

DeNora, Tia. 2013. *Music Asylums: Wellbeing Through Music in Everyday Life*. Farnham, UK: Ashgate.

**Reviewed by Jonathan Still**

The idea that music has mystical powers—to heal, to soothe, to cause depravity, to promote political unrest or intelligence—has a long history that persists to the present day. Yet even scientific research into music and health often focuses on effects rather than causes, leaving vital questions unanswered. By contrast, *Music Asylums*, part of Ashgate’s Music and Change: Ecological Perspectives series, sets out to explore “how, where and when music makes a difference.” It is the first volume in a triptych devised by Tia DeNora and Gary Andsell, based on their six-year study of community music therapy in a center for mental health in England. The focal point of the three-part work is the recently published co-authored volume *Musical Pathways for Recovery* (Andsell and DeNora 2016), with DeNora’s *Music Asylums* and Andsell’s (2014) *How Music Helps* envisaged as side panels that support and reflect on the topic from the authors’ respective specializations of music sociology and music therapy.

DeNora’s contribution can be seen as a logical continuation of her longstanding interest in how music “gets into” society, through micro-sociological studies of “music in everyday life,” the title of one of her most well-known books (DeNora 2000). She defines herself as a music sociologist who aspires, as she explained in *After Adorno*, to draw “musicology and sociology more closely together into a new type of interdisciplinary project that transcends the traditional boundaries of both” (DeNora 2003, 154). This is motivated on the one hand by a dissatisfaction with the kind of sociology that, when it deals with music, leaves out what is specifically musical about it, and on the other with the kind of musicology that represents the social as a static backdrop against which music is created and performed, or as something that is “reflected” in music. What is missing in such accounts, she has argued, is the understanding that music might be involved in co-producing the society which it is simultaneously supposed to reflect. Yet it is not enough to make such a claim in only general terms, she says: what is needed is an empirical music sociology that operates at the “right level of generality,” where assertions about music’s power or influence are supported by documentation of how such effects are realized, “the *actual* mechanisms through which music plays a mediating role in social life” (DeNora 2003, 40).

To address such questions in relation to music and health demands a complex, multifaceted approach. *Music Asylums* is roughly divided into two halves, the first providing a general ecological account of “how illness, health, the body, mind, culture and agency are intertwined” (6), the second developing and illustrating these ideas with reference to specific contexts where music is a significant factor in producing and maintaining well-being. The first three chapters examine the concepts of health and illness from a sociological perspective, with a particular focus on mental health, drawing on Thomas Szasz’s (1961) *The Myth of Mental Illness* and Erving Goffman’s (1961) famous study of “total institutions,” *Asylums*. Chapter 6 is an excursus on music and consciousness, while the seventh chapter discusses the implications of the preceding arguments for questions of musical ethics and aesthetics.

The theoretical heart of the book lies in the fourth and fifth chapters, where DeNora constructs a conceptual model in which the ambiguous meanings of *asylum* intersect on multiple planes. In one sense, asylum can mean a retreat, physical or virtual, that offers safety, respite, protection, and opportunities for repair and play, a place where it is possible to flourish. In another, it may refer to the literal, bricks-and-mortar “total institution” that Goffman (1961) described in *Asylums*, characterized by almost complete isolation from the outside world, and where all the inmates’ activities take place under one roof, determined by a single authority. The irony of such places is that within them, it is almost impossible to find any “asylums from the asylum” (DeNora 2013, 49). Indeed, asylums may produce the very symptoms that they were designed to treat, precisely because they lack opportunities for the other, first type of asylum. DeNora exploits this irony to illustrate both how social conditions may contribute to well-being or illness, and how music as a form of asylum can provide opportunities for play, for respite, for escape, or for changing the environment.

