



American Music Therapy Association, Inc.

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MUSIC THERAPY AND YOUNG CHILDREN

What is Music Therapy?

Music Therapy is the clinical and evidenced-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program. Music therapy is a well-established allied health profession similar to occupational therapy and physical therapy. It consists of using music therapeutically to address physical, psychological, cognitive, behavioral and/or social functioning. Because music therapy is a powerful and non-threatening medium, unique outcomes are possible. With young children, music therapy provides a unique variety of music experiences in an intentional and developmentally appropriate manner to effect changes in a child's behavior and facilitate development of his/her communication, social/emotional, sensori-motor, and/or cognitive skills.

Music therapy enhances the quality of life. It involves relationships between a qualified therapist and child; between one child and another; between child and family; and between the music and the participants. These relationships are structured and adapted through the elements of music to create a positive environment and set the occasion for successful growth.

How Does Music Therapy Make a Difference with Young Children?

- Music stimulates all of the senses and involves the child at many levels. This “multi-modal approach” facilitates many developmental skills.
- Quality learning and maximum participation occur when children are permitted to experience the joy of play. The medium of music therapy allows this play to occur naturally and frequently.
- Music is highly motivating, yet it can also have a calming and relaxing effect. Enjoyable music activities are designed to be success-oriented and make children feel better about themselves.
- Music therapy can help a child manage pain and stressful situations.
- Music can encourage socialization, self-expression, communication, and motor development.
- Because the brain processes music in both hemispheres, music can stimulate cognitive functioning and may be used for remediation of some speech/language skills.

Example Case Study:

A music therapist working in a community music school refers to one of her students as a “musical child.” The six-year old girl, who has physical and developmental delays, is somewhat verbal and interacts in a limited way with others. When she began music therapy at age three, it quickly became obvious that she had exceptional innate musical ability. She could play the piano by ear when she was two, although her hands have only four fingers each. And even though she rarely spoke, she sang – and in tune.

The last three years have resulted in significant growth. Through weekly individual 45-minute and then 60-minute music therapy sessions, the child has made progress in the length of her attention span, degree of independence and ability to follow directions. She now speaks one and two word phrases spontaneously, and there is also marked improvement in her social skills. In addition to singing and playing keyboard and piano, the child now plays the omnichord, autoharp, bells, chimes, xylophones, drum set and various small percussion instruments. In her initial stages of music therapy, when she played the keyboard and piano, she would not allow anyone else to play with her. Now, however, she plays the melody and the therapist plays the accompaniment. The child's preschool teacher has asked her to play for other children in her class, thereby using her musical strength to draw her into the group.

What Do Music Therapists Do?

Music therapists involve children in singing, listening, moving, playing, and in creative activities that may help them become better learners. Music therapists work on developing a child's self-awareness, confidence, readiness skills, coping skills, and social behavior and may also provide pain management techniques. They explore which styles of music, techniques and instruments are most effective or motivating for each individual child and expand upon the child's natural, spontaneous play in order to address areas of need.

Often working as a part of an interdisciplinary team, music therapists may coordinate programming with other professionals such as early intervention specialists, medical personnel, child-life specialists, psychologists, occupational and physical therapists, speech/language pathologists, adapted physical education specialists and art and dance/movement therapists. Music therapists may also furnish families with suggestions and resources for using music with the child at home.

Music therapists develop a rapport with children. They observe the child's behavior and interactions and assess communication, cognitive/academic, motor, social/emotional, and musical skills. After developing realistic goals and target objectives, music therapists plan and implement systematic music therapy treatment programs with procedures and techniques designed specifically for the individual child. Music therapists document responses, conduct ongoing evaluations of progress, and often make recommendations to other team members and the family regarding progress. Music therapists will also often make recommendations to team members and the family regarding ways to include successful music therapy techniques in other aspects of the child's life.

Who is a Qualified Music Therapist?

Graduates of colleges or universities from more than 70 approved music therapy programs are eligible to take a national examination administered by the Certification Board for Music Therapists (CBMT), an independent, non-profit certifying agency fully accredited by the National Commission for Certifying Agencies. After successful completion of the CBMT examination, graduates are issued the credential necessary for professional practice, Music Therapist-Board Certified (MT-BC). In addition to the MT-BC credential, other recognized professional designations are Registered Music Therapists (RMT), Certified Music Therapists (CMT), and Advanced Certified Music Therapist (ACMT) listed with the National Music Therapy Registry. Any individual who does not have proper training and credentials is not qualified to provide music therapy services.

What Can One Expect from a Music Therapist?

Since music therapy may be listed on the child's IEP (Individualized Education Program) as a "related service" or may be provided to children under the age of three as part of the IFSP (Individualized Family Service Plan), music therapists must be able to assess the needs of the young

child as well as those of the family. They design individualized programming, monitor progress, evaluate, and provide documentation related to the child's goals and objectives.

