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CHILDREN OF DIVORCE: THE THERAPEUTIC USE OF MUSIC IN GROUP TREATMENT

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An Abstract Presented to the Faculty of the Graduate School of Lindenwood College in Partial Fulfillment of the Requirements for the Degree of Master of Arts Thesis B38c 1989

Abstract

This manuscript examines the effects of parental divorce on children and reviews existing treatment interventions with this client population. Documented treatment programs report very limited use of the expressive arts therapies. In particular, the absence of the use of music therapy techniques is noted. An instructional guide that provides an introduction to music therapy and five music therapy session plans is developed for use by psychotherapists treating children of parental divorce. The guide is evaluated by 20 psychotherapists. The evaluators rate the instructional guide to be a valuable resource and express interest in implementing the techniques presented.

CHILDREN OF DIVORCE : THE THERAPEUTIC USE OF MUSIC IN GROUP TREATMENT

Kathy Schnelder Bearman, B.A.

A Culminating Project Presented to the Faculty of the Graduate School of Lindenwood College in Partial Fulfillment of the Requirements for the Degree of Master of Arts

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TABLE OF CONTENTS

CHAPTER ONE: Introduction
CHAPTER TWO: Literature Review
The Effects of Parental Divorce on Children3
Concerns of Children3
Separation Anxieties4
Reunification Fantasies6
Responsibility and Blame7
Age-Specific Reactions of Children to Divorce9
Three to Five Year Olds9
Six to Eight Year Olds12
Nine to Twelve Year Olds13
Adolescents14
Preventive Interventions15
The Expressive Arts Therapies20
Music Therapy
Music As Background27
Music and Active Listening28
Recreational Music Therapy28
Music with Additional Expressive Media29
Active Listening and Verbal Discussion29

Guided Imagery and Music30
Creating Music31
Analytical Music Therapy31
Creating Music with Additional Expressive Media32
Research: Music and Psychotherapy33
CHAPTER THREE: Method38
CHAPTER FOUR: Results and Discussion40
APPENDIX A: Instructional Guide46
APPENDIX B: Questionnaire89
APPENDIX C: Cover Letter92
REFERENCES94

CHAPTER ONE

Introduction

The current pervasiveness of divorce in our society has resulted in efforts to understand the psychological and emotional repercussions of parental divorce on children. The development of expertise in this area has been accompanied by efforts to design effective intervention strategies for this client population.

The following manuscript outlines the significant effects of parental divorce on children and examines the treatment interventions that have been formulated. This examination indicates that the use of the expressive arts therapies in existing documented treatment programs is limited. Due to the effectiveness of these therapies with children, increased use of these techniques may result in improved treatment interventions.

In particular, the use of music therapy techniques in group intervention with children of divorce is not documented. A review of the field of music therapy and the research validating its therapeutic effectiveness indicates that certain music therapy techniques may be of value in addressing the therapeutic issues of children of parental divorce. Unfortunately, it is possible that

psychotherapists who are not trained music therapists may remain largely unfamiliar with these techniques. Yet, professionals treating children of divorce may be able to improve their interventions through the incorporation of music therapy methods which have been demonstrated to promote psychotherapeutic gains.

This overview suggests the need for the development of an instructional guide designed to provide the following: (a) an introductory overview of available music therapy techniques, and (b) a series of detailed music therapy activities specifically designed for use by the trained professional treating children of parental divorce. An instructional guide was developed, based upon the following premises: (a) Professionals treating this client population are seeking new techniques that may aid their work, (b) professional psychotherapists who are not trained music therapists may be instructed in the use of music therapy techniques through a guide, and (c) information presented in the guide will provide the basis for professionals to formulate additional original music therapy interventions for use with children of divorce.

CHAPTER TWO: LITERATURE REVIEW

The Effects of Parental Divorce on Children The rate of divorce in the United States has consistently risen in recent years. According to the United States Bureau of Census, fifty percent of all marriages end in divorce; approximately one out of every three children is subjected to the range of physical and psychological changes which accompany parental divorce (Bureau of Census, 1987). Projections pased on these data show that by the mid-1990's, divorce will have impacted one out of every two children (Glick, 1979). Awareness of the increasing pervasiveness of divorce in our society has resulted in an effort to identify its effects upon the emotional, social and cognitive development of children. Research and growing clinical experience in this field indicate that children of parental divorce are faced with the resolution of difficult emotional issues (Wallerstein & Kelly, 1980).

Concerns of Children

Judith Wallerstein (1983), a leading researcher in the study of the effects of parental divorce on children, maintains that such children are faced with the mastery of six interrelated hierarchical coping tasks. This

process appears to add significantly to the normal challenges of growing up. The six tasks are:

(a) acknowledging the reality of the marital rupture,

(b) disengaging from parental conflict and distress and resuming customary pursuits, (c) resolution of loss, (d) resolving anger and self-blame, (e) accepting the permanence of the divorce, and (f) achieving realistic hope regarding relationships (Wallerstein, 1983).

Edward Teyber (1985) outlines three primary categories of concerns of children of all ages who deal with parental separation and/or divorce. They are (a) separation anxieties, (b) reunification fantasies, and (c) responsibility and blame.

Separation Anxieties

According to Teyber (1985), the greatest conflict which is created by marital separation is the fear of losing both parents. This fear is based upon a very real experience. Often, children of divorce see one parent suddenly pack and leave the home without warning.