Play is vital to well-being, DeNora argues, because it promises the possibility of transformation, and can be seen as “a medium of world-making, the creative making of self, other and situation, now, again and later” (42). A focus on the importance of this creative and playful use of culture is, in DeNora’s view, what distinguishes Goffman’s thinking in *Asylums* from his earlier work, *The Presentation of Everyday Life* (1959). In the earlier book, Goffman suggested similarities between everyday life and the theatre, for example, in the way that people use “backstage” areas to prepare for, or repair from, public life. However, as DeNora points out, there are limits to the comparison: real life permits or forces people to digress from a plan or script to a greater degree than staged performances. Culture is not a fixed resource like a script and a set of props that can only be used off-the-shelf,

as it were, but is subject to creative and subversive adaptations in everyday life. Yet the degree to which this is possible is constrained by access to the necessary space and resources, and the effects of being deprived of such access is Goffman's concern in *Asylums*. Since such privations may not be confined to life in institutions, the difference between everyday life and asylums as described by Goffman is only a matter of degree.

At the core of DeNora's theory is a nuancing of the concept of "removal activities," the term Goffman used to describe pastimes that provided inmates with a temporary escape from the oppressive tedium of their day-to-day existence. Some of these were officially sanctioned participatory events such as games, dances, choral singing, and classes; others were individual—though still dependent on materials provided by the institution—such as watching TV or reading. Some forms of solitary activity were less favorably viewed—excessive daydreaming, or collecting objects not usually regarded as collectable, for example. Goffman grouped all these activities together under the single term "removal," but DeNora makes a distinction between two types of behavior, which she terms *removal* and *refurnishing*. These behaviors provide space *from* something or space *for* something, respectively. In her terms, *removal* refers to activities which involve getting away from the situation at hand, either physically or mentally, using whatever resources are available to transcend or block out the unwanted environment—listening to music, playing a game, watching TV, writing a diary, eating, drinking, taking drugs, and so on. The key characteristic of removal is that it is solitary, and involves a disengagement from others and the environment, and does not involve making any perceptible change to surroundings for others.

*Refurnishing*, on the other hand, is a form of asylum-seeking that, by definition, involves making changes, steps toward the creation of a place that is more conducive to well-being and flourishing. This might involve painting a room, putting on music that others can hear, or modifying one's own appearance. There are crossovers and ambiguities, such as putting on headphones to listen to music as a form of removal, which can also serve as a signal to others that one wishes to be left alone. Such ambiguities also attend the concept of what constitutes private or public space, and what is intimate or what is impersonal. Nonetheless, a basic distinction between the creation of room through removal or refurnishing is crucial for understanding how differently music can be conceived, or seen to act, in the world. As removal, in the form of, say, using an iPod to make a journey to work tolerable in what Michael Bull (2005) calls "accompanied solitude" (343), it offers asylum, but in a way that involves withdrawal from social interaction. Although time out and time away are important, there is a risk

that one may just return to the world even less able to face it than before, and without having done anything to change it for the better. This is quite different from musical participation of the refurbishing kind, which affords engagement with others, and possibilities for transformation.

Such activities form the focus of the final three chapters, where we are introduced to BRIGHT (Borough Centre for Rehabilitation, Interaction, Group Activity, Hospitality and Training), the focus of the six-year longitudinal community music therapy study that began in 2005, further described in Andsell and DeNora (2012). Detailed descriptions of interactions between people, music, and musical material enable us to see how musical performance with or in front of others becomes an opportunity to try out alternative ways of being in the world. For example, one visitor to BRIGHT sings songs from a repertoire that is not common to other participants, and as result tends to be rather isolated from them. As he begins to take part in music of the hitherto unfamiliar repertoire that the others sing, he finds a way of connecting with them. Playing and performing in the musical sense provide ways to practice performing in other settings, or to gain confidence doing so. Sometimes, dividing lines between one kind of performance and another are blurred or nonexistent. For example, Gary Andsell, in a dual role as accompanist and music therapist, provides on occasion what DeNora calls a “sheltered musical interaction” (92), a cross between musical and social support, accompaniment and caring that must conceal its own art as part of the task. In vignettes like the one chronicling Andsell, one can see some of the interrelated themes of the book in sharp focus: what music is, what it does, and what it means to *care*.

