

**SPECIAL ISSUE**

Guided Imagery and Music: Contemporary European perspectives and developments

## Article

## Searching for the unknown: A case study with a young woman suffering from music performance anxiety

Alice Pehk

**ABSTRACT**

This case study is based on a psychodynamically-oriented music therapy service comprising 17 therapy sessions throughout 11 months with a 19-year-old woman suffering from music performance anxiety. The main therapy method used throughout this work was the Bonny Method of Guided Imagery and Music which enabled to find, recognise and reactivate the client's anxiety-producing experiences, to become conscious of them, to accept them, to work through them, and finally to integrate the new aspects and strengths that grew from these experiences into the client's current life. The outcome of the therapy process shows its effectiveness in lowering performance anxiety and anxiety in general (measured before and after the therapy and during a six-month follow-up), decreasing psychosomatic problems as well as improving self-esteem and self-confidence, and a better sense of control.

**KEYWORDS**

music performance anxiety, psychodynamics, Bonny Method of Guided Imagery and Music (BMGIM), unconscious, fear of death

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**INTRODUCTION**

Psychodynamically-oriented music therapy – as the main approach used in this case study – provides the opportunity to discover and become conscious of the experiences (e.g. early experiences), cognitive and behavioural patterns, and values and

preconceptions of the client that can be seen as predictors of the formation of music performance anxiety (MPA) or anxiety in general (e.g. Barlow 2000; Benjet et al. 2010; Knappe et al. 2010). The main aim of the therapy has been to find, recognise and reactivate the anxiety-producing experiences, to become conscious of them, to accept them, to

work through them and finally to integrate the possible new aspects and strengths growing from these experiences into current life.

According to Heinz Kohut (2011), the individual knows that the outer world needs to be dealt with, and the developing ego begins to recognise it as the danger produced by the unknown but also as a source of satisfaction. Music which consists of balanced and meaningful elements can produce early symbolic associations with pleasurable events and produce remarkable relief from anxiety. There is evidence that listening to classical music can reduce anxiety (Chang et al. 2008; Labbé et al. 2007; Lai et al. 2008). The research also shows significant decrease of anxiety as an outcome of receptive music therapy (Gutierrez & Camarena, 2015; Bulfone et al. 2009; Guetin et al. 2009). These findings support the Bonny Method of Guided Imagery and Music (BMGIM) as an applicable method for reducing anxiety. The energies that were previously involved in sustaining anxious tension were freed and directed to more productive inner activities, e.g. making it possible to look inside one's inner world in a more relieved state and explore the themes that would be rather painful or even impossible to explore without music.

It is important to point out that intentional listening to music in an altered state of consciousness can bring an internalised sense of order, balance and harmony, as well as a sense of connection to the pulse and movement of consciousness. In BMGIM, altered states of consciousness experiences induced and supported by trained facilitators enable a multidimensional connection and interaction with music and imagery, facilitate the emergence of both positive and problematic aspects of the individual psyche, and provide access to peak experiences containing healing processes not available in waking states (Bonny 1978).

## BACKGROUND INFORMATION

Emma (name changed) is a 19-year-old music student. Her main intention in coming to therapy was an unbearable level of music performance anxiety which she saw as a major problem for her as a future musician and music teacher. Emma likes making music. She remembers, however, having suffered from MPA since she started to study and perform music. She cannot perform at any concert without experiencing a nagging anxiety. She cannot control herself and her playing while performing and it makes her angry with

herself. Musicians and evaluators among the audience make her more anxious than an audience consisting of ordinary people. Interestingly, she does not feel anxiety while dancing or acting.

Emma does not understand what makes her anxious while performing. She realises that there is nothing to be afraid of in these situations; that she knows the material and is sure that she is able to perform correctly and artistically. She recognises, however, that there is "something" that does not let her enjoy performing. Emma added that she has the same kind of feeling when she must tell somebody something that she would not like to tell or that would be hard for her to tell.

Emma acknowledges that even though other people regard her as a very calm and balanced person she often feels anxious and nervous inside. She also admits locking unpleasant feelings like anger and aggressiveness inside by suppressing these feelings.

