

The Music of Being: Music Therapy, Winnicott and the School of Object Relations (Alison Levinge)

Reviewed by Giulia Fedrigo



Title: The Music of Being: Music Therapy, Winnicott and the School of Object Relations | **Author:** Alison Levinge | **Publication year:** 2015 | **Publisher:** Jessica Kingsley Publishers | **Pages:** 176 | **ISBN:** 978-1-84905-576-5

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Publication history: Submitted 1 April 2017; First published 5 February 2018.

Communication is defined as the ability people have to use symbols to create meaning within and across channels, media, cultures and contexts (Miller 2016). Words are symbols we use to represent something else, and when they are combined they form the most prevalent symbol system: language. Through words we are able to communicate with other people, to share our knowledge and imagination, and to shape our external and internal world. But what if a person is left without communication, no words or symbols to express their inner feeling and thoughts? Or what if their language is so distant from the symbols we use to share meaning that it becomes difficult for others to understand? Being able to create and use symbols to communicate is one of the most momentous and mysterious aspects of humanness (Langer 2009) yet it is also one of the biggest challenges that children and adults who come to music therapy often face in their everyday life.

In her book *The Music of Being: Music Therapy, Winnicott and the School of Object Relations*, Alison Levinge explores the ideas of paediatrician

and psychoanalyst Donald Winnicott as key to uncovering the world of meaning concealed behind the exchanges with our patients, independent of the symbol that is used, whether communication is through music, language or action (and reaction).

Levinge shares pictures of particularly intense moments of her own experiences of clinical work with children and adults who are, on many different levels, impaired in their ability to communicate efficiently through the means of language. Conscious and unconscious processes that take place in the therapeutic relationship are then investigated through the lens of a psychoanalytic approach, in which the theory of object relations takes centre stage.

Indeed, as highlighted by Levinge, it is not enough for us as therapists to “create a space in which (we) can be with (our patients) to help (them) to find some relief and transformational quality to their life”, but rather what is necessary is “to find the means by which some sense of what has happened (in the music therapy space) can be made” (p. 8).

In chapter one the author gives a picture of the analytical family in which the theory of object relations was developed, providing the reader with the historical background and ideas that most influenced this school of thought. Beginning with Freud, we follow the transformation of the understanding of human development through the eyes of Klein and Fairbairn until we reach the ideas of this family's most recent influential theorists: Winnicott and Bowlby.

The second chapter describes the figure of Winnicott under two particular aspects of his life: firstly, the central role of the feminine figure in the theorist's early life and its influence on his thinking on the mother-child relationship; secondly, and just as importantly, the role that creativity played in his life through the forms of music and the musicality of his words.

Particular emphasis is given by Levinge to the liveliness, freedom and musicality of Winnicott's language, and the strong relationship to music both in Winnicott's private life and in the way he used words to express his ideas, which could be spontaneous, playful and highly attuned. Those characteristics lead Levinge "to see a striking connection between how Winnicott used the language of words and [her] own employment of the medium of music as a therapeutic tool" (p. 29). Throughout the book the author remarks on this connection between language, play and music, making it easy to adapt Winnicott's theories of the mother-child relationship to the relationship the author has, as a music-mother, with her patients.

Music takes the central role in the third chapter, where its characteristics, its connection with language and its role in therapy are discussed. Levinge uses a quote by the musician Daniel Barenboim to describe the difficulty of explaining in words what happens in a musical relationship, which is seen as a "musical experience communicated by non-verbal means [that has] the power to impact upon one's whole being" (p. 43). Music therapists and their clients enter into communication with each other but also with the different parts of our selves. The nature and quality of music can be viewed as "a special kind of language" (p. 47) which, in a therapeutic setting, can allow our patients to connect with some part of themselves that have perhaps been ignored or protected and have not been easily reachable with the language of words.

From the start of life, we are exposed to music in many different ways. Our relationship with music and with the musical elements of life begins before we are born and continually shapes our experience,

creating relations with the world. Levinge here highlights how this early experience is at the base of the formation of the first relationships in life. We make meaning of our experience with communication that is initially not made of words, but is made of musical elements that form a language and a bridge between our inner word and other relational words.

Chapter four is devoted to some of Winnicott's most important concepts and again frames her discourse between historical backgrounds and reflection on her work as a music therapist. Levinge not only explains the holding concept but also its development from Bowlby's "objective approach" (p. 57) and the importance Winnicott placed on the internal world of the child.