DeNora frequently warns against a view of music and music therapy as a kind of pharmaceutical intervention, delivered through headphones, and measured in terms of before-and-after effects, where the human being is reduced to a brain that processes sound, and against blanket notions of the “power of music,” as if the power inheres in music alone, independent of the contexts, objects, and people with which it is intertwined in everyday experience. Paradoxically, this overly simplistic model often underlies both idealist and scientific notions of what music is, to the detriment of those practitioners of music therapy who have to try to explain what it is that they do and how it works, in order to make a case for it. The temporalities of illness, well-being, and musical experience are complex. One may be ill, but experience pockets of feeling well. Experiences of music may be immediate and temporary, or have effects that are only experienced later, and may not even be construed as being directly related to music at all. For this reason, in her concluding remarks, DeNora suggests using the grammatical concept of the future perfect tense (e.g. “I will have done”) as a metaphor

for this phenomenon, since it “highlights some of the ways in which musical acts and their consequences for wellbeing are fluid objects, located and specified in terms of their meaning, value and efficacy only in retrospect and only in relation to (how they are coupled) with other things” (142).

The metaphor also captures very well the experience of reading *Music Asylums*. At just under 150 pages, it is a relatively compact volume that at first sight seems straightforward. DeNora’s style is clear and accessible, her arguments are convincing, and she offers frequent practical examples or colloquial phrases to illustrate theoretical points. After having read it, however, a more complex, demanding work emerges, both in the sense of what the author has written, and what the reader must do to understand it. Having followed the topics and arguments in linear fashion, one is faced with the task of making sense of DeNora’s vision in its non-linear totality. In this process, ideas that in isolation seemed simple now appear more complex, as they have to be assimilated into a wider framework. This, though, is perhaps the point of the book: music and health are slippery concepts with complex temporalities and interdependencies. Music’s dynamic form makes it simultaneously a powerful medium in social life, and a problematic subject for analysis. As a result, DeNora covers a dizzying range of topics and perspectives, including the sociology of medicine, health and music, music and consciousness, music therapy, notions of public and private, and an extended appraisal of Goffman and his critics.

The potential readership of this book is probably as heterogeneous as its subject matter. Music therapists reading the later chapters will undoubtedly rejoice in DeNora’s scholarly, sensitive advocacy of their work, while researchers and practitioners in related fields may find her investigative framework useful to apply in other empirical settings. Yet despite the detailed focus on a particular community music therapy context, *Music Asylums* is more than a specialist textbook on what is sometimes called “applied music,” a term that incidentally seems to imply the existence of conditions where music is able to float free of its connections with people and things in the world. On the contrary, DeNora’s point is that by “examining what it is that music does . . . it is also possible to understand what music is, or more specifically, what kind of an object it is, namely, an emergent, flexible medium that, like health/illness, takes shape in relation to other things” (136). In this sense, *Music Asylums* is equally an important contribution to continuing debates about the ontology of music and to the discipline of musicology itself.

#### References

- Andsell, Gary, and Tia DeNora. 2016. *Musical Pathways in Recovery: Community Music Therapy and Mental Wellbeing*. London: Routledge.

## Current Musicology

---

- \_\_\_\_\_. 2012. "Musical Flourishing: Community Music Therapy, Controversy, and the Cultivation of Wellbeing." In *Music, Health and Wellbeing*, edited by Raymond Macdonald and Gunter Kreutz, 97–112. Oxford: Oxford University Press.
- Bull, Michael. 2005. "No Dead Air! The iPod and the Culture of Mobile Listening." *Leisure Studies* 24 (4): 343–55.
- Clarke, David, and Eric Clarke. 2011. *Music and Consciousness: Philosophical, Psychological, and Cultural Perspectives*. Oxford: Oxford University Press.
- DeNora, Tia. 2000. *Music in Everyday Life*. Cambridge: Cambridge University Press.
- \_\_\_\_\_. 2003. *After Adorno: Rethinking Music Sociology*. Cambridge: Cambridge University Press.
- Goffman, Erving. 1959. *The Presentation of Self in Everyday Life*. London: Penguin.
- \_\_\_\_\_. 1961. *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates*. New York: Penguin.
- Szasz, Thomas. 1961. *The Myth of Mental Illness: Foundations of a Theory of Personal Conduct*. New York: Hoeber-Harper.