

A New Understanding of Orff Music Therapy

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Abstract: Music therapy, also known as music therapy, or music medicine, is an emerging and interdisciplinary discipline that integrates music, medicine, and psychology. The idea and clinical application of music therapy have been around for a long time, but it was founded as a discipline in the 1950s. After half a century, music therapy has developed considerably and shows a bright future. Music therapy has developed rapidly in a relatively short period due to its outstanding applicability and has gradually transformed into a bio-psycho-social model. This paper describes the scope of music therapy and reviews the development of music therapy in China and abroad. It focuses on the role and development of music therapy in the field of special education. Orff music therapy is a very effective music therapy method, which combines music, dance, language, rhythm and so on effectively. The paper presents the whole process of training children with intellectual disabilities using the Orff music therapy method including playful and improvisational music activities, combined with language training, and music and body movement methods. It also envisages the shortcomings in the future development of this emerging fringe discipline

Keywords: Music therapy, Genres, Orff Music Therapy, Applications, Perspectives.

1. Introduction

Music is a special language whose frequencies, rhythms, and regular sound vibrations produce physical energy that acts on the human physiology and psyche. It enhances the physical and psychological well-being of patients with a variety of conditions, improves their cognitive and social skills, and relieves physical and mental pain. Music therapy is an emerging cross-cutting and applied discipline founded in Europe and the United States [1]. Although it has been in existence for just over half a century, music therapy has spread and grown at an astonishing rate in many countries around the world. In China, music therapy is not widely used, and many people do not even know what it is. This paper, therefore, provides an overview and analysis of the history and current status of music therapy, a discipline with not only psychological and psychiatric expertise but also a deep aesthetic and artistic character, and offers some constructive ideas for the future development of music therapy. The aim of music therapy is to change the physical, verbal, social,

psychological, emotional, and other aspects of the client's life, generally to facilitate non-musical goals.

2. Review of the Literature

2.1. Inside Music Therapy

As music therapy is a young and applied discipline with a wide range of disciplines, applications, and schools of thought, there is no single standard definition of the discipline in terms of how music therapy has developed. This is because music therapy is, after all, a relatively young discipline, and because music therapists from different countries and nationalities are influenced by a variety of factors such as different cultures, histories, economies, politics, and medical conditions, as well as the differences in the areas and therapeutic approaches in which music therapy is carried out by specialists from different countries, giving rise to inconsistent definitions. Simply put, music therapy is the use of all forms of musical activity, including listening, singing, playing, rhythm, and other means to stimulate and hypnotize the person and have the sound stimulate the body to respond for health purposes.

According to traditional Chinese medicine, the five tones enter the five organs and regulate the balance of qi and blood and the yin and yang of the internal organs. From the perspective of modern medicine, beautiful music, transmitted to the body through the auditory organs, produces subtle harmonious resonance. It is a kind of benign stimulation that can act through the central nervous system to regulate blood flow, promote blood circulation, enhance heart, brain, liver, and kidney functions, increase gastrointestinal motility and digestive gland secretion, and strengthen metabolism [2].

As far back as primitive societies, Westerners believed that music could influence mental and physical health. Some tribal shamans or mages used drumming or singing sacred songs for magical and religious purposes, either to exorcise evil spirits or demons from the patient to cure illnesses or as a prelude to actual healing rituals. It is generally accepted that the pioneers of music therapy were the ancient Greeks, and the theories of Pythagoras, Plato, and Aristotle can be said to be the origins of the principles of music therapy. Pythagoras first introduced the concept of 'music medicine', believing that music could have the effect of increasing or relieving human passions by affecting the harmony of the soul; Plato pointed out that music could influence human behavior and consciousness; Aristotle believed that music had the value of relieving emotions. The ancient Greeks' understanding of the medical effects of music had evolved from a sorcerous concept to a philosophical and ethical perspective, paying attention to the application of clinical diagnosis and logical thinking to the practice of music therapy, and beginning to focus on the psychological effects of music [3]. Music was seen as a means of relaxation and stress reduction. Currently, the most important international music therapy academic groups include the World Federation for Music Therapy, the European Federation for Music Therapy, the Music Therapy Working Group of the European Psychotherapy Association, the Guided Imagery and Music Therapy Association, and the Nordoff Robbins Music Therapy Institute. Since the establishment of the World Federation for Music Therapy in 1974, the new discipline of music therapy has developed rapidly. More than 200 countries around the world have established music therapy associations and hold the World Congress of Music Therapy every two years.

