



## **ART BRIDGES: Lesson Plans for Enrichment, Growth and Healing**

### **Music Enrichment for Hospitalized Children and Adolescents**

**Activities 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 clients who are medically approved to leave their rooms and interact with other patients. For patients on contact precautions or who otherwise cannot leave their hospital room, bedside sessions may be effective, but the leader in this situation should always have an awareness of the clients' prognosis, emotional stability, and physical limitations. Patients may benefit from the positive auditory stimulation of the music, the mood elevation triggered by hearing preferred music, and the social interaction between musician and patient.

It should be noted that these sessions reach greater degrees of therapeutic depth under the supervision of a music therapist by addressing physiological goals like oxygen saturation and emotional goals like processing the trauma that led to hospitalization or the depression that stems from a long recovery process. A music enrichment or volunteer music program functions most safely and effectively as part of an existing music therapy program. The music therapist can effectively train professional musicians to interact appropriately with patients, respond appropriately to medical emergencies during a session, and implement healing-music interventions at bedside.

## Bedside Song Request and Chat

### Materials:

1. List of popular songs that contain age-appropriate lyrics and represent a wide variety of age-appropriate genres
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 patient and visitors may choose songs that they like and then talk about why they chose them.
2. Play soft background music or sit in silence as patient and family members 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 unless physical limitations prevent active participation.

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:** sharing memories and processing emotions in a non-threatening environment, assertiveness to speak up with a request, mood elevation with preferred music, positive stimulation to incorporate non-medical activity into hospital routine

### **Bedside Relaxation Music**

#### **Materials:**

1. Accompanying instrument like keyboard, guitar, or harp
2. Chord charts for slow, sedative songs that fall into preferred music genres (i.e. "A Thousand Years" from Twilight for an adolescent girl)

#### **Procedure:**

1. Prior to activity, ask client for music preferences to determine selections or style of improvisation.
2. As instrumental begins with simple bass pattern, soothing timbre, and medium-slow tempo, encourage patient to take a few deep breaths with you and stretch upper body if medically appropriate.
3. Sing preferred music with voice no louder than your speaking voice. Encourage continued deep breathing.
4. Calmly stop music and alert nurse if patient begins having a medical event or if patient alarms go off during session.
5. Softly and gradually fade out music and silently pack up instruments if patient falls asleep during the session.

**Desired outcomes:** relaxation, slower heart rate, relief in emotional anxiety, assistance in going to sleep

## Pediatric Concerts

### **Materials:**

1. Shakers
2. Small percussion instruments



3. Scarves
4. Accompanying instrument like guitar, ukulele, or keyboard
5. Chord sheets with a wide variety of age-appropriate, popular songs

### **Procedure:**

1. Greet patients and family members individually as nursing staff helps transport patients to group area. Always welcome siblings into group.
2. Distribute shakers or other small percussion instruments (considering physical limitations) for patients to play during music.
3. Encourage simple, seated dance moves with small percussion instruments (if medically appropriate) and allow children to alternate leadership.
4. Encourage singing along with popular songs, and pause songs to allow group to finish a popular lyric.
5. Distribute the scarves so the patients can “do the wave” with certain songs.
6. Offer words of encouragement and support between songs, since some clients have had long stays or scary procedures to cope with. Say that you hope the music is a nice break to have fun and relax.

**Desired outcomes:** mood elevation, positive interaction, emotional support during difficult hospitalization, appropriate physical activity, positive stimulation and support for siblings and other family members

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*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](http://www.hildegardcenter.org) .**

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