

**SPECIAL ISSUE**

Guided Imagery and Music: Contemporary European perspectives and developments

Interview

In search of the lost grail: An interview with Torben Moe

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ABSTRACT

In this interview Torben Moe, current chair of the European Association of Music and Imagery (EAMI), reflects on his own motivations and experiences at being one of the pioneers of Guided Imagery and Music (GIM) in Europe, both as a trainer and as a clinician and researcher within the psychiatric establishment in Denmark. He has also been a driving force throughout a ten-year-long process which has led to the official formation of the EAMI at the 12th European GIM Conference in Athens, September 2016. The interview concludes with some thoughts on current and future possibilities of GIM, and a special call for readers' help with the search of the lost grail.

KEYWORDS

Guided Imagery and Music, healthcare, the unconscious, European Association of Music and Imagery

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INTRODUCTION

Steen: You are currently the first chair of EAMI, you were in the steering committee in the ENGIM network and you were in the European GIM movement almost from the beginning, being the second primary trainer in Europe after Margareta Wårja. I know that you have been working toward

the creation of EAMI for a long time. I would like to take a look at the events from your personal perspective right from your first experiences with GIM and up to the present, and after that have some thoughts on future perspectives.

But first and foremost: What is it that drives your work with GIM? There were other times back when you first made contact with GIM, what happened?



Photograph 1: Torben Moe

BACKGROUND

Torben: I did various things after high school. I helped to make the Danish production of *Hair* and I also joined the political action theatre group *Solvognen* (which created controversial performances in public spaces, the most well-known being the *Santa Claus Army* which entered the most popular mall in Copenhagen and gave away the goods on the shelves as Christmas presents to the customers). There was an assistant telling me that if you want to do some serious theatre, go down to Poland, to the Laboratory Theatre created and led by Jerzy Grotowski (Encyclopedia 2004) (see Factbox 1).

So, I went down there, I did not know what I was joining but there were hundreds of people in line for the admission tests. I explained to the director that I had acted as a police officer in the supermarkets and things like that, and he did not believe his own ears because it was behind the Iron Curtain and it was a whole other world I had come down to. For six months, I became part of a regular group who worked together day and night and we had nothing, just ourselves. It was interesting to work with the unconscious. It's like: "I can see you're trying to tell me something – but what is it? What is it really?" The interaction with others was amazing. You became incredibly sensuous about how you experienced other people and what you believed in – using almost Grotowski as a kind of Bible.

Steen: That must have been a very intense experience indeed?

Torben: It was very intense; we just had to find each other non-verbally and I was supposed to make some instruments or sounds that could support the movements of others and it was really exciting. I was 23 years old and had just done high

Jerzy Grotowski was born in 1933 in Rzeszów, Poland and died in 1999 in Pontedera, Italy ('Jerzy Grotowski - Biography | Artist | Culture.pl', n.d.).

He founded the Laboratory Theatre in Wrocław, Poland ('Strona główna - Instytut im. Jerzego Grotowskiego', n.d.), and the workcenter of Jerzy Grotowski and Thomas Richards in Pontedera, Italy ('Workcenter of Jerzy Grotowski and Thomas Richards', n.d.). These were experimental theatres focused on the 'total act' as an authentic creation within the relation between actor and audience, with the following qualities (with many others) ('Grotowski Statement of Principles', n.d.):

- ❑ The actor's act - discarding half measures, revealing, opening up, emerging from himself as opposed to closing up - is an invitation to the spectator.
- ❑ This act could be compared to an act of the most deeply rooted, genuine love between two human beings.
- ❑ The use of non-verbal voice was part of Grotowski's investigation into the use of the actor's own self as the substance of performance.
- ❑ Projects like his Special Project (1973) or Przedsięwzięcie Góra (Project Mountain) (1977) took the form of group séances that had an ethical and psychotherapeutic dimension.
- ❑ They consisted, amongst other things, of slowly building interpersonal systems of communication - first using movement, then using the voice, finally, through group singing.
- ❑ Participants included Peter Brook, Jean-Louis Barrault, Joseph Chaikin (Open Theatre), Eugenio Barba (Odin Teatret), Luca Ronconi, Andre Gregory ('Jerzy Grotowski facts, information, pictures | Encyclopedia.com articles about Jerzy Grotowski', n.d.).
- ❑ Grotowski described his rehearsal processes and performances as "sacred", seeking to revive what he understood to be the routes of drama in religious ritual and spiritual practice ('Grotowski Statement of Principles', n.d.).

