CATHARSIS®
APPLICATION PROGRAM

Healing emotional wounds through music & art

CLINICAL RESULTS & METHODOLOGY

2015

by Ms. Chantal Desmoulins

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Acknowledgements

If it was not for a team of forward thinking professionals who have an enthusiasm for innovation and the passion to guide others on a unique and profound path toward self discovery, the development of this methodology would have remained a mere vision.

Both Dr. Alain Amouyal and Chantal Desmoulins wish to acknowledge the expertise and spirit of the following individuals who were instrumental in making this concept a reality.

Since its inception, we have had the honor and privilege to work with senior professionals who are part of a great chain of innovative and passionate human researchers. Their lives have been dedicated to the service of an evolutionary ideal. We pay tribute to these remarkable individuals:

• Dr. Michel Gabriel Mouret, psychiatrist, was the first professional in 1981, to detect the mobilizing effect of Alain Amouyal's music and the first, untiring researcher, to associate it with graphic expression. For several years he shared with us his enthusiasm and immense knowledge in the areas of symbolic imagery and anthropology, while directing us on our own paths of discovery.

• Dr. Lucien Duclaud, psychiatrist and pioneer in his field of expertise, has since 1985 exhibited the best use of our program of graphic expression under musical induction in his psychiatric aftercare clinic. He put to the test our proposal and verified our assumptions, while simultaneously allowing thousands of patients to benefit from this approach. Because of his efforts and dedication he has helped many recover from serious and/or disabling conditions.

• Dr. David Feldman, neurobiologist, who designed rehabilitation programs which assess and restore the deficiencies and disruptions of neuro-cognitive structures and work with those exhibiting the syndrome identified as central auditory processing disorders (C.A.P.D). During his work with autistic children he has highlighted the converging effect of Alain Amouyal's music and its ability to stimulate creativity. We were fortunate enough to have him as a friend and share both his love for music (he is a conductor) and rigorous scientific methodology. He brought us much insight in the formalizing of our protocols.

• Dr. Jacqueline Verdeau-Paillès, psychiatrist and music therapist, an extraordinary woman who loved opera and had a phenomenal musical culture. All her life, she contributed tirelessly, both nationally and internationally, to provide an essential place to music therapy and art therapy in the field of psychiatry. Her intelligence, her enthusiasm, her humanity were an example for all. As her legacy, she left several major writings, in which the depth of her insights remains to be discovered.

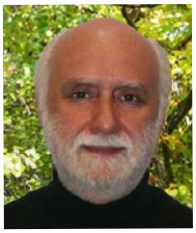
It would be nearly impossible for us to individually acknowledge all the many professionals with whom we have been fortunate to work, but we thank them for their loyalty and trust, as well as for all the feedback we received, which allowed us to refine our protocols.

The Creators

Chantal Desmoulins, DEA
Director of Program Development & Education

Ms. Desmoulins holds a DEA (Diploma of 5 yrs Advanced Post-Graduate Studies) Comparative French & Foreign Literature, and Symbolic Studies from the Center of Research of the Imaginary in Grenoble University III, France.

She focused her research on the study of the organized system of images. Since 1985, Ms. Desmoulins has supervised the implementation of Catharsis Technique and Catharsis Application Program, at therapeutic facilities in France, Switzerland, and the United States. She trains practitioners in private practice, retirement homes, and rehabilitation centers, as well as supervises the analysis of patients' drawings. This ongoing relationship with both the practitioners and patients allows her to ensure the utmost quality in the application of the Catharsis Application Program, and to maximize the positive results for patients.



Dr. Alain Amouyal
CEO Silcord US Productions & Composer

Dr. Amouyal began his musical journey as a guitarist and bassist in a rock band at age thirteen. He started improvising on the organ at the age of twenty-three, and followed his passion for music with formal studies in ear-training and music theory.

As a composer, Dr. Amouyal has had over 15 CDs distributed by Eroica Classical Recordings. His first symphonic work was recorded with the London Symphony Orchestra and the London Voices at Abbey Road Studio 1 in London in 1999.

As a dental surgeon, Dr. Amouyal introduced his music to patients at his dental practice and observed that the majority of them experienced a release of tension and relaxation. In 1981, a psychiatrist colleague incorporated Dr. Amouyal's music with graphic expression sessions at his clinic. With positive results being demonstrated with the sessions, a musical program was created, intended for use by psychiatrists and psychotherapists. This therapeutic technique is still being applied 25 years later with great success. Dr. Amouyal is presently developing a large scale expressive art therapy project called The Orpheus Project which is based on his research and application of the Catharsis Technique and the Catharsis Application Program.

Board of Advisors

Dr Alain Amouyal and Chantal Desmoulins are honored that the following experts bring their exceptional contribution to the development of their enterprise : continue testing of the Catharsis Technique and the Catharsis Application Program, with the intention of publishing a scientific paper in an academic Journal and a Thesis.

Dr. Lucien Duclaud - MD, PhD (Neuropsychiatry)

Admitted by competitive examination to the School of Health Service of the French Navy, and studied medicine at the Faculty of Bordeaux.
Specialization in Psychiatry from the Faculty of Medicine of Paris.

Director of psychiatric services in Madagascar (Girard and Robic Hospital of Antananarivo), and later, Cameroon (Garoua Hospital).
Resigned from the Armed Forces Health Services in 1982 and moved to Liberal to serve as a psychiatrist at the clinic Relaxazur in Cassis (1982-2006).
Named national expert in Neuropsychiatry by the French Minister of Health.
Psychiatrist and Chair of the Medicine at Médiazur Bouilladisse Alpes Maritime clinic from 2006 to 2010.
Medical expert of the High Authority of Health from 2004 to 2008.

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Lucien.duclaud@laposte.net

Dr. Herve Perron - PhD, HDR, Chief Scientific Officer, Geneuro SA

PhD in Immunovirology (1991) at the Joseph Fourier University, Grenoble-France and HDR (Professoral Thesis; 2001) in Neuroimmunology at the Faculty of Medicine, Grenoble-France.

