

Preface

Through music a child enters a world of beauty, expresses his inmost self, tastes the joy of creating, widens his sympathies, develops his mind, soothes and refines his spirit and adds grace to his body.

—U.S. NATIONAL CHILD WELFARE ASSOCIATION

Music makes us laugh, cry, and dance, gives us the motivation to complete difficult feats, and helps us feel like we are part of a community. Human culture is saturated with music. If you question this idea, try going through a typical day and listen for how many times music is playing around you. Whether as background music on television or in stores, or as part of your favorite playlist, it is a constant and powerful presence in our lives. Music also has strong therapeutic effects, so clinicians and educators instinctively use music in their work. Let us offer the example of a recent television advertisement. It opens with a man dressed in scrubs talking to a young girl who is lying in a hospital bed. He is kind, warm, and funny, yet she responds tentatively with just a few words and brief eye contact. He begins to sing a name game song and suddenly she looks up at him and immediately joins in the singing. They connect through the song and are smiling at each other. Then he tells her the dreaded shot in the arm is over with and she laughs, saying, “Is it really?” The ad is designed to thank nurses for their work, and it depicts a moment that clearly shows how music is frequently used as a natural part of treatment. The purpose of this book is to help professionals learn how to understand and use music in their clinical practice as a way to access children’s inherent strengths and abilities.

A belief in the power of music has sparked much interest in how and why music affects us so deeply. We view music as a universal human trait, as instinctive and natural to life as is breathing. We are all born with the capacity to find meaning in musical experience. All cultures create lullabies; all parents intuitively launch into baby-speak as a way to communicate with, soothe, and connect with their child. Each of us is born hardwired for language and music. Both the language we speak and the music we respond to are shaped by our familial and cultural surroundings. Paul Nordoff and Clive Robbins (1985), pioneers in the field of music therapy, wrote that “music is a universal experience in the sense that all can share in it; its fundamental elements of melody, harmony, and rhythm appeal to, and engage [the] related psychic functions in each of us” (p. 15). This view is supported by the extensive research on the brain being conducted in laboratories and hospitals. Scientists are studying what happens to brain waves and neurological functions when someone is listening to or playing music. Music, unlike speech, motor functions, pain responses, and emotions, is held in every area of the brain. When we listen to a piece of music, our frontal lobes respond to the lyrics, our amygdala responds to the emotional tone, our hippocampus brings up long-held memories related to the song, and our motor neurons make us instinctively move to the beat. Nothing else in the human experience gives us this total response! People who have experienced serious trauma are able to respond to music when words fail them, for music, quite literally, opens up pathways of memories and feelings that are blocked. It is natural that mental health and allied health practitioners will want to find ways to use music to help clients reach their goals.

This book was written to help mental health clinicians, health professionals, and educators understand how they may bring music into their work in a safe and ethical manner. You are the people who support, console, challenge, and encourage children who have suffered a trauma, are emotionally fragile, or have mental health issues that prevent them from fully engaging in life. In our 60-plus years of combined experience as musicians, music therapists, and music therapy educators, we have witnessed many instances in which music makes an immediate difference in how people communicate, socialize, and behave. The judicious use of music can unlock the therapeutic relationship, offer a creative way to work through issues, and provide a path to client success and fulfillment not otherwise possible. Doing this means we have to think about music in a very different way: No longer is it relegated to serving

as a background to interactions, or as an aural reflection of love, sadness, yearning, and joy. We can start to think about music as a way to connect with clients in a palpable way. What we want to emphasize here is that you do *not* need to be a trained musician to find therapeutic musical applications to integrate into your work. Following basic clinical and ethical guidelines, it is possible to find effective ways to use music as a therapeutic medium.

Both of us spent our formative years as music therapists working with children who were delayed in communicating, emotionally labile, or otherwise socially or physically impaired. We learned firsthand that music can reach children thought to be minimally capable of response. We have witnessed over and over in our lives, whether with children with autism spectrum disorder, patients in a hospital bed who were seemingly unresponsive, or people with advanced dementia who are no longer able to speak, how music brings people into relationship and into a moment of awareness and interaction. This book is not meant to help the reader learn how to assess or create treatment plans based upon musical engagement, but to identify simple techniques with which to bring music into clinical practice. Knowing how to use music holds the potential to enhance psychotherapy practice in many direct and lasting ways.

The first chapter in the book provides a broad introduction to what music can contribute to therapy. Chapters 2 and 3 together show how to bring music into the therapy room. Chapter 2 describes basic techniques and activities, while Chapter 3 takes this further to show how the clinician can use these strategies in a way that effects positive change. Chapter 4 focuses on children's musical development and describes the powerful role of music in the child's cognitive and emotional development, as well as how to work with children in a developmentally appropriate way. The remaining chapters each provide guidelines for how to intervene musically with a particular population, namely, children with attachment disorders, trauma, and cognitive and behavioral problems, which includes a section on children with autism spectrum disorder.

On a practical note, we decided to use a masculine pronoun when referring to the client and a feminine pronoun when referring to the therapist, for the sake of clarity and simplicity. All client names and identifying information have been changed to ensure anonymity. Also, when writing vignettes we sometimes combined our experiences or made modifications to create stories that are fully anonymized and still remain relevant.

Creating a place for music in your clinical practice is something to be done with planning and also with enthusiasm, for what else can prompt children to play with others in a unified yet individualistic manner that sounds and feels good, or offer a safer way to experience feelings? Our hope is you will read this book and be inspired to incorporate some of its ideas into your practice. Take what works and expand upon it, and please pass some of what you learn on to others.

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