Factbox 1: Jerzy Grotowski's Laboratory Theatre

school and then got to do something radically different. The whole idea was called the nude theatre, that is, to take off all the costumes and see what was left there. It was incredibly inspiring and it clearly laid the groundwork for my interest in music, psychodrama, etc.

When they worked on a performance, they spent three years making that performance. The

Odin Theatre in Holstebro, Denmark, also comes from Grotowski and all that tradition and that way of working goes back to Grotowski. It's a bit of a coincidence that the leader of expressive arts also worked with Grotowski; he now has an institute in Switzerland and they work with the unconscious too, just in a different way.

When I came home from Poland, I would have liked to have made that kind of theatre almost as they now have in Aalborg and call it creative movement. I would have liked a permanent group, and I considered joining the Odin Theatre, but then it was either the family or the Odin Theatre. Grotowski had some interesting thoughts in which he said that you can go both ways: you can also take the sensuous into society and take up the fight there. I think that became my mantra. It was really an eye-opener, it was probably there all my interest started. I went home and started at Sct. Hans Hospital; I used some of the exercises with the patients where I combined movements and music, and so I was completely hooked.

FIRST EXPERIENCE WITH GIM

Torben: I had started my work at the psychiatric department at Sct. Hans in Roskilde in 1976, and in the mid-80s I joined a GIM conference in Stockholm. I was invited by Margareta Wärja, who was just educated as a GIM fellow, and Frances Goldberg was the teacher.

Gestalt was very much mainstream at that time, Yalom was taught in the department at Sct. Hans and my participation in the conference was paid by the institution. It became a landmark journey for me, I met Frances Goldberg and we decided to create a Nordic music therapy supervision group, with Goldberg as supervisor. During the conference, I had a very strong personal experience with strong emotions. It was unexpected and it left a lasting impression that provided the motivation for continuing in the supervision group and later to begin the education in England.

Steen: Was your experience in the first GIM seminar something that resonated with your experiences at the Laboratory Theatre?

Torben: I don't know. GIM hit more deeply in a way – more involuntarily as a bomb. In Poland, you have a black room – “tell me who you are and what should be done”, so there were slightly different challenges.

Steen: In the comparison between the GIM experience and the Grotowski work, GIM was more like a bomb that hit more deeply?

Torben: As it was so unexpected, it felt deeper; the other one was building more gradually, there was more control. Anyway, they are connected and I found that both were very interesting.

I joined GIM training level one and two in Canterbury, England, led by Marilyn Clark and assisted by Linda Mardis Kaiser. I found new and very inspiring friends among the members of the group in which I was the single man. The experiences were deep, and I remember once, I visited the Tate Gallery on my way home and found the pictures extremely beautiful; there was this sense of timelessness that I found very alluring.

At Sct. Hans, I had improvisation groups with young patients at that time; they were very open and receptive for new impulses, but some of them found it very difficult to be both active players and reflective at the same time. They benefitted a lot from the introduction of the GIM method, where they could just listen to the music and focus on what happened within, which worked very well.

After I had organised the first GIM level one in Denmark, where I was assisting Frances Goldberg and created the first GIM association in Denmark, members of my training group in England organised the first European GIM conference in Findhorn with 40 to 50 participants. People came from Sweden, we were a small group from Denmark and I became room-mate with Leslie Bunt.

Steen: What was that thing about the grail?

Torben: I remember we were in this shop discussing if we should buy this grail that I found, and it became the symbol passed on to the organisers of the next conference. It was passed on from conference to conference and it happened that there was a conference every second year. However, at some point in time the grail was lost and we don't know where it ended up.

FROM COORDINATION GROUP TO ENGIM TO EAMI

Torben: We had the next conference in Denmark in Skælskør, where we set up a coordination group to keep things together in between conferences. I was assisting Frances Goldberg in Sweden and Norway, and I got in touch with the music therapists

there. I gave GIM sessions in Sct. Hans Hospital, private sessions and sessions in connection with the courses where I was an assistant, and thus I became a GIM trainer.

In Ammerdown in 2006 we discussed a lot and agreed that the network was very *con amore* and that a more structured format would be more trouble than good. In the following years, however, some of us felt a little remote-controlled by AMI, not because they in any way restricted us, but because the European educational tradition seems somewhat different than the American. We have a tradition that learning takes place in diverse ways, whereas the American tradition might be more fixed in a form of apprenticeship; it seemed more hierarchical where it practically was ruled by a few people and it all happened far away from us, in more than one sense. When you were to be approved as a trainer, some criteria were exercised that we, in Europe, regard as quite personal and you might want to keep for yourself; for example, documentation of one's spiritual conviction – and how do you even document that? There was not complete agreement between the European tradition of learning and the American, and it eventually resulted in a need to do things differently. We then decided to set up a small group, and Dag Körlin, Margareta Wårja, Leslie Bunt and I became 'boat keepers', as a task we received from the community.