Following such a departure, the parent is often seen on an infrequent and irregular basis. Children realize that they can be left, and wonder what is to stop the remaining parent from leaving as well. Under normal

circumstances, it is common for children up to eight or nine years of age to fear abandonment. Parental divorce serves to intensify these fears of abandonment and loss, as children experience their worst fears actually becoming a reality.

Abandonment fears and separation anxieties result from (a) children's unsophisticated concept of time and undeveloped thinking ability, and (b) the intensity of children's emotional and psychological dependence upon parents. Children experience the world more in the present moment; they have not yet developed the capacity to project themselves into the future with the same assurance that adults have developed. Thus, children are less sure about the stability of people and relationships with people over time. Children achieve "object constancy." the realization that a person or object still exists, even though it is not within sight, to some degree by the age of three. However, the emotional conflict which is involved with parental divorce can serve to create stress which leads to regression in this area (Teyber, 1985).

Children express their fear of abandonment by exhibiting difficulty with normally nonproblematic

partings, such as leaving for school, going to bed, etc.

According to Teyber (1985), separation anxieties in

children can be prevented to some extent if parents are

able to communicate the following clearly to them:

(a) what to expect in advance, (b) an understandable

explanation for the divorce, and (c) reassurance of the

permanent and continuing nature of the relationship with

both parents.

Reunification Fantasies

Even if conditions have not been pleasant during the marriage, children long for the safety of the old family structure simply because it is familiar. They may use reunification fantasies to ward off severe feelings of sadness and loss at the ending of the intact family.

Denial is a normal defense mechanism which allows children to gradually realize and accept the new, frightening situation at a rate which is safe and comfortable for them. However, in some cases, children continue to use denial to avoid their true feelings.

Long term use of reunification fantasies can lead to depression and other behavioral problems.

One particular difficulty arises for children who have been allowed to come between their parents during

the marriage. They often feel that they are responsible for the divorce, and therefore, for bringing their parents back together. They may attempt to unite the parents as a team again by becoming a problem; they may steal, fight, fall at school, etc. The problem, of course. Is intensified if one or both parents encourage the reunification fantasies in some manner. Reunification fantasies are most effectively dealt with if parents explain the following facts clearly: (a) the decision to divorce is final; there is nothing that the child can do to change it, (b) there is no possibility that the parents will reunite or remarry in the future, and (c) the decision to divorce is strictly an adult decision. It is helpful to children to emphasize the boundary between parents and children, differentiating between matters that concern only adults (buying a house, car, etc.) and matters that concern children (buying pets, choosing chores, etc.) (Teyber, 1985).

Responsibility and Blame

Most children are firmly convinced that they are to blame for the divorce. Some feel that the divorce happened because they did not mind, because they fought with their siblings, etc. Teyper (1985) stresses the

need for parents to repeatedly reassure and explain to children that they did not cause the divorce.

Children are "egocentric" in their thinking. Young children experience themselves as the center of the universe; they experience that the world revolves around them. Because of their emotional and intellectual immaturity, they are unable to understand that things happen, that people make decisions which are not based upon them. Children do not have a clear understanding of the relationship of cause and effect. They experience everything that happens in the world as happening specifically to them or as having been caused by them. As children grow into pre-school and early school years, this egocentric way of perceiving the world gradually matures into the ability to better understand the separateness of others and the nature of cause and effect relationships. However, all children, until early adulthood, tend to continue to view themselves to some extent as the cause of events which occur in the world around them (Teyber, 1985).

Because children do not understand cause and effect, and also cannot clearly differentiate between fantasy and reality, they engage in "magical thinking." They assume

that their own thoughts, wishes, and desires have actually caused things to happen in the world. For example, children who at some point were angry at their fathers, and wished that they would go away or even die, might conclude that their wish actually caused their fathers to leave at the time of parental separation.

Occasionally, this problem is further complicated by a parent who will actually tell children that they were the cause of parental separation (Teyber, 1985).

Age-Specific Reactions of Children to Divorce Three to Five Year Olds

According to traditional psychoanalytic theory, children in this age group experience what is called the "Oedipus conflict." Children become aware of their own sexual feelings, which they focus upon the parent of the opposite sex, longing to possess this parent exclusively. They often wish that the parent of the same sex could be eliminated in some way. The children are caught between their attachment to the opposite-sex parent and their fear of the anger of the same-sex parent. Eventually, the child resolves the conflict by identifying with the same-sex parent, and giving up the desire for the other parent (which surfaces again in adolescence).

Given that magical thinking is such a predominant force for children of this age, one can understand how they are more likely to feel responsible for their parent's separation and divorce. They imagine themselves and their feelings during the Dedipal stage as part of a love triangle causing the marriage to end. Some mothers further burden their young sons by referring to them as the "man of the house" now that the father has gone (Teyber, 1985).

In the book <u>Surviving the Breakup</u> (Wallerstein & Kelly, 1980), the reactions of children in this age group are outlined:

- Fear. These children seemed frightened, bewildered and sad. They experienced separation anxieties in the form of night waking, crying, fear of school.
- Regression. They returned to the use of security blankets and toys. Lapses in toilet training and increased masturbatory behavior were noted.
- Macabre fantasy. They relied on fantasy to explain events, especially if they had not received explanations. They fantasized being

left hungry by parents.

