



ART BRIDGES: Lesson Plans for Enrichment, Growth and Healing

Music Enrichment for Children with Cognitive Disorders

**An Article submitted by Board-Certified Music Therapist
Rachel Rotert**

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 Bridges” 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 can be effective for mood elevation, reinforcement of positive behaviors, and reinforcement of academic skills, but I would highly recommend consulting with a music therapist prior to implementing any program with this setting. A professional would be able to ensure that the program's activities are helpful, safe, achievable, and enjoyable for all participants.

Follow the Leader

Materials:

1. Recorded music player (iPod, CD player, etc.) with playlist of age appropriate, high energy songs that children will most likely know and prefer (i.e. Disney movie songs or current pop songs with appropriate lyrics)
2. Egg shakers (bought through vendor like Musicians Friend or homemade with Easter eggs, un-popped popcorn, and electrical tape)

Procedure:

Note: consider the physical and cognitive processing abilities of individuals in your group when leading this exercise. Do not encourage children to test their physical limitations without a music therapist or physical therapist present. Give children with cognitive delays simple directives with few words, and give them time to process and implement your instructions while incorporating the visual cue of the desired movement or hand-over-hand assistance if necessary.

1. Have each child choose two shakers out of bag.
2. Start song and give simple directive "Do what I do."
3. Lead a variety of dance/aerobic movements from a sitting position using legs and arms (i.e. punching up/out/down, clapping shakers together, patting knees, stomping feet).
4. Direct a participatory, outgoing child to lead the group dance moves for 30 seconds to a minute, and instruct the rest of the group to follow their peer.
5. Give each child an opportunity to lead, but be understanding if a client is withdrawn and is not yet ready to lead in this way.

Desired outcomes: increased attention span, cooperative behavior, other awareness, confidence in leadership

Action Songs

Materials:

1. CD player
2. CD with age-appropriate songs that incorporate simple movements (clapping, tapping feet, swaying, etc.) See www.listenlearnmusic.com for some great options for younger children. Use age-appropriate pop songs like “Cupid Shuffle” or “Cha Cha Slide” with adolescents.

Procedure:

1. Warm-up prior to the music by demonstrating the actions and dance moves that will happen when we hear certain words. Give clients time to process instructions.
2. Turn on music and remind group to “do what I do” as you clearly demonstrate each dance move. Simplify movements and minimize movement changes with songs like “Cha Cha Slide” to create a success-oriented activity.
3. Add slightly more complexity to movements if group is catching on easily to keep client attention engaged throughout song. Encourage “freestyle” dance for a portion of the song if clients appear to be frustrated in trying to follow along.

Desired outcomes: mood elevation, physical wellness through exercise, confidence, positive social interaction, increase attention span

Fill-in-the Song

Materials:

1. Accompanying instrument like keyboard or guitar
2. Chord sheets for a variety of age-appropriate, popular songs that the clients in your group will likely prefer.
3. Large-print lyric sheets for higher functioning groups.

Procedure:

1. Prior to this activity, assess client music preferences by asking clients directly or briefly interviewing parents or staff beforehand.

2. Explain to group that they can help the leader with the next song by singing the word that comes next whenever the leader stops.
3. Start a preferred song, and pause before the last word of a well-known phrase (i.e. sing “Let it go, let it ____”). When a client sings or says the missing word, reward the behavior by continuing the song.
4. Allow phrase finishing opportunities about every 4 bars with higher functioning groups, but do this less frequently with clients who have greater difficulty verbalizing or who may become easily frustrated with the music being interrupted.

Desired outcomes: focused listening, more confident verbalizations, more effective timing with verbalizations

Guitar Duets

Materials:

1. Guitar and picks



2. Chord sheets for group-preferred songs (unless memorized by leader)

Procedure:

1. Explain to group earlier in session that they get to take turns playing guitar only if they demonstrate a level of respectful cooperation that you determine beforehand. It may be appropriate to mention this reward while explaining group rules as added motivation or to re-mention it if a client is demonstrating behaviors that could cause them to lose the reward.
2. During final five to ten minutes of group session (depending on size of group), announce that it's guitar time, and begin playing a song that most or all of the group members prefer.
3. Kneel in front of or on the left side of the first client, and show him or her how to hold the pick and strum. Use your left hand to control the chords of

the song you're playing, and use your right hand to assist the client with the first few strums if necessary.

4. Allow each client who has earned the guitar reward to play for approximately 8 bars while encouraging other clients to sing along and applaud their peers whenever it's time to switch.

Desired outcomes: motivation for positive behavior, increased self-esteem due to success-oriented instrument play, respectful turn taking and encouragement of peer performers

Black Key Improvisation

Materials:

Keyboard



Procedure:

1. Explain to group earlier in session that they get to take turns playing keyboard only if they demonstrate a level of respectful cooperation that you determine beforehand. It may be appropriate to mention this reward while explaining group rules as added motivation or to re-mention it if a client is demonstrating behaviors that could cause them to lose the reward.
2. During the final five to ten minutes of group session (depending on size of group), announce that it's keyboard time, and choose a client to stand at your right side at the keyboard. Remind other clients to "be a good audience", so they will each get a turn as well.
3. Explain to the first client and the audience that the white keys of the piano sometimes make crunchy sounds together, but black keys make pretty, smooth sounds together no matter how you play them.

4. Play a simple, rhythmic bass pattern on the lower black keys, and encourage client one to play higher black keys (start with one or two at a time). Show the client how to play simple glissandos or trills if they catch on quickly.
5. Allow each client 8-12 bars to play their song. For higher functioning groups, allow clients to determine the “mood” of their song to help determine the tempo, dynamics, and keyboard instrument choice (piano, organ, strings, etc.)

Desired outcomes: motivation for positive behavior, increased self-esteem due to success-oriented instrument play, respectful turn taking and encouragement of peer performers

*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>.*

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