Emma lives and learns far from home. She shows tight attachment to her family, although she seems to be highly motivated to move towards gaining more independence and freedom in her life. Her family occupies her attention very much. Emma believes that a sense of wellbeing in her family depends on her in many ways; she feels responsible for it and tries to give her best to all family members. Emma's mother likes to make her worry about her by sharing every little health problem with Emma. Mother also tends to tell Emma what to do and what the right way of doing something is. Emma meets her demands conscientiously and tries to comfort her so that she could feel better. Furthermore, Emma tries to mother her mother. She sometimes takes responsibility for her and tries to solve her problems. She finds her mother to be obstinate. Her mother does not talk much about her deepest issues and does not express her strong feelings. Emma's father seems to be a person of little authority in the family as he obeys his wife. Emma's older sister is the first close person to her. Emma's grandmother (her maternal grandmother) was a very important person for Emma in her childhood. Emma took care of her grandmother during her illness and until her last moments. Emma was the person to find her dead and this experience left its mark on her. She added that her first thought after her grandmother's death had been that she had done something wrong, that she was responsible for it.

Emma's background is highly relevant to the indicators of the Profile of Music Performance

Anxiety (Pehk 2012) – a general structure which encloses personal background, personality traits, behavioural patterns and life attitudes that are characteristic of a person suffering from MPA.

## METHODOLOGY

### Therapy method

The main therapy method used throughout the case was the Bonny Method of Guided Imagery and Music (BMGIM). In addition, other music therapy techniques (free and referential improvisation, unguided music imaging, directed music imaging) as well as techniques from other psychotherapy methods (active imagination, empty chair technique, constellations, body work) were used in the therapy processes if deemed efficient concerning the therapy process and the client's intentions and needs. In addition, other creative modalities like drawing and sculpturing were used to deepen the understanding of the process.

### Therapy setting

Because of the long distance between Emma's home and the therapist's room, the sessions were not held regularly. There were sometimes large pauses between sessions and sometimes two sessions were carried out on successive days. The number of sessions was not agreed in advance. The client and therapist decided to follow the process freely and carry on until the aims were achieved. The duration of one session was one-and-a-half to two hours. The therapy process started with an initial semi-structured interview and was followed by 17 therapy sessions over 11 months. At the end of the process, a closing semi-structured interview was carried out. Six months after the end of the therapy process a follow-up questionnaire was filled in by the client.

### Objectives of the therapy

The main objective of the therapy was to cope better with MPA and to understand what might cause such an acute anxiety before and during the client's performances. The other aim for the client was to know herself better and to gain a proper understanding of her intentions in certain activities and her feelings caused by these situations. The client also expressed a wish to have fewer questions and more answers in her life.

### Evaluation data

Qualitative as well as quantitative data were gathered from music therapy sessions and interviews. Every therapy session and interview was audio-recorded. The qualitative data included: two semi-structured interviews; field notes from every music therapy session gathered from Meaning Units (Giorgi 2005); BMGIM travel transcriptions; recordings of the improvisations; drawings and mini sculptures. The quantitative data included: the State-Trait Anxiety Inventory (STAI) EX-2 (Spielberger et al. 1983); the Kenny Music Performance Anxiety Inventory (Kenny 2005); the Performance Anxiety Self Report; the Self-Image Inventory; the ten-item subjective general self-condition scale and anxiety level scale.

The follow-up questionnaire was completed by the client approximately six months after the end of the music therapy process. The questionnaire included open questions and a ten-item scale for subjective evaluation of the total outcome of the music therapy process as seen by the client at the current moment, and the questionnaires mentioned above.

### Ethical issues

The client has given her consent for all the materials gathered in the music therapy process to be used in the current paper, including the transcriptions of interviews and sessions, artwork and test results. Personal data are presented delicately in the study. To ensure complete confidentiality, the names of geographical places or certain institutions were removed from the materials. The name of the client has been changed.

## TREATMENT PROCESS

### Session 1: Taking the challenge

Emma talked a lot during pre- and post-session as well as while imagining. It seemed that her constant chatter served as a defence against the therapist's possible intervening reflections or questions.

In her first imagination with the BMGIM-programme 'Pastorale' (Bruscia) Emma entered a scary forest. She expressed ambivalence in some aspects. The forest was scary but she also found it beautiful. She entered the forest despite being afraid of what she might find or what she could

experience. Emma found a cabin on a tree and went up there. She knew that she did not feel good being somewhere high but she still wanted to go there and have the experience once again. She refused to continue walking along the road to reach the destination, which was unknown to her, and allowed her friend to guide her back to the safe place where she had started the image. It seemed that she was not ready yet to look into the unknown parts of herself.

