

**THE CREATIVE USE OF MUSIC
IN GROUP THERAPY**

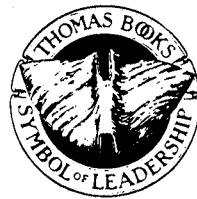
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Second Edition

**THE CREATIVE USE
OF MUSIC
IN GROUP THERAPY**

By
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CHARLES C THOMAS • PUBLISHER
Springfield • Illinois • U.S.A.

Published and Distributed Throughout the World by

CHARLES C THOMAS • PUBLISHER
2600 South First Street
Springfield, Illinois 62794-9265

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ISBN 0-398-06585-3 (cloth)

ISBN 0-398-06586-1 (paper)

Library of Congress Catalog Card Number: 95-50966

First Edition, 1980

Second Edition, 1996

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*Printed in the United States of America
SC-R-3*

Library of Congress Cataloging-in-Publication Data

Plach, Tom.

The creative use of music in group therapy / by Tom Plach. — 2nd ed.

p. cm.

Includes bibliographical references and index.

ISBN 0-398-06585-3 (cloth). — ISBN 0-398-06586-1 (pbk.)

1. Group psychotherapy. 2. Music therapy. 3. Group psychotherapy for teenagers. I. Title.

RC488.P59 1996

816.89'1654—dc20

95-50966

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PREFACE

In the past forty years, the use of music and music activities as a form of therapy has become increasingly popular and more accepted by professionals in all aspects of the helping professions. Music therapy is currently being employed in all aspects of psychiatric care, homes for the retarded, and homes for the aged. It is also being used with the physically handicapped, developmentally disabled, sensory impaired, and in special education within the school systems. Universities and colleges everywhere are developing and implementing degree programs in music therapy, both at the undergraduate and the graduate level, so as to meet the increasing demand for qualified music therapists. Despite the rapid growth of the field, however, there seems to be a lack of published material on how to use music as a form of therapy. A brief overview of currently available resources in music therapy shows an abundance of excellent research material,¹ a minimal amount of published books on music therapy with the retarded, music therapy with special education, music therapy with the aged, and music activities for psychiatric clients. There are also several excellent books that give overviews of the field of music therapy. Taking into account this severe shortage of available materials on music therapy, the purpose of this book is to offer the reader information on one small aspect of the overall field of music therapy; this being the use of music in conjunction with group therapy for the adolescent and adult psychiatric client.

The book is designed for the student who is just beginning a career in human services as well as for the experienced professional seeking to add new techniques to their repertoire of treatment approaches. While the guidelines and examples presented in the book highlight the needs of the client in an inpatient psychiatric setting, the formats are adaptable

¹For a concise overview of the research that is available in music therapy, I would refer the reader to the *Music Therapy Index*, available through the National Association for Music Therapy, P. O. Box 610, Lawrence, Kansas 66044.

to other settings as well. This can include the outpatient mental health setting, the residential treatment setting, the inpatient medical unit, the substance abuse treatment program, or intermediate care facility. For, regardless of the setting or the presenting problem of the client, music can be easily blended into a group therapy program.

The Creative Use of Music in Group Therapy, therefore, is an attempt to help the professional human services worker develop an added skill to benefit the client. It is with this foundation that I present *The Creative Use of Music in Group Therapy*.

ACKNOWLEDGMENTS

Special thanks to Twentieth Century Music Corporation, Fox Fanfare Music, Inc., for the use of lyrics to “Home” by Charlie Smalls, copyright © 1974, 1975, and 1978 by Fox Fanfare Music, Inc.; all rights reserved. Used by permission.

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When we feel, we begin to be alive. When we express a feeling, we share with the rest of the world that we are alive. When we express a feeling through music, we invite the rest of the world to share in our experience of the feeling, and to be alive with us.

**THE CREATIVE USE OF MUSIC
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Chapter I

INTRODUCTION

“I think she should get out of the situation altogether.”

