

Psychology aspects of musical perception in patient selection
for music therapy
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The musical languages used in art are as diverse as the linguistic forms of human communication.

Therefore, for the correct choice of the method of musical-therapeutic influence, it is first of all necessary to determine the musical genre (or genres) that is most understandable and close to this particular person.

Education of musical ear, the ability to adequately perceive musical sound (especially at an early age) would be practically impossible without reliance on spatial, objective, motor sensations, and personal experience.

The listener, perceiving sounds, essentially deciphers the thoughts, feelings and images contained in a piece of music, actually encoded by the composer in the form of musical notes. Musicians turn notes into corresponding sounds, i.e. broadcast the code. The success of decoding depends not only on personal experience, but also to the same extent on individual musicality, the level of musical training and the adequacy of perception. Taking into account these qualities of a potential patient is necessary to determine the indications or contraindications for the use of MT, and also helps to use the method more efficiently.

In this regard, it became necessary to diagnose individual musicality and the adequacy of the perception of the musical language, which is carried out in three stages.

1st stage - questioning. For this stage and all subsequent work the basic reporting document is used - a map of music therapy. In accordance with the questions posed and the answers received, you should fill in the passport data in order and the column - musical history:

- 1) music education (primary, secondary, higher, for which class);
- 2) attitude towards music in general: positive, indifferent, negative;
- 3) preferred: music genre (opera, symphony, jazz, light music, folk), musical instrument muses. works, composer (s), performer (s) (underline as required);
- 4) negatively perceived music: (check the appropriate).

2nd stage - diagnostics of musicality.

The examinee is offered to intonate in turn with his voice: A) a number of separate sounds, for example, C, E, F sharp, A flat, B;
B) sing intervals, for example, a major second (do-re), a minor third (la-do), a clean fourth (do-fa), etc.

C) hum a fragment of a familiar melody, for example, "I met you ...", "My native country is wide," "I walk around Moscow," etc.

D) repeat the given rhythmic pattern by clapping your hands or tapping.

The tests offered are from a professional point of view

elementary. Therefore, musical persons without much effort carry out all the assigned tasks. There may be musical personalities with some imperfection of intonation hearing or sense of rhythm. Finally, there are cases of complete absence of musical ear, then the subject is not able to cope with the tasks.

For the initial selection of patients and the subsequent correct construction of a music therapy plan, data on the level of his musical education are of great importance, the consideration of which, in combination with the criteria of musicality, gives three categories of persons (simplified scheme): 1 type - music-music educated; musically uneducated; Type 3 ^{at type} non-musical-musical personalities.

3rd stage.

An equally important characteristic is the nature of musical perception, which can be found out by asking the patient how he perceives this or that musical fragment, melody, chord. At the same time, musical personalities, both educated and not educated, by the nature of musical perception can be adequate or inadequate. For example, when listening to cheerful, energetic music, an inadequate listener may say that it is a sad melody that causes despondency.

The final assessment of the musicality and the adequacy of the patient's perception is carried out by comparing the survey and diagnostic data.

Patients who do not adequately perceive music should be treated especially carefully. Such a phenomenon can occur in persons suffering from psychopathies, neurotic disorders, and then music therapy should be prescribed taking into account the condition of a particular patient. For example, the psycho-emotional state of depressed patients is often beneficially influenced by minor, slow music, sometimes with a tinge of sadness.

Sometimes inadequacy of musical perception occurs at professional musicians, which to some extent explains satiety with music, professional fatigue. In such cases, music therapy may have relative contraindications.

For non-musical personalities, music therapy is completely contraindicated (except for sound reflexotherapy), because it is not possible to directly influence the psychoemotional state of the patient.

Conclusions: Testing the patient for musicality and the adequacy of musical perception is a preliminary and necessary stage that allows for the correct selection of patients for music therapy and influences the choice of an effective method and type of exposure.

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