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# What is music therapy?

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## Who am I and what do I do?

- Board Certified Music Therapists use a variety of music based interventions such as singing, playing, songwriting, recording, and listening to work towards health care goals within a dynamic therapeutic relationship.
- Audrey Hausig, MMT, MT-BC
  - 20 years in practice
  - Substance use, mental health, neurodiversity, trauma
  - Person centered, strengths based, trauma informed approach

Music Therapy is, "a systematic process of intervention wherein the therapist helps the client to promote health, using music experiences and the relationships that develop through them as dynamic forces of ic Therapy change" (Bruscia, 1989)

Music Therapists in the United States have **Bachelor's**, Master's or Doctorate degree 200 hours of fieldwork and 1060 of clinical internship **Board Certification (MT-BC)** Licensed in MD, NY, NJ, VA, NV, GA, ND, RI, OR, OK, WI



## Types of interventions

- •Receptive
- •Re-creative
- ImprovisationalSong writing



#### Music Therapy throughout the life time

- Pregnancy/birth (Maternal health, infertility, postpartum disorders.)
- Infancy
- Early childhood
- Childhood
- Adolescence
- Adults
- Seniors
- End of life/hospice (bereavement)





Singing and speaking involve different neural pathway in human brain. This means people who may not speak can sing.

Songs stored in memories from early years are often preserved in people living with dementia.

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#### Considerations for using music in your practice:

- Choosing music
  - Client preferred
  - Relates to goals both in lyrical content and music aspects
  - Within your scope
  - Safety
- Cultural Humility
  - Appropriation
  - Micro aggressions

  - Safety https://static1.squarespace.com/static/5bb4cd5c01232c468d3a9cb0/t/5ed069bc05f7d56275b9093a/1590716860172/police+brutality.pdf
- What to call your sessions that employ music approaches

## Contraindications

- Music can elicit strong emotions and memories
- Music can be over-stimulating
- Certain music may cause distress relating to fixed delusions
- Certain songs may be triggering (get high songs, lost loved one's favorite song, etc.)



A music therapist saying, "that's inappropriate" to a client's song request is judgmental, dismissive, and oppressive and it shuts down expression. Here are some alternatives for when you don't see a way around censoring.

The one from each column so that you can variate, explain, and provide a way for ward.			
Validate	Honest, nonjudgmental	Ways forward	
	reasons		
"Thank you for sharing that	"This song explores really	"Can we make up our own	
song."	important subjects but":	song that expresses the	
		emotion or message that's	
"Thank you for sharing	"I'm not trained to support	important to you in your	
something so important to	you in exploring them, so I'll	requested song?"	
you."	refer you to someone who		
	can."	"Can we rewrite lyrics that	
"Thank you for sharing		would feel safe for most	
about yourself through	"Not everyone in the group	people, but still express	
choosing this song."	is ready/able to face these	what's important to you?"	
	issues right now."		
Share something you like		"Can we listen to this 1 on 1	
about the song (the	"Some parts of it are outside	after the group?"	
production, a lyric, the bass	of our facility rules, since not		
line, etc.) or promise to	everyone is always safe to	"Can we find another song	
listen to it on your own time.	get into these topics."	by the same artist that's	
		safer/within the rules, etc."	

Pick one from each column so that you can validate, explain, and provide a way forward.

Alternatives to censoring: If the song is sexually explicit, use it as an opportunity to discuss sexual safety, relationships, and self esteem. If the song talks about violence, explore how the client relates to it and work on coping skills. Have they experienced violence? Do they feel unsafe? Do they feel violent urges or overwhelmed by their experiences? If the song talks about substance or alcohol use, explore the role of drugs and alcohol in the client's life.

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#### Research

The Limits of Resilience and the Need for Resistance: Articulating the Role of Music Therapy With Young People Within a Shifting Trauma Paradigm: Explores a shift from resilience and accepting social injustices that cause trauma to developing resistance. https://www.frontiersin.org/articles/10.3389/fpsyg.2021.600245/full (Scrine, E. 2021)

<u>Music therapy for depression</u>: Findings of the present meta-analysis indicate that music therapy provides short-term beneficial effects for people with depression. Music therapy added to treatment as usual (TAU) seems to improve depressive symptoms compared with TAU alone. Additionally, music therapy plus TAU is not associated with more or fewer adverse events than TAU alone. Music therapy also shows efficacy in decreasing anxiety levels and improving functioning of depressed individuals. <u>https://www.cochrane.org/CD004517/DEPRESSN\_music-therapy-depression\_(</u>Aalbers S, Fusar-Poli L, Freeman RE, Spreen M, Ket JCF, Vink AC, Maratos A, Crawford M, Chen X, Gold C. 2017)

<u>Music-based therapeutic interventions for people with dementia:</u> Providing people with dementia who are in institutional care with at least five sessions of a music-based therapeutic intervention probably reduces depressive symptoms and improves overall behavioural problems at the end of treatment. It may also improve emotional well-being and quality of life and reduce anxiety, but may have little or no effect on agitation or aggression or on cognition. We are uncertain about effects on social behaviour and about long-term effects. Future studies should examine the duration of effects in relation to the overall duration of treatment and the number of sessions. <u>https://www.cochrane.org/CD003477/DEMENTIA\_music-based-therapeutic-interventions-people-dementia</u> (van der Steen JT, Smaling HJA, van der Wouden JC, Bruinsma MS, Scholten RJPM, Vink AC. 2018)

Music therapy for schizophrenia or schizophrenia-like disorders: Moderate-to low-quality evidence suggests that music therapy as an addition to standard care improves the global state, mental state (including negative and general symptoms), social functioning, and quality of life of people with schizophrenia or schizophrenia-like disorders. However, effects were inconsistent across studies and depended on the number of music therapy sessions as well as the quality of the music therapy provided. Further research should especially address the long-term effects of music therapy, dose-response relationships, as well as the relevance of outcome measures in relation to music therapy. https://www.cochrane.org/CD004025/SCHIZ\_music-therapy-schizophrenia-or-schizophrenia-disorders (Geretsegger M, Mössler KA, Bieleninik Ł, Chen X, Heldal T, Gold C. 2017)

<u>Music interventions for improving psychological and physical outcomes in cancer patients</u>: This systematic review indicates that music interventions may have beneficial effects on anxiety, pain, fatigue and QoL in people with cancer. Furthermore, music may have a small effect on heart rate, respiratory rate and blood pressure. Most trials were at high risk of bias and, therefore, these results need to be interpreted with caution.

https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD006911.pub3/full (Bradt, J, Dileo, C, MaGill, L, Teague, A. 2016)

Li, Xing. (2020) "A total of 19 trials evaluating 1,548 patients were included in this study, of which 765 were in the control group and 783 in the experimental group. **Compared with standard care, music therapy can significantly increase the score of the overall quality of life in patients with cancer. In addition, music therapy was found to be more effective for decreasing the score of anxiety, depression and pain.**"

Gutsgell, Schutcher, et al. (2013) "A single music therapy intervention .... was effective in lowering pain in palliative care patients."

Burnsm Perkins, et al. (2015) **"Music therapy was associated with perceptions of meaningful spiritual support and less trouble breathing."** 

## Questions

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