- Bewilderment. They tried anxiously to comprehend the present and future dimensions of their relationships with both parents.
- Replaceability. They imagined that the departed parent rejected them, and left in search of a new family.
- 6. Fantasy denial. Girls especially used fantasies containing the theme of having been loved the best by their fathers. Boys found it harder to deny their father's absence. Boys and girls were equally committed to fantasies of reunification.
- 7. <u>Disruption in play</u>. They exhibited less pleasure in play; they constructed unsafe worlds "populated by hungry, assaultive animals."
 (p. 61)
- Emotional neediness. They demonstrated a hunger for affection, physical contact, nurturance and protection.
- Mastery. They attempted to reestablish order in their lives through their play.

Six to Eight Year Olds

Children in this age group are better able to understand the meaning of divorce and its implications for them specifically. They are very much involved, emotionally and intellectually, in making the transition from the home and family to the community (school and playground). The rupture in the family caused by divorce may pose a real threat to the newly acquired gains in independence these children have achieved. Wallerstein and Kelly (1980) noted the following primary responses to divorce in this age group:

- Grief. The most obvious response was a
 pervasive feeling of sadness evidenced by much
 crying, sobbing, etc. They had difficulty
 obtaining relief from their sorrow; they did not
 use fantasy to deny the separation and loss.
- Fear. These children feared being left without a family, or being sent to live with strangers.
- Feelings of deprivation. They feared being deprived of food and toys.
- Yearning for the departed parent. This was
 especially true for boys whose fathers had left.
 This is a difficult situation for a boy with

- newly resolved Oedipal conflicts, who finds himself alone with his mother.
- Inhibition of aggression at father. These children were not negative toward their departed fathers immediately following the separation.
- 6. Anger at custodial mother. They expressed anger directed at the custodial mother either for causing the divorce or for driving the father away.
- Fantasies of reconciliation. Fantasies that parents would reconcile or remarry were common and enduring.
- 8. <u>Conflicts in loyalty</u>. They remained faithful to both parents, even in the face of demands by one parent to go against the other.

Nine to Twelve Year Olds

A great difference in response to stress in general and to the divorce in particular has been observed in children of this age group. Wallerstein and Kelly (1980) have concluded that at some point during the eighth to ninth year, there is rapid growth and strengthening of the ego. This results in a greater repertoire of coping skills, a greater ability to understand reality, and an

increased capacity to withstand stress without regression. The most common reactions of this age group include:

- Anger. This was the most intense reaction of these children. Their anger was well-organized and clearly object-directed, masking other more painful responses such as sadness and helplessness.
- Shaken sense of identity. The self-image and identity of these children seemed to be organized around being their mother and father's child; the family rupture resulted in confusion.
- Somatic complaints. Children complained of headaches and stomach pains.
- Alignment with parent. Children were especially vulnerable to persuasion by one parent to join in opposition against the other parent. Fatherdaughter and mother-son alliances were most common.

Adolescents

The adolescent group experienced parental divorce as traumatic (Wallerstein & Kelly, 1980). Although they generally did not feel responsible for the divorce, they

felt a great amount of anger, sadness, sense of loss and sense of betrayal. They expressed a serious concern related to their own futures as marital partners and sexual partners.

Research illuminating the effects of parental divorce on children clearly indicates that this is a client population with a particular set of psychological needs. Issues of children of divorce not only need to be further clarified and understood through research, but effective treatment modalities must be developed to facilitate their resolution. Various programs have been designed for use with this population.

Preventive Interventions

Several pilot preventive interventions have been developed based on support principles for children of divorce. Two early studies involved nine children and relied on impressionistic evaluations. Cantor (1977) indicated that there was little indication of positive behavior change in the observed children, based on teacher and parent judgments. A study by Guerney and Jordan (1979), in contrast, received very positive feedback from the children and parents involved. Felner, Norton, Farber, and Cowen (1981), evaluated another

preventive intervention for crisis children, primarily children of divorce. They reported some adjustment gains for participants on teacher ratings and self reports of anxiety. However, there was no control group in this study.

The Divorce Adjustment Project (Stolberg & Cullen, 1983; Stolberg, Cullen & Garrison, 1982) had two main components: (a) a Children's Support Group for 7-13 year old children of divorce that provided support and developed communication, anger control and relaxation skills, and (b) a Single Parent Support Group that provided support and discussions. Outcome comparisons at the end of the intervention and after five months indicated that children in the support group alone improved most in self-concept and parents in the parent group alone improved most in adjustment. Participants in the combined parent-child intervention did not reflect parallel improvement (Stolberg & Garrison, 1985).

The Children of Divorce Intervention Project (Pedro-Carroll & Cowen, 1985) was a school-based, time-limited (10 week) intervention program. The children were students in the third through sixth grades, consisting of 42 boys and 33 girls. They met once weekly for one hour

in groups of eight or nine children. The program sought to build support through sharing; to focus on divorce-related feelings and experiences; to build cognitive skills through the use of discussion, filmstrips and role-plays of divorce-related experiences; to deal with anger-control. The results of the study indicated clinical, as well as statistically significant improvements in the condition of the participants.

Pedro-Carroll and Cowen (1985) concluded:

Findings from this study suggest that child maladjustment after parental divorce is <u>not</u> an inevitable consequence, i.e., it can be moderated or contained by informed preventive intervention emphasizing the provision of support and situationally relevant problem solving skills.

(p. 19)

Another time-limited group intervention was developed by Neil Kalter (1985). He stated that he chose the group format for several reasons: (a) It creates the opportunity for peer support which is effective in helping children deal with divorce and post-divorce related issues, (b) the groups provide a sense of safety in terms of the number of people present which individual

therapy cannot provide, (c) children are not inhibited by the presence of other family members, and (d) group therapy is more time-efficient than individual or family therapy.