Presently Thesis Director at the "Doctoral School" of University Claude Bernard Lyon-1.

He is general manager of the newly created French subsidiary company, Geneuro-Innovation, and remains Chief Scientific Officer for the Geneuro Biotech Group. Current professional endeavors bridge "Research and Development" in Geneuro-Innovation with pharmaceutical development for clinical applications in Geneuro SA.

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Dr. Sergyl Lafont - PhD, Chief Scientific Monitoring Research & investing information in a worldwide leader compagny in vitro diagnosis for medical and industrial application

President of ARTEB (Association for the development of Biomedical Technologies) 2003 to 2007.
Pay Master of ARDI (Regional Agency of Development and Innovation in Rhônes- Alpes- France)
Vice President of Rhônes-Alpes Israel exchanges

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Dr Christian Simonin - MD, PhD
Psychiatrist and psychotherapist working both in private practice and rehabilitation Center. Publication: The Intelligence of the Living (Testez Editions, 2009) co-written with Dr. Alain Horvilleur - several pages devoted to the Catharsis Technique in the Intelligence of the Body chapter.

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Pr Marc Bonnefoy - MD, PhD
Head of Geriatric Department - Hospital center Lyon Sud France

Department Head of Geriatrics - Hospital Center Lyon Sud France
Academic professor at the University of Medicine Lyon Sud.

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A TRIBUTE TO AN INNOVATIVE PHYSICIAN & RESEARCHER

Dr. Jacqueline VERDEAU-PAILLÈS - MD, Neuro-Psychiatrist at the University of Bordeaux

Former House Physician and Clinic Director
Former Board of Advisor Catharsis Technique

Dr Verdeau-Pailles became a pioneer in her field by exploring the clinical and therapeutic dimensions of music therapy. She traveled the world for many years presenting lectures, attending seminars and exploring new cultures. Her generous and enthusiastic personality was admired by both colleagues and patients alike. The sudden departure of this exceptional woman on May 20, 2010 was felt by all who knew her.

The Clinical Results

Dr. Amouyal, Ms. Desmoulins and their collaborators have conducted qualitative research (1) based on the description, analysis, and interpretation of observed phenomena by associating the music of Catharsis Technique with expressive drawing. This research encompasses spontaneous observation that testifies to the special impact this contemporary music has on emotional release and rebalancing of the emotional psyche.

1977 to 1981 - Initial Clinical Observation from psychiatrist in France

Numerous therapists confirm that Dr. Amouyal's music has a positive impact on their patients. Practitioners observe that those exposed to the music experience a reduction in anxiety and listen to the music induced a calming effect which creates ability for the individual to can restore a sense of balance in their lives.

1981 - Psychiatric Hospital - Limoux - France

Principal Investigator: Dr Michel G. Mouret, psychiatrist & Head of Pedopsychiatric Department

Participants: 20 children and adolescents

Dr. Michel G. Mouret (2) made key observations about the therapeutic effects of the Catharsis musical program. After the implementation of graphic expression sessions under musical induction, Dr. Mouret was amazed by the correlation between the symbols patients had illustrated in their drawings and the titles Dr. Amouyal had given the songs - titles which were not disclosed to the listeners. Dr. Mouret report how this music impact individuals both emotionally and mentally. Dr. Mouret concluded that the musical selections in the Catharsis program can indeed reveal and activate the unconscious and its driving archetype. He found that children who participated in the Catharsis Program were less distressed and more able to cooperate about their care. He also found that staff who was part of the program encounter deep insights about themselves and were more involved in their work.

1981 to 2007 - Relaxazur - After Care Psychiatric Clinic (Inpatient) – Cassis - France

Principal Investigator: Dr Lucien Duclaud, Psychiatrist & Clinic Director (3)

Participants: Adult females (1000 +)

The population was women with depression, obsessive-compulsive disorder, anxiety neurosis, hysteria, phobia, obsessive neurosis, traumatic stress and sexual abuse.

Dr Duclaud reported that the program was very successful especially with woman dealing with depression, anxiety neurosis, phobia, traumatic stress and sexual abuse. The program contributed to the healing process in more than 80% of the participants. As a result, a higher number of women involved in the Catharsis program was discharged after 3 months from the after care clinic to return home instead of needing continued hospitalization.

Dr Duclaud reported that the program was successful with woman dealing with hysteria but the success rate was only 60%. He observed nevertheless a positive effect on the release of physical symptoms and pain.
Dr Duclaud reported that the impact on obsessive neurosis was more difficult to quantify even though he observed a significant reduction of anxiety with those patients.
Another study done in a rehabilitation center for long term unemployed workers (men & women) dealing with obsessive compulsive disorder, outcomes reveal the same significant reduction of anxiety with this population.

Dr. Lucien Duclaud (3) reported that musical selections with the Catharsis technique facilitate the emergence of feelings and traumatic experiences, confirming its distinctive cathartic power. Dr. Duclaud utilizes the Catharsis Technique exclusively as an expressive arts intervention.

1983 - Center for Psychological Observation and Care for Children (ages 2 to 6)
Principal Investigator: Dr David Feldman (4) Acoustic Therapy Department Director

Participants: 10 children
Dr. Feldman tests Dr. Amouyal's music on hypoacustic, autistic, psychotic, and neurotic children particularly those exhibiting language and hearing impairment. He notes, through an increased creativity in their drawings, a stimulation of the imaginary world by this synthesized music, and confirms the real and often beneficial effect of this music on the emotional and mental world of these young patients, as well as the particularly "convergent" effect of some of the musical compositions.

1985 - Camargues High School – Nîmes - France
Principal Investigator: Chantal Desmoulins, Literature Instructor (5)

Participants: 20 adolescents (age from 15 to 17)
Experiments conducted by Ms. Desmoulins in the educational environment, confirms the music's positive impact in the developing adolescent. The students' drawings and remarks clearly demonstrate the awakening effect of the music, its ability to stimulate creativity, and an increased desire to communicate with others. For the three students who had psychological issue, it was a complete release of their problem. After two years, 12 students testify that the program was of great help for their scholarship decision and the 3 students was clear of their initial problem.

