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churchill fellow of 2005

Music teacher

BRYNTIRION COMPREHENSIVE SCHOOL

WALES, U.K.

Fellowship Report

The use of music therapy in mainstream schools

Dallas / Fort Worth, Texas, U.S.A.



As a music teacher I know the power music has to move and motivate people, as well as entertain them. However, it became crystal clear to me within hours of observing American music therapists that music can also be used to enhance so many other facets of life and learning.

The secondary comprehensive school in which I work in South Wales has, in recent years, accepted increasing numbers of pupil with Special Educational Needs (S.E.N.), including many with communication disorders on the autistic spectrum, as part of the national drive for inclusion and integration. This has posed challenges for us as teachers, and I felt that I was lacking in both skills and resources to effectively teach and motivate these children.

In an effort to improve and expand my teaching skills I looked towards the use of music therapy in schools, but found that in the U.K. most music therapists follow the Nordoff-Robbins school of therapy, which is based on musical improvisation, often on a one-to-one basis. Whilst extremely valuable to those clients lucky enough to take part in it, it is, however, difficult to transfer to a classroom situation. It is also primarily used for children and adults with profound and multiple learning difficulties and physical disabilities, often in a medical context. When I looked to the U.S. however, I found that music therapists have a more integrated role within the institutions in which they work. The use of music therapists in mainstream schools is

widespread, where they work along side teachers to enhance pupils' educational experience.

The Winston Churchill Memorial Trust Fellowship has enabled me to visit Dallas and Fort Worth, Texas, to observe first hand music therapists at work in an educational setting. After contacting the American Music Therapy Association (A.M.T.A.) I was fortunate to be put in touch with Kathleen Coleman, the A.M.T.A. co-ordinator for Dallas / Fort Worth. Kathleen arranged a varied programs of visits and observations across the Dallas / Fort Worth area and ensured that the whole month spent in Texas was full of memorable experiences. She also generously provided accommodation in her own home when long driving distances were involved the following day, and took me herself to places that were tricky to find. Kathleen was a superb host and guide to whom I owe a big debt of thanks.

My observations began at Kathleen's home, where she has a private music therapy practice. There I was able to observe teenagers and young adults with problems ranging from autism to Down's syndrome. In these cases, musical programs have been developed through liasing with the clients' parents, teachers, and the clients themselves. The aims of the sessions are to improve social, communication and literacy skills through music, plus any other issues specific to the client.

During sessions clients were encouraged to sing along with well-known and familiar songs, which they did with enthusiasm, even those who had speech difficulties. Kathleen mostly accompanied the songs on the guitar, although some were unaccompanied, accompanied by simple percussion or accompanied by CD backing track. Speech was encouraged through discussion, the co-composition of songs and the singing of missing words within a song. An omni-chord (electrical keyboard / guitar type instrument) and percussion instruments were used by the clients to add musical accompaniments and encourage independence and motor skills. Reading was encouraged through following the words of songs and singing them aloud when possible. All of the clients had obviously built up a rapport over many sessions with Kathleen and enjoyed communicating through music and participating in music making.

The first school setting in which I observed music therapy was Parkway Elementary School, Lewisville. There the music therapist, Michelle Kennemer, worked with small groups of four to six S.E.N. pupils for half hour sessions. Each session began, as had Kathleen's, and as (I was to discover) did most music therapy sessions, with a 'Hello' song in which the children were encouraged to join in by singing and shaking hands. Sessions all also finished with a 'Goodbye' song. This structured the sessions and provided a familiar framework for the pupils. Michelle also used a graphic 'schedule' chart with velcro stuck on laminated pictures to show the children the activities they would be doing in the session and provide a tangible sense of time for them. At key points in the session pupils were invited to take off the picture of the activity they were about to do and name it, working on their reading and speech skills in the process. In some subsequent music therapy sessions I observed pupils were invited to take off the pictures after each activity had finished, while speaking and signing "finished", whilst in others pupils were invited to chose the activity they wanted to do next, taking off pictures and carrying out the activities until all the pictures had gone. Whichever way the schedules were used, they seemed to help the children focus and they enjoyed the structure of the session.



