survival and benefit neuronal differentiation. Calming effects beneficial to learning have also been demonstrated in laboratory rats (Chikahisa et al. 2006, 2007). Furthermore, some research studies show that music is very effective for mood induction (Panksepp & Trevarthen 2009).

Using improvised or recorded music as an auditory frame or stimulus for certain behaviours, moods or movements is common in any Eurhythmics lesson. Many exercises include developing some kind of physical reaction to a musical stimulus, such as clapping hands, stamping feet, producing vocal sounds, jumping, laying down, hugging a partner, or standing still. Many of the goals of these exercises are behavioural and aim to improve learning skills – e.g. to develop attention, stimulate acute listening, practise certain types of coordination, induce group cooperation, improve memory and promote spatial awareness (Bachmann 1998; Caldwell 2012; Juntunen 2002; Nivbrant Wedin 2015).

In this vignette we can see how the teacher tries to link a personal experience of life (safe/unsafe feelings) with a musical experience (tonic-relaxed place/dominant-tension place) in order to develop a deeper knowledge of themselves (their feelings, bodies and daily lives) and of the music (tonic and dominant chords). From a humanistic perspective, music therapists embrace a holistic vision of the human being; body, mind and spirit are integrated and the strengths of the person are underlined. An important concept is the ‘here and now’, where the person is encouraged to experience feelings, thoughts or behaviours in the present time. According to Bunt and Stige “A music therapist could be seen as aiming to encourage creativity and self-expressive behaviour and to maximise growth and potential, often as part of an evolving group process” (Bunt & Stige 2014: 44). The therapist’s role is seen as a facilitator that accompanies the process. Musicicking, because it is a temporal art, is a very useful practice to bring people together ‘here and now’.

In Jaques-Dalcroze’s approach to the human being, self-awareness related to daily life experiences is an important issue:

“It must be understood that these exercises do not profess to constitute the whole artistic training of the student, but they must, in due course, inevitably develop his self-knowledge-revealing to him his numerous motor faculties, and
augmenting the sum of his vital sensations. Arts cannot dispense with knowledge of life. Only by familiarising the student with life can we develop in him a love for art and the desire to pursue it” (Jaques-Dalcroze 1921: 71).

For both humanistic music therapy approaches and Dalcroze Eurhythmics, relating personal life experiences (like safe/unsafe feelings) to musicking (like tonic/dominant chords) is a creative way of learning about oneself. Furthermore, relating to other group members can induce personal insights and experiencing various musicking roles allow people to encounter different layers of themselves (Bachmann 1998; Nivbrant Wedin 2015).

**Interpersonal relationships**

**Vignette 5:** In Gulu (Uganda), a music programme is developed in a school for deaf children. They have all grown up in a 20-year civil war that has devastated most of the country. Thirty different-aged pupils and teachers attend the music activity. A Western volunteer models a eurhythmics-based exercise. She plays a steady beat on a drum placed in the middle of the circle and pupils move different parts of their bodies to the beat. She then varies the drum-playing: with her fingers (soft, small), with her elbows (hard), with her naked feet (staccato), with her hair (soft, imprecise). Her facial expression accompanies the playing (angry, tired, happy, bored). Pupils vary their movement qualities, they laugh, look at each other, imitate others...some of them even emit spontaneous wails or squeaks. Each pupil has a chance to lead and to follow the activity. The atmosphere is relaxed and enjoyable.

In this vignette we can see how, from a physical feeling (moving different parts of the body to a steady beat), in a social context (a school for deaf children in Uganda), different movement qualities and related emotions flow in a dialogue with no words between participants. Psychobiological approaches to music therapy seek to link physiological, psychological and social issues. Some neuroscientists who are studying the emotional brain aspire to understand the nature of affective experience. According to Panksepp and Trevarthen, music is first “lived and felt as experience in the body, “embedded” in intersubjective and cultural dynamics” (Panksepp & Trevarthen 2009: 106). These authors sustain that the musicking of human species evolved because of our need for social communication, learning and the creation of cultural meaning (Blacking 1976; Cross 1999; Mithen 2005; Panksepp & Trevarthen 2009; Wallin, Merker & Brown 2000).