1985 - Retirement Home – Le Printania – Chantilly - France
Principal Investigator: Mrs. Nicole Leneveu, Director & Registered Nurse

Participants: 10 residents
Mrs. Leneveu organized the first Catharsis musical program to provide the elderly a break from routine daily activities. As the residents (82 years old on average) listened to the music, she noticed that they appeared relaxed and the music seemed to bring a sense of calm and relief to those with Alzheimer's disease.
She writes, "The positive reaction manifested by our residents was noticed by all of the caregivers as well as by Dr. Gatet, gerontologist."

Participants: 8 residents with Alzeihmer disease
Mrs Leneveu and Dr Gatet reported that all residents who participated in the program, either experienced a decrease in physical pain, or improvement their mood which helped them to be less disoriented. They also report better communication.

1986 - Psychiatric Clinic – Carcassonne - France
Principal Investigator: Dr. Jacqueline Verdeau-Paillès (6), Head Director

In 1988, the organization Convergences hosted a conference entitled "Creation and Madness," in which Dr. Verdeau Paillès presented Dr. Amouyal's psycho-musical research. She expressed the following observations regarding his music:
"Dr. Amouyal considers artistic, vocal, instrumental, graphic, and corporal expression, as we all do; an essential tool for communication and personal balance, in addition to being potential sources of creativity, which in certain cases need to be discovered and developed. Thanks to years of research, he has produced an original music medium that can help medical and mental health practitioners in their daily procedures. With Dr. Amouyal's music, we conducted individual psychotherapy sessions with patients suffering from a severe form of neurosis. Unquestionably, this technique helped patients overcome certain obstacles in the healing process. The music fulfilled its role as a therapeutic tool.

1991-1992 Lonjaret Institute for the Deaf and Hearing Impaired – Lyon - France
Principal Investigator: Principal Investigator: Mrs. Nicole Tagger, Institute Director

Conducted by Chantal Desmoulins & Olivier Siegrist assistant of Pr Massarenti, Professor in the Department of Educational Sciences at the University of Geneva.

Participants: 30 children
Mrs. Tagger, the Director of the Institut Lonjaret for the deaf and hearing impaired, decided to implement the Catharsis Technique with deaf children. The comparison of the results of the control group and the experimental group confirm the music's impact on the imagination and its ability to awaken creativity, even in children with severe hearing impediments. (7)

2000 to 2002 Public Hospital, Geriatric Departement – Sète - France
Principal Investigator: Mrs. Marie Christine-Plumejeaud, Registered Nurse

Participants: 76 patients
Mrs. Marie-Christine Plumejeaud, a night nurse, suggests a musical listening in a hospital setting of primarily geriatric patients. These sessions took place in both long-term and short-term care, over the course of 61 nights.
The 76 patients, male and female, with an average age of 80, suffered from serious medical conditions such as respiratory illness, Alzheimer's, depression, and various behavioral problems.

What was observed is that by simply making one of the musical recordings available broke the existential isolation felt by these individuals and acted as a calming refuge for patients confronted with suffering and solitude. The listening of selections from Dr Amouyal's music offered a resolution to the distress these patients felt during their care. This music was a truly effective tool to help reach deep within the individual acting as a conduit for experiencing relaxation and a peaceful demeanor, especially for patients afflicted by Alzheimer's who displayed a deterioration of their cognitive and relational abilities. (8)

2005 - Retirement Home Le Cottage – Medica France – Argenteuil - France
Principal Investigator: Mrs Nicole Leneveu, Director

Participants: 20 residents

Anne Deparnay, an ergotherapist, proposed this treatment to residents presenting with significant spatial-temporal disorientation, and behavioral difficulties such as anguish, aggressiveness, or anxiety. For Ms Deparnay and nurse coordinator, Ms. Tuy Rainsart, the elements of comprehension that these disoriented individuals exhibited throughout the sessions, allowed them together with the professional staff, to establish simple and concrete actions in response to their issues which the residents were able to execute. For example, the caregiver-patient relationship became less problematic in regards to personal hygiene and daily living activities such as using the restroom without incident.

2006 - Center of Speech Therapy, Geneva Switzerland
Principal Investigator: Ms. Marie-Dominique Pecorini-Wetterwald (9), Center Director

Participants: 40 patients

Ms Pecorini-Wetterwald works with children and adults with various speech pathologies. She implemented the Catharsis Technique with a group of patients and confirms its effectiveness in accelerating change. The analysis of data gathered from the sessions gave her a comprehensive understanding of her patients, allowing for therapeutic interventions that were better adapted to their individual needs. She continues to be surprised by the behavioral changes that result from the graphic expression under musical induction sessions, especially in patients suffering from stuttering. (10)

2006 to 2013 - Laennec Center, Irigny France
Principal Investigator: Dr. Christian Simonin (11), Psychiatrist

Participants: 70 students

Dr Simonin organized sessions with participants in a rehabilitation vocational program who present with issues of processing stress, lack of self confidence, acceptance of handicap, and emotional fragility. Dr. Simonin and the teaching director, Mr. Pierre Salvetti, confirmed that these individuals showed greater willingness and better communication with others following exposure to the Catharsis Technique. It was documented that there was enhanced efficiency in completing the necessary steps for re-matriculation after the musical sessions, confirming an association with the Catharsis Technique and scholastic re-training. Participants were better able to handle their stress, were more relaxed, and were less fearful of final evaluations (12).