We would like to keep the boat in the water, but at the same time one can imagine we sailed a little on our own roads, sailing a little in our own direction relative to the mothership in the United States. It was quite in line with Helen Bonny's thoughts that her GIM model could be interpreted in many ways and seen as a tree with many branches and with many possibilities for developing the branches.

There was also the main tradition that one could 'only' use classical music as a frame of understanding and as the primary media, and we experimented much more with jazz and world music. Especially on courses I held in England and Norway where we tried new models and ideas evaluated on the courses, and this resulted in compiled programmes which represented something new that has since been used by others in the community.

So, there was something new on the musical front, an extension of the compositions and of the musical diversity. Finally, the development of Music and Imagery and short pieces of music began. This occurred while cognitive and evidence-based short-

term therapies became popular and became highly prevailing in the healthcare system and almost established a monopoly of short and evidence-based therapies, where your goal almost is to have as few sessions as possible. It can be very difficult to compete with this if you are in private practice and compete with psychologists who receive government support and you argue that clients must pay more to get GIM sessions.

The trend with short-term evidence-based therapies evolved into the prevailing standard, and everyone had to adjust so that if you wanted to work widely in the healthcare system you had to use sessions of 50 minutes duration. Then there was a whole wave of group sessions, which is now a whole special education by Frances Goldberg and also by Lisa Summer. Margareta Wårja contributed with Short Music Travels, and I have also used such a format in Denmark and Finland.

Steen: There seems to be much agreement on this development?

Torben: Yes, there is a lot of consensus about it in Northern Europe and I believe in Southern Europe too. Now the educational working group has described these formats and included them in the training standards document so that it has been formalised. As I see it we have now made a formal structure that in many ways resembles any other association structure which acts as an interest organisation; this is, of course, non-profit but is also a formal structure that funds can relate to more than a loose network structure. So, you can say in a way that you have mirrored the funds' way of organising themselves, making it easier to get funding.

It does not need to imply changing the philosophy itself in the therapy; there is nothing to prevent the same level of *con amore* or interest or motivation or spark. On the contrary, if it turns out that it is possible to get funding to use the short music listening formats, you have the opportunity to broaden the method more in the healthcare system. However, if you are restricted to the full format with one-and-a-half-hour sessions, you are left in private practice and even though you are a Jungian to the fingertips and fight for depth therapy and believe in the depth of the transpersonal perspective, you are opposed to market forces. At this point, I can use Marilyn Clark's own statement: ten years ago, she had 20 clients a week and now it is less than half no matter what actions she takes to promote her business. Of course, it can be done, but time is

much more difficult for those deeper forms. You can lament that but it is also a balance that you can come up with a message that you can spread to more people.

THE CELEBRATION IN ATHENS

Steen: In Athens, EAMI was formed permanently – after a conversation and a process that has taken place since Ammerdawn in 2006 – it has taken ten years (Wärja 2010) (for more details, see Factbox 2). What is your personal experience of that. What is your personal experience of that process and how was it to experience that accomplishment? You were jumping into the Mediterranean at midnight?

Some steps in the development of the GIM movement in Europe (drawing on Wärja 2010).

- ca. 1986 First music therapy seminar at the Löwenströmska Psychiatric Clinic near Stockholm in Sweden with GIM, introduced by Frances Goldberg.
- 1986 First GIM seminars in Canterbury, England by Helen Bonny, later Marilyn Clarke and Linda Kaiser Mardis.
- 1991 First GIM training in Sweden by Frances Goldberg and assisted by Margareta Wärja.
- 1991 First GIM training in England in Canterbury by Marilyn Clarke and Linda Kaiser Mardis (completed in 1994).
- 1993 First GIM training level one in Lithuania by Helen Bonny and Margareta Wärja.
- 1994 First level one training in Austria.
- 1995 First level one training in Oslo, Norway.
- 1995 First level three training in Germany by Frances Goldberg.¹
- 1996 First GIM conference in Findhorn, Scotland.
- 1997 2nd GIM conference in Skælskør, Denmark.
- 1998 3rd GIM conference near Stockholm, Sweden, Margareta Wärja becomes the first European primary trainer.
- 1999 First training in Alicante, Spain for European students by Frances Goldberg.

¹ Level three is a more comprehensive training and as such it is mentioned separately. There is no information about level two trainings in relation to the expansion of the GIM movement in Europe.