Kalter outlined five major goals to be achieved by the groups: (a) to normalize the sense and experience of being a child of divorce, (b) to clarify divorce-related concerns and questions, (c) to provide a safe environment for the experience and processing of painful emotions, (d) to develop coping skills for difficult feelings and family interactions, and (e) to communicate to parents the nature of the issues and questions children may have with regard to divorce.

In addition to verbal discussion, Kalter used techniques such as role-playing, writing, drawing and storytelling to facilitate the emergence of divorce-related issues. The effects of this intervention have not been researched.

Rainbows For All Children (Yehl & Laz, 1986) is an ongoing peer support group program (non-therapy) for children of divorce. The program, which is school or church-based, is guided by a caring adult, and is offered to children ages 4-18. Each session follows the same

basic format: (a) the theme is introduced through a story, song or film strip; (b) the activity is presented, incorporating a worksheet, an artistic project, or a game; (c) the discussion encourages the sharing of feelings; and (d) the closing segment encourages a short period of personal reflection. Rainbows For All Children is currently undergoing evaluation for its effectiveness.

Clearly, the interventions mentioned above represent the efforts of concerned professionals to incorporate the most recent research findings into effective responses to the growing needs of children of divorce. It is interesting to note that the movement in the design of interventions appears to have evolved from a strict verbal therapy model to interventions which supplement verbal therapy with art, role-playing, storytelling, and writing. These techniques, known as the "expressive" or "creative arts " therapies, are not only recognized as effective therapeutic tools in the treatment of children (Daklander, 1978), but they represent a growing awareness of the value of the expressive therapies in the field of psychotherapy as a whole. A further examination of the wide range of approaches encompassed by the expressive therapies may provide increased awareness of therapeutic

techniques which may be of value in the effective treatment of children of divorce.

The Expressive Arts Therapies

The term "psychotherapy" refers primarily to theoretical models that advocate the promotion of psychological health through the verbal processing of material. As the Humanistic movement in psychology evolved, a greater emphasis developed upon viewing the human being as a complete and inherently wise entity. A new value was placed upon the exploration and experience of the self on many levels to facilitate the integration of the self as a complete being. The development of creativity was viewed as an important aspect of self-actualization and as a criterion for mental health.

A direct result of the theoretical orientation of the Humanistic school of psychology has been the growth of the expressive arts therapies, including art therapy, creative writing, poetry therapy, dance/movement therapy, psychodrama and music therapy. These modalities facilitate the stimulation of qualities related to creativity, such as self expression, divergent thinking, originality, flexibility, and spontaneity. The expressive arts therapies are increasingly utilized both

in conjunction with and as preferable alternatives to traditional verbal psychotherapies.

The skilled expressive therapist combines expertise in the field of psychotherapy with the application of creative arts modalities to address the needs of individual clients most effectively.

In the book <u>Creative Process In Gestalt Therapy</u>
(Zinker, 1977), the author discusses the role of
creativity in the therapeutic process. He describes the
act of creating as therapeutic in itself, allowing for
the expression and examination of the content of our
internal lives. He maintains, "We live full lives to the
degree to which we find a full range of vehicles which
concretize, symbolize, and otherwise give expression to
our experiences." He includes a chapter entitled "Art in
Gestalt Therapy," which describes his own successful
therapeutic work with clients using drawing and sculpture
as media for projective expression.

Violet Oaklander (1978), another therapist of the Gestalt orientation, has also found the use of the expressive therapies to be extremely effective with her clients, primarily children. In the book Windows to Our Children (1978), she presents a comprehensive collection

of expressive therapy activities.

Oaklander (1978) discusses the theoretical basis for her use of the expressive therapies. She states that the natural, uninterrupted development of a child's senses, body, emotions and intellect is the deepest base of the child's sense of self. A strong sense of self results in the ability to have good contact with the environment. Consequently, Oaklander (1978) maintains that most children who are in need of therapy have in common some impairment in their contact functions. She describes looking, talking, touching, listening, moving, smelling and tasting as the "tools of contact;" how people make use of their contact functions indicates the strength or weakness in the sense of self. She states the following:

I work to build the child's sense of self, to strengthen the contact functions and to renew her own contact with her senses, body, feeling and use of her intellect. As I do this, the behaviors and symptoms that she has used for her misdirected expression and growth often drop away without her being fully aware that her behaviors are changing. Her awareness is redirected to the healthy mindfulness of her own contact functions, her own

organism, and thus toward more satisfying behaviors....as the child in therapy experiences her senses, her body, her feelings and the use she can make of her intellect, she regains a healthy stance toward life. (p. 59)

Oaklander (1978) discusses several modalities that she has used effectively in her therapeutic work with children. They include drawing, painting, movement, sculpture, fantasy, storytelling, writing, poetry, puppetry, meditation, creative dramatics, pantomime, dream work, projective tests as therapeutic techniques, tarot cards, and music.

A brief section that specifically addresses the use of music in therapy with children is included. Oaklander (1978) mentions several techniques, including the use of music as background for art work, as accompaniment in fantasy work, for movement improvisations, for rhythm improvisations, for accompaniment to stories, etc. She also works to increase awareness of sounds through sound recognition games, listening exercises, matching emotions to sounds. A technique that Oaklander (1978) experienced as particularly effective is the use of songs to stimulate the expression of feelings on various topics.

For example, the song "Go Tell Aunt Rhody," about a goose that dies, lead to discussions about death, grief, and sadness. Similarly, the song "Simbay Mamma's Baby," which is about violent reactions to a new baby in the family, brought about the sharing of similar feelings experienced by children. Oaklander states, "At times these songs had more power than storybooks" (p. 116).