The history of the use of music to treat illnesses in China dates back as far as thousands of years ago in primitive societies when witch doctors treated illnesses. From historical documents, the main emphasis in ancient China was on the use of music for health. Since the Tang et al. dynasties, music therapy has been used more widely in clinical practice. Music therapy, as a fully-fledged modern discipline, has had a late start in China, especially in mainland China. In recent years, the field of

music therapy for children has been emerging and growing rapidly. To date, music therapy has been practiced in nearly 300 medical institutions across the country, and a music therapy team of musicians, psychologists, medical practitioners, and other professionals has been formed, with national academic groups, specialized educational institutions, and professional audio-visual publishers and equipment development centers. However, the overall level of music therapy in China is still very much in the early stages of exploration, and there is still a huge challenge to improve the effectiveness of music therapy, to better integrate it with traditional Chinese healthcare, and promote its application in more areas [4,5].

2.2. Genres of Music Therapy-Orff Music Therapy

Under the explorations of different music therapy methods, the world has produced different schools from psychological dynamics, biological schools, humanistic schools, behavioral and gestalts, and schools that have been developed by fundamental music education theory. At present, the music therapy of the world has been divided into ten schools: Nordoff-Robbins Music Therapy, Psychodynamically Oriented Music Therapy, Clinical Orff Schulwerk, Clinical Applications of Kodaly Concept, Clinical Applications of Dalcroze Eurhythmics, Guided Imagery and Music Therapy, Developmental Music Therapy, Music Therapy, and Transaction Analysis, Gestalt Approach Music Therapy, Applications of Behavior Modification Principle to Music Therapy Treatment [6].

The Orff music system takes "original music" as the main axis, and puts forward six major concepts of pursuing simplicity, advocating integrity, focusing on practice, advocating popularization, emphasizing creativity, and adhering to openness. One of the most essential and profound perspectives is to advocate that, starting from the nature of children and allowing children to feel, experience, and even create music in a happy, playful, and easy-to-receive way. The core concept of Orff music therapy is original music education, which is based on rhythm, using the entertainment function of music to actively mobilize students' participation and creativity under the premise of interest guidance, to promote the improvement of students' personality quality, music perception ability, music performance skills and so on. Orff advocated integrated music, autonomous expression, and presentation, combining music, dance, language and even painting to apply a variety of means, through rhythm recitation, singing, dancing, playing musical instruments, situational games, and other forms not only focusing on improving children's perception, understanding and performance ability of music, but also help to cultivate their comprehensive abilities in language expression, cognitive imagination, interpersonal communication and other aspects [7].

Previous empirical studies have demonstrated good progress in the use of Orff music therapy in group and individual therapy intervention studies with several children with intellectual disabilities. The overall process, model, and analysis of the effectiveness of Orff music therapy interventions for children with intellectual disabilities are further elaborated.

In the study, the subject was diagnosed as moderately mentally handicapped and was currently in the fourth grade of a special primary school. She does not like to interact with others, have mild emotional behavior, has slurred speech, is inattentive, and moves very slowly, but has a high sensitivity to music and does not express her feelings when listening to music, but often stands up suddenly in class to express her happiness with body language. She likes to be noticed and praised and can cooperate with the therapist in music-related activities through guidance.

During the study, the therapy room was first set up with the subjects' favorite cartoon pictures to remove any unfamiliarity with the therapy environment. The therapist and the group start with a song and then greet each other in turn. The participant is asked to listen to the song and encouraged to tell the group if they like the song. Next, the participant is asked to play a musical instrument of

their choice and is then asked to improvise and say what comes to mind when they play and what they mean when they play. The therapist then takes the participant through a therapeutic activity in which the participant moves forward or backward, hand in hand, to the rhythm of the beat to the melody and rhythm of the music, finally singing the farewell song in unison, nodding and waving to each other as a sign of goodbye, and walking out of the classroom door to the rhythmic backdrop of a three-beat march.

After the goals are set, the subjects are effectively followed up and assessed through therapeutic activities and behavioral observations, which are recorded and studied to provide a reliable basis for the next phase of treatment. After one year of continuous progressive treatment, the overall feedback was good through systematic assessment of the subjects' language, cognition, social interaction, and emotion, and the expected goals of Orff music therapy were achieved [8].