At the end of her image Emma drifted into superficial sleep and saw herself in a park with a fountain in the centre and four tracks leading towards it. According to Jung, the nucleus of the psyche, the Self, expresses itself in some kind of four-fold structure (Jung 1968/1980). The number four might be considered as an equivalent of centredness, balance and wholeness, moreover when a fountain as a symbol of the Self (placed in the centre of a garden or park) stands at the starting point of these roads, in the balanced centre. Jung (1968/1980) was convinced that a fountain was an image of the soul as the source of inner life and spiritual energy. He also pointed out that the symbol appeared while the individual's life was perceived as inhibited. One can consider the imagination to represent Emma's further intentions that her unconsciousness already 'knew'. She had shown a clear wish to take the challenge and to take a deeper look into herself to find the important answers and to cope better with her life.

### Sessions 2 and 3: Honey and hedgehog

During these two sessions, the focus was on Emma's stomach ache. She remembered that her stomach problems had started while she was in eighth grade. Although she spent a lot of time in hospitals there have been no biological findings.

In the imagery of the second session (GIM-programme 'Creativity I' by Bruscia and Bonny) Emma saw that her stomach was like a big bowl with an orange honey-coloured whirlwind, which caused a huge fountain of honey. Interestingly, she said she admired the fountain of honey; she saw what was hurtful, harmful and disturbing in real life as something pleasant and admirable in her imagery.

In the third session the image of the fountain was still relevant for Emma. She said she kept holding on to the stomach ache. In the active imagination before the GIM-travel she gave the stomach ache the form of a hedgehog. The therapist considered using the GIM-programme 'Imagery' (Bonny), which allows the traveller to go

through different kinds of experiences by being emotionally quite evocative, but also allowing some rest at the same time. The hedgehog ate honey and liked it the way Emma had done in the imagery. The hedgehog also scratched Emma inside but she let it happen because it was important for her to allow the hedgehog to reach up (out), but it failed. Excerpts from the session:

(Ravel): "...The hedgehog sits on the edge of the bowl and watches the whirl... it is afraid of light... There is the way out like a gallery as was in the previous imagery... The hedgehog tries to move up to the gallery and it would like to have some honey, but it doesn't succeed... because the gallery is too high for it... The hedgehog reaches up with the help of a chair... gets some honey... and goes back down... It repeats this action... It likes honey because it is sweet... the hedgehog gets full of it..."

(Tchaikovsky): "There are some scratches inside... this is the place where the hedgehog has stayed... /.../ I'm like feeling the pain that these scratches may cause... this is disgusting... /.../ I feel my stomach... it stings a bit... Butterflies landed on my stomach... it's a nice feeling..."

During the post-session, Emma made the hedgehog and the balloon-like empty hole out of modelling paste (see Picture 1).



Picture 1: The hedgehog and the empty hole

There were scratches inside the bowl which appeared there after the hedgehog had left the hole. It was notable that she saw the hedgehog on a parent's lap and it was two years old. She said that the hedgehog was in the bowl later, at kindergarten age. Therefore, we can assume that something happened in Emma's life during kindergarten years that 'scratched' her inside and took the form of a disease.

Emma seemed to be separated from her real feelings. During both imageries, there were several moments when the content was quite challenging and powerful, but Emma remained calm and neutral.

### Session 5: Moving on

During this session's imagery, Emma arrived in a soft wide warm room, which could be interpreted as a perinatal issue representing the mother's womb, and the twine she grasped and moved along could symbolise the umbilical cord connecting the mother and the child. The client held the twine until she got out of this soft and warm room to the real world represented by the image of nature. This experience was new and somehow unexpected for the client; she was rather amazed and could not see its meaning or connection to her real life. The music that evoked this experience was Vaughan Williams' *Fantasia on a Theme of Thomas Tallis* from the BMGIM-programme 'Expanded awareness' (Keiser). This music fits very well with Grof's (2008/2000) suggestions for experiencing deep transpersonal issues; the music was of high artistic quality, not familiar to the listener and with no specific meaning. The client showed that she was open to this kind of deep experience. Emma felt that in those images there were certain important issues for her, but it was still difficult to find the real meaning of the images and to integrate them into her everyday life.