2007 - Lyon-Sud Hospital – Lyon France
Principal Investigator: Professor Marc Bonnefoy (13), Head Director of the Geriatric Department

Participants: 10 patients

Lyon-Sud Hospital is a long term geriatric care facility. Psychologist Maryanne Quenin implemented the Catharsis Technique with a group of patients with dementia presenting with disorientation, anxious agitation, grief and/or issues of abandonment. Soon after initiating the musical sessions, she observed changes in attitude toward others, reduced agitation, calm demeanor and verbalizations which were incomprehensible became clearer. Throughout the course of the musical program, she noted significant behavioral changes among the participants (14). Dr Bonnefoy reported that benefits of the program in regards to behavioral changes were still present 6 months after implementation of the Catharsis Technique.

2007 - Retirement Home Bévières – Grenoble - France
Principal Investigator: Mrs. Christiane Lavanant (15), Director

Participants: 20 patients

Mrs. Anna Mateus (psychologist), along with three psychiatric aides, were trained to administer the Catharsis Technique to a group of residents. The main goal of implementing the program within the institution was to offer concrete solutions to people exhibiting cognitive difficulties, regardless of the severity of illness. Significant changes were noted with nearly all of the residents who participated. The team observed reduction of motor agitation and wandering, physical relaxation, release of distress. These positive results encouraged them to continue implementing the program. In addition, families and professional staff confirmed these results by observing ongoing changes in the resident's daily activities (16). On December 4, 2008, the team trained in the Catharsis Technique presented their findings at the 3rd National Conference on Aging and the Aged in Paris.

2008 to 2010 - E.H.P.A.D. "Notre Dame des mines" – Home for the Elderly – Molière-sur Cèze, France
Principal Investigator: Mr. Jean Ménard (17), Director

Participants: 30 residents

Mr. Jean Ménard made the decision to train five members of his personnel in the Catharsis Technique in order to develop a personalized system of care for seniors. Having always placed an emphasis on the quality of care-giving for the most dependent individuals, he immediately recognized the potential benefit of applying the Catharsis Technique to those patients who are disoriented and incoherent as well as those who were exhibiting Alzheimer-like illness. Very quickly the staff recognized an improvement in communication with the residents involved in the Catharsis Technique. They note that these seniors had the ability to resolve feelings of grief when exposed to the music. The staff observes that this therapeutic tool was effective with those who were the most difficult to stimulate. For the team, this technique created a new way of being with the patients as well as an opportunity to reflect on their role as caregivers and the benefit of incorporating a complimentary therapy to traditional medical care in order to enhance the quality of life for their residents (18).

2008 to 2011 - Association Temps Fort – Psychological care and family therapy – Lille - France
Principal Investigator: Mrs. Fabienne Cattarossi, Psychologist & Center Director

Participants: 50 persons
Temps Fort is a non-profit organization whose staff is comprised entirely of psychologists, providing long-term psychological care for unemployed individuals since 1991. The director, Mrs. Fabienne Cattarossi, and seven staff psychologists were trained in the Catharsis Technique. The technique was implemented to treat a variety of emotional disturbances present in their patient population: severe depression, anguish, relational difficulties and stabilized psychoses.

For the director, the Catharsis Technique integrated itself seamlessly into the center's practice, adding a new possibility for their patients to work through their life history using this innovative mediator. The psychologists appreciated the method because it offered the possibility for projective expression, which was supported by a solid theoretical framework of implementation and analysis. The results revealed substantial psychic and emotional progress in more than 80% of program participants.

2012 - The E.H.P.A.D. "Residence du Parc" – Home for the Elderly – Saint Amans Soult, France
Principal Investigator: Mr Cedrick Decavele, Director (19)

Participants: 8 residents
Two men and six women (ages 78-88) diagnosed with Alzheimer's disease and/or associated disorder participated in a 12 week graphic expression under musical induction sessions called the Catharsis Application Program. These residents were monitored for changes in behavior, socialization, communication and the ability to express emotions. Upon completion of the program, it was determined that all the therapeutic goals selected for each participant was achieved and for three out of eight, the results surpassed the expectations of the goals initially established. The benefits associated with involvement in the program included improved self image, enhanced interaction and communication between residents, reduced anxiety, brighter affect, more focused attention and a reeducation in wandering behavior. For the professional staff, it gave them a new perspective on how to relate to the residents and prompted them to alter their approach of caring for them on a daily basis.

In Summary

The hospitals, medical facilities and rehabilitation centers, whose staff was trained in the Catharsis Technique between 1980 and 2013, continue to benefit from the application of this therapeutic tool. This technique has shown to improve the emotional well-being of those caring for the elderly, coping with long-term unemployment, disabled workers, and patients with psychiatric or psychological disorders.

The newly trained health workers, mainly in nursing homes, especially appreciate this method because it has helped them find solutions to support their most vulnerable patients who are impaired by physical and/or mental dysfunctions. For these health professionals, the Catharsis Technique is an effective, easy to use concept which allows them to:

- deliver a quality therapeutic program based on careful monitoring of observed responses and indivi dualized care
- be able to work more effectively as a team in a professional environment while creating bridges bet ween disciplines that may not always have the opportunity to collaborate
- master an effective therapeutic tool
- encourages the elderly to engage in an activity enabling them to establish and maintain connection with staff and residents
- gives participants an opportunity to feel useful and valued

Future Endeavors - 2014 and Beyond

The Catharsis Technique is designed to provide the practitioner with a method which takes into account the uniqueness of each person as well as their individual pathology. Practitioners have embraced the use of artistic mediation as a viable therapeutic tool and have exhibited great interest in incorporating the method into their private practice. Built from the main Catharsis Technique program, the Catharsis Application Program (CAP) gives practitioners the opportunity to offer selected musical selections in a 12 week session. This allows individuals who are unable to commit to a 9 month program the ability to experience the bene-fits the method delivers in a condensed form. Practitioners have discovered that CAP adapts seamlessly into their practice and patients are enthusiastic with how effortlessly they experience emotional release during the process.

In addition to continuing our efforts with older adults, youth at risk, vocational rehabilitation, children with disabilities, and individuals with psychiatric illness, we will be expanding our program to offering CAP as an adjunct service to substance abuse detox centers in 2014.