Barbara Bastable using a schedule

The children in Parkway responded enthusiastically to all aspects of the music therapy, singing along with songs readily and volunteering to participate in activities. One of particular interest because of the way it encompassed many different skills, involved a 'bear song'. A folder had been made with several 'caves' stuck on the inside of it, inside each of which was a cardboard 'bear' illustrated with a picture. Using a simple sung phrase, the music therapist invited pupils one at a time to pull out a bear and see what it was hiding in its cave. The item was then discussed, thus working on communication and speech skills, and also often integrating with subject matter that the pupils had been working on with their classroom teacher (eg. the topic of 'winter'). This activity also encouraged patience and turn-taking in the pupils, who were all keen to pull out a bear, but they had to wait until the musical phrase had been sung each time and their turn came around.

Bears featured in another session at this school, in which all of the pupils were given a bear hand puppet and encouraged to 'act out' a story read / sung by Michelle. The children could see the book with its pictures, hear the words being read and sung and feel the puppets in their hands, so this was a multi-sensory experience which helped to make the story come alive for them in a fun way. The only problem was getting the pupils to give the bear puppets back at the end of the activity!

One of the pupils at the school was dressed in a weighted vest at the start of the music therapy session. I had not seen this practice before, but the sense of weight can apparently help children with attentional difficulties concentrate on specific tasks. Psychologists decide the amount of weight in the jacket as part of the evaluation each child undertakes when putting together his or her Individual Education Plan. Not just any child can be placed in a weighted jacket!

Another music therapist I visited in the Lewisville School District was Bill Matney, in the Lewisville Learning Centre. This establishment seemed to me to be the equivalent of a British Pupil Referral Unit, being responsible for the education of children who, for one reason or another, had been excluded from mainstream schools.

Bill was an impressive musician and music therapist. He is a percussionist, and all of the sessions I observed were based around drumming or playing percussion instruments. Each session was prepared before the pupils entered the room, with chairs placed in a circle and an instrument put in front of each one. The first session I saw began with 'boom whackers'; simple plastic tubes of differing lengths and pitches. As soon as all the pupils were seated, without speaking Bill began beating a short rhythm with his boom whacker and the pupils joined in. Bill then used a different pitch boom whacker in each hand, each one corresponding to the one held by half of the pupils. He alternated rhythms with each side of the circle and sometimes had them both playing at the same time. Whilst this was going on a support member of staff beat a rhythm on a hand drum. This kept the impetus going and added to the musicality of the group. When the music was brought to a close, all pupils finished together and with a sense of achievement. They were all also focused on Bill and ready for the next activity which, as a member of staff from the school pointed out to me, was a considerable achievement for many of the pupils who had been classified as 'unteachable'. The non-verbal way in which Bill gained the pupils' attention was ideally suited to these teenagers who frequently used speech with teachers as an opportunity for confrontation.

This level of concentration from the pupils continued throughout the session, during which they were given the opportunity to play several instruments, including African drums, chimes, cabasas and guiros. Sometimes the instruments were played together as a group, sometimes opportunities were given for solos. The African drums seemed particularly therapeutic for the pupils, as they were able to vent their feelings in a tactile yet constructive way, without losing control. Using their hands on the instruments helped to keep them focused on what they were doing in a sensory way.

Some of the pupils in this group of twelve to sixteen year olds showed excellent rhythmic imagination and played steadily and with flair. Indeed, one pupil had progressed so well that Bill gave him individual coaching in African drumming during the lunch hour, if the child had behaved well in school during the preceding week. This was a strong motivational reward for the pupil, who obviously loved the drumming.