### Session 8: What am I doing and why?

During the eighth session, Emma described herself as being stuck in multicoloured pieces of wool and she proposed the imagery as the opening image for a short GIM-travel with Hovhaness' *Meditation on Orpheus* and Duruflé's *In Paradisum*. The ball of wool happened to be soft and warm, but sticky and multiplying at the same time and Emma could not get rid of it. She felt angry and annoyed. Moreover, the ball had a piece of paper with a question in it, a message that Emma could not yet understand, "What are you doing and why?". She thought about the meaning of the question while sitting by her grandmother's grave. The question seemed to contain a feeling of guilt; Emma was uncertain if it was acceptable to behave in accordance to her needs and to feel her ego growing during that process. She was afraid of actualising herself and being less attached to her mother. Emma needed a Wise Old Man (Jung 1968/1980) in her imagery to tell her that everything she was doing was right.

Emma seemed to get quite close to something that bothered her, which she had not yet understood. During the session, she experienced strong fear like never before, which was also connected to body feelings.

### Session 9: Death and fear

This time Emma chose to begin the GIM-travel from the place in which the last session she had felt fear and shivering – just before the gate of the graveyard. The BMGIM-programme 'Positive affect' (Bonny) was chosen for potentially allowing and experiencing spiritual and transpersonal issues (Grocke 2002). *Scaramouche* by Sibelius was added to the programme because of the course of the imagery. From this imagery, Emma searched answers to her questions: "What is going on? What am I doing here?".

Irvin Yalom (1980/2008) considered fear of death to be the heart of anxiety. Such recognition is often catalysed by an 'awakening experience' – a dream, or loss (the death of a loved one, divorce, loss of a job or home), illness, trauma, or aging. According to Yalom, once we confront our own mortality, we are inspired to rearrange our priorities, communicate more deeply with those we love, appreciate more keenly the beauty of life, and increase our willingness to take the risks necessary for personal fulfilment. It seemed that Emma's anxiety might be connected to the fear of death. Now she could see that other people's death touched her very deeply and she was afraid of the possible death of people close to her.

It seemed that Emma had started to accept the fact of her grandmother passing away. In the current imagery, she allowed her to lie down to her grave and disappear. Excerpts from the session:

(Mozart): ".../ I see myself in a double picture: sitting on a bench by my grandmother's grave and at the same time standing by the graveyard gate...

(Barber): ".../ I'm back in the graveyard... All the gravestones are grey... My grandmother is walking around there... I see my mother who tells the grandmother to go to sleep now... the grandmother laid down into the grave and disappeared...

(Sibelius): ".../ I'm in another graveyard now... /.../ The picture of how we took care of my grandmother during her illness appears now and then...

Emma said she needed time to digest the information she got from the imagery. It was quite symbolic because digesting problems and the stomach ache have been her main physiological (psychosomatic) problems.

### Session 11: Close to the dead

In the previous session, Emma made an interesting point. Namely, she expressed her fear of losing her mother. She realised that the fear was connected to being afraid of losing a person whom she could contact. This finding surprised Emma quite a lot and she said she should look at the areas that might have connections to that theme a bit more.

Emma had had a dream of a figure of a dead body which had been quite a dreadful image for her. While re-imagining it during active imagination and talking about it afterwards, many times she expressed thoughts like “I don’t know who it was”, or “I don’t know what this imagery is trying to tell me”, or “I don’t know how to take this dream”. Because of ‘not knowing’ it was decided to leave the focus for GIM-travel open and just let things go their way.

The programme ‘Hero’s Journey’ (Clark) was chosen because the therapist proposed that Emma should be ready for a deep inner excursion following the so-called myth cycle (Campbell 1986) that might allow getting in contact with the important and deep aspects of her troubles. During that travel, Emma seemed to have reached a very deep level of the expanded state of awareness. The pictures moved slowly, she expressed herself in silent slow verbal phrases that were accompanied by deep calm breathing. Emma found herself between many dead bodies. The feeling was frightening and sad but she expressed it calmly and quietly, and she did not have any tears or physical expressions that could indicate these feelings. Excerpts from the session:

(Bartok): /.../ It is a cave, a round room full of dead bodies... a bit scary... The bodies have calm faces... older unfamiliar people... I’m alone there... it’s dreadful... I don’t know why they are there... I’m sitting down next to the bodies... it’s a sad feeling...

(Hovhanness): /.../ A big snake between the stretcher... it moves towards me... it’s not a good snake... I feel that somebody is watching me... The snake came again from somewhere... it’s bigger than me... it wants to bite me and I hide my head between my knees...

(Durufilé): /.../ The dead people’s souls rise up... I see my reflection among them... I’m in white clothes... and I feel good and happy...

Afterwards she mentioned having winced many times during the imagination, but these wincings were not noticeable from the outside. Emma could not get in real contact with her feelings that time either.