In the United States, the Catharsis Technique offers continuing education accreditation for training in the methodology. We are working to foster new professional alliances throughout the country and establish solid relationships from these new associates. Each day, the Catharsis Technique team brings a powerful and vital energy into their work, forging new paths, and developing new tools such as CAP to offer innovative solutions to restore emotional balance.

The Method

Etymology

What is the Meaning of Catharsis?

Catharsis, derived from the Greek word katarsis, means purification or purgation of the emotions (such as pity and fear), primarily through art. This purification brings about spiritual renewal or release from tension. Catharsis is also a psychoanalytic method, which consists of eliminating a complex by bringing it to consciousness and affording its expression. (Merriam-Webster Dictionary)

The Concept :

What is Catharsis Application Program?

Catharsis Application Program (CAP) is an original therapeutic process combining graphic expression under musical induction while utilizing psycho-technical testing as an assessment tool for the professional. This unique artistic mediation—adapted from the Catharsis Technique—falls within the field of creative arts therapy and demonstrates the same rigorous standards seen in the fields of art and music therapy.

CAP is a powerful tool that helps patients explore their emotions and feelings through the use of music and graphic expression. Utilized in Europe for more than two decades, Catharsis Technique and Catharsis Application Program offer therapists a unique and pleasurable methodology to assist patients in uncovering the underlying causes to a wide range of emotional issues.

Twenty-eight years of clinical observations under rigorous methodology have clearly shown that the music composed by Dr. Alain Amouyal facilitates the emergence of emotions tied to past traumatic experiences. As does a fable, his music has the ability to draw an individual's attention toward a particular problem and its possible solution. Just as the ancient tragedies of Greece gave spectators the opportunity to rid themselves of certain urges (violence, passion, fear, etc.), the cathartic function of music brings past traumatic experiences to the surface and serves as a means of releasing the emotional baggage tied to them:

"Finally, I've reached the core, I'm at the heart of the problem... tears are running down my face. Painful experiences... the memories that once stifled, engulfed, and controlled me are exorcised. It's as if this music has cleansed and pacified my past experiences so that I may finally let go of them." D.E., nurse

The Music

The technique uses, for the most part, music that was composed and recorded through improvisation. It was not composed with the intention of creating a certain effect on listeners, and can thus be considered "non-conditioning." As studies have shown, the spontaneous nature of music is of undeniable importance in music therapy. It is probably this aspect that incited a sophrologist who regularly uses the technique to say: "The music allows listeners to break through mental barriers without setting off a self protection mechanism."

The technique is based on a single work of music, spanning 3 hours in total. Its musical continuity allows for an extension of thought and affective expression, which is conducive to psychotherapeutic work. The music can thus be considered as having a "convergent"(*) effect.

Graphic Expression

Graphic expression allows therapists to observe the concrete effects produced through music induction. According to Dr. Michel Gabriel Mouret, "Allowing creativity to flow in drawing, painting, and collages during music listening helps patients discover themselves, and lets those who observe their drawings get a glimpse of their mental organization at a particular moment in time. In this way, patients are able to reacquaint themselves with the underlying framework that supports their internal world, made up of strengths, weaknesses, mental and spiritual forces, all of which are stimulated and mobilized by the music. More powerful than conscious elaboration, the intensity of that which has been revived through musical induction is preserved in the patients' drawings."

Verbalization

Whether in a hospital, clinic, or private office, patients are encouraged to verbalize on their experience and drawings after each session of graphic expression. The initial role that music induction plays in awakening patients' past feelings may be used to associate these feelings to memories during a therapeutic session.

Methodology

After studying nearly 10,000 drawings, a rigorous methodology was developed for use in psychiatric, geriatric, and educational environments. The technique is based on the following criteria:

Controlled Therapeutic Milieu

- Structured schedule: establish number and duration of sessions at regular intervals
- Controlled physical environment: sessions are implemented with well defined conditions & therapeutic character to maximize healing effect of the music
- Program follows a specific musical order to promote healthy emotional release
- Participants are able to choose either group or individual therapy
- Facilitators and other designated leaders follow a defined protocol when implementing therapeutic sessions
- Limited number of participants per session

Evaluation of Results

- Individualized goals are established for each participant
- Sessions are structured with a well defined evaluation system
- Precise data gathering for each participant is collected for therapeutic documentation and research purposes
- Data gathering for each drawing session include patient verbalization/commentary or psychologist notes for non verbal patients which is incorporated in the assessment analysis
- An evaluation is performed before and after each session to determine the overall mental and emotional well-being with each patient

(*) "…convergent in this sense meaning the effect of withdrawing from the body; relaxing, feeling secure and slowing biological rhythms…" Introduction à l'acousticothérapie. D. Feldman, P. Gardey, J. Reynaud, 1985.

• A final assessment incorporating the progression of the graphic expression for all sessions is performed on each participant
• Questionnaires to rate satisfaction are completed by facilitators and patients

The CAP Process

(1) The Catharsis Application Program is a 12-session process, unfolding over three months in one-hour weekly contact sessions
(2) Each session is implemented with well-defined conditions and therapeutic character to maximize the healing effect of the music
(3) Patients are asked to draw under musical induction but are not instructed what to draw, nor are they given the title of the musical excerpt to which they will be listening
(4) Patients are free to comment on their drawings or any emotions that come up
(5) Summary reports are completed and delivered in the 13th week
(6) Two therapeutic approaches can be used in conjunction with Catharsis Application Program music: (a) receptive music therapy and (b) graphic expression under musical induction
(7) Intervention can be conducted in an individual or group setting
(8) Some projective tests, questionnaires and evaluation scales, designed for children, adolescent or adults, can be administered during the pre and post evaluation:

• **The Test for "Receptivity to Music"** is a questionnaire based on the work of Dr Jacqueline Verdeau-Paillès. It presents the influence of our sound world in relationship to our emotional life. It can help therapists to determine if CAP is suitable for addressing their patient's needs and aids in determining whether graphic expression under musical induction or receptive music therapy is an appropriate choice.