During Bill's other sessions with different groups at the Lewisville Learning Centre I observed pupils interacting with each other through shared playing of instruments such as the ocean drums. These are large two sided drums approximately two feet in diameter, filled with beads. They can be held by two or three pupils, and a gentle 'shhh' sound made by rolling the drum and moving the beads. Children who had been teasing each other and arguing as they entered the room quietly co-operated with each other when playing together; a huge step forward in communication and social skills. Bill also used well-known games such as 'Simon says' in musical activities to encourage both the pupils' enjoyment and listening skills. The children concentrated extremely well and obviously enjoyed both the games and all of the musical activities they took part in.

During the month I visited five more elementary schools in the Birdville, Grand Prairie and Arlington school districts of Dallas / Fort Worth with Melissa Herring, Jennifer Stein, Shannon Kowalski and Barbara Bastable. These music therapists showed the same level of dedication, professionalism and enthusiasm I had previously seen. Each therapist had their own particular style, as was to be expected with different musicians, but the value of their work was clear in every class they went into. Children universally greeted the music therapists with delight and participated happily in the sessions. Classroom teachers were unanimous in their praise of the music therapy programs and the way they helped the children to learn and develop in so many ways.

I was particularly interested in the use by the music therapists of sung stories and song lyric books. These books I had not seen before, but they were illustrated books of popular songs such as 'Love Me Tender', with a line of the lyrics on each page. The children listened carefully to a recording of the song whilst following along with the text and looking at the pictures. They all seemed to enjoy it and show a high level of concentration, and I can see that these books would be of use in our secondary school setting where some children have difficulty reading, but enjoy age appropriate materials. Books can also be chosen to fit in with current topics.

As well as singing, I also saw lots of instrumental work in the elementary school observations. Children played small percussion instruments such as tambourines and claves individually, and larger instruments such as the 'gathering drum' as a group.



Barbara Bastable using a visual aid, singing and playing claves

I was exceptionally impressed with the work of the music therapists in the Arlington Independent School District who had put together packs of resources for their own and the classroom teachers' use, which included visual aids and audio CDs. The CDs contained examples of all the music used in therapy sessions, plus music that could be used with each of the percussion instruments. So if, for example, a classroom teacher decided she wanted the children to play the tambourines, he or she could find the audio CD with music for tambourines and simply select any track and know it would be appropriate for the children to play along with. The music therapists had done everything they possibly could to ensure that the classroom teacher could carry on the work they did in music therapy sessions with the pupils throughout the week. Interestingly, it was evident from the proficiency and responses of the children which classes had had extra sessions from their teachers and which had not!

The value of music therapy in helping develop speech was particularly evident in observations of younger pupils, aged three to seven. Children seemed motivated to speak when encouraged through a sung question, or when they had to provide the missing word in a well-loved song. Singing a question or a well-known phrase seemed to act as a trigger, even when a spoken question had failed to elicit a response. Interestingly, sometimes it could be seen that the phrase initially learned as a sung one could be transferred to a spoken one. In one instance a reticent pupil was encouraged

to participate through a sung phrase, “If you want a tambourine, raise your hand...” (sung to the tune, “If you’re happy and you know it...”). The next pupil was then prompted by the spoken phrase, “If you want a tambourine...” and the previous child shouted “raise your hand!”. She had transferred the sung phrase to a spoken one, despite being initially unwilling to respond to a spoken request. All of the music therapists sang instructions and requests to the pupils on times and seemed to get positive reactions where sometimes spoken commands did not.

In the Arlington Independent School District with Barbara Bastable (featured in the photographs) I also observed a music therapy session in Sam Houston High School. The young people there had diverse special educational needs encompassing, amongst others, a wheel chair user and pupils with autism, but they all again seemed to respond positively to music therapy. They enjoyed following along one of the song lyric books, sang enthusiastically when required and performed proficiently a group rendition of ‘Love Me Tender’ with handbells. This last task was impressive as it required both co-ordination and concentration. The pupils were also encouraged to be independent through operating equipment and setting up instruments.