Osborne offers a biopsychological view on how music can help children who have experienced conflict zones. He defends that from the bodily experience of music (the ear, the heart, respiration, bodily movement and basal metabolism) there is a powerful focus for social cohesion and communication, which helps children reinforce their social identity and engages in their process of trust: “As far as I know, only music can bring all these qualities together in this way, simultaneously, in a shared instant” (Osborne 2009: 351). Sutton points out the bodily disconnections people who have experienced traumatic events feel. She declares that music “exists in time, is felt physically and as emotion in the body” (Sutton 2002: 35) and can help to settle extreme experiences. In both cases, the starting point is the body but the aim is emotional and social.

Eurhythmics lessons usually take place in a group because individuals learn from each other and different opportunities for interaction and collaboration arise. In a Eurhythmics lesson many social abilities, such as eye contact, leading and following aptitudes, turn-taking skills or working with different constellations of the group are encouraged (Bachmann 1998; Caldwell 2012; Llenguere 2002; Nivbrant Wedin 2015). Jaques-Dalcroze insists:

> “The aim of eurhythmics is to enable pupils, at the end of their course, to say, not ‘I know’, but ‘I have experienced’ and also to create in them the desire to express themselves; for the deep impression of an emotion inspires a longing to communicate it, to the extent of one’s powers, to others” (Jaques-Dalcroze 1921: 63).

Through the experience of these social abilities, participants construct their cultural identity and the sense of selfhood, because the ‘I’ is always created in relation to a ‘We’ (Ansdell 2015). The sensitivity expected of music therapists in this regard can also be found in Eurhythmics practice, as in the following example.

**Musical meanings**

**Vignette 6:** A Eurhythmics teacher is evaluating pulse and rhythmic sense of a 10-year-old student group at a primary school in Barcelona. Most of them come from middle class families and present pre-adolescent characteristics. She asks pupils to walk the pulse of a classical style improvised music and then to clap the rhythm. Most of them have trouble recognising the difference between pulse and rhythm. Their movements are stiff, they look insecure and bored. When she asks one of the students to
perform the exercise on her own while others watch, she perceives even more difficulties in carrying it out. A week later, at a school party, the same student dances to a hip-hop music. She can clearly follow the pulse and rhythm of the song because she moves from one to another comfortably. The next day, the teacher tries the same exercise but with a hip-hop song. Most of the students follow it better. They appear to be more creative and communicative. This music has meaning for them.

From a sociocultural perspective, musicking is not only a physical individual experience, it is basically a sociocultural experience that takes place in a concrete context where the meaning of it is created, just as the vignette above describes. The way human beings experience musicking is related to a certain worldview which relates to assumptions, values, and the issue of meaning (Mkhize 2004; Navarro 2013; Ruud 1998; Saarikallio 2012; Stige 2002). Music is not an abstract 'thing' that exists separate from its context (Small 1998). Musicking is always embodied in a moving-sound form somewhere with someone and, therefore, it is always relational and context-bound (Stige et al. 2010). Some contemporary interdisciplinary theories defend that only through our embodied self we can experience and construct knowledge, form a memory and create behaviour and identity patterns (Johnson 2007; Shusterman 2008, 2012). The construction of an identity and the sense of belonging to a group is essential for people's well-being and quality of life (Ansdell 2015; Ruud 1997). There are some cross-cultural studies that state that music serves as a resource for self-reflective and autobiographical work and also helps emotional processing (De Nora 2000; Saarikallio 2012).

Dalcroze Eurhythmics is currently developed in very different settings across the world (Nivbrant Wedin 2015). In each context, teachers must find out the significant musicking experiences students need to develop wellbeing processes. However, one thing which is the same across cultures is that human beings construct meaning from bodily experiences (Johnson 2007). Jaques-Dalcroze (1921) observed that students had different musical skills depending on their European country of origin, but a similar disembodied approach to musicking. He wanted to bring back the sense of unity that Western culture had forgotten since the advent of the Cartesian view of the self, which established a mind/body dichotomy ('I think, therefore I am') that still exists throughout Western psychology (Fairfax 2008; Juntunen & Westerlund 2001). Jaques-Dalcroze was very concerned about this disembodiment and over-intellectuality that most Western music sustained and that other non-Western cultures did not show (Davidson & Emberly 2012; Gouk 2000; Phillips-Silver 2009).