“No. She would be better off if she stayed where she was at.”

“But she’s not happy there.”

“But it’s secure. Why change something that is safe and secure.”

The preceding dialogue was being held by several clients in a group therapy session that was begun with music. The basis of the discussion was the lyrics in a popular song entitled “Lyn’ Eyes,”² to which the group had listened at the start of the session. The song describes a young woman who is involved in a romantic triangle, which has apparently left her feeling unhappy and unfulfilled. The song also points out the woman’s tendency to maintain the behavioral pattern that led to her present situation. The clients in the group session were in the process of exploring this behavioral pattern, the benefits involved in maintaining the pattern, and some possible solutions to the problem. Later on in the session, the clients began to apply the same problem-solving process to their own personal issues, thus gaining some new insights about how they create problems in their own lives. The clients also discovered that, as individual members of a group, they all had something in common, i.e. patterns of behavior that resulted in their feeling unfulfilled. What made this session unique was that many of the clients had previously been resistive to or defensive toward the leader’s attempts to facilitate personal insights. Because the clients had seen the problem somewhere else first, i.e. through a character in a song, they seemed able to let down their defenses and, as a result, explore something new to them.

This example is one of many techniques for applying music in a group therapy session. Definitively, music therapy can be described as the use of music in the accomplishment of therapeutic aims. Specifically, music as it applies to group therapy can be defined as the use of music or music activities as a stimulus for promoting new behaviors in and explor-

²“Lyn’ Eyes,” recorded by the Eagles on Asylum Records.

ing predetermined individual or group goals in a group setting. This book shall explore two different formats for a group therapy session with music. The first format, which will be exclusively addressed in Chapter III, involves using music or a music activity at the start of the session, allowing the remainder of the session for processing group and individual reactions to the activity. This particular format tends to focus on the stages involved in personal growth and group development as well as encouraging exploration of and personal work on pertinent therapeutic issues.

The second format, which will be addressed in Chapter V, involves the use of a music activity throughout an entire group therapy session. This format does not set aside specific time for the participants to process reactions to the activity. Within this format, the major focus is usually upon the acquisition of recreational and interpersonal skills as well as upon the fun aspect of music.

Before moving into these areas, however, it seems necessary to explore some of the advantages of using music in group therapy. To do this, let us take a statement from a client involved in group therapy with music, for who would know better the advantages of having music in a session than an inpatient who attends five or six nonmusic group therapy sessions a week. Said one middle-aged female client, "Music helps me feel. I experience things in this group that I never experience in other groups." The same client went on to elaborate upon how music frequently puts her in touch with sadness that she often avoids confronting as well as with other feelings she attempts to block out. Juliette Alvin, in her book entitled *Music Therapy*, elaborates even further on this particular advantage:

Even in its most simple forms, music is evocative of sensations, moods, and emotions. It can reflect the feeling of the moment or change it by its presence. It can also increase the actual mood and bring it to a climax or dispel it.³

She later continues,

Music has the power to affect mood because it contains suggestive, persuasive, or even compelling elements. In music accompanying a specific function one of these elements is usually dominant. But whatever its purpose music is always related to man's own experiences, since it has been born out of his mind, speaks of his emotions, and lies within his perceptual range.⁴

³Juliette Alvin, *Music Therapy* (New York, Basic Books, Inc., 1975), p. 60.

⁴*Ibid.*, p. 61.

The therapist who has facilitated group therapy with no stimulus but his own dialogue and body language can certainly identify with the difficulty involved in bringing to the surface feelings or issues that the participants constantly avoid. Yet, music seems to be able to sneak in the back way. Where direct dialogue or confrontation may have met with extreme defensiveness and anxiety, music may open up communication between therapist and client.

The best example of music as a resource for evoking feelings, however, is our own individual experiences with music. I would invite the reader to spend a few minutes contemplating the following questions: What music do you like to listen to when you are sad? Angry? Happy? When was the last time a song brought a tear to your eye? What five songs do you most identify with and why? What songs do you most dislike? If you were to write a song, what would it be about? What musical instrument would best describe how you feel right now?