I witnessed handbells being used successfully with S.E.N. adult clients too. I was invited to attend a rehearsal of a handbell group that has been established for nearly thirty years, under the direction of Mr Joe Pinson. They rehearse every Sunday afternoon and regularly perform at church services and concerts. I was able to see with Joe’s group the potential for achievement through this medium, as they perform to a high standard and with obvious enjoyment. Joe has, over the years, developed a system of music notation that the clients understand and enables the group to play a wide repertoire of music. The level of concentration everyone showed when reading and playing the music was remarkable. When invited to play and conduct myself though, I could see why everyone needed to concentrate so hard. It was much more difficult than it looked! I enjoyed taking part though, and it gave me a unique perspective.



There I am at the back – trying to keep up!



Widespread mirth at my effort!



The two halves (treble and bass) of the handbell group

I saw a completely different facet of music therapy when I visited the Dallas Children's Medical Center; a specialist children's hospital with just over four hundred beds. I observed Lisa Jones, a music therapist based in the Oncology ward. I observed Lisa working with a group of cancer sufferers and their parents during a once weekly session that is run on a 'drop-in' basis, providing a half-hour session to encourage both the children and adults to have fun and make music together. Lisa explained that her role is to help the children and their families to cope; amongst other things with their diagnosis, with pain, with taking unpleasant medication, with meeting lots of strangers, and with grief. Most of Lisa's work is with individual clients, and due to the highly personal and sensitive nature of this work I was not able to observe it. However, I could see from the group session how valuable music therapy is in this setting.

Lisa explained that parents find the diagnosis of cancer in their child traumatic and heartbreaking, and the last thing they often want to do is be happy and cheerful. However, research has shown that children improve more when they are happy and have the opportunity to laugh and have fun, which is where the group music sessions, along with other play and art therapy, help. The group I saw had seven young people, ranging in age from two to twenty one, some accompanied by their parents, some on their own. The group sang well-known songs together (such as 'Bingo'), experimented with percussion instruments and played a parachute game that involved flinging a toy monkey up to the ceiling along to 'Three little monkeys'. The parents were involved in every activity, including a game in which each parent was invited to record a short phrase (such as, "Hi, y'all!"), which the children then replayed during each chorus. This caused much hilarity amongst children and adults alike.

Each of the activities was simple; chosen to succeed easily and create a happy atmosphere of achievement. As Lisa explained, the parents needed to see their children enjoying themselves in order to allow them to come back the next week. For some children it was the first time they had visited the play area; a big step in their recovery. The session also allowed the parents a short release from their worries, and sometimes encouraged parents to interact with each other and start supportive friendships.

The music therapy carried out in the Children's Medical Center was very different to the sessions I had observed in schools. Therapy in the hospital, like much music therapy in the U.K., is very rarely structured or pre-planned as it has to take account of medical conditions and rapidly changing situations. However, it was undeniably valuable to the clients and their families at possibly the most difficult times of their lives and I was privileged to have an insight into it.

Another establishment that uses music therapy to help children through difficult times is the Collin County Children's Advocacy Center, whose aim is to identify, protect and improve the lives of abused and neglected children. To respect the confidentiality of the children who attend this centre I was not able to observe any music therapy sessions, but I had an enlightening visit with Tania Cordobes, the resident music therapist, who gave me a tour of the centre and told me about her work there.

Music therapy is just one part of the healing process undertaken by the children who attend the Advocacy Center, a large percentage of whom are victims of sexual abuse. Expressive art therapists, play therapists, counsellors and other professionals are also on hand to help the children work through their recovery process and move on with their lives. Music therapy is also used to help non-offending parents deal with their issues; they often feel overwhelming guilt and sadness and music therapy can help deal with this.