From the participants’ bodies, across their behaviours, and by means of meaningful interpersonal and intrapersonal relationships, Dalcroze Eurhythmics gives credit to the musical beings that carry out musical actions.

MUSICAL ACTIONS

Communicative musicality

Vignette 7: In a YouTube video (https://www.youtube.com/watch?v=_JmA2CIuVYU), two twin babies are standing in the kitchen, face to face, 'talking' to each other. They only pronounce one syllable ("da"), but they use a variety of facial expressions, body movements, silences, dynamics, pitches, rhythms and phrases. Most of the comments on the video try to guess what the children are talking about.

Malloch's and Trevarthen's communicative musicality theory (Malloch 1999; Malloch & Trevarthen 2009; Trevarthen 1999) acknowledges that babies communicate with their caregivers through musical sound-gestures using musicking parameters: rhythm, intensity, pitch and silence. This psychobiological approach defends the existence of an innate ability (musicality or protomusicality) that allows infants to share and sustain a relationship coordinated in time, which is constructed with vocal sounds, facial expressions and body movement. The different communicative elements cannot be understood as independent, for they are performed simultaneously. Davidson and Emberly affirm that:

“Infant behaviour involves exaggerated melodic contours (vocalizations in song-like utterances), rhythmic pulses (including bouncing, patting, tapping and other whole body movements), all of which take place in a social turn-taking framework focused on an interaction with the adult caregiver using both sound and movement” (Davidson & Emberly 2012: 137).

The communicative musicality theory could very well serve Jaques-Dalcroze’s statement that “there are many more musical children in the world than parents believe” (Jaques-Dalcroze 1921: 47) and that “the important thing […] is that the child should learn to feel music, to absorb it not merely with his ear, but with his whole being” (Jaques-Dalcroze 1921: 49). The human being is born musical and
bonds with its caregiver musically, so these attunement experiences are crucial to the survival of the human species (Trevarthen & Malloch 2009). According to Perret (2005), communicative musicaity is responsible for creating neuronal connections that will allow the baby to experience emotions through its body. A new-born baby’s brain has a great number of potential neuronal connections that need to be activated through experience, which allows these connections to be created, expanded or to deteriorate. The right side of the brain (receptivity, intuition, body sensations, emotions, imagination and regulation of the nervous system) is dominant during the first three years of life. The left side of the brain (expression, analysis, language, logic and semantics) becomes dominant when language flourishes. This leads us to the conclusion that during the first years of life, neuronal connections flourish thanks to communicative musicaity which, again, leads us to Jaques-Dalcroze’s recognition of musicking’s relation to wellbeing (Habron 2014).

Expression and communication

Communication, understood as an exchange of auto-expressions, is a basic need of the human being; through others people construct a sense of identity and recognise themselves. Ansdell states that “As theory, the dialogical principle is simply that human being is innately relational; that a minimum of two is required to successfully maintain identity, meaning and wellbeing” (Ansdell 2015: 159). The first communicative human action, therefore, is through organised sounds and movements in time. The joy and feeling of connection is experienced much before language is developed, so communicative musicaity is related to the most instinctive and emotional part of the human being.

Nordoff and Robbins (1977) referred to the music child as a part of the person that responds to and engages with music(ing) despite his/her pathological circumstances or limitations. Their creative music therapy approach, which is based on improvisational musicking with the clients, could very well be understood under the light of the communicative musicaity theory and Jaques-Dalcroze’s approach to musicking. The music child is a characteristic everybody has by virtue of being a human being, but “only when some communicative direction or some responsive order, some perceptive openness or some freedom from confining habitual activity develops can it be said that the Music Child is “being awakened”’ (Nordoff & Robbins 1977: 1). That is, only through expression and communication can the music child – the musical being – emanate and reveal itself. Jaques-Dalcroze also considered expression and communication “an integral factor in the conditions of existence and the progress of the individual” (Jaques-Dalcroze 1921: 168).

