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Can Pleasure Be a Therapeutic Aim

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Music Therapy Gives Pleasure

"It's good", "It was great", "I enjoyed myself", "It's cool." Music therapy entertains, pleases, amuses. It gives pleasure. Perhaps for this reason many people do not accept it as a legitimate treatment, but merely as an amusement, a diversion, leisure. The notion that illness is connected to evil, to sin, and involves punishment is deeply rooted in humanity.



In primitive peoples, illness was considered a result of some broken taboo. Without the protection of the totem, the infractor was the target of its rage and had his body possessed by a malign entity. The cure consisted of expelling the evil spirit. Even today rituals that include "healing music" are found in the *pajé* (shaman) activities of the indigenous people of Brazil. The *pajé* or witchdoctor would chant without stopping to the spirit causing the illness, in a repetitive melody structure, with small changes in rhythm, melody and words. The tribe would accompany his singing, which could last many hours or even days. The members of the tribe would alternate, stopping to rest, but the *pajé* would not interrupt his song until he had defeated the spirit, forcing it to withdraw.

"If It Hurts It Heals"

In all religions, from Greco-Roman antiquity up to the Jewish-Christian period, examples are given of people afflicted by terrible ailments because they offended the gods. Often, the punishment fell upon entire communities, as was the case of the Egyptian plagues. Christ cured the ill people by forgiving their sins.

Traces of magico-religious tendencies to explain illness are still found in the mind of people, even nowadays, when we cultivate science. Nevertheless, this belief has been substituted for something more sophisticated: the ill person "causes" his illness, his headache, his flu, his cancer, not to speak of his neurosis, anxieties and obsessions. Like sin, though not against the gods but against himself, men get sick. If the illness derives from guilt, the guilty person believes that he should pay with his actual suffering for the wickedness that he may have committed. The Brazilian popular proverb – "If it hurts it heals" – confirms the belief in the necessity of pain. Although there is no scientific theories supporting the understanding that disease is a punishment, and there are no treatment methods based in this idea, what is heard from the mouth of most people who experience diverse therapies is "the process of growth is marvellous, but it involves much suffering", "change is very painful", and other such statements.

But music therapy is centred on pleasure, pleasure in playing, in listening, in moving. Could it be therapeutic? Moreover, could it aspire to the status of treatment? To whom?

The Experience of Pleasure

Pleasure is the satisfaction linked to the realization of vital functions. It is the first gratification new-borns enjoy when their basic needs are satisfied. The functional pleasure reaches the

organs, and the baby begins to enjoy, for example, the pleasure of sucking, even when he does not need to be fed. Besides physiological necessities the voice of the mother, is also important, from the beginning of life. Aberastury asserts that the mother's voice is like milk entering the ears, and in psychoanalytic treatment "when early experiences are relived, this is felt in a concrete, intense and physically gratifying manner."

The experience of pleasure is the support for frustrating or unpleasant situations. Moreover, it is the first investment to lead the baby to reality. During life, pleasure will be enhanced with other stimuli (creativity, artistic appreciation, playing, and so on).

The Origin of Neurosis and Psychosis

According to Freud, neurosis derives from a conflict between the *id* and the *ego*. In psychosis this conflict is between the *ego* and external reality, and culminates in the case of schizophrenia "a blunting of affection, that is to say, the loss of interest in the outside world." Freud (1981-A, p.2743) even believed that all psychoses are motivated by the deprivation "of one of those childhood desires, never fulfilled, which take deep root in our organization, determined by phylogeny. This deep deprivation always has an external source" ((1981-A, p.2743). The psychosis results, therefore, in a conflict between the *ego* and the outside world. The *ego* fails in its function of reconciling its own demands and those of reality, deforming itself, tolerating injuries to its unity or even in certain cases disassociating itself.

The outside world also has its role in the advent of neuroses, since derived from the norms which lead to the necessity of repressing instinctive impulses. Thus there exists in neuroses an attempt to avoid part of reality, substituting it – in the realm of fantasy – for other corresponding images, thoughts and feelings to its desires. Fantasy has the role of attenuating the demands of real life. Neurotics seek new options, regressing to earlier and better times, but, like in children's play, they lean on a part of reality different from that against which they had to defend themselves, attributing to the chosen part a "special meaning and hidden sense which we qualify as 'symbolic', even though not always accurately so."

Whilst in neurosis the basic conflict is between the *ego* and the *id*, causing afterwards the loss of part of reality and the ulterior need to substitute it, the psychosis has its origin in the conflict between the *ego* and the exterior world, which deprives it of desires and basic necessities. The first step in psychosis is the denial of this undesirable and painful reality, followed by the necessity of creating a new reality, exempt from motives of disgust and unhappiness offered previously. It is also from the world of fantasy that psychosis will extract the raw material for the construction of a new reality. The delusions and hallucinations are attempts, at the expense of the *id*, to repair and reconstruct the reality, or rather, attempts at a cure. However, the "fantastic new world of psychosis" seeks to substitute external reality and this process of transformation possibly finds "an intense opposition of powerful energies." "The rejected reality probably tries to impose itself on the mindset", explaining why the delusions and the hallucinations are accompanied by so much anguish and suffering.

Pleasure as Motivation

Foucault (1975) says that when retreating to the arbitrary world of fantasy, the individual tries to escape from the constraints of his real universe, but finds in the morbid world the same constraints, nevertheless transformed, which makes it difficult to recognize.