A music therapist who works with young children should possess a strong knowledge of relevant music and materials, early childhood development, specific needs of the child, and developmentally appropriate practices. A music therapist is accomplished in the use of instruments and voice. He/she is able to adapt strategies to a variety of settings and across disciplines, thus individualizing music therapy interventions to meet children's specific needs. In addition, he/she may provide structured or semi-structured opportunities for children with and without disabilities to interact together in a music setting. Music therapists are creative, energetic, and positive. They demonstrate strong oral and written communication skills and work well with families and other professionals.

Where do Music Therapists Work?

In addition to early intervention centers, preschools, and schools, music therapists offer services to individuals and groups in a variety of settings. These settings include, but are not limited to, mental health clinics, rehabilitation facilities, outpatient clinics, wellness programs, schools, nursing homes, senior centers, private practice, group homes, day care treatment centers, medical and psychiatric hospitals, substance abuse programs, hospice and bereavement programs, and correctional and forensic facilities. Some music therapists are self-employed and may be hired on a contractual basis to provide assessment, consultation, or treatment services for children and adults.

How Does Music Therapy Help Families?

Music therapy can provide enjoyable yet purposeful activities and resources for families to share with their children. Families can learn to use music through meaningful play and nurturing experiences. Music therapy may serve as a positive outlet for interaction, providing fun activities that can include parents, siblings, and extended family. Often music therapy allows a family to see a child in a new light as the child's strengths are manifested in the music therapy environment.

What Research and Resources are Available to Substantiate and Support Music Therapy?

Through *Journal of Music Therapy*, *Music Therapy Perspectives*, and other resources, AMTA promotes much research exploring the benefits of music therapy with young children. Furthermore, AMTA has an Early Childhood Network that disseminates additional information to interested parties.

Why Music Therapy?

Music therapy may address several needs simultaneously in a positive and exciting medium: it may provide pleasurable learning that promotes success. Furthermore, music therapy can greatly enhance the quality of life of the young child and his/her family. Music is often the first thing to which a child relates. It is a "universal language" that crosses all cultural lines. Music occurs naturally in our environment in many settings and is a socially appropriate activity and leisure skill. Music provides a predictable time-oriented and reality-oriented structure while offering opportunities for participation at one's own level of functioning and ability. Not only may music activities be opportunities for a child to "shine," but they may also be used to reinforce nonmusical goals. Most people, especially children, enjoy music – therefore, music therapy can be the therapy that reinforces all other therapies.

A Director of Educational Services for a public school system affirms:

"The inclusionary preschool music therapy sessions gave children an opportunity to make new friends and learn things about themselves and others. I saw major gains in the children's social skills

and in their attention spans. I wholeheartedly endorse the program and think that every child could benefit from music therapy.”

An occupational therapist writes:

“I love having a music therapist on our interdisciplinary team. When we co-lead sessions, I notice that the children are much more motivated to push themselves when working with such things as fine motor control and range of motion activities.”

The father of a 5 year old child diagnosed with Attention Deficit/Hyperactivity Disorder observes:

“Music therapy has helped my son to increase his concentration and attending. His eye contact has increased since participating in music therapy. Moreover, I believe that in part his increased use of language may be attributed to attending music therapy. Finally, he has developed an interest in music.” (Child has participated in individual music therapy for 1 1/2 years.)

The mother of a 6 1/2-year-old child diagnosed with Down Syndrome states:

“Music therapy has helped my son to learn turn-taking, sharing, listening skills and some colors, animals, parts of the body and clothes.” (Child participated in group music therapy for 2 years in preschool and then in individual music therapy for 1 year in kindergarten.)

The mother of 7 year old twin sons, one diagnosed with Tourette Syndrome and one diagnosed with Pervasive Developmental Disorder, comments:

“For one son music therapy seems to have reduced an extreme sensitivity to sound. For both boys, the therapy has been a catalyst for improved sociability. Much of the time the boys seem to exist on parallel universes, but on the drive home from therapy they usually have a conversation.” (The boys have participated in small group or partner music therapy sessions for two years.)

The mother of an 8-year-old child with Apert Syndrome and Attention Deficit Behaviors notes:

“Music therapy has (1) helped with my daughter’s spontaneous speech; (2) allowed her to use her hands with many different textures and independently of each other; (3) expanded on her natural musical ability; and (4) helped her learn to focus and develop patience with music as the motivator.” (Child participated in small group music therapy for 1 1/2 years in preschool and in individual music therapy for 4 years.)

The parent of a hospitalized child undergoing treatment for cancer relates:

“Music therapy has been a tremendous benefit not only for my child, but also for our family. During music therapy time, my child is able to do fun things that help him forget about his pain. We are grateful to share some time with him doing things that bring back a smile to his face.”

How Can You Find a Music Therapist or Get More Information?

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