Ex-pressing (taking out something that presses from the inside), creating (giving it a form) and communicating (sharing it with others, from the Latin communis, meaning “what is held in common” (Ansdell 2015: 219)) is a basic tenet of creative therapies (Fiorini 2007; Machioldi 2008; Murcia & Kreutz 2012; St Thomas & Johnson 2007). Music as a healing medium is essentially linked to its capacity of reflecting emotional and mental processes and to communicating them to people (Saarikallio 2012). Communicative musicaity is an innate ability that needs to be cultivated through cultural learning in order to appropriate music as culture (Stige 2003), but developing it is a basic need that any human being requires to grow up healthy (Trevarthen & Malloch 2009). Jaques-Dalcroze believed that his method “trains the powers of apperception and of expression in the individual and renders easier the externalisation of natural emotions” (Jaques-Dalcroze 1913: 32).

Improvisation: Musicking through time and space

According to Habron (2014), one of the pillars that Eurhythmics and improvisational music therapy share is improvisation as a means of creating musicking experiences. The Latin improvisare means “unforeseen” or “unprepared” (Ansdell 2015: 114). The improvisational models of music therapy are based on sharing music making, which is created spontaneously between client(s) and therapist. Attuning to the client’s musicking and developing from there is a basic tenet of these models (Bruscia 1999). Therapist and client(s) create unforeseen sounds together, communicating and collaborating in time and space (Pavlicevic & Ansdell 2012). The general principle of a Eurhythmics lesson is the same: ‘music’ is created for and adapted to the needs of the class. Students react to the teacher’s improvisation who, in turn, accommodates the students’ reactions (Del Bianco 2014; Habron 2014). Jaques-Dalcroze thought of improvisation as “the capacity of spontaneous creation” (Jaques-Dalcroze 1921: 64), its main goal to achieve a means of self-expression, for “all children feel a craving to create” (Jaques-Dalcroze 1921: 35). He also believed that creativity could only be taught through creativity, which is why “he left the door open for a variety of ways of

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presenting material. This meant that teachers were free to depart from his original structures. In fact, he encouraged variety and change through individual decision and creative choice by teachers" (Juntunen 2000: 2).

When creating unforeseen sounds together in time and space, people engage with the flexible interactive processes of creation and communication. Frölich affirms that:

“Communication (exploring the reaction of a person who is playing with us) and improvisation (creating new situations with sound and space) are fundamental learning experiences that involve more than simple skill development” (Frölich 2009: 498).

In Eurhythmics lessons, both pupils and teachers are encouraged to improvise in movement, vocally and with instruments. Tables 1, 2 and 3 give some examples of improvisations that can be developed in a Eurhythmics lesson through a health-musicking

<table>
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<th>Initial instructions: Musicking</th>
<th>The health-musicking frame</th>
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<tbody>
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<td><strong>Sound Massage</strong></td>
<td>Half of the group sits on the floor (preferably with their eyes closed) and the other half chooses small percussion instruments. Pupils with instruments move around space playing for the ones sitting. The instruction is to 'give' and 'receive' a sound massage. It is important to experience both roles and to leave some space afterwards to comment on the activity.</td>
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<tr>
<td><strong>Chopsticks Improvisation</strong></td>
<td>In a circle, all the students hold a pair of chopsticks. The teacher plays a steady pulse with any instrument that can be well heard. The first student improvises a rhythm over that pulse and signals the next student to improvise another rhythm. Everybody adds their rhythm when receiving the signal from the student next to them. At the end, the whole group is playing. The improvisation ends in the opposite direction: one by one, each student stops their rhythm until the only one remaining is the teacher playing the pulse.</td>
</tr>
<tr>
<td><strong>Passing the drumstick</strong></td>
<td>Seated in a circle, the children learn a song to pass a drumstick following the pulse. When the song ends, the person that has the drumstick improvises on the xylophone. The teacher accompanies the song and the improvisations with the piano or another harmonic instrument. When the improviser finishes, the song starts again.</td>
</tr>
</tbody>
</table>

Table 1: Examples of instrumental improvisation in Dalcroze Eurhythmics and possible interpretations within a health-musicking frame
‘The musicking’ explains the activity while ‘the health-musicking frame’ offers a lens through which to consider the activity in terms of wellbeing. The most important issue of improvising in an educational context is acknowledging that nobody knows what will happen after the initial instructions (Frölich 2009). The instructions are just an excuse to music together through our innate communicative musically abilities. Whatever happens afterwards are the “magic moments” (Pavlicevic 2012: 197), which are so difficult to express in words. Our goal as music teachers and music therapists is to offer frames that allow those ‘magic moments’ to come through.