There exists, therefore, a failure in the substitution of reality by something milder. The demands and the frustrations resulting from reality will be represented "in this new exterior fantasy world", in an unrecognisable manner, what causes more anguish. The person is unable to escape from the reasons for the suffering originating in real life, because they are still present (although transformed) in the new world. In order to free himself from the uncomfortable presence of the external reality, which attempts to impose itself on perception, and from the element of frustration that he wishes to deny, and which is found disguised in the made-up world, the subject is obliged to constantly expend energy destined to failure. This provokes the intense suffering of the psychotic.

If it is possible to accept the premise that the psychotic retreats from reality with the aim of running away from a frustrating world, which deprives him of satisfaction, it is possible to accept the hypothesis that – for the return to reality – the first step is the perception that this same reality can offer him pleasure.

While doing research some time ago, I observed by the researchers through the reports of music therapy sessions, that patients make constant references to pleasure, and that very often they start to talk coherently after a few sessions, which indicates the pertinence of the hypothesis posed. It is not intended to affirm that music therapy sessions are only entertainment, amusement and "enjoyment." Any therapy implies a process of change, of confronting new situations, and human fears the unknown. Even the creative processes, in which artists or intellectuals dedicate themselves to create something new, produces anxiety, a feeling of unrest, often described as "painful." The creative processes demand an immersion in the unconscious in the search for the elements of fantasy necessary for the transformation of reality, and that could be viewed as an approximation of the psychotic state. However, there is a difference not only of degree, but a qualitative difference, between this "pain" and the intense mental suffering of the individual who has lost his way back to reality.

For the existence of this movement between fantasy and reality, according to Winnicott, (1975) it is necessary that the individual introjects "good objects" which serve as support in digesting "bad objects." Otherwise, there would not be any motivation for creativity, because reality would be rejected. It is worth assuming that music would be useful to make this bridge between fantasy and the world of reality.

Difficulties in Verbal Communication with Schizophrenic Persons

According to Vetter, (1968) the psychodynamic approach considers the disturbances in the language of schizophrenia predominantly motivational. The schizophrenic person is motivated to change his speech with the aim of defending himself from society, possibly in an attempt to survive, or to remove anxiety. By disconnecting himself from this society, which is seen as threatening, he feels more secure. In trying to reject society and be himself, he turns to archaic manners of expressing sentiments and thoughts. He uses words and symbols from the current language, but he changes them to meet his own psychological process.

On abdicating the *egoic* function of adhesion to the real world, the psychotic becomes ruled, in large part, by the laws of primary process inherent to the *id*. Thus language changes, as a consequence of condensations, dislocations and other characteristics of thought in this psychic instance.

As a consequence, the linguistic phenomena observed in schizophrenia occurs:

- Communication difficult to be understood.
- Ambiguous language with a tendency towards generalization or the use of diffuse terminology.
- Words used inexactly and frequently incoherent or unconnected.
- Contradictory sentences and euphemisms which may contain self-references and impersonal construction.

A large part of the abnormalities of behaviour are described from a psychopathological point of view in terms of communication, and psychotherapy, and according to Bandler and Grinder (1977), we must try to improve the patient's speech. The deviation of current language makes verbal communication with schizophrenic persons very difficult, and it is necessary to find another way to approach them.

The Non-referential Characteristics of Music

Music is a non-referential language, which therefore does not denote meanings. Despite this, it admits the attribution of connotative meanings, connected to the emotional state and influenced by the life experience of the listener/interpreter. As a language, music is connected to culture, and this has two consequences: 1) The connotative meanings, although connected to personal experience, are not unrestricted and unlimited, as they are culturally imbedded; 2) the "normal" and the "schizophrenic" persons share a common code, even though each one creates diverse connotations in relation to the same music.

Moreover, music possesses a series of qualities similar to the functioning of the primary process and to the representation of dreams, but through sounds and not through images. The possibility of representing causal relationships, alternative relationships and so on. does not exist in music and, by its own peculiarity, it admits condensation and dislocation.

All human beings bring inner sentiments, emotions, and various experiences which, in being ambiguous, ambivalent or even "polyvalent," are very difficult to express. Everybody is able to remember situations in which it was hard to find sufficiently appropriate words to declare love to a boyfriend or girlfriend, to describe the feeling at the birth of a child or the emotion aroused by a work of art.

Music, because of its fundamentally non-referential characteristics, can express experiences untranslatable in words, unless neologisms are created. As Copland says, music expresses moods "in an infinite variety of nuances and differences. It can even point towards moods which do not correspond to any word in a known language" (1974).

And, if it wasn't so, as Carpeaux (1958) suggests, we would not need music.

Conclusion

It is possible thus to suppose that it would be easier to make contact with a schizophrenic person through musical language. Music allows freedom from the constraints of the verb, from logical discourse, leading the listener to travel "to the land of dreams", where he finds his desire satisfied and his nightmares more atrocious, according to the composer Schoenberg (cf Leibowitz, 1981). The externalizing of instincts, through a language that can represent them, brings the relief of tension and all of the pleasure which derives from this. Considering that the damage to the language of the schizophrenic person is functional (a way of avoiding contact with the other), it can be concluded that its loss is not permanent, and when the anxiety is removed it is possible to regain it.

It is observed that after music therapy sessions several patients communicate adequately by verbal language, with a temporary suspension of delusions and hallucinations, to which they refer as being problems deriving from their own conflicts. The numerous references to pleasure with musical interaction suggest that this pleasure temporarily suppresses anxiety, giving the schizophrenic the opportunity and the desire to communicate verbally, in an adequate and pertinent manner. So the hypothesis that music therapy offers an opening in the channels of communication with the autistic world of schizophrenics, through the experiencing of pleasure, becomes a legitimate one.

The biological aspects of pleasure and the brain functions involved in it deserve a specific study. Such study could enlighten other aspects of the temporary suppression of anxiety in schizophrenic people, giving to music therapists new tools to enhance their job.

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