

Music Therapy in the Treatment of Eating Disorders

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Note: None of the interventions provided in this series should be applied to your own healthcare/treatment without the direct consultation of a board certified music therapist (MT-BC). If you are interested in seeking music therapy treatment, you can find an MT-BC in your area by visiting www.musictherapy.org.

People often say that music is their therapy. For music to have such a positive impact on the lives of others is refreshing for me. It sometimes can be difficult for individuals to differentiate between music enhancing a mood they have and clinical music therapy. This is one of the reasons for me contributing and writing this 3-part series on music therapy in recovery of eating disorders. It is my goal that at the end of this series, you will have a better understanding of what music therapy is, how it is effective with this population while experiencing eating disorder symptoms, and how effective music can be to promote and engage in recovery. For part one, I will share a brief history of music therapy, where music therapists work, and what differentiates music therapy from music listening.

Part One

Music has been used as an agent of healing since the dawn of man. Anthropological studies have shown that before *homo sapien* spoke, s/he sang to communicate (Mithen, 2005). Instruments have been found in places of importance and monuments throughout cultures worldwide and throughout time. Drums have been used to communicate between villages. Shamans have used and continue to use music for its healing qualities. All this to say that we are musical beings and have always been. Music therapy is a clinical and systematic process harnessing the therapeutic power of music to achieve non-musical goals. The American Music Therapy Association (AMTA) defines music therapy as, "Music Therapy is the clinical and evidence-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."

The modern and established healthcare treatment service of music therapy came about after World War I and World War II. There were volunteer musicians, amateur and professional, visiting hospitals to entertain wounded soldiers during their hospital stays. Physicians and nurses noticed that veterans receiving music were leaving the hospital sooner. This realization led to the hiring of musicians by hospitals. Soon after this, it was clear there needed to be training before entering these positions, thus leading the way for formal training at a collegiate level. This is a very brief history of music therapy as we know it today. Let's shift our focus to where music therapists work and what treatment may include.

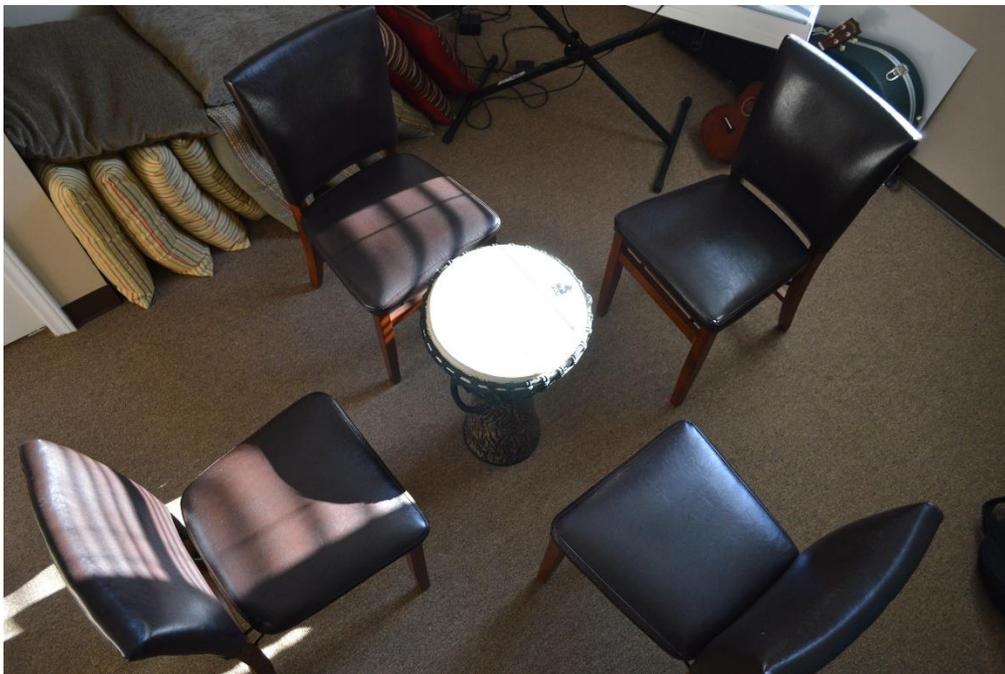
Where Do Music Therapists Work?

Music therapists work in a variety of locations and with people of all ages. Post-board-certification, MT-BCs are equipped to work with people the beginning of life through the end of life. Some music therapists specialize in working with prematurely born infants in the NICU while others, such as myself, work with adults in treatment centers with various needs. Before I worked specifically with individuals with eating disorders, I worked with children ages one to three and also with older adults at the end of

life and/or with memory care needs such as Alzheimer's disease. There are MT-BCs who work exclusively with certain populations and some who specialize. Some of the settings in which you frequently see MT-BCs working are:

- Hospitals
- Rehab Centers
- School Systems
- VA Hospitals
- Mental Health Treatment Centers
- Hospice Organizations
- Private Practice

What Separates Music Therapy from Music Listening



For a music experience to be music therapy, it is to be implemented with, by, or under the advisement of a board certified music therapist. I get asked frequently, "Does one type of music work better than the rest? I bet classical music is useful in helping patients calm down." There is not one type of music that is more therapeutic or useful than all the rest. What it comes down to is musical preference. Musical preferences tend to vary from individual to individual, so you can imagine that a huge part of my job is learning new music. By learning the music, I mean learning how to play and sing the song for piano or guitar, usually. (Sometimes banjo or ukulele in my work.)

A huge component of music therapy is that board certified music therapists are not only highly qualified clinicians but highly skilled musicians as well. Music therapists complete an AMTA accredited bachelor's degree program which I like to break down into three parts:

- Music Specific
 - Music theory, aural skills, music history, applied music lessons, etc.

- Clinical Skills and Therapeutic Knowledge Specific
 - Counseling courses, psychology courses, pre-med level anatomy and physiology, etc.
- Music Therapy Specific
 - A culmination of the above listed as well as training in and applying skills in using music therapy as treatment with specific client/patient populations
 - Once course work is completed, music therapist students are then eligible to pursue and complete a 6-month (or 1040 hours) internship. After successfully completing the internship, the individual is then eligible to pursue board certification in music therapy.

Music listening that makes you feel good can be therapeutic in the fact that it elevates or validates your current mood state. It is not music therapy as much as it is a coping skill you are utilizing to achieve your own personal goals (Boblin, 2008). Music therapy is goal-driven, following a formal assessment by an MT-BC.



Music therapy interventions used with the mental health population include but are not limited to songwriting, lyric analysis, active music making, clinical improvisation, music-assisted relaxation, music and visual arts experiences, group singing, role playing using music as means of communication, etc. Explaining and digging deeper into how these interventions relate specifically to eating disorders will be the topic of Part 2 of this three parts series on music therapy and recovery from eating disorders.

Boiler Plate

Dean Quick, MT-BC is the Program Director and Board Certified Music Therapist for TranscendED where we understand the value of recovery, and believe that all individuals should have equal access to treatment. At TranscendED it is our goal to provide quality treatment, vigorous advocacy, multi-disciplinary education, and abundant support to those directly and indirectly affected by eating disorders. TranscendED is one of very few eating disorder treatment centers to accept Medicaid.

References

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