In summary, Orff music therapy mainly uses musical activities and language training to allow children with intellectual disabilities to participate and experience first-hand to gradually improve and alleviate their psychosomatic impairment and gain compensatory improvement in Orff music therapy. The parents and teachers of the five children with intellectual disabilities who have undergone the Orff music therapy systematic intervention study consistently reported that the children's enthusiasm for music has increased significantly, their initiative to participate in group activities and communicate with peers has increased, their language expression has improved, they have started to have a small amount of active verbal communication, and their motor coordination has improved significantly. At the same time, the practice also shows that Orff music therapy for children with intellectual disabilities needs to follow the principle of tailor-made teaching and that appropriate and unique methods must be chosen according to individual circumstances to effectively exploit the advantages of Orff music therapy [9,10].

3. Shortcomings and Prospects of Music Therapy

3.1. Research on Basic Theories is Relatively Weak.

Music therapy is an emerging discipline, the domestic development history is short, and it has not fully formed a systematic research system. Although music therapy is widely used in clinical experimental studies and case studies, there is also a lack of discussion of basic theoretical definitions and academic concepts. In the absence of a comprehensive foundational theory, researchers tend to define it from other schools, such as educational psychology, or to explain a phenomenon or research results from the perspective of other schools. As a result, music therapy becomes more dependent on other disciplines, making its development direction of it tend to be more passive.

3.2. The Field of Study is Relatively Single.

Statistics show that clinical studies and case studies of music therapy focus on children, especially children with autism and intellectual disabilities, and there is a large amount of literature and research results. In the increase of the overall research level of music therapy, the research direction is inclined toward the group of children with psychological and mental disorders. However, there are relatively few studies on other groups such as sub-healthy adults, healthy adults, university students, and the elderly. This shows that researchers ignore the wide application of music therapy, which is related to the weakness of the basic theory of music therapy mentioned above, and researchers should study in-depth many aspects, so as not to make the research of music therapy monolithic, and it is not conducive to the future diversified development of it.

3.3. Ignorance of the Cultural Background of the Crowd

Music therapy in most countries is in its infancy and has no mature development trend, which often refers to schools or theories in other countries. This leads researchers to ignore the differences in different cultural backgrounds across countries and regions, and whether they are suitable for use in their own countries or regions. Multi-dimensional research should be carried out according to the customs, cultures, and medical traditions of the country or region, and eventually, a distinctive, systematic, and diversified music therapy system should be formed [11].

4. Conclusion

Music therapy research has progressed in many ways. In the past, research on music therapy was either a reflection on the nature of music and its impact on people's physical and mental health or a summary of people's experiences in clinical practice, with a certain degree of blindness. In terms of research methods, a variety of scientific methods have been used to assess the effectiveness of music therapy, including observation, interviews, questionnaires, and psychometric tests, which have been used to provide a more scientific account of the effectiveness of music therapy through comparative studies. Although the mechanism of music therapy has not yet been fully understood, theories of aesthetic empathy, resonance principles, and neurological activity have been put forward as the understanding of music therapy progresses. These theories can be summarised as the physiological and psychological effects of music. In terms of music therapy, there is passive music therapy, which is based on listening, active music therapy, which involves the participation of the patient, and integrative therapy, which is not limited to active or passive, and electrotherapy, which converts music signals into low and medium frequency currents synchronized with music and is applied to acupuncture points or patient areas. In clinical practice, music therapy is used in the treatment of psychiatric depression, pain management, hypertension, coronary heart disease, and brain disorders. Although music therapy has a long history, it is still a new discipline and faces many difficulties. Although the technical methods of treatment are developing rapidly, the development of basic research is slow, and there are great difficulties in training music therapy professionals. However, the therapeutic effect of music on the mind and body is certain, and music therapy has a promising future in the treatment of psychosomatic disorders. We believe that in the future, music therapy will be further developed. In conclusion, music therapy has developed rapidly in a relatively short period due to its outstanding applicability, and its main achievements lie in the creation of therapeutic methods and their effectiveness. Music therapy has moved away from a purely biomedical model and has gradually transformed into a bio-psycho-social model, introducing music, psychological, social, cultural, and aesthetic theories into the treatment. In the future, music therapy will be further developed by its relevance to the needs of society in medicine, healthcare, and social life. In short, Orff music therapy is more close to the psychological and emotional characteristics of individuals, and more suitable for the intervention treatment of individual emotional disorders. It will also show good therapeutic effects in application practice, and explore feasible implementation strategies and approaches for the healthy development of individuals. Therefore, educators should continue to improve their music literacy, explore more music intervention methods based on Orff music therapy, and apply it to the intervention of individual mood disorders.

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