

Journal of Creativity in Mental Health



Music

ISSN: 1540-1383 (Print) 1540-1391 (Online) Journal homepage: http://www.tandfonline.com/loi/wcmh20

Music and the Expressive Arts With Children Experiencing Trauma

Keith M. Davis

To cite this article: Keith M. Davis (2010) Music and the Expressive Arts With Children Experiencing Trauma, Journal of Creativity in Mental Health, 5:2, 125-133

To link to this article: https://doi.org/10.1080/15401383.2010.485078



Copyright © Taylor & Francis Group, LLC ISSN: 1540-1383 print/1540-1391 online DOI: 10.1080/15401383.2010.485078



Music and the Expressive Arts With Children Experiencing Trauma

KEITH M. DAVIS

Appalachian State University, Boone, North Carolina, USA

The creative and expressive use of music can be a powerful therapeutic intervention with children and adolescents who have experienced trauma. In this article, a model for increasing self-awareness and self-understanding including materials, facilitation, and processing of musical activities in group format is presented. Creative activities such as the "feelings ensemble" and "feelings symphony" are illustrated in a case application with children transitioning back to school following a tornado. Implications for the role of expressive arts activities in the aftermath of a natural disaster are discussed.

KEYWORDS creative arts, expressive arts, music, counseling, children, trauma, natural disaster, creativity

The use of expressive arts techniques continues to increase in the counseling profession. For example, in 2004, a new division within the American Counseling Association (ACA) was formed. This new division, *The Association for Creativity in Counseling*, and its publication, the *Journal of Creativity in Mental Health*, support and publish creative and expressive approaches in counseling. In addition, the *Journal of Humanistic Education, Counseling, and Development* dedicated an entire volume in 1997 to creative arts in counseling. Recently, two landmark books on creative arts in counseling were published: *Counseling as an Art: The Creative Arts in Counseling* (Gladding, 2005) and the *Sourcebook in Expressive Arts Therapy* (Atkins & Williams, 2007). Finally, recent professional counseling conferences have seen an increase in presentations demonstrating the effectiveness of creativity

Address correspondence to Keith M. Davis, Department of Human Development & Psychological Counseling, Appalachian State University, 730 Rivers Street, Dept. HPC, Boone, NC 28608, USA. E-mail: daviskm@appstate.edu

in counseling. For example, the conference programs for the ACA national conference in 2008 (Honolulu, HI) and 2009 (Charlotte, NC) demonstrated 31 and 24 content session titles, respectively, with the words "creative," "expressive arts," and "creative arts." The 2009 Association for Counselor Education and Supervision (San Diego, CA) contained 7 such content sessions, and most recently, the 2010 North Carolina Counseling Association (Concord, NC) offered 6 creativity-related content sessions.

EXPRESSIVE ARTS THERAPY

Definitions of expressive arts therapy vary. Natalie Rogers (1993), daughter of Carl Rogers and a pioneer in creative and expressive arts, defined expressive arts therapy as the use of "various arts—movement, drawing, painting, sculpting, music, writing, sound, and improvisation—in a supportive setting to facilitate growth and healing. It is a process of discovering ourselves through any art form that comes from an emotional depth" (p. 2). Natalie Rogers (1993) stressed that expressive arts therapy is *not* about creating pretty pictures or stage-ready dance performances. Rather, it is the act of exploring our inner realm and expressing feelings through various media (Rogers, 1993). Atkins and Williams (2007) added to this definition.

Expressive arts therapy involves the use of artistic experience in the service of health, healing, and human growth and development. In expressive arts therapy a combination of imagery, symbol, storytelling, ritual, music, dance, drama, poetry, movement, dream work, or visual arts are used together to give shape and form to human experience, to hold and express emotional and reflective experience, and to expand and deepen personal understanding and meaning. (p. 1)

Based on these definitions, expressive arts therapy places an emphasis on supporting the internal and therapeutic processes of the creation and expression of art making, as opposed to an analysis of art product. One particularly helpful aspect of expressive arts therapy, especially in working with children, may be the use of music.