The imagination brought up two sides of Emma. The “white side”, the nice figure representing her, indicated her inner resources supporting her, giving her a sense of security and showing her the way out of the dreadful place. The snake could be considered to represent her Shadow-side that would like to attack her, also being powerful and having much energy. Emma could not discover what the message actually was that the snake should have brought her. She did not have courage to face the snake in the imagery.

### Session 12: Waves of fear

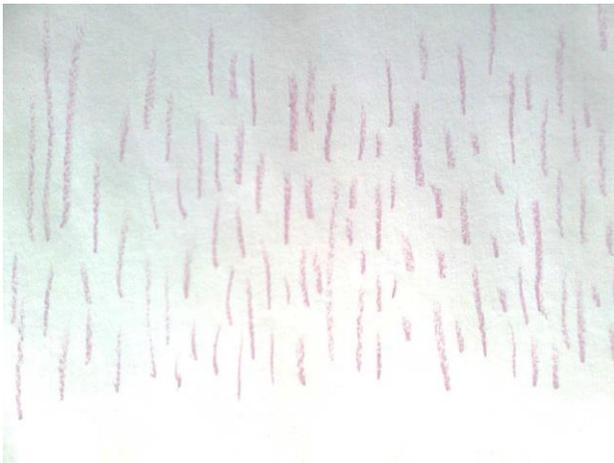
Emma drew her MPA as “light lilac” waves or flashes which came from above (see Picture 2)

Emma said that she was ready to explore the issues that might be connected straight to her MPA. She was also prepared to start the imagination by picturing herself right between the waves of her MPA.

The BMGIM-programme ‘Faith’ (Bruscia) had such characteristics which could touch the areas connected to Emma’s MPA. And so, in her imagery Emma reported expecting something big and awful without knowing what it might be. She agreed to bear the anxiety, which “that something” might cause. She expected it and regarded the situation inevitable that she could not change. It was hard, however, for Emma to see what “it” was, because there was too much light in her imagery.

Jacobi (1964/1978) considers the symbol of “too bright light” to represent the dreamer’s condition being driven into anxiety and because of these too intensive and unpleasant feelings it might lead to rationalisation as a defence mechanism. That seems to be exactly what happened to Emma. To her surprise there was no dangerous or evil “something” behind the dazzle. It was a big funny ball which had little hands and legs and was not dreadful at all. We might consider that Emma was still not ready to meet the “real issue”.

Emma felt that she was stuck in something that did not let her release her anxiety. She would have liked to know what it was, but she could not find tools for that yet.



Picture 2: Music performance anxiety

### Session 13: I should do what is good for me

At the beginning of the session, the client was very excited about her recent dream in which the key symbols were danger of the collapse of a store, and souls of dead children that could not find peace. The main feeling connected to it was big fear and she had woken up weeping. Interestingly, the client did not find any particular moment, feeling or metaphor, which she would have liked to explore more during the GIM-travel.

The therapist thought that the programme 'Guilt' (Frohne-Hagemann) had certain qualities ("dark" feelings, sadness, but also comforting and consoling) that could get in contact with the client's feelings experienced during the dream that were bothering her. Emma received many questions in the imagery. One of them was "Why is everybody in hospital?" She did not get the answer from the old lady; she could not answer the taxi driver where she would like to go. By the end of the imagery, Emma reached the situation similar to her earlier imaginations; she did not know where to go, what to do and what was bothering her. In the post-session, Emma admitted she liked to tease herself and felt that it was interesting and exciting when doing so. This kind of behaviour might be considered "a compulsive defensive mechanism for avoiding the roots of the experience" (Leiper & Maltby 2008: 106) or resistance to change (Freud 1937). Freud saw the repetition compulsion as a manifestation of the death instinct and hidden aggression. The death instinct (Thanatos) is considered to be the unconscious drive towards dissolution and death, turned inwards on oneself and tending to self-destruction, later turned outwards in the form of aggression. According to Melanie Klein (1957), anxiety is the immediate response to the endopsychic perception of the

death drive.

Emma talked about being angry at her unconscious and the therapist proposed that she might communicate with it. The empty chair technique, known from Gestalt-therapy (Brownell 2008) was used to explore the theme more profoundly. However, there were no signs of anger in Emma's way of having a conversation with that part of her. She admitted closing the feelings and emotions in her and also expressed a will to try to take the risk and express her feelings. As an important aspect in the conversation with her unconsciousness she had come to the conclusion that "you should do everything that is good for you and you know what is good for you".

