

History of Anthroposophic Music Therapy

Already in the Old Testament we find David, who with his string playing calmed and finally healed King Saul, who was plagued by an evil spirit. In ancient Greece it was known that music could help to restore the mental and spiritual inner harmony of a sick person. (Beat Böhm, *Heilende Musik im griechischen Altertum*, Thieme Verlag, 1958) In addition, the Greeks used the keys to achieve moral and medical effects (see Kolisko).

Plato and Aristotle describe not only the healing power of music, but also its pedagogical effectiveness as a means of educating people. From the post-Christian period it is said that music (auditions) was successfully used against depression and insanity. Arab scholars also report about the healing effect of music in the 9th century and in the 13th century musicians were employed in the hospital of Cairo to comfort the sleepless patients at night. In the 15th/16th century (Renaissance), active singing and lyre playing is mentioned for the first time in melancholic patients and the recommendation is made to use music as a remedy against the plague and other epidemics. In the Romantic period the medical reference system of music changed to a psychologically oriented one. In the 18th century, Seguin (cf. Beilharz In: Beilharz (eds.)) described the stimulating effect on people with so-called mental handicaps and Heller (see *ibid.*) spoke about the "uplifting" effect of music at the beginning of the 20th century. Anthroposophical music therapy does not go back to a founding personality, but should rather be seen in the context of the development of the anthroposophical movement and the ideas of Rudolf Steiner. In his writings, mainly in the lectures given in 1924 on speech formation, painting, pedagogy and religious questions, on Tone-Eurythmy (GA 278) and Music (GA 283), there is a wide variety of information on a deeper experience of sound, on intervals, on musical elements such as melody, harmony, rhythm and beat, on major and minor, on the development of music in the cultural epochs, as well as musical suggestions for use in a pedagogical context. The beginnings of anthroposophical music therapy are closely linked to the development of the curative education movement. From the very beginning of anthroposophical curative education music has had a high status. It was used not only in lessons with children and young people but also in the rhythmic organisation of the course of the day, week and year to create a harmonising environment for those in care (cf. Beilharz on www.anthromedia.net).

In the first curative homes Pilgramshain in Silesia (Germany, today Poland), and Sonnenhof in Arlesheim near Basel (Switzerland), music therapy was already being practiced in the 1920s. Karl König (1902 - 1966), who after completing his medical studies in 1927 worked for a year at the Ita Wegmans Clinical Therapeutic Institute in Arlesheim and in 1928 went to Pilgramshain as a senior physician, before founding the Camphill Movement in Scotland in 1939, became interested in the therapeutic effects of music at a very early stage and developed group therapies involving coloured light and eurythmy, for example. There were also isolated individual pieces of music, e.g. to help epileptic children to start the day with wake-up music without attacks. Until the first lyre was created by Edmund Pracht in 1926, classical instruments such as piano, violin, cello, percussion instruments or flutes were still used in the Clinical Therapeutic Institute in Arlesheim, which was directed by Ita Wegman. As Pracht felt that the piano was not harmonious for the children to accompany eurythmy, he developed the lyre, which from then on was also used in playing for adults. Edmund Pracht, who was a musician, recreated the lyre in collaboration with Lothar Gärtner, who as a young sculptor was active in the area surrounding the Goetheanum. It was not a reproduction or further development of the ancient instruments lyre or kithara, but was created from new ideas of form and sound, in an effort to capture the elements of sound. Prachts intention was not primarily therapeutic, but rather a general musical one (cf. *ibid.*) While in the 1930s and 1940s it was above all the musical-therapeutic cultural impulse that was consolidated and further developed, the 1950s saw a further elaboration of the music-therapeutic approaches of the early period (cf. [anthromedia.net](http://www.anthromedia.net)). When Dr. König went to South Africa from Scotland, he placed further research into the effects of music in the hands of Dr. Hans-Heinrich Engel, whose musical anthropology forms the basis of music-therapeutic training in Switzerland.

From 1963 onwards, the music-therapeutic work initiated by Dr. König experienced a new revival through the collaboration with Dr. Engel and the musicologist Prof. Dr. Hermann Pfrogner. He and his collaborators developed group therapies for children with certain curative pedagogical clinical pictures. Eurythmic elements or coloured light were included. In addition, a circle of people who were doing research in music therapy was formed. The international study group founded by these three personalities, which included not only Johanna Spalinger and Maria Schüppel but also doctors, curative educators and musicians, existed for only a few years, but has had a strong influence on anthroposophical music therapy up to the present day. They researched the effect of the musical elements so that they could be used as "active ingredients" in a well-dosed manner, as in the case of

drug treatment. Since the 1950s, Julius Knierim developed a different kind of music therapy activity as a teacher and musician, in which he wanted to strengthen the personality strengthening and soul-ordering powers of artistic activity and, in the sense of salutogenesis, to have a healing effect not least through improvisation. Knierim also gave decisive impulses for a further development of the playing approach on the lyre by giving the lyre a new meaning as an "instrument of the middle" by forming a tone between the right and left hand. (Beilharz In: Beilharz (Eds.)) Through Norbert Visser in the 1980s, the impulse of the Choroi musical instrument making led to the development of new, easily playable instruments which can be used both in joint improvisational playing and in therapy. These instruments are produced exclusively in social-therapeutic workshops where people with so-called disabilities work (see Beilharz In: Beilharz (eds.)). Short biographies of the music-therapeutic pioneers can be found on the website www.musik-therapie-anthroposophisch.de

So the initial impetus for anthroposophical music therapy lies in curative education and was inspired and decisively developed by the doctors Dr Karl König and Dr Hans-Heinrich Engel. Both of these personalities used music as a medicine that can unfold its effectiveness right into the organic realm. It seems that music, religion and the art of healing, which in ancient times were closely connected and went their separate ways over the centuries, are now growing together again through anthroposophical music therapy work. The Music Therapeutic Workplace of Maria Schüppel was founded in Berlin (Germany) in 1963 as a training centre and was thus the very first anthroposophical music therapeutic training. In 1970, out of the Choroi impulse, Julius Knierim, Johanna Spalinger and others founded the Free School of Music at Michaelshof in Hepsisau (near Stuttgart in Germany) as a travelling study. The training as an anthroposophical music therapist, which has been offered since 1983 at the Academie De Wervel founded by Eva Mees in Driebergen (Netherlands), has been offered since 2006 at the Hogeschool Leiden as a training course in art therapy. In 1997 the Orpheus School for Music Therapy was founded in Bern (Switzerland). The founding members were Johanna Spalinger, Dr. Heinrich Schneider and Marlise Maurer. This was followed in 2001 by the Dorian School of Music Therapy, founded by Christof-Andreas Lindenberg in Glenmoore, PA, USA.