MUSIC AS A THERAPEUTIC INTERVENTION FOR SCHOOL-AGED CHILDREN AND ADOLESCENTS

Music has long been a powerful way for people to connect, celebrate, entertain, remember, and mourn. This may be especially true for school-aged children and adolescents who often define themselves through pop culture, in which music plays a major part. Bowman's (1987) description of the

overall importance of music is most poignant: "Music is more than just a medium of entertainment. It is a powerful tool that can capture attention, elicit long forgotten memories, communicate feelings, create and intensify moods, and bring people together" (p. 284).

Music Interventions in Special Education

The use of music as a developmental and therapeutic intervention with school-aged children is well documented in a variety of educational literature. In the field of special education services, the use of music as part of an integrated intervention helped facilitate speech-language development for children with communication delay (Geist, McCarthy, & Rogers-Smith, 2008). Improvisational music therapy (the specific use of music by a credentialed music therapist; Certification Board of Music Therapists, 2009) was found to be an effective intervention for facilitating joint attention behaviors and nonverbal social communication skills for preschool children diagnosed with autism (Kim, Wigram, & Gold, 2008). Similarly, music therapy was used as an intervention in reducing self-injurious behaviors and aggressive and destructive behaviors in children diagnosed with autism spectrum disorders and developmental disabilities (Lundqvist, Andersson, & Viding, 2009). Music was demonstrated as a therapeutic intervention with blind children to help develop sensorimotor skills, social and communication skills, cognitive skills, and emotional skills (Kern & Wolery, 2002) and similarly as an intervention for children with hearing impairments (Jahns, 2001). Finally, music therapy was part of an integrated approach in working with children diagnosed as emotionally/behaviorally disturbed to cope with strong emotions and reduce emotional outbursts (King & Schwabenlender, 1994).

Music Interventions in Counseling

More directly related to counseling interventions, the use of music in therapy and in processing feelings with school-aged children has been well documented. Related to children experiencing trauma, Malchiodi (2008) edited an entire book on counseling interventions in which the therapeutic use of music was incorporated; specifically, Hilliard (2008) described how music was used in grief work with children and adolescents experiencing trauma.

In working with children and adolescents experiencing depression, Hendricks and Bradley (2005) detailed how a combination of music and interpersonal psychotherapy were integrated within a family counseling model. A study by Hendricks, Robinson, Bradley, and Davis (1999) found a decrease in depressive symptoms during a 10-week school-based therapy program for school-aged children. Equally, Burak-Maholik (1993) discussed psychoeducational strategies for teachers to employ when faced with depressed children, music being one strategy.

DeLucia-Waack (2001) developed a manual for school counselors working with children in groups who have experienced divorce; music was integrated as a way to increase the skills learned within the group. Gallant, Siegel, and Holosko (1997) used music interventions in the treatment of adolescent addiction. DeCarlo (2000) discovered that weekly group sessions using rap music promoted the development of appropriate social skills related to morality, identity, judgment, decision-making, anger management, impulse control, and crime and punishment with urban African American adolescents. Camilleri (2000) found that music therapy addressed the social and emotional development of participation, interaction, relationships, communication, expression, space sharing, problem solving, self-esteem, respect, and awareness in a New York community school.

Kottman, Strother, and Deniger (1987) used music as one tool for preteens and adolescents in developing conflict resolution skills. Hodas (1991) incorporated music and lyrics in therapeutic relationships with adolescents as a way to explore gender and sexuality issues. Stephens, Braithwaite, and Taylor (1998) made use of hip-hop as part of an HIV/AIDS preventive counseling protocol in helping young African American adults. This last study found that disease-prevention personnel could use an increased understanding of the relationship that many African American young adults have with hip-hop to educate these populations about protective factors for HIV. Finally, Harris and Wilbur (1998) reported how the use of drums and drumming with adolescents helps in creating a sense of community, reconnecting with history and heritage, promoting healing, educating, and celebrating rites of passage in adolescence.

Given the documented effectiveness of music as a therapeutic tool for working with school-aged children with a variety of issues, the purpose of this article is to describe how music was used in the processing of feelings of elementary school-aged children who experienced a tornado and the accompanying trauma that resulted. A case illustration to give context for the implementation of music and the expressive arts is explained, followed by the method, and concluding with implications for counselors working with school-aged children.

