



ART BRIDGES: Lesson Plans for Enrichment, Growth and Healing

Music Enrichment for Adults Recovering from Addiction

**Activities submitted by Board-Certified Music Therapist
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Disclaimer

The arts are a powerful modality to influence positive change in a number of clinical, medical, and educational settings. However, there is a significant difference between expressive therapies (i.e. music therapy, art therapy, and creative arts therapy) and arts enrichment programs. For example, therapy addresses individualized goals based on assessed treatment needs, and enrichment helps expose a group to a positive arts experience and may lead to positive functional lessons among the group as a whole. Therapy may require more arts-based skill and versatility from the group or session leader (i.e. live music, improvisation, hands-on or complex art making), whereas enrichment can often be accomplished with recorded music and by non-therapist staff members/volunteers who are skilled with that particular population. The purpose of the “Art Bridge”s activities is to offer ideas to support arts enrichment programming, but none of these activities can be called “therapy” unless performed by a Board Certified Music Therapist, a Licensed Art Therapist, or a Licensed Creative Arts Therapist.

Considerations for Non-Music Therapists

Music enrichment groups with this population add a refreshing and healthy dynamic to an addiction treatment program if conducted by facilitators who are passionate and knowledgeable about the addiction recovery process. Music can be especially helpful in helping build a rapport among group members, elevating client moods, and practicing healthy coping skills. It is important that facilitators understand that addiction has both physiological and psychological components, so it is truly a complex and difficult task for clients to break out of the addiction cycle. It is important to emphasize that it is possible to break free from addictive behaviors without oversimplifying the process or acting judgmentally toward clients for past behaviors. As always, music enrichment is most safely and effectively conducted under the consultation or direct supervision of a Board Certified Music Therapist.

Coping Skill Brainstorming

Materials:

1. CD player or iPod with preferred, age appropriate music selections (or live music in background of this activity is even better)
2. Worksheets with questions designed to help clients brainstorm healthy coping skills (ways to calm down, supportive people, ways to express self, gratitude list)
3. Writing utensils
4. Tables, desks, or other hard writing surfaces

Procedure:

1. Distribute worksheets, and explain that this activity is all about figuring out healthy coping skills to replace the role of addiction in their lives.
2. Begin the brainstorming process by asking clients to help define coping and give an example of an activity, person, or technique in their life that helps them have a better day and distracts them from the urge to use.
3. Once all clients understand the activity and seem to have a few ideas, start music. Try to select music that is preferred but not so complex or energetic that it's distracting. The music is even better if the lyrics contain a few ideas about ways to calm down and feel better (i.e. "Breathe" by Ryan Star, "Happy" by Pharrell, "Lean on Me" by Bill Withers).

4. Allow 10-15 minutes of background music time for brainstorming, and give individual guidance and attention to clients who seem to need help with new ideas.
5. Go around room so that each client can share a few healthy coping skills on their lists.
6. Encourage clients to practice at least 3 coping skills in the week to come.

Desired outcomes: brainstorming healthy alternatives to substance abuse as a means of coping, building a strategy for safe emotion regulation and expression, establishing hope that it's possible to replace negative coping behaviors with positive coping skills, practicing healthy coping through writing, discussion, and preferred music listening

Song Request and Chat

Materials:

1. List of songs from a variety of genres that may be preferred for group (pop, classic rock, hip hop, etc.)
2. Accompanying instrument like keyboard or guitar
3. Chord charts for each song on the list unless songs are memorized by leader

Procedure:

1. Explain that the activity is a song request game where the clients may choose songs that they like and then talk about why they chose them.
2. Play soft background music or sit in silence as clients look over the list. Once someone speaks up, acknowledge that they made a great choice, and begin playing.
3. Encourage singing or clapping along during music if clients are comfortable with active participation, but make it clear that it's okay to simply sit and listen too.
4. As the song ends, ask the requester why he or she chose that song. If they are vague or unsure point out that sometimes songs become our favorites because of their meaningful words, their energetic rhythms, a personal memory that is linked to them, or the happy/relaxed feeling we get when we hear them.

Desired outcomes: increased rapport among group members, mood elevation with preferred music, opportunity for emotional expression in a non-threatening environment, processing memories that link to addiction patterns or triggers

Call and Response Beats

Materials:

1. Hand drums or paddle drums



2. Soft foam mallets for paddle drums

Procedure:

1. Distribute drums, and encourage clients to keep drums quiet until everyone has received a drum.
2. Demonstrate a simple one or two bar rhythm and gesture to the group to repeat the rhythm after you with appropriate instrument volume.
3. Gradually increase the complexity of rhythms so that clients remain engaged and focused; avoid introducing a rhythm much longer than two to four measures. Be success-oriented in your approach. Don't try to "stump" the group with an overly complicated rhythm.
4. Allow each client an opportunity to lead three to five rhythms (depending on size of group and preferred length of activity) and encourage other group members to repeat after them.
5. Discuss the interpersonal and communication skills needed to make the game work (focus, listening, assertiveness, respect, memory, etc.). Discuss other settings (work, home, school) where those skills may be needed. Discuss ways that drugs may affect these skills and other functional skills to remind clients of the steep cost of continued addiction behaviors.