Creativity in therapy and education

Jaques-Dalcroze (1921) talks about the “joy of an elevated character” that the child experiences when creating and participating in a collective music experience (Jaques-Dalcroze 1921: 98). This joy, he states, is of ‘elevated character’ because it comes from the inside of the child, it is not “based on external circumstances” (1921: 99). Jaques-Dalcroze understood this joy as an outcome of the child’s creative potentialities, his sense of emancipation (personhood: the ongoing process of becoming a person) and responsibility (ability to respond to a circumstance).

<table>
<thead>
<tr>
<th>Initial instructions: Musicking</th>
<th>The health-musicking frame</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Leading and following</strong></td>
<td><strong>Experience of a non-verbal communication through movement.</strong></td>
</tr>
<tr>
<td>In pairs, one leads a free dance and the other follows. When the teacher performs a signal, the roles change. This activity can also be done in trios. Different styles of recorded music can be played so that different types of movements can arise. When the activity ends, the pupils comment on the movements they liked best. Finally, pupils ‘give’ to their partner a movement that they liked as a gift.</td>
<td><strong>Experience leading and following roles: what it feels like to lead, what it feels like to follow.</strong></td>
</tr>
<tr>
<td><strong>Blind following, careful leading</strong></td>
<td><strong>Experience different types of movements which allow a person to be and feel different from the usual.</strong></td>
</tr>
<tr>
<td>In pairs, one pupil closes his/her eyes and the other one leads. The music should be ‘caring’. The one who sees takes care of the blind one and guides him/her through space with movements. Roles are exchanged and the activity is commented on.</td>
<td><strong>Develop a non-verbal communication between pupils. Observe the quality of this communication (easy, difficult, flexible, stiff).</strong></td>
</tr>
<tr>
<td><strong>Warming up, cooling down</strong></td>
<td><strong>The experience of taking care of another person and being taken care of.</strong></td>
</tr>
<tr>
<td>The whole group is in a circle. The teacher plays recorded music and performs movements which everybody imitates. When the leader is finished, she/he signals another person in the circle to do the leading. This continues until the music ends.</td>
<td><strong>How it feels to take care of a person. How it feels to be taken care of.</strong></td>
</tr>
<tr>
<td><strong>Table 2: Examples of movement improvisation in Dalcroze Eurhythmics and possible interpretations within a health-musicking frame</strong></td>
<td><strong>Experience oneself through other senses less developed than sight.</strong></td>
</tr>
<tr>
<td><strong>Observation of the pupil’s quality of movements when they are leading and when they are blind.</strong></td>
<td><strong>Experience of trusting abilities.</strong></td>
</tr>
<tr>
<td><strong>Development of interpersonal relationships: the individual and the group.</strong></td>
<td><strong>Observation of who they choose to continue the leading.</strong></td>
</tr>
<tr>
<td><strong>Experience leading and following roles.</strong></td>
<td><strong>Observation of the length of time students perform movements: if they do so for a long time or if they signal the next leader quickly.</strong></td>
</tr>
<tr>
<td><strong>Observation of the pupil’s quality of movement and communication (anxious, insecure, confident, enjoying, playful).</strong></td>
<td><strong>Observation of of who they choose to continue the leading.</strong></td>
</tr>
</tbody>
</table>
Initial instructions: Musicking

**Voice orchestra**

Pupils are asked to explore vocal sounds related to a theme (seasons; night/day; happy/sad; city/countryside). One student shows his sound-gesture and the rest of the class echoes. The following student does the same and everybody echoes. This keeps going on until everyone has shown his/her sound-gesture. The teacher chooses four of the sound-gestures and organises four groups, each performing one. The teacher conducts the voice orchestra creating rhythmic patterns. After modelling the conducting, other leaders can conduct.

The health-musicking frame

Experience the most instinctive and baby-like communication.