CASE ILLUSTRATION: USE OF MUSIC IN COUNSELING FOLLOWING A NATURAL DISASTER

Natural disasters are, unfortunately, a frequent occurrence in the Southeast part of the United States. Given the proximity of the warm Gulf of Mexico and Atlantic Ocean waters, hurricanes, tropical storms, and strong thunder storms often result in strong winds, rain, and flooding that cause property damage, loss of life, and displacement of people. Equally, the Southeast is often the battleground for warmer humid air clashing with

strong cooler Canadian air, often resulting in tornados that cause extensive damage and loss of life. This was the case when a tornado swept through a small rural community in the Southeastern United States, causing extensive destruction to property and resulting in the death of two members of the community.

In the wake of the tornado and its destruction to the rural community and its people, the elementary school was closed for a week. When plans were made for the reopening of the school, a crisis counseling team was organized and put in place to provide counseling services to the students and teachers. As part of the counseling crisis team, I implemented a counseling strategy that would allow the children to process their experience with the tornado. Because young children are frequently at a loss for words and do not always have the vocabulary to articulate experiences and feelings, I chose to use an expressive arts activity that focused on processing feelings through a music activity.

Group participants were school children in Grades 3 through 5 (ages 8- through 11-years-old) in three different classrooms. Each class contained approximately 20 children, males and females, and was composed mostly of students from Caucasian and Latino backgrounds living in rural parts of the Southeastern United States. Also included were several parents of the children.

On the first day that school reopened, I brought a variety of instruments (e.g., drums, bells, tambourines, shakers, etc.) and visited three separate classrooms. All instruments were placed in the center of the classroom for students to explore.

Before engaging with the instruments, I facilitated with the children a short discussion on their feelings about the tornado. Not surprisingly, the children stated feelings of being scared, frightened, mad, confused, and sad. After noting the feelings, I facilitated a short discussion on music, asking students to raise their hands if they liked music. All students raised their hands, some telling stories about certain types they liked, singing in church, and family members and friends who played instruments.

The children were then introduced to the collection of instruments and noisemakers in the center of the classroom and encouraged to experiment with as many of them as possible until they felt comfortable with a particular one. After all students and some parents had an instrument or noisemaker, they were randomly assigned to smaller-sized groups of five or six. Each group was then given a card with a feeling word written on it (e.g., scared, mad, sad, confused). This was done in a way that the feeling was only known to the members of that particular group. Each group was then given approximately 20 minutes to develop a musical composition, with the guidance of an adult parent in the group, which best represented that feeling. There was no emphasis placed on the musical quality of the composition but rather encouragement to develop and make meaning from their experience with the tornado.

Feelings Ensemble and Symphony

The use of music with children in a group format was an adaptation (Davis, 2007) of a group counseling process model and activity originally developed by Bowman (1987) in his work with children. Both Davis (2007) and Bowman (1987) described two musical activities that were particularly helpful in facilitating self-awareness and self-understanding of children's feelings: a) the feelings ensemble and b) the feelings symphony. These two activities involved students composing and performing their own compositions regarding personal feelings.

After 20 minutes, the groups were reassembled and each group (i.e., ensemble) took turns playing their "feeling" composition, while the other groups listened and tried to name the feeling being played. After all groups played their compositions, I facilitated an overall group discussion among the children regarding the chosen feelings. The children related each of the feelings discussed back to specific memories of their experiences during the tornado.

Once the groups had concluded their compositions and subsequent discussion, I announced that all groups/ensembles were to perform together a "feelings symphony." With each group facing the center of the classroom, they now constituted a full feelings symphony. Acting as the "maestro," I cued a particular feelings group to begin playing softly by pointing to that group. A raised hand signified to a particular group to increase their volume of playing, while a lowering of the other hand signified a decrease of volume and a horizontal hand indicated silence for the moment of any given group. The maestro used both hands to explore different combinations of groups playing with varying intensities, working toward the building of all groups playing to a crescendo and then calming all groups for a soft ending. In this activity, the maestro decides what combinations and intensities to use with the groups. Some of the children took turns being the maestro, which allowed them to experience a sense of control over the sometimes-chaotic feelings the music represented.