- 2000 4th GIM conference on the Isle of Elba, Italy.
- 2002 First level three training in Denmark/Norway.
- 2002 5th GIM conference in Krummendeich, Northern Germany.
- 2004 6th GIM conference in Bulgaria.
- 2006 7th GIM conference in Ammerdawn, England.
- 2006 First training in Spain for Spanish students by Denise Grocke & Ginger Clarkson completed in 2008.
- 2008 8th GIM conference in Fevik, Norway, formation of European Network of GIM (ENGIM).
- 2010 9th GIM conference Laguardia, Spain.
- 2011 First trainings in Greece (in English language) by Dag Körlin.
- 2012 First trainings in Greek language by Evangelia Papanikolaou in Greece and Cyprus.
- 2012 10th GIM conference Vadstena, Sweden.
- 2014 First training in native language in Spain by Esperanza Torres.
- 2014 11th GIM conference in Berlin, Germany, preliminary formation of the European Association of Music and Imagery (EAMI).
- 2016 12th GIM conference in Athens, Greece confirmation of the EAMI and the formation of a committee of educational standards.

Factbox 3: Expansion of the GIM movement in Europe

Torben: It's true – it was a formidable adventure. It was a great and wonderful way it was celebrated; it was just such a way I had wished it to be, where the formal and rational part works on its own premises. There is, on the one side, some money coming in which is used to initiate some projects or to create a structure that can surround the work; then, on the other side, you have the whole celebration and the joy of realising that this is the most reasonable thing to do to support the spirit in the bottle. Therefore, it was so amazing and festive to experience the way the music came on and a great joy and celebration, and I think this points to the future, for hopefully there will be many young people who have many ideas and initiatives, nuances and buds to contribute that we have not foreseen at all, that can help open up new dimensions and help the unconscious to be allowed to be present and benefit all men.

It was really the consummation of a long-time process, but what I like is that we have the union

structure that works completely rationally and everyone agrees to pay some contingent. However, if the more therapeutic process is mixed into this and a kind of circle discussion is created, then I start to doubt it; it is like mixing two things that I do not really think belong together. Of course, members need to trust the chairman and the board that they do not steal from the box and so on, but I think it is good to have the union structure on one side and then the other work on the other. Of course, it must be so that the association structure supports the potential of the educational structure, so that those who have some experience and time are given a little money to meet and to find out how to handle this. Another aspect of this is that I really hope that the organisation and the philosophy in the future will be characterised by inclusion instead of exclusion of different perspectives and practices.

Who knows, it may well be that we can unite with the United States on a higher level. But I think this is the right thing to do at this point in time. The celebration was very affirmative, it was also sunny and hot under favourable surroundings, and maybe it's part of it as we are not able to plan or decide over the circumstances and coincidences that happen to support us.

PERSONAL VERSUS PROFESSIONAL PERSPECTIVES

Steen: You have presented a picture where the engagement and motivation started with a very personal experience, but at the same time you were employed in psychiatry. I guess for many these very personal experiences contribute to the motivation to work with GIM. Is it a kind of duality that many have such personal experiences as motivational factors, but the expansion of GIM does not go from mouth-to-mouth in relation to such personal experiences, but by research and treatment in the healthcare system?

Torben: It probably has something to do with how to unite the different worlds. One could also imagine that it was founded in spiritual communities such as the Roy Hart tradition, but I think there has been a move in the direction that for some 'strange' reason there is a need to document what you are doing.

Steen: It's needed because you want to use the method in the healthcare system?

Torben: That's it, and therefore you can say that to be allowed to do it, you have to prove that it works.

It is a gift and a great experience to see that when you have patients who get that personal experience, and when it is reflected upon and in a way repeated for them, they get an experience they will never forget. I already saw this with the first patients because afterwards they were asked what they remembered from the therapy. Despite the fact that they might have been almost psychotic during periods then what they could remember were their personal experiences during the music. So, this survival and personal experiences we also see with the patients and that's all about it, so I don't know if I see it as a duality. I don't think I do, I see it more like a kind of joining of the two halves of the brain.

Steen: Helen Bonny also described her very personal experience where she writes that she had to go to therapy for a long time and after a number of years of personal development and therapy, then she became a music therapist?

Torben: Well, that's right, but it's probably for many people an avalanche that's started and it takes some responsibility and self-care to follow it up, and at the same time it's not something you can demand from people that they have to do. Some of them may forget that again, which Helen Bonny also did in the sense that she put it on the shelf for a few years, maybe while she had smaller children and when she reached the age of 40 she took it up again. Maybe it also has to do with stages of life and maturity, it does not disappear in the blue sky, but it is kept somewhere.