Daklander's reported success with the use of music therapy techniques indicates that there may be value in developing such applications for use in group treatment with children of divorce. Further examination of the clinical research on music therapy yields no studies that have specifically measured the effectiveness of music therapy with this population. Although the interventions discussed previously (Pedro-Carroll & Cowen, 1985; Kalter, 1985) include the use of storytelling, art, drama, and writing in addition to verbal therapy, music is included only in the program Rainbows For All Children (1986), which uses songs to suggest particular themes.

A more detailed examination of available music therapy resources as well as clinical research in this field may yield insight into the value of incorporating music therapy as a component in interventions with

children of divorce.

Music Therapy

Bonny (1986) states, "Music therapy may be defined as "the systematic application of music as directed by the music therapist to bring about changes in the emotional and/or physical health of the person. As such, its functional rather than its aesthetic and entertainment aspects are emphasized." (p. 4)

The characteristics of music which contribute to its therapeutic use are as follows:

- Music is non-verbal. Verbal communication is linear and therefore limited to one level of communication. Music is multi-dimensional, crossing through verbal barriers and providing meaning on several levels simultaneously.
- 2. Music evokes emotional responses. It is used in love songs, funeral dirges and marches. These are general responses; more specific responses occur within each individual as music is listened to. Music is considered a mood changer due to its ability to influence our feeling states.
- 3. Music evokes physiological responses. Rhythm,

the energizer of music, is related to heart rate, blood pressure, breathing and the whole multitude of vibrational periodicities that make up the body structures. The tension/release dynamic inherent in Western musical composition further enhance the rhythmic balances desired in good health.... It is speculated that the production of morphine-like peptides or endorphins may be connected to certain musical experiences.

- 4. Music stimulates symbolic representation. Images, whether kinesthetic, emotional or visual are a part of treatment in various diseases. Carefully chosen music can effectively enhance the flow of imagery and fantasy or renewal of memories, where clinical situations dictate these as the treatment of choice.
- 5. The sensory stimulation of music can create synesthesias of other senses. Touch, taste, vision and smell are enhanced when music is deeply listened to, creating a basis for work with the sensorily handicapped. (Bonny, 1986, p. 4-5)

Music therapy is a broad field; it encompasses a very wide range of diversified approaches that may be applied as indicated by the needs of specific client populations. Such client populations include the following: mentally retarded children and adults, handicapped children and adults (blind, deaf, speech disorders, motor disabilities), alcoholic and chemical dependents, geriatric clients, behaviorally disordered children and adults, and children and adults undergoing psychotherapeutic treatment (Michel, 1976). Issues of relevancy to the designated topic, children of divorce, indicate that further discussion be limited to music therapy applications in psychotherapeutic treatment.

At the risk of oversimplification, one might separate music therapy situations into three basic categories: (a) music is present as background in the environment, (b) music is actively listened to, and (c) music is created.

Music As Background

Music as an element of the background can be a very powerful force. Rudolph Dreikurs (cited in Oaklander, 1978) discusses the beneficial effects of music on several psychotic children:

Using music brought results in cases where other approaches had failed. It seems that the pleasant experience with music, often merely in the background, stimulates participation, permits an increase in the child's attention span, and raises his frustration tolerance. External and internal tensions disappear, as reality becomes more pleasant and less threatening. The demands for participation are so subtle that they are not resented or defied.

Music and Active Listening

Recreational Music Therapy

The second category, which involves actively
listening to music, presents potentially unlimited
possibilities for therapeutic work. Within this category
lies a realm of recreational activities, particularly
useful in helping clients to achieve the following:

- Learning and relearning of constructive socialization skills
- Play therapy, or learning how to experience pleasure
- 3. Constructive use of leisure time
- 4. Competitive games, or learning to cope with

(Plach, 1980, p. 61)

An excellent resource for developing recreational music therapy activities is <u>The Music Therapy Sourcebook</u>
(Schulberg, 1981). Included are activities such as:
Musical Bingo, Musical Crosswords, Musical Jigsaw Puzzle,
Name That Tune, Bean Bag Toss and Musical Charades.

Music Combined with Additional Expressive Media

A second group of music therapy resources which may involve actively listening to music are those which combine music with other expressive therapies (art, drama, writing, poetry, movement, etc.) to address issues, to stimulate the creative experience, and/or to aid in the development of group process stages. Examples of such techniques include the following (Plach, 1980):

(a) simultaneous application of media and music, (b) use of music prior to the application of secondary medium(s), and (c) use of secondary medium(s) prior to the application of music. Numerous examples of the techniques described above are provided in music therapy resource books (Plach, 1980; Schulberg, 1981).

Active Listening and Verbal Discussion

A very widely used technique is that of lyric

discussion. This method involves listening to the lyrics of a song that has been chosen on the basis of its content, followed by a verbal discussion of the thoughts and emotions it evoked in clients. (Schulberg, 1981; Plach, 1980)

Similarly, instrumental music of various moods and styles may be played, followed by discussion of personal reactions.