Chapter five deals with the concept of play and the observations of an infant in a set situation. I found this chapter particularly interesting for my practice as I can observe some of my own experiences reflected in those recalled by the author. Play can be a lens through which we understand our client's inner world, from being a "simple and enjoyable dramatization" to a "denial of the inner world life" (p. 80). In reflecting upon the mother-infant relationship, Winnicott views a direct connection to what also "occurs in the analytic consulting room between an analyst and a patient" (p. 86). This can be considered similar to those connections that music therapists also make with their clients through play. This concept is fully introduced later in chapter eight where play theory is linked to musical play. Levinge suggests that when we improvise as a music therapist we create a musical relationship and a "holding framework in which the moment to moment musical connection can evolve" (p. 125).

Chapters six and seven focus respectively on the concept of transitional objects and transitional phenomena, and on the concepts of aggression and hate. Transitional objects and phenomena are one of the most well-known contributions of Winnicott's thinking on infant development: in his theory he sees a third space between the inner, subjective and merged world and the objective, separated and external world a child is immersed in, a space in "which transitional objects and phenomena are brought in order to aid the process of keeping inner and outer reality 'separated yet interrelated' (Winnicott 2008, p. 3)" (p. 90). Within these chapters, Levinge alternates between the description of these concepts and her notes from therapy sessions, and shares not only stories of success but also, and perhaps most poignantly, her concerns and questions about what was going on

for a particular client. These reflections highlight beautifully the purpose of the book, which facilitates the reader in the process of understanding and applying these theories to his/her own experience as they are so sensitively reported by the author.

Chapter nine is dedicated to the concept of self, its dependence on the experiences we receive in our external world and on how we manage and elaborate them. The role of the mother is again at the centre of this chapter and it is described in relation to the formation of the infant's self. The emotional and relational environment in which we grow up shapes the way we develop and who we will become, and it is strictly dependent "upon both what and how we experience the external world, followed by what these experiences come to mean" (p. 134). Levinge moves through the chapter with various examples to describe the primary role of the mother in making sense of the world for the child, not only with emotional availability but also the ability to connect and attune to the child's needs. Levinge reflects on the therapy setting where our object as therapists is to "find ways of creating spaces with our patients where we are able to think about and reflect upon their experience" (p. 138). It is our role to provide the patients the environment in which they can express their self and in which "our shared music (can be) filled with intense feeling created not through imitation" but through attunement.

Further important considerations for therapy are discussed in chapter ten. Transference and countertransference are introduced to the reader as two potent tools in psychoanalysis that therapists can use. This chapter requires the reader to have some basic knowledge in order to fully understand the explanations given by the author. However, chapter eleven collects Levinge's final reflections on the impact of Winnicott's theories on her own clinical work. Levinge concludes the book with a reflection that can be considered the point of arrival of an intense journey through the world of Winnicott in which she approaches the question of how we can create a potential space in which play, and consequently change, can occur.

In order to lead the reader through a thorough understanding of the concepts, Levinge discusses them in the context of therapeutic practice, a thread which is ongoing throughout the book.

I found the topics covered in the book very interesting and appealing. This book provides some excellent material for reflections on our clinical work as music therapists, but also provides a basis for understanding the psychoanalytic theory of Winnicott, its origin and influences, and its

applicability to the field of music therapy. The book offers different clinical examples of how the theory of object relations and the creative thought of Winnicott can inform our understanding of the wordless musical moments we share with clients. It is therefore helpful for all music therapists and music therapy students. As a music therapist who often uses improvisation in working with children, I found this correlation highlighted by the author to be interesting and significant, and perhaps one of the reasons why Winnicott's theories are particularly useful.

Coming from the Italian context where Winnicott's theories are surely known to those who study psychology, but not necessarily to those who study music therapy, I was delighted to have the opportunity to engage with some of these concepts from psychoanalysis (such as the transitional objects, holding, transference and countertransference), which were less familiar to me. With this book, Levinge offers the opportunity to locate these theories within our specific therapeutic context, however the author does assume some prior knowledge of key theories and I did not always find it easy to navigate for that reason.

In conclusion, this is an important contribution to the literature and one that deepens the relationship between the analytic work of Winnicott and the field of music therapy. It requires some familiarity with the theoretical framework and concepts addressed. However, I found the language chosen by the author and her open and honest stance on her experience and inner world related to the therapy context to be very helpful in explaining theory, and the book will certainly offer stimulus to deepen the understanding of Winnicott and how his theories apply to the practice of music therapy.

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Suggested citation:

Fedrigo, G. (2018). Book review: "The Music of Being: Music Therapy, Winnicott and the School of Object Relations" (Alison Levinge). *Approaches: An Interdisciplinary Journal of Music Therapy, First View* (Advance online publication), 1-3.