• **The Simplified Self-evaluation Questionnaire (Version 3)** is derived from the questionnaire which generally accompanies the Hamilton's depression scale. There is one version for children and one version for adults. They gather subjective information about the subject's mood, and allow therapists to track a subject's progress over a period of time.

• **The Test for the Symbolism of Space** is derived from the symbolic use of space developed in graphology by Pulver and Arthur Mabille in the "Village" projective test. It analyzes the spatial position attributed to the fundamental concepts of self, the past, the future, matter and the ideals according to several criteria.

• **The Tree Test** is based on works by Koch and Jucker. Renee Stora developed this test, which involves around 200 objective criteria compiled through clinical and statistical studies.

• **The Draw-A-Person test (for children up to 12 years old)** developed by Florence Goodenough and Dale Harris, was initially used to measure children's intelligence, but was later used by Machover and others as a personality test that takes into account socialization factors and personality projection in children's drawings.

• **The Archetypal Test with 9 elements** is a projective test using the drawing of 9 archetypal elements combined with the writing of a story. It was developed by Yves Durand and drawn from the work of his professor, Dr Gilbert Durand, (philosopher). He built this test from the inspiration of several myths and symbols.

All the above are subjective tests. Objective test(s) may be used as well. For some research projects, the SCL90-R (Symptom Check List 90 items Revised) will be used to help assess a broad range of psychological problems. It is also useful in measuring patient progress and/or treatment outcomes. Symptoms for the following disorders are evaluated: somatization, obsessive-compulsive, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, and psychoticism. The test is grouped into four categories: adult psychiatric outpatients, adult non-patients, adult psychiatric inpatients, and adolescent nonpatients.

The Therapeutic Program using Graphic Expression under Music Induction

Week 1 – Initial Evaluation
REFERENCE DRAWING No. 1 without music
A first drawing without music, a projective test and an objective test, which serves as a basis for comparison during final evaluation.

Week 2 to 11 – CAP Sessions
10 music sessions with graphic expression using CDs 1-10

Week 12 – Final Evaluation
REFERENCE DRAWING No. 2 without music
Participants are retested with the same criteria as in the initial evaluation.
This final drawing without music serves as a basis for comparison during final evaluation.

Week 13 – Final Assessment
THERAPEUTIC ANALYSIS OF DRAWINGS
Discussion of the evolution of each drawing and its relationship to the music with each participant.

Objectives for this final assessment is to:
➛ highlight changes that appeared in the collected data
➛ assess the initial objectives
➛ share information and arrange a consultation with other professionals involved in the care of the patient, if warranted.

The Tool: Graphic Expression Packet

This packet contains:

• **The Programmatic Music :** A unique selection of 10 pieces - three hours of musical excerpts - from the Catharsis Technique musical program.

• **Manual:** Theoretical guidelines – 127 pages

• **Clinical observation grids** *for the analysis of patient's drawings*
Clinical observation grids (table format) – 706 Criteria: Detailed analysis with suggestions for interpretation. (+ appendix)

• **Clinical observation grids** *for the analysis of patient's comments*
Clinical observation grids (table format) – 273 Criteria: Detailed analysis with suggestions for interpretation.

• **Patient's Journal** - template

Therapeutic Communities

Patient Populations for the Catharsis Application Program

CAP, as a powerful therapeutic tool, assists patients in exploring their emotions and feelings through the use of music and expressive drawings. CAP offers therapists a unique and pleasurable methodology to help uncover the underlying causes to many medical or mental health issues. It is suitable for all ages and can be used in either individual or group sessions. This dynamic process is particularly recommended, but not limited to the following areas:

- **In Mental Health centers, Psychiatric hospitals and clinics,** the program will help patients let down their guard during psychotherapy and enhance the verbalization of their feelings. In our experience, it releases past traumatic experiences and the repressed feelings associated with them. It complements the healing process during periods of mourning. Additionally, it offers to the psychiatrist an alternative that reduces the need for mood-altering drugs.

- **For pediatric practitioners** and personnel working with children exhibiting hypoacusis, neurosis, psychosis, autism, and behavioral disorders it stimulates their imaginative world and supports creativity. It acts in a beneficial way on the emotional and mental world of the young patients, changes their behavior and enhances both their learning process and social communication skills.

- **In Oncology Treatment Centers,** it allows patients to express their feelings and come to terms with their illness and treatment. The CAP process assists patients with overcoming the strong emotional issues that are often tied to the diagnosis of cancer.
It also serves as a support system for the patient's family, friends and caregivers during the stages of his or her illness. It could be organized as an outpatient service that makes a beneficial link between their normal life and the responsibility in caring for their loved one.

- **In Retirement and Nursing Homes,** the benefits of CAP are as numerous as the number of pathologies that can occur towards the end of one's life. It gives patients with advanced dementia or disorientation a means of expression, and a voice to those who are no longer able to verbally communicate effectively. Physical benefits felt by patients who participate in the program include effortless and restful sleep, a reduction in aggressiveness and nervousness and the alleviation of pain. In addition it reduces the need for mood-altering drugs.
Caregivers feel less stressed when they see their loved ones experience less suffering as a result of the positive outcomes the program offers. Communication among caregivers, patients, and their families is enriched and more supportive through the beneficial effects of this program.

- **In Drug & Alcohol Rehabilitation Centers or Transitional Sober Living Housing,** CAP is an important tool which can assist in the process of identifying and transforming those emotional triggers that prompt additive behavior during initial treatment and recovery. It creates a safe and supportive environment conducive to optimum healing and offers a very personalized treatment program to address the specific addiction and any co-existing issues associated with the disorder. By uncovering the underlying causes to long-term alcohol and drug use, the CAP process lends support to patients with overcoming emotional issues that may have preceded the addiction.

Blending the cathartic process with other therapies during addiction treatment helps one to remain in and complete the program so that they have a better chance of staying clean and sober. It raises the chances for effective recovery and the successful re-entry into society. Lastly, CAP is a perfect method to encourage patients to continue group therapy as part of their ongoing recovery plan.