Guided Imagery and Music

Bonny (1973) developed the technique of Guided

Imagery and Music. This method uses music and relaxation
to facilitate an "Altered State of Consciousness." In
this state of heightened awareness, music is thought to
generate greater levels of emotional intensity and depth.
The melodles, harmonies and rhythms may take on meanings
to clients. This experience may provide greater insight
into the self, broaden one's perspective, produce a
heightened sense of empathy, unity, and a sense of the
divine. (Bonny & Savary, 1973)

This experience consists of a warm-up, the introspective experience, reorientation or "coming out" of the experience, and group sharing. There are four basic variations of Guided Imagery and Music (Bonny,

1973): (a) guided verbal imagery and recorded music;
(b) guided verbal imagery and live, improvised music;
(c) music with no verbal imagery (the imagery is
stimulated through the music alone); and (d) music with
no verbal imagery, traveler and guide (client works with
a nondirective, supportive guide).

Creating Music

Analytical Music Therapy

Valuable resources for psychotherapeutic work with clients are provided by a group of techniques known as "analytical" music therapy techniques (Priestley, 1975). These techniques involve the creation of music or sound by the client and/or therapist using musical instruments. Some of the available examples of analytical music therapy techniques are:

- Group and individual improvisations (open or on a particular theme, emotion, etc.)
- 2. Musical role-playing: The "sounds" of conflicting feelings are played, or the role of another person in the client's life is "played" by the client through creating sounds. The client may play out both sides of a relationship or internal conflict, or the therapist/group may

- play one aspect, creating a dialogue between client and therapist/group.
- Reality Rehearsal: The feelings stimulated by a particular decision are expressed through musical improvisation.

Any idea, emotion, conflict, relationship, etc. may thus be expressed through sound, creating an audible projection of the internal world of the client. The sound improvisations may be tape recorded and played back to the client if desired.

Creating Music Combined with Additional Expressive Media

This group of techniques includes exercises requiring clients to (a) use sound expressions in response to other stimuli, or (b) use sound expressions to stimulate other creative expressions. Examples include: (a) Clients use instruments to express their reactions to pictures, stories, poetry, etc.; (b) clients use instruments to accompany a group member's verbal sharing, creating "audible empathy" (Moreno, 1984); and (c) clients create music for other group members to respond to through art, movement, poetry, etc. Also included in this category are songwriting activities (Schmidt, 1983).

Research: Music and Psychotherapy

It is obvious that the field of music therapy offers a wide variety of approaches that may be of use to psychotherapists. Clinical research indicates that many of the techniques discussed above have been effective tools in psychotherapeutic work.

A "pilot" evaluation of an eight week music therapy program was conducted at Bristol General Hospital, Great Britain (Bunt, Pike & Wren, 1987). The group consisted of six clients and four staff members who met once weekly. Music therapy activities consisted of group improvisations on various themes such as dawn, a haunted house, moods of the group members, and a day in the life of each group member. Discussions following the improvisations were encouraged. An open-ended questionnaire completed by staff and clients indicated that music therapy improved group cohesiveness; developed the imagination; explored nonverbal communication; built confidence; encouraged relaxation, trust, and the participation of all group members.

A study of a music therapy program attended by 23 psychiatric inpatients over a two and one half year period was evaluated. The activities included choral

music, rhythm groups, vocal dynamics, individual plano instruction, voice therapy, guitar, and direction for concerts and variety programs. It was concluded that the program had "an organizing influence" on the clients' lives and that they developed increased self-assurance as a result of their participation (Wasserman, 1972).

Moreno (1980) developed the technique of musical psychodrama and described its implementation in a workshop format. He concluded that the power of music was important as a psychodramatic device.

In a study combining music therapy and rational behavior therapy, Maultsby (1977) found that music with lyrics conveying a meaningful message was beneficial to subjects. He concluded that favorite music usually elicits strongly positive emotive reactions, and that people tend to generalize their positive reactions to the situations and ideas associated with it. He also noted that the structure of the music encouraged people to repeat the message of the song, following the melody, and that this was an aid in remembering the ideas conveyed through the lyrics. Insights arrived at through contemplating the message of the song were also remembered.

Brydon and Nugent (1979) used musical metaphor as a means of therapeutic communication. They maintain that the nondominant hemisphere of the brain is important in the process of change, which is the goal of therapy, and that it can be accessed powerfully through the use of music, metaphor, and visualization. They used a musical metaphor in the form of a story, a representation of the situation of the client. The story contained suggestions oriented toward change. The musical metaphor, combined with visualization, was found to be helpful to clients in dealing with life situations.

According to Monsour (cited in Schmidt, 1983), group music making and composition help to encourage group involvement and provide a sense of security while allowing for new experiences. Songwriting can faciltate the recovery of repressed material (Apprey & Apprey, 1975). Ficken (1976) states that songwriting is useful in promoting group cohesiveness, expressing feelings, building self-esteem, and modifying behavior.

Music therapy techniques have also been effective in work with children. Music was used as part of a comprehensive preoperative teaching session for pediatric patients. The children who received music therapy before

medication were rated as showing less anxiety for the surgical procedure (Chetta, 1981).

A program combining music, movement and art was initiated with eight children, aged six to eight years, with learning and behavioral disorders. It was concluded that the program successfully met the following objectives: facilitating awareness of body parts and feelings, improving self-concept, and increasing self-expression and self-acceptance (Adler & Fisher, 1984).

Grossman (1978) found that stories told by 12 emotionally disturbed and abused children in response to two different musical compositions were projective in nature and could be of value to professionals working with the children.

Wells and Stevens (1984) explored the effect of music as a stimulus in creative storywriting in ongoing inpatient group psychotherapy with adolescents. Short selections of music were played, and clients created portions of stories in response. As the selections changed, the stories were rotated, allowing each group member to write part of every story. This technique was cited as a projective diagnostic tool and as an aid in promoting positive interaction and group cohesion.