Like the music therapy in the Children's Medical Center, the sessions carried out by Tania are largely improvised because of the volatile and constantly changing situations of the clients. They are tailored to the needs of each individual client at the time they are there, but activities could include collaborative improvising on instruments, composing songs or listening to music with a particular significance and discussing it. Music therapy takes place in a dedicated room decorated with fun, colourful images and resourced with a variety of instruments.



Joia tubes in the music therapy room at the Children's Advocacy Center

This is all the more remarkable when it is considered the centre (like the Children's Medical Center) is funded largely by public donations. There are several more specialist therapy rooms in the centre, as well as cheerfully decorated visiting rooms and a play area. There is also a police station based in the centre, necessary for security and ongoing investigations into child abuse and neglect.



Music therapy room

I was grateful to Tania for sitting down with me at the piano and showing me how she improvises with her clients; an aspect of music therapy that I had thought beyond me. I realised it was actually something I could do, and even work into my lessons, with a little practice!

My final observation showed me yet another face of music therapy in Texas when we travelled to a small town, Stephenville, approximately one hundred miles south of Dallas / Fort Worth. Here we met Kathleen's friend and colleague Cathy Knoll, an experienced music therapist who has worked in the town for nearly thirty years. Cathy works in many schools throughout the district, covering children of all ages and needs.

Cathy's holistic approach to music therapy within the community reinforced my impression of music therapists in the U.S. as being extremely caring and hard-working. Cathy's sessions showed a balance between the structure and planning required for constructive learning, and the flexibility of an experienced and

imaginative practitioner. Cathy used a similar mixture of vocal and instrumental music along with visual aids and discussion that I had observed in other school settings. She seemed able to cope with any eventuality; when a child opened a jar of honey being used as a prop, the children (after checking with the teacher that no-one was allergic!) were offered a taste of the honey, creating a multi-sensory and exciting experience for them.

In a way, this final observation encapsulated the approach of music therapists in the U.S. as I saw it; they are not only musicians, but innovative therapists working with many different mediums, resources and techniques to improve the lives of their clients in large and small, but always important ways.

For me as a teacher, I have had my horizons expanded and my mind opened to a new multi-dimensional way of approaching teaching during my Fellowship. The main points that I think I will be incorporating into my teaching are the use of visual aids, song lyric books and improvisation. I will also strive, in consultation with other teachers in my school, to enhance other aspects of my pupils' education (such as literacy) through music, particularly those children with S.E.N..

On a personal level, I have met some fantastic people during my stay in Texas and been bowled over by their generosity and kindness. Kathleen, my guide and mentor during my stay astutely said, "Travel never leaves you where it found you." This is so true, and I am grateful to the Winston Churchill Memorial Trust for the opportunity of a lifetime, as well as to all the people I met along the way who made the experience such a special and enriching one.

Claire Hawkes

March 2006

Annex
Itinerary

Sun. January 29th 2006

Arrived in Dallas / Fort Worth

Tues. January 31st & Wed. Feb. 1st

Private practice of Kathleen Coleman, MT-BC, Grapevine, Texas

Wed. Feb 1st (pm)

Parkway Elementary School, Lewisville, Texas

Fri. Feb. 3rd

Lewisville Learning Center, Lewisville, Texas

Mon. Feb. 6th

Children's Medical Center, Dallas, Texas

Fri. Feb. 10th

Birdville Independent School District, Fort Worth, Texas

Sunday Feb. 12th

Bell Band rehearsal, Gateway Baptist Church, Denton, Texas

Mon. Feb. 13th

Farrell Elementary School, Grand Prairie, Texas

Wed. Feb. 15th

Hale Elementary School and Percy Elementary School, Arlington, Texas

Thurs. Feb. 16th

Sam Houston High School and Williams Elementary School, Arlington, Texas

Tues. Feb. 17th

Collin County Children's Advocacy Center, Plano, Texas

Wed. Feb. 22nd and Thurs Feb. 23rd

Stephenville School District, Stephenville, Texas.

Sat. Feb. 25th

Flight back to London Gatwick