Processing

After completion of the feelings ensemble and symphony, I facilitated group discussion and processing among the children regarding their identified feelings (scared, mad, sad, and confused). I then added the word hope. The discussion and processing was in two parts: feelings regarding their traumatic experience with the tornado and feelings of hope to continue being children with exciting things to learn in school and fun things to do in their future.

Following are a few sample processing questions: "How did your musical composition relate to your feelings about the tornado?" "How do your feelings affect other people around you?" "Can you tell me another time when you also felt scared, mad, sad, and confused?" "What did you all notice about feelings as

everyone was playing?" "What do all these feelings say about how we experience sad and scary things?" "What does it mean to have hope?" For other ideas about processing questions related to this activity, please see Davis (2007).

DISCUSSION

The purpose of this particular activity and processing was to help children, and some of their parents, transition back into school after experiencing a tornado in their community. For many of the children, this was their first experience with a natural disaster and the death of someone close to home. To begin the return to a "sense" of normality and healing was not possible without first affirming the children's feelings of anger, sadness, and fear. Often, these feelings are not expressed, yet the reality is that these feelings are part of life experience. To acknowledge and affirm in a supportive manner all types of feelings helps children learn how to process feelings in a healthy and healing way. Trauma is an unfortunate reality and can be overcome through supportive and healthy counseling interventions.

Through this activity, the counselor and children talked about how feelings can ebb and flow like the crescendos of the differing group ensembles and how to work with such feelings. Involving the parents of the children in the activity helped them in processing their own feelings and helped them feel better about returning their children to school.

Furthermore, exploring and affirming such feelings and experiences through the creative use of music supports a humanistic approach of valuing one's creative power as a crucial force in change and healing, as well as taking the subjectivity and viewpoints of others fully into account (Raskin & Rogers, 1989). Creative and expressive arts activities are well suited for children who often do not have the words or vocabulary to explain or express complex feelings and experiences. The use of music as a medium to express feelings was a simple and concrete way for them to communicate such complex inner experiences.

In a time of limited resources and reduced school budgets, many counselors working in schools may not have the types of instruments readily available that were used in this particular therapeutic activity. However, expressive sounds can be made with a variety of objects (e.g., pencils, blocks, pots and pans, cans, clapping hands, tapping on books, etc.), and children can bring in appropriate examples of the music they listen to. This can also be an opportunity for school counselors to collaborate with music teachers in facilitating this exercise, using a variety of available rhythm instruments.

While this particular experience took place in the wake of a natural disaster, it can easily be adapted to a variety of developmental life issues faced by school-aged children. Music continues to be a powerful way to connect with many people, and for school-aged children, this may be especially true.