### Session 15: A track to the unknown

It was decided that the issue of death should be focused on because many matters in Emma's life seemed to be connected with this theme. She considered it hard for her to go through it, but she could see the advantage that might rise from it and worked on the issue with great commitment. The GIM-programme 'Deep Soul' (Borling) seemed to be suitable for exploring these matters in depth. During the imagery, Emma talked very little in comparison to her previous travels. There were many different pictures, and several disturbing moments when her thoughts were distracted from music. Excerpts from the session:

(Pärt, Cantus in Memory of Benjamin Britten): /.../  
Many different pictures change... I see a line... ...  
Many disturbing moments when thoughts go away from music...

(Pärt, Fratres): /.../ The line is a deep and wide forest with high pines... Many gibbet girls hang on the trees... They are strangers... It is dreadful to go there... I go forward... there are so many corpses... /.../ Ordinary forest, but there is something mystic in it that I would like to find...

The key images included a bottle with a letter saying, "Go away!" and another message found by a tree saying, "Go to the right place!". Finally, she saw a family model: a mother and a father, one daughter and three sons in a picture. Emma said afterwards that the model was somehow connected to her piano playing, but she did not know how.

It seemed as if Emma was fighting against the imageries and feelings; she clearly defended herself from experiencing something too hard or awful. Afterwards she said she was too tired to continue the struggle until the end of the travel.

It appeared that there was a major fear of death behind Emma's fears. She was brave and took chances to explore the theme in different ways but something always remained unknown. She had searched for 'that something' for a very long time, but without success. She searched for something that she could never find – something that was behind the "line", on the other side of being, the "land of darkness" – death.

Being aware that she was afraid of the unknown, she understood that it did not make any sense to be scared of that, because there could not be any answers. Nobody knows what is waiting for us after crossing the line. We can speculate about those themes, we can believe in some existing dogmas connected to them, but the sane mind says that there is no way to know what is 'there', if there is heavenly eternal life or complete darkness or nothing at all, if we can continue our existence in some way or if our track ends at the moment of death. This is knowledge that is hard to integrate, but when a person can accept it, their life becomes undoubtedly easier and more serene.

During the post-session, Emma made long pauses to think about the issues and expressed an understanding and acceptance towards the development of the themes. This session had an important influence on her process and there was hope that she could integrate the experiences and understandings received from the session into her life as naturally as she handled the theme in the therapy. By the end of the session, Emma was quite convinced that she was ready to continue on her own and that she had the tools to manage with the most complicated situations and inner conflicts.

### **Session 17: It is all right not knowing the future**

Emma came to the session with the extremely important understanding that it would not be necessary to know everything about the future. That statement could be regarded as the most important statement for the whole therapy process. She had been heavily involved in searching for 'something' throughout the therapy, something she did not know, something that "had to be behind other things", but was unreachable for some reason and she did not know why. She was more than satisfied with herself for reaching that point.

Emma drew a picture to illustrate her current condition. She used many colours. She worked intensively; her movements were firm and confident. The hand moved from the lower left to the upper right side. Emma named the picture

'Versatile flowing up' (see Picture 3).



**Picture 3: Versatile flowing up**

The client explained that if she had a problem, she could solve that faster than before. She also talked about being flexible and seeing her problems from a different angle, which allowed her to find a solution more quickly and sometimes discover that the issue was not as bad as it had seemed at first sight. She also said that she could now be satisfied with her answer "I don't know" and she could take that as normal because she could not forecast the answers to many questions and problems in her life. She said she was curious about what would happen next instead of being anxious about it, she was no longer afraid to meet some challenges in her life. That understanding had taken a firm place in Emma's inner world. Emma felt calm and happy. She said that the feeling was neutral in a way, no highly positive or negative sensations, balanced. She liked the feeling. The client also said that she was looking for interesting new experiences and new challenges; she was open to everything that would come to her. She had reached a secure balanced point in her life.

### **OUTCOME**

From the client's point of view, the most important change during the therapy process was that she now knows how to listen and understand herself. This is where she found all the other shifts to start from.

Emma finds herself to be a versatile person at the current moment. She concentrates much more on herself than on other people's problems and concerns. She likes challenges and new situations more than ever before. She is open to everything that might happen and to meeting new people and getting acquainted with them. She is not afraid to

express her opinion to different people; she is not concerned about how they react or what they are thinking about her.