• **In Juvenile Detention or Youths at Risk Centers,** CAP provides a useful assessment tool. It creates a safe and supportive environment favorable to optimal rehabilitation and offers a very personalized treatment program to address the particular behavioral and emotional problems, which underlie the causes of delinquency. Through CAP, young people are able to overcome emotional issues. Thanks to this process, therapists are able to set goals for personal development such as learning to express feelings other than anger, developing one's own interests and friendships, becoming accountable for his/her feelings and behaviors and most of all to discover inner strength and self-esteem. These contributions prepare the adolescent to rejoin society with the tools needed to become a balanced and productive adult.

• **In Private Practice,** practitioners have the ability to track the overall impact that graphic expression under music induction sessions have on the individual's well-being. The program is designed to accommodate individuals, couples, family or group sessions.

To have the ability to readily identify changes that occur during CAP sessions generates a strong complementary alliance between the music and psychotherapeutic treatment. This process reinforces the patient/therapist relationship.

In summation, utilizing CAP in private practice is beneficial for:

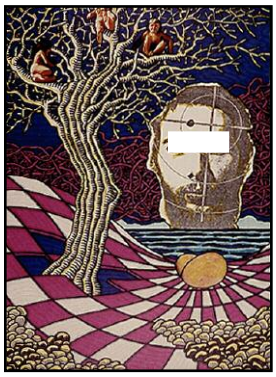
- Alleviating the stress generated by the work environment and/or conflicts with co-workers
- Facilitating the release of aberrant emotional behaviors seen in children or young adults with learning disabilities or those having difficulty adapting to the school environment
- Clarifying the issues surrounding personal problems that inflict individuals, couples or families

Sample Case Study

Psychiatric Hospital in Carcassonne
Private Consultation

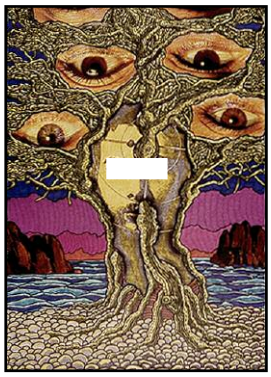
Practitioner: *Dr. Jacqueline Verdeau-Pailles* | Neuropsychiatrist and senior physician of the Department of Health and Mental Hygiene in Carcassonne, and music therapist. Specialized in music therapy in conjunction with an art therapy program at the University of Paris V-René Descartes. Developed a procedure to analyze receptivity to music. Published book on psycho-musical aspects entitled "Le Bilan Psycho-Musical et la personnalité" *(Psycho-Musical Assessment and Personality"). Éditions J.M. Fuzeau S.A, 1981.*

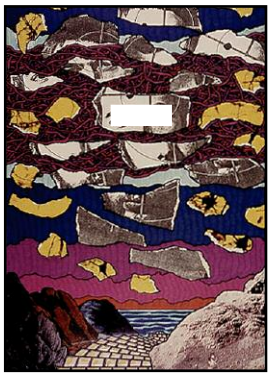
Patient: *Male, 27 years old. Diagnosis: severe case of obsessive neurosis and incapacitating phobias.*

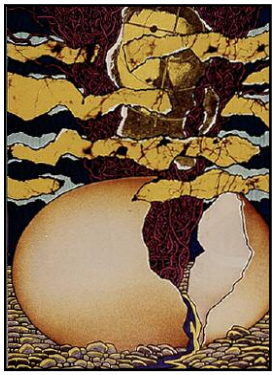


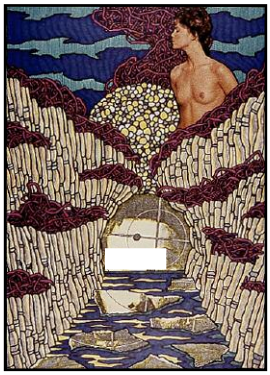
CD 1

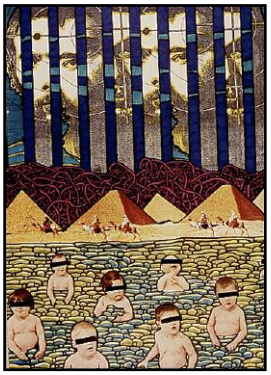
«This image, I am convinced that it is 'THE' image. The only image, the one that can explain everything. It is something the entire world has in common and it is my mission to paint it. I don't think I'm really a creator, but the craftsman for a universal idea.»





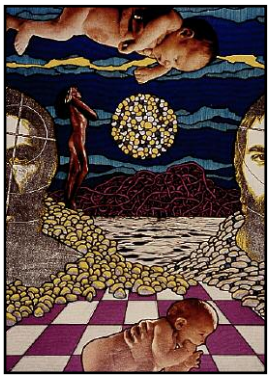


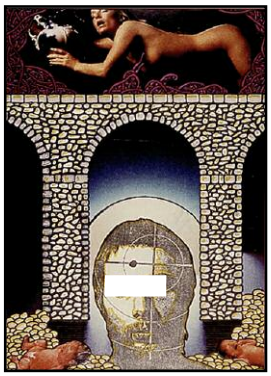


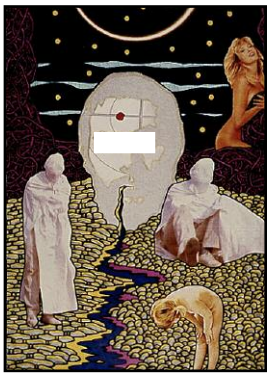


CD 7

This is the most successful session since the beginning. All the symbolism is there. The rain, the water, …that's my problem, my diarrhea. Water is part of my personality.