Given that most people could answer the above questions, we once again see a potentially valuable resource for evoking feelings, as well as expression of thoughts and feelings. What evokes feelings in each of us as individual human beings, and what provides each of us individually with a vehicle for expression, certainly has the potential for a similar impact upon a group.

To further elaborate upon this technique of using music as a vehicle for self-expression, let us look at the various degrees of complication that could potentially be involved in expressing oneself through music. A highly complicated form of self-expression through music, for example, might be a 100-person choral group performing a difficult vocal selection. Although each member of the chorus may be singing something slightly different from the other members, the result is an individual and group expression of a particular feeling and/or idea. Within the framework of a group therapy session, self-expression through music might take a much simpler form. For example, a session might be composed of each client expressing a feeling on a selected rhythm instrument, first individually and then collectively as a part of the group. Self-expression through music might also take the form of each client selecting a song that is expressive of something that he feels and then singing that song alone or with the group. In whatever form it takes, music can provide a valuable and effective alternative for self-expression for the client who has difficulty expressing himself through verbal dialogue or nonverbal movements.

Besides being able to evoke specific feelings and thoughts in the

individual and group, and besides being a vehicle for self-expression, music is also very adept at stimulating verbalizations and socialization. The most common example of this power is the quiet, shy individual who attends a group sing-along, hears some of his favorite songs, and suddenly is singing and socializing with the group. As was pointed out earlier, music is related to man's own experience and is a vehicle of expression for his thoughts and feelings. What one man is able to express through music, other men can relate to inwardly on an emotional level and outwardly on a verbal level.

The final major advantage for employing music in a group therapy session lies in its reliability in offering a group a common and dependable starting place for discussion and personal work. As with any other stimulative technique, the group leader using music has no guarantee that his group will respond in a certain manner on a given day to a preselected music activity. However, because of its ability to evoke similar emotions, thoughts, and behavioral responses within various listeners,⁵ the leader can often predict with some certainty how his group will respond to a given musical activity. This, then, provides the leader with a valuable tool for facilitating responses. An experienced and knowledgeable music therapist can conceivably take any group of clients, at any level of functioning, at any given point in time, and with minimal knowledge of the individual illnesses and group dynamics, design and implement a music activity that will facilitate exploration and growth on an important issue for the group or its individual members. As will be stressed throughout this book, even when the group does not respond in the manner expected by the leader, a good facilitator can turn the experience into a therapeutic learning experience for the participants.

Throughout the remainder of this book, many of the other advantages

⁵The assumption that music has the ability to evoke similar emotions and behavioral responses in people comes from two basic sources. The first is my own personal observations and experiences with facilitating hundreds of groups of clients. In using much of the same music repeatedly, I have been able to observe similar emotional and verbal reactions in different groups listening to the same music. This leads me to believe that many of us will react in similar ways to a given musical selection, although our reactions can be altered at any time by such factors as personal mood, present environmental circumstances, etc. The second source on which this assumption is based is the wealth of research that has been done in measuring people's responses to a given selection of music. Although the research is varied, the majority of research in this area seems to attempt to measure people's likes/dislikes for and/or their emotional reactions to music and then correlate those measurements with such factors as age, sex, or personality traits. Although much of the research tends to substantiate the claim that music can evoke similar emotions and thoughts in people, I would invite the interested reader to explore the research personally through the *Music Therapy Index* mentioned in footnote 1.

of using music in group therapy will be shown via concrete examples of activities. The four advantages pointed out thus far regarding ability to evoke feelings, ability to provide a vehicle for expression, ability to stimulate verbalizations, and reliability to provide a common starting place are major advantages and, thus, have received special attention.