REFERENCES

- Atkins, S. S., & Williams, L. D. (Eds.). (2007). *Sourcebook in expressive arts therapy*. Boone, NC: Parkway.
- Bowman, R. P. (1987). Approaches for counseling children through music. *Elementary School Guidance & Counseling*, *21*, 284–291.
- Burak-Maholik, S. (1993). Psychoeducational strategies for depressed students. *Journal of Emotional and Behavioral Problems*, 2, 45–47. Retrieved from http://www.eric.ed.gov
- Camilleri, V. (2000). Music therapy groups: A path to social-emotional growth and academic success. *educational HORIZONS*, 78, 184–189. Retrieved from http://www.pilambda.org/horizons/publications%20index.htm
- Certification Board of Music Therapists. (2009). *CBMT information*. Retrieved from http://cbmt.org/default.asp?page=CBMTInformation
- Davis, K. M. (2007). Feelings ensemble and symphony. In S. S. Atkins & L. D. Williams (Eds.), *Sourcebook in expressive arts therapy* (pp. 123–125). Boone, NC: Parkway.
- DeCarlo, A. (2000). Rap therapy? An innovative approach to group work with urban adolescents. *Journal of Intergroup Relations*, *27*, 40–48. Retrieved from http://www.nahrw.org
- DeLucia-Waack, J. L. (2001). *Using music in children of divorce groups: A session-by-ses-sion manual for counselors*. Alexandria, VA: American Counseling Association.
- Gallant, W., Siegel, S., & Holosko, M. (1997). The use of music in counseling addictive clients. *Journal of Alcohol and Drug Education*, 42, 42–52.
- Geist, K., McCarthy, J., & Rogers-Smith, A. (2008). Integrating music therapy services and speech-language services for children with severe communication impairments: A co-treatment model. *Journal of Instructional Psychology, 35*, 311–316. Retrieved from http://www.projectinnovation.biz/jip_2006.html
- Gladding, S. T. (2005). *Counseling as an art: The creative arts in counseling* (3rd ed.). Alexandria, VA: American Counseling Association.
- Harris, T., & Wilbur, J. (1998, Fall). Percussion discussion: Using drums to reconnect youth. *Reaching Today's Youth*, 42–44.
- Hendricks, C. B., & Bradley, L. J. (2005). Interpersonal theory and music techniques: A case study for a family with a depressed adolescent. *The Family Journal: Counseling and Therapy for Couples and Families*, *13*, 400–405. doi: 10.1177/1066480705278469
- Hendricks, C. B., Robinson, B., Bradley, L. J., & Davis, K. (1999). Using music techniques to treat adolescent depression. *Journal of Humanistic Counseling, Education, and Development, 38*, 39–46.
- Hilliard, R. E. (2008). Music and grief work with children and adolescents. In C. Malchiodi (Ed.), *Creative interventions with traumatized children* (pp. 62–80). New York, NY: Guilford.
- Hodas, G. R. (1991). Using original music to explore gender identity and sexuality with adolescents. *Journal of Poetry Therapy*, *4*, 205–220. Retrieved from http://www.tandf.co.uk/journals/titles/08893675.asp
- Jahns, E. (2001). Introducing music to the hearing-impaired. *Teaching Music*, *8*, 36–40. Retrieved from http://www.menc.org

- Kern, P., & Wolery, M. (2002). The sound path: Adding music to a child care play-ground. *Young Exceptional Children*, *5*, 12–20. Retrieved from http://www.dec-sped.org/Store/YEC_Monograph_Series
- Kim, J., Wigram, T., & Gold, C. (2008). The effects of improvisational music therapy on joint attention behaviors in autistic children: A randomized controlled study. *Journal of Autism and Developmental Disorders*, 38, 1758–1766. doi:10.1007/ s10803-008-0566-6
- King, R. P., & Schwabenlender, S. A. (1994). Supportive therapies for EBD and at-risk students: Rich, varied, and underused. *Preventing School Failure*, *38*, 13–18. Retrieved from http://www.heldref.org/pubs/psf/about.html
- Kottman, T., Strother, J., & Deniger, M. (1987). Activity therapy: An alternative therapy for adolescents. *Journal of Humanistic Education and Development, 25*, 180–186.
- Lundqvist, L. O., Andersson, G., & Viding, J. (2009). Effects of vibroacoustic music on challenging behaviors in individuals with autism and developmental disabilities. *Research in Autism Spectrum Disorders*, *3*, 390–400. doi:10.1016/j.rasd.2008.08.005
- Malchiodi, C. A. (Ed.). (2008). *Creative interventions with traumatized children*. New York, NY: Guilford.
- Raskin, N. J., & Rogers, C. R. (1989). Person-centered therapy. In R. J. Corsini & D. Wedding (Eds.), *Current psychotherapies* (4th ed., pp. 154–194). Itasca, IL: F. E. Peacock.
- Rogers, N. (1993). *The creative connection: Expressive arts as healing*. Palo Alto, CA: Science and Behavior Books.
- Stephens, T., Braithwaite, R. L., & Taylor, S. E. (1998). Model for using hip-hop music for small group HIV/AIDS prevention counseling with African American adolescents and young adults. *Patient Education and Counseling, 35*, 127–137. Retrieved from http://www.elsevier.com/wps/find/journaldescription.cws_home/505955/description#description
- **Keith M. Davis** is Associate Professor and Program Coordinator for the Clinical Mental Health Counseling Program in the Department of Human Development & Psychological Counseling at Appalachian State University, Boone, North Carolina.