

# How can music therapy help adults with mental health problems?



## **Mr B**

Mr B, 30, was a patient in a secure psychiatric unit when he was referred for individual music therapy. He was diagnosed with paranoid schizophrenia, and this had contributed to his history of violence. He had been to prison, but was now seen to require specialist treatment. He claimed at this time to be well, and appeared amenable and co-operative.

Initially, Mr B's piano playing was obsessive in character. He played for long periods, appearing oblivious to the presence of the therapist. His music was disorganised and confused. In avoiding musical contact with the therapist, Mr B remained isolated, and he had limited insight into his own behaviour.

Over three years, a relationship developed between Mr B and the therapist through music making. Mr B's music became more responsive and interactive, and he began to be able to use music to express his emotions. As the therapy progressed, he developed more insight into the way that he related to other people. He was also able to talk about his remaining paranoid ideas.

The progress that he made in music therapy made a significant contribution to his overall rehabilitation.

## **What is music therapy?**

Music therapy is an interactive, primarily non-verbal intervention. It provides a process through which clients can express themselves, become aware of their feelings and interact more easily. Music therapy can provide new insights into a client's functioning. Therapists work with all age ranges, in a wide variety of settings.

Music therapy can help in areas including:

- communication disorders
- learning disabilities
- mental health problems
- physical difficulties
- emotional problems
- challenging behaviour

Music is a powerful emotional medium, which can affect all of us deeply. In music therapy sessions, interactive music is spontaneously created by the client and therapist. The client does not need any musical training or experience in order to make use of music therapy. Accessible instruments are provided for the client to play. These might include a selection of percussion instruments.

The therapist seeks to establish contact with the client through the shared use of sound. The therapist responds to and supports, with music or words, any form of communication from the client. This could include the client's music, vocal sounds, movement, words or facial expression.

By establishing a relationship through music, the client can experience and explore new ways of relating, leading to development and change.

## **What are the aims of music therapy?**

The aims of music therapy are primarily non-musical, and are determined by the needs of each client. Typically, they might include:

- developing communication and self expression
- raising self esteem and confidence
- helping a client develop insight into the meaning of their behaviour
- developing the capacity to manage feelings
- helping a client to develop positive relationships with others
- overcoming trauma
- working through emotional problems

## **The practice of music therapy**

Music therapists provide group and individual assessment and treatment sessions according to the needs of each client.

Music therapists also provide the following services:

- writing reports and summaries of clinical work
- taking part in Care Programme Approach meetings and reviews
- offering advice and consultation for staff

Music therapy is a State Registered profession. This assures the public that those who practise music therapy are competent to do so.

## **Jim**

Jim was an elderly man undergoing assessment. There was a query that he might have dementia. He spoke a great deal, but seemed to shut out other people. Staff found it difficult to talk to him about either his feelings or his practical needs. Because he seemed unable to express himself in words he was referred to a music therapy group.

At first he appeared very motivated to take part in the sessions. He improvised with the therapist on a range of instruments, and suggested songs which he would then sing. After four months, several new members joined the group. Jim found this very frustrating, as he had been used to a smaller group. He started to sing long medleys of songs which dominated the sessions. Jim seemed to be crying out for attention, but the therapist felt that he had become very stuck.

A breakthrough came when the therapist began improvising with Jim within the structure of his songs. In this way, she could make contact with Jim in a more flexible way.

Jim was gradually able to become much more responsive to the other group members, and began to take part in the music that they offered. The group began to develop a real sense of sharing, by responding to each others' music. At the same time, Jim was able to settle into a new permanent home for men with dementia.

The **Association of Professional Music Therapists** (APMT) is the national organisation for qualified music therapists and those in training. If you would like further information about employing a music therapist, or would like to find a therapist in your area, please contact:

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Website: [www.apmt.org](http://www.apmt.org)

The **British Society for Music Therapy** (BSMT) is a registered charity. Its aim is to promote the use and development of music therapy. Membership is open to all with an interest in music therapy. The BSMT organises conferences, workshops and meetings, and is a centre for information. Members of the BSMT receive the British Journal of Music Therapy twice a year, and the BSMT Bulletin three times a year.

For further information contact:

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