Patient response to program participation:
"After the first phase, I didn't want to use any other music but this; without being able to use words, I felt that work was taking place deep within me."
"At the beginning of the second phase, I had the impression of regressing and this new experience with Catharsis would not be beneficial or that I would not have enough ideas; that I had already exhausted all the resources of the music, that there had not been enough time elapsed between the two sessions, but this was not the case. I turned a corner I thought never to turn."
At the end of the second phase, the patient asked that his work be displayed, saying, "It's the image of my own story." He himself dated the different drawings:

Drawing #1: Infancy until 10 years old
Drawing #2: I take the place of the father until 18 years old
Drawing #3: Experience with addiction with breaking of personality
Drawing #4: Resentment and blame of the family, of the entourage and the appearance of symptoms (diarrhea)
Drawing #5: Symptoms stronger and stronger, manifesting in me at the station in an avenue like a row of concrete
Drawing #6: Individual fragmented
Drawing #7: Meeting with my wife and return to hometown
(This desire was manifested in reality by his desire to have a child. He had a little girl)
Drawing #8: Homecoming, accepting my role as father
Drawing #9: Regression; as if I could say I found all my senses.
Drawing #10: End of a cycle: the symptoms come out of my mouth. Expression replaces symptoms

Dr. Verdeau Paillès concludes at the mourning of the symptoms:
"The patient received psychotherapy like I've rarely seen. The patient is now healed, delivered from his symptoms. It follows two prior attempts to heal through psychoanalysis that had failed to resolve his issues. He has now found a job (he did not work up to this point) and has a child.
The first phase allowed him to take a step and considerably enriched his psychotherapeutic experience.
A radical change of style in his drawings, which until now had been exclusively geometrical and lifeless, was apparent with the appearance of living forms emerge and highly-charged symbols associated with his problems. After the music "Passage" (Phase I, CD 5), he himself, and for the first time, linked his symptoms to a sexual significance. Despite his great musical education and his attraction to Bach, after the first phase he did not want to use any other music but this.
The second phase allowed him to go deeper even further. He frees himself of his symptoms and in fact grieves for it. During the series of collages he took a major step in his recovery by presenting a concrete representation of himself. This was a break from the past where he dealt with his physical symptoms in the abstract. In the last collage, in which I saw this flood pouring out of the mouth (expressing his liberation), I knew that a significant release would take place. When prompted, he was able to speak about himself, where in the past he was unable to use his words to express his thoughts and feelings. Today, I can conclude that his experience with the Catharsis Technique gave him permission to mourn his symptoms and the ability to actively return to a healthy social and family life. For me this music can cross new boundaries, it is more than a projective test, it is a therapeutic tool."

NOTES

(1) Canadian Journal of Music Therapy, Special Issue: Emerging Research, XIII(2), 1977"In qualitative research, one might ask, "What is it that takes place between the client and the therapist during the process of therapy that makes the therapy a powerful (or emotional, or life-changing) experience ?"
Qualitative research examines how phenomena are experienced and constructed through description, analysis, and interpretation. It can help us learn more about aspects of the therapeutic setting. It relies upon words, music, sounds, or pictures to report the results. Qualitative research is generally nonpositivistic and grew out of phenomenology, existentialism, and hermeneutics in the human sciences. Qualitative research looks for meaning and understanding and allows phenomena to unfold over time."
(2) Senior physician in Child Psychiatry at the Hospital of Limoux in 1981.
(3) Psychiatrist and national expert on Neuro-psychiatry.
(4) Neurobiologist and audio-psychophonologist, in charge of the Acoustic Therapy department at the Center for Psychological Observation and Care (for children aged 2 to 6) in 1983.
(5) Amouyal, Dr. Alain & Desmoulins, Chantal. (1984). Graphic Expression under Musical Induction in a Scholastic Setting. Ed. Sté de la Cordée. 85p.
(6) Head of staff at the University of Bordeaux, senior physician of the Department of Health and Mental Hygiene in Carcassonne, and music therapist. Taught music therapy at the University of Montpellier. President of the ISME (International Society for Music Education) music commission on specialized education and music therapy. Taught music therapy in conjunction with an art therapy program at the University of Paris V-René Descartes. Developed a procedure to analyze receptivity to music, and has written a book on psycho-musical aspects entitled "Le Bilan Psycho-Musical et la personnalité". Éditions J.M. Fuzeau S.A, 1981.
(7) 1991 Review - Catharsis Technique experimentation conducted at the Institut Lonjaret in Lyon, France.
(8) 2001 Review - Catharsis Technique experimentation conducted at the Hospital of Sète in Southern France.
(9) Speech and Language Therapist, psychotherapist, Sophrology Master PNL.
(10) 2008 Review. Catharsis Technique experimentation for stuttering clients conducted by speech therapist Marie-Dominique Pecorini in Geneva
(11)The Intelligence of the Living (Testez Editions, 2009) co-written with Dr. Alain Horvilleur - several pages devoted to the Catharsis Technique in the Intelligence of the Body chapter
(12) 12-page excerpt from the report by the Director of Training regarding the psychological impact of CAP on clients at the Laennec Center.
Report of director of the training regarding psychological service of CAP
(13) Prof. Bonnefoy, Chief of Geriatric Medicine at South Lyon Central Hospital.
(14) 2008 Review. Catharsis Technique experimentation conducted at the Geriatric hospital in Lyon by Psychologist Marianne Quenin.
(15) Director of the Bévière retirement home in Grenoble. Mrs. Lavanant has more than 40yrs experience as a care-giving professional: C.N.A., registered teacher, and, later, a diploma in General and Applied Psychology from the French Institute on Human Culture. She is also a lawyer: legal counsel and teacher for the Chamber of Commerce and Industry.
(16) 2008 Review. Catharsis Technique experimentation conducted by psychologist Anna Mateus at Bévière - retirement home.
(17) Director of the Notre Dame des Mines retirement home at Molières sur Cèze for 24 years.
(18) 2009 Review. Catharsis Technique experimentation conducted by psychologist Sophie Guigou-Castanet at Notre Dame des Mines - retirement home.
(19) 2012 Review- CAP Experimentation conduction by psychiatric nurse Marie-Christine Plumejeaud and psychologist Ophélie Salvan.

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