Emma points out that she regards her higher self-esteem and self-confidence as the main results of the therapy. She can understand her real needs and the reasons for certain feelings or moods. She can also see connections between psychological and physiological processes; she understands how these might be connected and could depend on each other. She finds that understanding herself better helps her to cope in any situation, including before and during performances. She can also regard her own needs as primary and act the way in which she feels comfortable.

One of the significant outcomes is that she can establish herself much more now in relating to her mother. She is no longer afraid of expressing her thoughts and understandings to her mother. She can also see that her mother takes her seriously and considers her thoughts.

Emma now realises that if she did not make certain decisions then nothing would move. She feels that she can control her life and she understood that her life was in her hands.

To accentuate some of the quantitative outcomes, Emma's subjective evaluations of her anxiety before and after therapy sessions are summarised in Figure 1. She perceived the biggest increase in her anxiety level during the 8<sup>th</sup> and 11<sup>th</sup> sessions. At the end of the eighth session, she realised that everything was messy, after the 11<sup>th</sup> session she was confused but optimistic concerning her future. She said that she did not know where to go, but nevertheless she felt like moving. In the last three sessions, Emma seemed to perceive a rather low anxiety compared to the previous sessions.

MPA as measured by the Kenny Music Performance Anxiety Inventory showed a clear decrease after the therapy from 140 to 87 (out of 259) and a slight increase during the follow-up to 95 (see Figure 3).

On the Self-Image Inventory the largest alteration in the scales was from extreme worrying at the beginning of the therapy to moderate carefree perception during the follow-up (from 1 to 5 on a 7-item scale).

Emma's trait anxiety as measured by STAI EX-2 shows a decrease. Her trait anxiety level at the beginning of the therapy was 39, after the therapy it was 31 and during the follow-up period it decreased to 28 (see Figure 2).

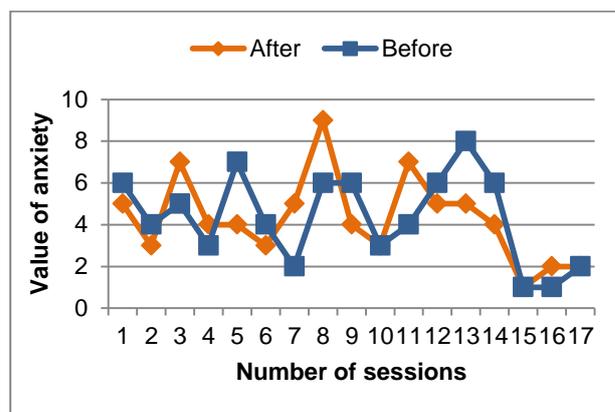


Figure 1: Emma's anxiety level before and after therapy sessions

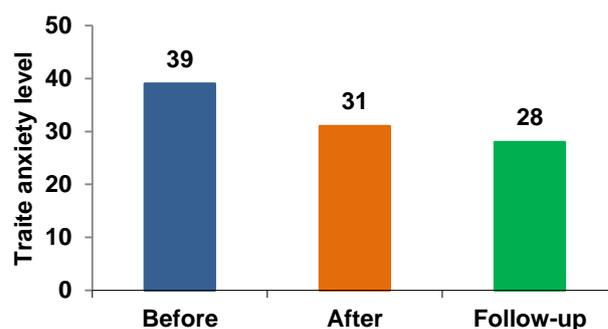


Figure 2: Changes in trait anxiety (STAI EX-2)

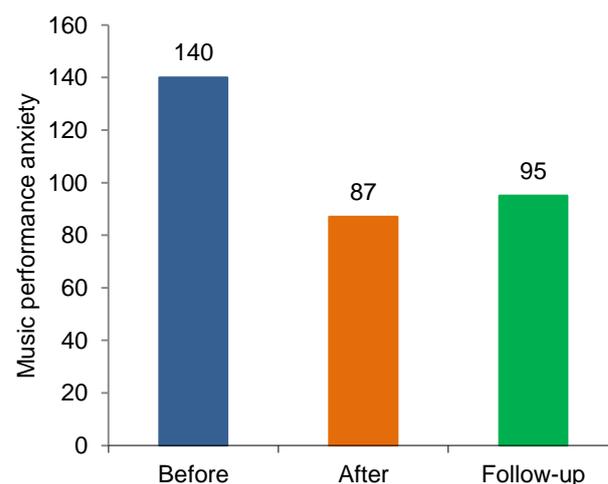


Figure 3: Changes in music performance anxiety (K-MPAI)

## DISCUSSION

Emma's case was named 'Searching for the unknown'. This knowledge was the key concept during the whole therapy process with Emma. Even in the first session, she took advantage of moving towards something she did not know, but she was not ready yet to know the unknown. The major

problem was her stomach ache, which had accompanied Emma since she was a little child. The first thing she saw when entering her image world at the beginning of her first BMGIM-travel, was the image of her stomach. This was a clear sign that stomach problems were one of the major issues that were connected to her unbalanced inner condition.