Steen: How do you see the personal development-oriented perspective for GIM in the future? Do you think there is a revival coming around the next corner?

Torben: I would like to see it in that light, but I think I have to admit it's difficult. I can easily see GIM in the health services in many different forms and probably also many other short-term GIM branches. At the same time, I think there will be some people who seek immersion directly, who might want a spiritual retreat that they might associate with, but maybe more at an existential level. That is, one has a kind of philosophy of life that you do this every year (go to a retreat). In any case, it is difficult to get many clients. There are not any of my students who have a lot of clients, but on the other side they may be very happy with the clients they do have.

So, it's a matter of one's life-base and maybe you want to have Jungian groups, you could have

GIM where you have a permanent relationship and maybe also organise a three-day retreat where you make GIM or maybe a whole week where it can be a more selected or passionate group that wants to work that way; groups that are used to a specific environment where it has been built up around GIM instead of a person. I can imagine that some people would want that kind of personal development work.

Steen: What about just ordinary people who would like personal development to take a series of GIM sessions?

Torben: Yes, I would like to have that, but it's just very difficult, I've had private GIM clients, and I'm not alone in having that problem. So, I'd say that the demand is not very big, but it's probably also about advertising. I have not spent any money on it; it might be good if I put a full-page ad in the main newspaper, but it costs money to do it – it may be that you could do it, but even though we have tried different strategies for seeking alternative environments (there are many offerings), there are many alternative therapies that you can go to.

PRESENT AND FUTURE PERSPECTIVES

Steen: You currently work as part of a research project with GIM adapted for refugees with PTSD, and you see a future for GIM in the form of diverse adaptations to different patient groups in the healthcare systems?

Torben: In the United States, for a number of years, there was a tendency of cultivating GIM according to a philosophy of immersion and it was more detached from the healthcare system and work life. But this comes at the expense of seeing more of an advantage in getting into the game and showing the established healthcare system that we can do something that can benefit many patients, including patients who have never heard of classical music or never heard that music can be used in this way. Then you get into a much larger field with several different diagnoses and you can perhaps help relax the rigidity of the diagnostic system when it actually turns out that GIM may work with patient groups where it had not been thought that it could work, and so on. There are many examples today of how to adapt the therapy to different groups that you work with, and there is also work within the field of somatics that have

come to fruition in recent years. So instead of saying, "It cannot be done" we can say "How can it be done?".

Steen: One of your patients from the recent pilot project (at the Trauma Clinic for Refugees) listened to the music every day and, if not, his brother would say, "I can see you have not listened to the music today".

So, the music can be a very active resource, you can pick it up and play it anytime in everyday life between the sessions, which may be crucial for some patients in order to stick to the course of recovery. So, it seems that this is an added advantage with GIM?

Torben: It's not so uncommon now in other therapies, in cognitive therapy for instance, you use a lot of home assignments and you are structuring and selecting the task; so the entire contract structure is very parallel, you ask the patient if it is appropriate or too much etc., and you also use it in mentalisation-based therapy, for instance, when you say: "Now you need to be aware of what others think" etc.

It has become a much more active form of therapy today. I remember a patient lying in bed – when he was scheduled to speak with the doctor, he got up, ironed his shirt, and when he had talked to the doctor, he went to bed again. Maybe he got better over time, but at least it is not something you would do today. What we also do is in fact a behavioural experiment that puts on music, has a certain way to sit up etc. In that way, it is a very effective element and in turn helps to defend short-term therapy and it is something patients can learn and do afterwards.

One can say that it is a very strong card to work with the unconscious and it activates a lot of things where you could break a sweat when working in short-term therapy when you see what is being started. Then, you navigate in stormy weather, at least navigate carefully and with much umph... I have such a picture of a steering wheel – you have to be fairly firm with how you want to land this and be fairly willing to renounce new achievements that may lie right ahead or maybe not. Who knows if more sessions would be able to bring more closure; maybe, on the contrary, it could open up more and things could get worse.

So, I think there is a great obligation in short-term therapy that you are very aware of what is being started using the music and very humble about the fact of what three to four minutes of

music can start; you have to be very aware of how to structure the short-term therapy and at the same time there is no guarantee that nothing can show up. But after all we are not the first to work with dreams or with energy, others are also working with dreams and energy and that part of consciousness.

Steen: I think this is a substantive statement to leave as a conclusion of the interview and possibly start new discussions. Thank you for sharing your experiences of the progression of the European GIM movement and your thoughts about the future with the readers of *Approaches*.

Now as a final act we would like to hand over to you, dear readers, the challenge of finding the 'Lost Grail'.

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