A study of the conjoint use of social work and music therapy with the children and families of adult cancer patients concluded that it provided: (a) improved patterns of communication and greater intimacy, (b) increased individual well-being, and (c) a relaxed environment conducive to open expression (Slivka & Magill, 1986).

In conclusion, it is evident that the field of music therapy contains numerous resources that could enhance the quality of psychotherapeutic work with any client population. However, psychotherapists who are not professional music therapists may remain largely unfamiliar with these techniques. Professionals working with children of divorce may be able to improve their interventions through the incorporation of music therapy methods which have been demonstrated to promote psychotherapeutic gains. Consequently, the formulation of an instructional guide for professionals that intoduces basic music therapy techniques and outlines a series of activities specifically designed for this client population may contribute to the effectiveness of interventions currently in use.

CHAPTER THREE

Method

Subjects

Twenty psychotherapists holding graduate level degrees in counseling, psychology and social work were asked to review an instructional guide, Children of Divorce: The Therapeutic Use of Music in Group Treatment (see Appendix A), and to complete an evaluation/questionnaire (see Appendix B). Ten psychotherapists were experienced facilitators of group treatment sessions for children of divorce. Ten psychotherapists were not trained specifically in this area, but were experienced individual, family and/or group therapists.

Materials

A cover letter (see Appendix C) was submitted to the psychotherapists requesting that they review the guide (Appendix A) and complete the questionnaire.

The questionnaire (see Appendix B) consisted of six questions and a section for comments. Each question was answered by indicating a score on a scale of one (lowest rating) to five (highest rating). The goal of the

questionnaire was to determine the extent of interest in the content of the guide, its effectiveness as a training instrument, and the effectiveness of the activities in targeting therapeutic issues specific to children of divorce.

Procedure

A music therapy instructional guide was developed (see Appendix A) to provide the following: (a) an overview of music therapy techniques and (b) five music therapy activities for use by psychotherapists treating groups of children of parental divorce. The activities incorporated music as follows: (a) music as a stimulus for group discussion and individual therapy, (b) music used in conjunction with other expressive media to express ideas and emotions which form the basis for therapeutic work, and (c) music or sound created by clients as a vehicle for the expression of ideas and emotions. The activities incorporated music therapy techniques researched as effective with other client populations to target specific therapeutic issues of children of parental divorce.

The instructional guide was reviewed and evaluated by 20 psychotherapists.

CHAPTER FOUR

Results

The evaluations of 20 psychotherapists indicate that the instructional guide is an effective resource for use in psychotherapeutic work with children of divorce.

One hundred percent of the evaluators agreed that the activities presented in the guide used music as a stimulus for group discussion and individual therapy.

One hundred percent of the evaluators agreed that the activities presented in the guide used music in conjunction with other expressive media to express ideas and emotions to form the basis for therapeutic work. One hundred percent of the evaluators agreed that the activities presented in the guide used music created by clients as a vehicle for the expression of ideas and emotions.

Eighty percent of the evaluators rated the music therapy overview as valuable, with thirty percent rating it as very valuable. Ninety-five percent of the evaluators judged music therapy techniques to be valuable in work with children of divorce, with forty-five percent describing them as very valuable. Eighty percent of the the evaluators described the style of presentation of

the activities as clear, with thirty percent describing it as very clear. Ninety-five percent of the evaluators felt that the activities were effective in targeting issues relevant to children of divorce, with forty percent describing them as very effective. Ninety percent of the evaluators agreed that the guide was valuable in preparing them to implement music therapy techniques, with forty percent indicating that it was very valuable.

See Table 1 for the mean scores of questions #2-#6. Table 1 $\,$

Mean Scores of Questions #2-#6

	Questions #2-#6	Ľ	SD
2.	Overview valuable	4.4	0.55
3.	Music therapy valuable with children of divorce	4.7	0.39
4.	Style clear	4.5	0.53
5.	Issues targeted effectively	4.6	0.46
6.	Prepared reader to use music therapy techniques	4.6	0.46
6.			4.6

Note. Rating scores were 1 (lowest) to 5 (highest). See Appendix B for complete questionnaire.

Discussion

Several of the evaluators made additional comments and suggestions for improving the instructional guide. Twenty-five percent stated that they thought the suggested questions provided in the activities were particularly well-worded, and that they encouraged responses without imposing demands or restrictions on clients. Two evaluators thought that additional questions would be helpful for each activity. Several evaluators commmented that they felt the clarity and detail of the activities helped them to feel comfortable implementing the activities, even though they knew nothing about music.

Several of the evaluators described the guide favorably, using words such as "wonderful," "excellent," "well-done," and "impressive." Several of the evaluators stated that they planned to try some of the ideas presented, and two mentioned that as they read the guide, they had formulated new music therapy ideas to use in their work.

Two evaluators suggested that a more detailed description of musical instruments and where to purchase them be given in the section on analytical music therapy.

One evaluator felt that even after reading the guide, certain therapists would not be comfortable working with musical instruments in therapy.

One evaluator suggested that the effectiveness of the music therapy techniques would be influenced by the nature of the relationship between the therapist and the group. This evaluator felt that the guide should contain a discussion emphasizing that the activities be used with discrimination and careful consideration of the needs and development of the group members. Concern was expressed that some of the activities could potentially elicit material which may not be dealt with sufficiently during the session. It was suggested, therefore, that the need for follow-up therapy be emphasized. It was also suggested that the guide specify that certain techniques may be inappropriate for use with certain clients. For example, the guided imagery introduction might contain a statement clarifying that this technique is not recommended for use with borderline clients. This evaluator described music therapy as a "potentially valuable technique if used within the boundaries of an established relationship; as with therapy generally, it is also potentially explosive and/or manipulative."

