

Music therapy with the terminally ill and bereaved



Harry's Story

Harry was a bright eyed, blond-haired four-year-old boy who was born with Spinal Muscular Atrophy, a degenerative muscle-wasting condition that is terminal.

He really enjoyed playing musical games such as 'follow my leader' using various instruments. This game offered him the opportunity to take the lead when, for so much of the time, he was reliant on others to do things for him.

Harry's mother, Lizzie, wrote to the music therapist following Harry's death: 'I have such happy memories of Harry through his music therapy' She remembered in particular a band that Harry formed two months before he died, which comprised his family, other children, and Hospice carers. 'It was precious to be sharing in such positive experiences when by this time so much of his life appeared to be a struggle' Lizzie went on.

The music therapist played music at Harry's funeral - a common part of the work. It is sometimes helpful for the family to witness carers being part of the grieving process, and providing music in this way often helps to bring relationships to a healthy conclusion.

Music therapy gave the chance for Harry to be creative, and offered an air of normality for a boy of his age, along with some physical, emotional and spiritual release.

All names in this leaflet have been changed

What is music therapy?

Music therapy is an interactive, primarily non-verbal intervention. It provides a process through which patients can express themselves, become more aware of themselves, and interact with others more easily. Music therapy can provide new insights into a patient's life. Music therapists work with all age ranges in a variety of settings.

Music therapy can help in areas including:

- Communication disorders
- Learning disabilities
- Mental health problems
- Physical difficulties
- Emotional problems
- Challenging behaviour
- Terminal illness

Music is a powerful medium, which can affect us all deeply. In music therapy sessions, interactive music is spontaneously created by the therapist and patient. No musical training or experience is needed in order to make use of music therapy. Accessible musical instruments are provided for the patient to play together with the music therapist.

The therapist seeks to establish contact with the patient through the shared use of musical improvisation. Any form of playing or vocalising from the patient is responded to and supported with musical accompaniment from the music therapist.

By establishing a relationship through music, the patient can experience and explore new ways of relating, leading to release and an improved quality of life.

What are the aims of music therapy?

The aims of music therapy are determined by the needs of each patient. Typically they might include:

- Increasing communication and expression
- Developing an awareness of self and others
- Providing emotional release
- Calling a patient out of isolation
- Increasing self-confidence

Music therapy is able to contribute to a patient's quality of life, enabling him or her to reach their full potential, even during the last weeks of their life.

The practice of music therapy in Hospices

The potential for a deep sense of listening within joint musical improvisation bears a striking resemblance to the Hospice philosophy of accepting the patient where they are. Music therapists employed by hospices provide individual and group sessions in a variety of settings. These might include:

- In the music therapy studio on the Hospice site
- At the hospital bedside
- In the patient's home

Although the preferred way of working is through joint musical improvisation, the music therapist is also able to work flexibly in the following ways:

- Improvising music for the patient
- Providing live music as relaxation
- Song writing
- Choosing and listening to music with the patient
- Providing music at a patient's funeral
- Working with bereaved people

Mrs Langford's story

Mrs Langford had been diagnosed with a degenerative condition. She was initially very limited in her ability to explore making music within active musical improvisations with the music therapist. Her playing, although appropriate, ordered, and rhythmical, lacked flexibility and a depth of expression. There was also a lack of energy and direction within it. Through improvising with her, the therapist encouraged her to move away from more conventional melodic and rhythmic structures. By exploring more a rhythmic and a tonal styles, she experienced an increasing sense of freedom. Her energy also lifted as her playing became increasingly animated. She then moved on to explore new areas of experience, ranging from quick, light textured music with high energy, to a slow, focused, more reflective style of playing.

In music therapy sessions with those facing the end of life, 'change' is not the major aim of the music therapist. The reality of the death of these patients is without question. The experience, therefore, is one of sharing, accompaniment, and release, moving towards a freedom of self-expression within the context of a healthy musical relationship. Through her experience in music therapy, Mrs Langford was able to experience a greater sense of freedom and flexibility through sharing musical improvisation with the music therapist.

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

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:

Association of Professional Music Therapists
24-27 White Lion Street
London
N1 9PD
Telephone: 020 7837 6100
Email: apmtoffice@aol.com
Website: 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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Please enclose an s.a.e. with written enquiries