Desired outcomes: processing skill set differences between sober and "using" selves, practicing healthy interpersonal skills, practicing effective leadership skills,

short-term memory stimulation, respecting and responding appropriately to peer leaders, developing courage to try new things

Relaxation Music

Materials:

1. Accompanying instrument like keyboard or guitar
2. Chord charts for slow, sedative songs that fall into preferred music genres (i.e. “Bridge Over Troubled Water” for classic rock lovers)

Procedure:

1. Be aware of client music preferences prior to group to determine selections or style of improvisation.
2. As instrumental begins with simple bass pattern, soothing timbre, and medium-slow tempo, encourage group members to take a few deep breaths with you and lead a few simple stretches that can be performed from a seated position.
3. Sing preferred music with voice no louder than your speaking voice. Encourage continued deep breathing.
4. Encourage clients to use their imaginations to take a “mind vacation” during the music to a new or familiar place that helps them feel safe and calm.
5. Allow time at the end of the activity to ask clients if they were able to relax, what helped them relax most, and what was most difficult. Discuss safe places they imagined. If clients mention drug-related places as “safe places”, brainstorm with the group to help the client think of alternative potential safe places. These strategies can help the clients figure out how to best cope and relax outside of the group setting to avoid falling back into addictive behaviors.

Desired outcomes: relaxation, establishing group rapport, slower heart rate, relief from emotional anxiety, assistance in brainstorming healthy coping skills to replace addictive behaviors

Instrument Pass

Materials:

1. Wide variety of small, easy-to-manage hand percussion instruments
2. Accompanying instrument like guitar, keyboard, ukulele, or large drum



Procedure:

1. Prior to this activity, clients should be seated on chairs or on the floor in a semi-circle facing the leader.
2. Briefly remove each instrument from the bag, reveal the name of the instrument, demonstrate how to play it, and set it on the floor near the edge of the client semi-circle.
3. Explain that the client closest to the instruments will start the instrument pass game by choosing an instrument and playing along with the leader. When the leader counts down verbally or with fingers, that means it's time to pass the instrument to your neighbor and choose a new instrument.
4. Start singing with rhythmic, steady accompaniment instrument. Lyrics of chosen songs should reinforce themes of working together (i.e. "Lean on Me"). Count down (4-3-2-1) verbally or with fingers about every 8 bars, and remind clients to pass instruments if they don't respond to cue.

5. When everyone has an instrument, you may use this as an opportunity to conduct the entire group to play louder, softer, faster, slower, etc. or do call/response drumming.
6. At the end of the activity, fade instruments out the same way you fade them in, by passing instruments toward the opposite end of the semi-circle and having the person at the end place their old instrument in the bag each time a new instrument is passed to them. Sometimes this happens quicker than the fade-in by passing every 4 bars.
7. Discuss interpersonal and communication skills we had to use to make that game work (i.e. respect, focus, eye contact). Discuss other settings (work, home, school) where those skills may be needed. Discuss ways that drugs may affect these skills and other functional skills to remind clients of the steep cost of continued addiction behaviors.

Desired outcomes: processing skill set differences between sober and “using” selves, practicing healthy interpersonal skills, reflecting on purpose of sober interpersonal interactions to develop healthy relationships and enrich life, developing courage to try new things

Ocean Drum

Materials:

1. Ocean drum



2. CD player or iPod with ability to play instrumental, sedative music (consult with music therapist for good relaxation CD options, avoid CDs that include verbal relaxation prompts since you will be there to prompt as the facilitator)

Procedure:

1. Turn on recorded music at a low volume (loud enough that every group member can hear clearly, soft enough that you can use a soft speaking voice and still be heard).
2. Introduce the ocean drum as a fun and unique instrument that all group members get to try out. Remind group members that respectful turn taking is a must for this activity to work.
3. Shift ocean drum gently in a subtle circular motion to make wave sound. Ask clients to close eyes, take deep breaths, and pretend they're at the beach.
4. Walk around the circle and allow each client about 30 seconds to hold the opposite side of the ocean drum, watch the beads, and feel the drum vibrations. Let go of your side of the drum, and allow the client an additional 30 seconds to produce the soft wave sound independently.
5. At the end of the relaxation experience, have clients discuss how effective the experience was and what was most effective. Point out that this activity hopefully provided a temporary escape from treatment issues, so that group can hopefully return to the present moment with a more refreshed mind.

Desired outcomes: multisensory stimulation to ground clients in present moment and distract from racing or unhealthy thoughts, healthy imagery to provide a temporary escape from the hard realities and work surrounding the addiction recovery process, physical relaxation through slower heart rate, deeper breathing, and softer muscles, empowerment to control relaxing sounds

*Heartfelt thanks to Board-Certified Music Therapist **Rachel Rotert**. She specializes in using music-based strategies and interventions to assist her clients in reaching a wide variety of emotional, relational, behavioral, and physiological goals. These music interventions may include song writing, music-assisted relaxation, lyric analysis, and drum circles. Rachel has worked in a wide variety of mental health treatment settings including a residential center for adolescents, an inpatient behavioral health hospital, and an outpatient recovery program for veterans. Rachel continues her mission to impact lives through music in her work at KVC (Kansas City, MO). KVC is a health system committed to enriching and enhancing*

the lives of children and families by providing medical and behavioral healthcare, social services and education. Hildegard Center had the honor of seeing Rachel at work “up close and personal” when she conducted “Music Magic” Workshops for children “at risk” as part of a grant Hildegard Center for the Arts received through the Lincoln Arts Council. You can contact Rachel at <https://www.linkedin.com/in/pianopeacemt>.

If you have used this activity, we’d love to hear from you! Please send questions or comments through our website www.hildegardcenter.org .

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