Experience the musicality of the sounds organised in rhythmic patterns.

Observation of any emotional difficulty with the baby-like sounds.

Imitate different vocal sounds, which allow a person to be and feel different from the usual.

Experience leading and following roles.

**Name improvisation**

Pupils are asked to say their name rhythmically and with a gesture. They are encouraged to experiment with dynamics, expression, emotion, pitch, etc. When everyone has had a turn, the improvisation starts. The teacher plays a steady beat with a percussion instrument and everybody walks the pulse in their place. A student performs his/her name, the next one adds his/her name at the same time, then the next one, etc. When everybody is saying their names, pupils can walk around, listening to the improvisation. The teacher can decide how to end the improvisation: all at once, by lowering the volume, by having them 'disappear' one by one etc.

Explore and construct the musicality of our name (our identity) in a group (where we belong).

Experience what type of emotions arise when we sing our names.

Experience of belonging to a group (common pulse) through individual names (different rhythms, melodies).

Observation of any emotional difficulties while performing their names.

**Moving voices**

In pairs, one moves freely and the other accompanies the movement with voice sounds. Then the students change roles. After the activity students are allowed to comment in pairs on their feelings during the musicking. They can share their comments with the whole group if they wish.

Experiencing a non-verbal communicative relationship through voice and movement.

How it feels to accompany with the voice. How it feels to ‘hear’ one’s movements.

Observation of the quality of pupil’s interaction (fluent, easy, flexible).

### Table 3: Examples of vocal improvisation in Dalcroze Eurhythmics and possible interpretations within a health-musicking frame

Improvisation is related, therefore, to creativity and spontaneity and it is directly linked to the instinctive pleasure of communicative musicality. According to Nivbrant Wedin, “Creativity is about breaking free from accustomed patterns and thinking along new lines, seeing the world from a different angle or varying one’s mode of action” (Nivbrant Wedin 2015: 228). This definition could very well describe what therapy is about: learning to re-frame yourself and others in order to allow other relationship patterns to arise (Navarro 2015). New frames create new views, other possibilities of understanding, being and relating. These new possibilities allow healing to emerge, because a person is no longer stuck in a rigid pattern. The flexible re-framing ability involved in any creative process enables a person to give form to experiences from the inside to the outside (Fiorini 2007). Promoting spontaneity and creativity is an important feature in some contemporary...
pedagogical approaches that link therapy with pedagogy (Garaigordobil 2003; Naranjo 2004; Wild 2003).

Creativity, therefore, is one of the meeting points of therapy and education and it is understood as a basic need to achieve wellbeing (Kenny 2006).

**HOW MUSICKING HELPS**

How musicking helps the human being is fundamental to music therapy and to Dalcroze Eurhythmics. According to Ansdell, “music’s powers are essentially mirrors of our individual and social powers, and as such are dependent on our ongoing ability to realize and to cultivate them” (Ansdell 2015: 298). What musicking offers is never a one way and unequivocal path; it is always in relationship to what we need, to how our needs match what the musicking offers and to how accessible musicking opportunities are (Ansdell 2015; DeNora 2000). Sometimes these opportunities are limited because of unequal access to musical resources, be they material (instruments, recorded music) or sociocultural (possibilities of participating in a music group or attending a musical performance). Stige and Aare state that “Your opportunities are linked to the values and attitudes of the community that you want to be part of and the match between these and your musicianship” (Stige & Aare 2012: 123). They define musicianship as the skills and attitudes that a person develops in a sociocultural context in relation to a specific music culture. One of the reasons Jaques-Dalcroze wanted to offer music education in primary schools was to help develop musicianship so that the proportion of music amateurs outbalanced the virtuosos. Offering musical experiences to primary school children – including those with special needs – was his way of demanding a right to a musical education so the coming generation would be “trained to a greater flexibility of spirit, a firmer will-power, an intellect less dry and exclusive, more refined instincts, a richer life, and a more complete and profound comprehension of the beautiful” (Jaques-Dalcroze 1921: 92).