Further important personal issues that grew out of the stomach problems were obscurity and the unknown, which was clearly connected to death issues and the relationship with her mother. An essential turning point in dealing with the mother issue was in the sixth session when she made a constellation illustrating the relationship with her. Emma visibly realised then that her mother played on her emotions and that she surely needed more space to live her own life. She felt great relief after reaching these insights and once having admitted the nature of the relationship with her mother, she also acquired a clearer understanding of other processes that took place in her family.

The issues of the unknown, fear and death filled most of the sessions with Emma. She was obviously searching for something that she might never be able to find. According to the existential view concerning death issues by Yalom (1980/2008), confronting these issues can release much energy that has been used mainly for purposes of avoiding this knowledge and, amongst other matters, to also fight with anxiety that emerges while our psyche tries to reach more balance and keeps us from knowing the real meaning of it.

Emma saw the clear connection between her performance anxiety and the unknown and death issues. She struggled with herself for a long time to let herself know what could be behind her troubles and anxiety. These issues appeared in her BMGIM-travels in many ways and in her imaginations as well as in the verbal therapy process where we could find a lot of questions that had remained unanswered for her for a long time. As a result, Emma now likes to be on the stage much more and she can enjoy making music with all her 'Dasein' (Heidegger 1996).

Based on the current case study and the author's other experiences with clients with MPA (Pehk 2012), the author suggests MPA not to be the primary problem for persons suffering from it. There is research evidence which confirms that social anxiety often comes out from under other disorders and problems (Wittchen & Fehm 2003). The MPA can be seen as a defensive mechanism

in the form of compulsive repetition that prevents oneself from feeling and expressing the "death drive" (Klein 1957: 83) and gaining maturation. Erik H. Erikson (1950) describes compulsive repetition as a state while the individual unconsciously arranges variations of an original theme, which they have not learned either to overcome or to live with. The persons suffering from MPA repeat the anxious situation over and over again and are not able to move further. They are unconsciously afraid of looking behind MPA because of the fear of finding something more dreadful or identifying the unknown aspects of their personalities and lives that should be recognised, accepted or altered. It appears to be rather convenient to admit that a person feels fear before or during the performance and not to think about the aetiology and roots of the phenomenon that would make the perceived situation more complicated.

Getting to know more about and accepting one's deeper intentions, behavioural patterns and life attitudes induces remarkable changes in people's lives. The process that the individual could start would be taking responsibility for their lives and gaining maturation not only in the meaning of growing up but more widely becoming the Self – the process that Carl Jung (1968/1980) has referred to as initiation. According to Jung (1968/1980) while a person is in the initial crisis they might search for something that is not known or impossible to find. In such a case only one thing works – turning directly toward the darkness or jumble and approaching it naïvely and without prejudice to find out what the secret aim of it would be. The process of individuation generally starts with the wounding of the personality and the suffering that accompanies it. It can therefore be considered to be much easier bearing the pain of MPA than digging deep inside oneself and discovering even more hurtful matters.

Nagel (1990) takes into consideration the suggestion by Gabbard (1990) that from the psychoanalytical point of view, somatoform disorders are the transformations of painful feelings to body parts and suggests that physical symptoms of performance anxiety can be seen as a defensive mechanism "against intrapsychic conflict". The current author dares to suggest MPA in general as a defence mechanism.

According to the study, psychodynamically-oriented music therapy, e.g. the Bonny Method of Guided Imagery and Music, can be suggested as an effective tool for going through the life matters which are connected with formulating MPA. The

task for the therapist dealing with MPA-clients is considered to be relating to the clients' matters as open-mindedly as possible to enable the emergence of every unique personal issue that might have a vital role to play in the particular person's way of fulfilling the aims of therapy. At the same time, however, the therapist should especially notice the themes connected to early experiences, family matters and existential issues of the client and try to use all the knowledge impartially and respectfully remaining in the role of a supporter and facilitator during the client's important inner journey.

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