

Music Therapy across the Human life Span: From Lullaby to Lament

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Thank you for the invitation to be here tonight to talk about music therapy.

Music therapy is defined by the Australian Music Therapy Association (AMTA) as “an allied health profession in which music is used to actively support people as they aim to improve their health, functioning and well-being. It can help people of all ages” (AMTA website <https://www.austmta.org.au/>). AMTA was established in 1975.

Music Therapy is one of the Creative Arts Therapies, alongside Art Therapy, Drama therapy, and Dance therapy and is also an allied health profession alongside Occupational Therapy, Physiotherapy and Speech Pathology.

Training as a music therapist involves a 3-year degree (usually a B.Mus) + a 2-year course-work Master’s degree and 640 hours of supervised clinical training. You must be an accomplished musician to be offered a place in the course. 50% of RMTs in Australia (n=1000) are Registered with the NDIS/NDIA.

Where do Music Therapists Work?

RMTs work in hospitals (paediatric and adult), special schools, community programs, in aged care and palliative care. Some music therapists have their own private practices or music therapy centres.

How do Music Therapists use music in their work?

We work with individuals and in group therapy contexts, including families. The main aim of music therapy is *to engage people in the music experience*. We are not concerned if a person sings out of tune – the most important factor is that they are engaged in singing, playing, moving to music, or listening intentionally to music. Our main methods are

1. Singing preferred songs, using age-relevant songs.
2. Writing /composing new original songs
3. Improvisation on a range of instruments, including tuned and untuned percussion
4. Movement/dancing to music
5. Receptive Music Therapy (listening closely to music), including relaxation techniques, and
6. Music & Imagery, where listening to music is a catalyst for memories of people, places and events in one’s life.

Singing is the mainstay of MT practice. Hearing acuity is developed at 6 months gestation in utero, where the foetus begins to recognize their care-giver voices. At 6 months of age, the infant starts exploring their voice, making little sounds in different pitches and timbres. Young children are very open in their preferences to music – they like music of all kinds of genres, and often spontaneously dance to music when it is heard.

For young adults, music preferences are very important as they navigate their place in their peer group and identity. In later adolescent years, individual preference for music is established and we know young people listen to music between 18-32 hours per week.

There are physiological benefits of singing that requires deep breathing to project the voice. Community choirs and group singing have been shown to have social benefits as well as physiological ones. There are approximately 200 community choirs in Melbourne for example, indicative of the popularity of singing in a group.

Improvisation

Music Therapists use tuned and untuned instruments for improvisations, including: small drums; djembes; melodic instruments (xylophones, metallophones), cymbals, and piano /keyboard. When working with an individual child or young person, the Music therapist may:

- Empathically mirror what the child is playing, matching tempo and dynamics
- Provide a basic rhythm to give the improvisation shape and form, leading to:
- Music dialogue in a question-and-answer type interaction
- Extend the dynamic range.

Drumming circles are also popular and are effective in enhancing communication and encouraging free expression, as there are no “wrong” notes. Drumming together also builds group identity.

Music Therapy and Autism

Many music therapists work under the NDIS and offer sessions to children and young people on the autism spectrum. It is a wide spectrum from severe effects of autism to high-functioning children with areas of brilliance. The main issue is difficulty relating to others, however there is a strong attraction to music as it is a non-verbal way of communicating, and young people relate very well to music. Improvisation develops social skills in the group context and with families. They learn turn-taking (waiting their turn to play), responding to others’ music by establishing a music dialogue, and listening to others’ music cues and imitating or matching a rhythm or phrase.

Song writing

Music therapists also facilitate composing new original songs with individuals and in groups. The process is:

- Brainstorming a topic for the song and asking participants to describe their experience (e.g. living with a health condition, or being in hospital, or gratitude for their family and friends)
- Structural reframing of the lyrics into “verses” and “chorus”
- Determining style and key
- Setting melody and accompaniment, and
- Recording a finished song.

Songs composed in music therapy often express gratitude for life and family, for pets and friends, and even for hospital staff. Songs are also used to reminisce about life events, as a life review for patients in palliative care.

Dementia and Aphasia

There is a fascinating link between music and memory. Participants who may have early dementia will remember the words of the song and sing along with the therapist. We know that songs are learnt by rote, and “popular” songs are heard over and over again. This memory is stored in long-term memory and can be accessed effectively in therapy sessions. In addition, music centres in the brain are housed in the right hemisphere (in right-handed people), whereas speech centres are located in the left hemisphere. If the person has suffered a left hemisphere stroke, they may have severe damage to the speech centres and be unable to speak. They can sing however, and they will sing the words.

Many notable poets and play-writers have espoused the benefits of music. Some of those quotes are:

“Music is life itself.” (Louis Armstrong, jazz trumpeter, 1901-1971)

“Where words fail, music speaks.” (Hans Christian Andersen)

“If music be the food of love, play on.” (Shakespeare)

“Music is a moral law. It gives soul to the universe, wings to the mind, flight to the imagination, and charm and gaiety to life and to everything.” (attributed to Plato)

“Music is the shorthand of emotion.” (Leo Tolstoy)

“. . . and music heard so deeply that it is not heard at all, . . . you *are* the music while the music lasts.” (TS Elliott *Dry Salvages*, V).

You can learn more about music therapy from these sites:

<https://www.austmta.org.au/>

<https://handbook.unimelb.edu.au/courses/m04aa/>

References:

Baker, F. (2022). <https://pursuit.unimelb.edu.au/articles/the-music-app-supporting-dementia-care-at-home>

Davidson J. W., McNamara B., Rosenwax L., Lange A., Jenkins S., Lewin G. (2014). Evaluating the potential of group singing to enhance the well-being of older people. *Australasian Journal on Ageing*, 33(2), 99–104. 10.1111/j.1741-6612.2012.00645.x

Grocke, D., Bloch, S., Castle, D., Thompson, G., Newton, R., Stewart, S and Gold, C. (2014). Group music therapy for severe mental illness: a randomized mixed methods study. *Acta Psychiatrica Scandinavica*, 130, 144-153. DOI: 10.1111/acps.12224.

Hearing in the womb. <https://lozierinstitute.org/dive-deeper/hearing-in-the-womb/>

Tamplin, J., Baker, F & Grocke, D. et al., (2013). Effect of Singing on Respiratory Function, Voice, and Mood After Quadriplegia: A Randomized Controlled Trial. *Archives of physical medicine and rehabilitation*, 94(3), 426-434. Doi: 10.1016/j.apmr.2012.10.006

Thompson, G, McFerran, K & Gold, C. (2013) Family-centred music therapy to promote social engagement in young children with severe autism spectrum disorder: a randomized controlled study. *Child: Health, Care & Development*. <https://doi.org/10.1111/cch.12121>