The notion that ‘music’ is always ‘good’ is an assumption that some contemporary music therapists are reviewing through sociocultural perspectives (Ansdell 2015; Pavlicevic 2003; Pavlicevic & Ansdell 2004; Ruud 1998; Stige 2002; Stige & Aare 2012). Reflective thinking about musicking experiences in context (For whom is it good? How is it good? When is it good? Where is it good? What does musicking offer here and now?) is the starting point to understand how musicking helps. The focus is on narrative, on the way we construct the meaning of an experience, and who benefits from these narratives. Through this perspective, the assumption is that the sociocultural aspect of the human being, and not the biological individual one, is more significant in communicative development. These reflective approaches can surely be of help to the Eurhythmics teacher – in both therapeutic and music education contexts – who is already highly trained in creating musical experiences according to the needs of the class. Any musical development takes place in a context where participants create the meaning of their experience. If the teacher acknowledges this and partakes in a reflective practice, the health-musicking aims of a Eurhythmics lesson can be more fully achieved. If these health-musicking aims are acknowledged and considered, then pupils will be able to experience wellbeing processes along with their developing musical skills.

**CONCLUSION: HEALTH-MUSICKING AND DALCROZE EURHYTHMICS**

In his writings, Jaques-Dalcroze refers to many issues that contemporary music therapy researchers deal with, such as autonomy, creativity, temperament, feelings, imagination, consciousness, expression, communication, body-mind connections, individuality and group. According to Berger, “the Eurhythmics approach to music education...parallels many of the goals of the music-based clinician on behalf of rehabilitation and health” (Berger 2016: 103). Therefore, we can consider Jaques-Dalcroze’s approach as being part of the development of health and wellbeing through music in different areas of practice: special educational needs (García 2004; Habron-James 2013; Hibben 1984; Llongueres 1984; Llongueres 2002), seniors (Kressig et al. 2005; Trombetti et al. 2010), HIV/AIDS (Frego 2009); autism spectrum disorders (Berger 2016) or somatic practices (Greenhead & Habron 2015).

According to Nivbrant Wedin, “Jaques Dalcroze argued that one should develop by absorbing ideas from other art forms and from the latest research, adapting one's method to the situation, the students, the time and society” (Nivbrant Wedin 2015: 23). How, then, can a health-musicking perspective help Eurhythmics practice? Some general points can be drawn out:
Musicking: a 'big' concept of music. The broad health-musicking frame can help Eurhythmics teachers think of their lessons as a chance to music together. This can help focus on the relationships that arise through musicking and how they relate to wellbeing.

Wellbeing: the goal of any Eurhythmics lesson. What wellbeing means in each context is something the teacher will have to discover. Some groups will need containment and a directive approach, others liberation and less guiding. If the quality of pupils’ actions and reactions is observed, what suits each group in terms of wellbeing will be discovered.

Focus on the process and not the product. Framing the activities by focusing on the how and not the what means focusing on social-cultural and emotional beings. During the musicking, observation of the qualities of individual expressions, of the interaction between people and of the cultural learning will help understand what the group needs in terms of wellbeing.

Offer a safe and non-judgemental environment. Every sound-gesture that students create is welcomed, nothing is 'wrong' or 'right' in terms of self-expression and creativity. This way, the message offered is: 'Whoever you are now is fine'. Providing open-framed activities where pupils have an opportunity of expressing and relating to their sociocultural selves can help them experience wellbeing processes.

Work flexibility/creativity through flexibility/creativity. It is important that the teacher works on his/her own flexible/creative approaches to musical relationships. This flexibility/creativity will allow the teacher to adapt to the needs of the class and offer meaningful musicking experiences. Allowing different contemporary ideas to be incorporated into the practice is as important as the constant re-framing of what the practice is and how it is carried out.

Ansdell notes: “When music flourishes, people flourish too. People love music, and they love musicking together. It is not difficult to understand why. This is how music helps” (Ansdell 2015: 305). The music therapy field is expanding its theoretical and conceptual base in order to explain how musicking helps the human being in different contexts. By applying these theories to Dalcroze Eurhythmics, we can see how practitioners can benefit and gain a deeper understanding of the intuitive insights which prompted Jaques-Dalcroze to claim: “The day is approaching, I am convinced, when the music cure will attain recognition” (Jaques-Dalcroze 1921: 59).

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