PERSPECTIVES

Over the past seventy-five to 100 years, numerous models of group therapy and group therapy techniques have been developed and proven to be effective. To view group music therapy in its proper perspective, it might be advantageous to explore how it fits into or is similar to preexisting models.

Upon initial observance, group therapy through music seems closely related to the Theme Centered Interactional Method developed by Ruth Cohn.⁶ As in this particular model, group music therapy sessions are often built around a preselected theme or issue that the group desires or is required to explore. For instance, in the example given at the start of the chapter in which the group members were discussing the lyrics to the song "Lyn' Eyes," the preselected theme was how people set themselves up to feel unfulfilled. Hence, a song was selected that might help the group explore that theme. Unlike the Theme Centered Interactional Method, however, in group music therapy the theme is rarely ever stated at the start of the session. By stating a specific theme at the beginning of a music session, the leader immediately sets up an expectation of how the clients should respond to the music. Since listening to music is considered a subjective experience, with no right way or wrong way to experience it, the communication of such an expectation will only lead to internal conflict within the listener, i.e. "do I respond in the way the leader expects me to respond, or how I really am responding?" This particular issue of possibly influencing client responses is addressed at greater length in Chapter II, "Guidelines for a Music Therapy Session."

A group therapy session in music may also differ from the Theme Centered Interactional Method in respect to the amount of emphasis placed, by the leader, upon remaining focused on the original preselected theme. The leader in a group music therapy session, for example, may

⁶Ruth Cohn, "Theme Centered Model," in John B.P. Shaffer and M. David Galinsky, *Group Therapy and Sensitivity Training* (Englewood Cliffs, Prentice-Hall, 1974), pp. 242-264.

not emphasize focusing on the original theme, particularly when there is a large degree of variation between the group's initial response to the activity and the preselected theme. In referring once again to our example of the group discussing "Lyn' Eyes," it is conceivable that after listening to the song, several clients may begin crying or showing other signs of being emotionally upset. In such a case, instead of putting pressure on the group to problem solve for the character in the song as might have been originally planned, the leader will shift the focus to having the emotionally upset client(s) work on interacting with the group about his feelings. In other words, the leader will choose to facilitate the responses to the music activity that occur with the group regardless of the relation of the responses to the preselected theme.

When selecting the theme or issue for a group music therapy session, the leader will, in some respects, employ concepts from the various group dynamic models of group therapy. A basic concept involved in the group dynamic model is that all group therapy sessions can be characterized in terms of a single overriding focus or concern, i.e. focal conflict. In the Foulke⁷ model of group dynamics, this might refer to a theme or common concern within the group. Henry Ezriel,⁸ in his model, refers to this theme as the "common group tension," whereas Dorothy Stock Whitaker and Morton A. Lieberman⁹ refer to this as a conflict between a disturbing motive and a reactive motive. Part of the job confronting the therapist, who must preplan a music activity for a group, is to identify its common theme or focal conflict and then select an activity that would help facilitate group and individual focus upon the theme.

For example, let us say that over a period of several sessions the leader observes several clients initiating the topic of anger within the group. However, each time the topic surfaces, the subject gets changed very rapidly. The leader might observe the clients becoming increasingly anxious and more defensive each time the topic of anger arises. Several clients might also be observed behaving in ways that the leader could

⁷Foulkes approach to group dynamics, as presented in John B.P. Shaffer and M. David Galinsky, *Group Therapy and Sensitivity Training* (Englewood Cliffs, Prentice-Hall, 1974), pp. 73-76.

⁸Henry Ezriel, approach to group dynamics, as presented in John B.P. Shaffer and M. David Galinsky, *Group Therapy and Sensitivity Training* (Englewood Cliffs, Prentice-Hall, 1974), pp. 76-78.

⁹Dorothy Stock Whitaker, Morton A. Lieberman approach to group dynamics, as presented in John B.P. Shaffer and M. David Galinsky, *Group Therapy and Sensitivity Training* (Englewood Cliffs, Prentice-Hall, 1974), pp. 78-80.