An evaluator suggested that a video of the activities in a group session be developed to accompany the guide. This therapist noted that the creative, free atmosphere of this type of session was impossible to convey through a session plan alone.

An evaluator suggested that it may be helpful to some psychotherapists to include information on the issues of children of divorce in the guide.

An evaluator who was previously unfamiliar with music therapy stated, "It is useful to consider an alternative to speaking or word therapy, especially with children who may be struggling with very highly charged feelings."

In summary, the evaluators found the instructional guide to be a valuable resource for use by psychotherapists working with groups of children of divorce. These results support many previous studies indicating that music therapy can be very effective in psychotherapeutic treatment, such as: Bonny (1978), Priestley (1972), Grossman (1978), Slivka & Magill (1986) and Bunt, Pike & Wren (1987).

Recommendations for further work in this area include revisions of the instructional guide to

incorporate the suggestions of the evaluators. In addition, research measuring the effectiveness of a pilot music therapy program as a component of a group treatment program for children of divorce is indicated.

APPENDIX A INSTRUCTIONAL GUIDE

Instructional Guide

CHILDREN OF DIVORCE:
THE THERAPEUTIC USE OF MUSIC IN GROUP TREATMENT

Preface

An examination of the field of music therapy indicates that it offers a wide variety of resources that could enhance the quality of psychotherapeutic work with any client population. However, psychotherapists who are not trained music therapists may remain largely unfamiliar with these techniques. Professionals working with children of divorce may be able to improve their interventions through the incorporation of music therapy methods which have been demonstrated to promote psychotherapeutic gains. Consequently, the formulation of an instructional guide that introduces basic music therapy techniques and outlines a series of activities specifically designed for this client population may contribute to the effectiveness of interventions currently in use.

Table of Contents

Preface					٠.		٠.		• •	•	•		•	٠.	(1 .)				ii
Introduction	onn				٠.		٠.			•			•		•	•			. 1
Section I:	Music	Ther	apy	Ov	er	v i	ew	٠.	٠.	•		٠.	٠	٠.				٠.	2
Section II:	: Music	Ther	apy	Ac	ti	νi	ti	es	٠.	•		• •	٠	• •	•	•		•	.12
Lyric	Discuss	lon			٠.					•			٠	٠.		•			.13
\$	Session	#1			٠.	٠.	٠.	٠.	٠.	•									.14
\$	Session	#2			٠.	٠.	٠.		٠.	•						•			.17
Analyt	tical Mu	sic T	her	apy	٠.			٠.		٠			•			•		•	. 22
2	Session	#3			٠.	٠.		٠.							•	•			.24
5	Session	#4			٠.	٠.	٠.	٠.	٠.	•			٠			•			. 26
Gu i dec	d Imager	y and	Mu	sic	:	٠.	• •	٠.	٠.	٠	• •			• •	•	•	•//•	•	. 28
5	Session	#5					٠.		٠.						•	•	• •	•	. 29
Section II	I: Self-	Test	for	Cr	ea	ti	ve	A	PF	1	ic	at	i i	01	١.	•		•	.32
Bibliograph	ny																		. 36



Introduction

This instructional guide has been developed for use by graduate-level mental health professionals who are currently facilitating therapy groups for children of divorce. It is intended to provide them with the opportunity to expand their working knowledge of the expressive arts therapies to include the use of music therapy techniques as potential therapeutic tools.

Section I presents an overview of music therapy techniques for psychotherapeutic work with children and adults.

Section II introduces three music therapy techniques that may be effectively used as the basis for group therapy sessions: (a) song analysis, (b) analytical music therapy, and (c) guided imagery and music. A series of five step-by-step session guides illustrating the adaptation of these techniques specifically for use in children of divorce therapy groups is presented.

Section III contains a review section which provides opportunities for self-test and creative application of the techniques presented.

SECTION I

MUSIC THERAPY: AN OVERVIEW

Music Therapy

Bonny (1986) states, "Music therapy may be defined as "the systematic application of music as directed by the music therapist to bring about changes in the emotional and/or physical health of the person. As such, its functional rather than its aesthetic and entertainment aspects are emphasized." (p. 4)

The characteristics of music which contribute to its therapeutic use are as follows:

- Music is non-verbal. Verbal communication is linear and therefore limited to one level of communication. Music is multi-dimensional, crossing through verbal barriers and providing meaning on several levels simultaneously.
- 2. Music evokes emotional responses. It is used in love songs, funeral dirges and marches. These are general responses; more specific responses occur within each individual as music is listened to. Music is considered a mood changer due to its ability to influence our feeling states.
- Music evokes physiological responses. Rhythm,
 the energizer of music, is related to heart

rate, blood pressure, breathing and the whole multitude of vibrational periodicities that make up the body structures. The tension/release dynamic inherent in Western musical composition further enhance the rhythmic balances desired in good health... It is speculated that the production of morphine-like peptides or endorphins may be connected to certain musical experiences.

- 4. Music stimulates symbolic representation.

 Images, whether kinesthetic, emotional or visual are a part of treatment in various diseases.

 Carefully chosen music can effectively enhance the flow of imagery and fantasy or renewal of memories, where clinical situations dictate these as the treatment of choice.
- 5. The sensory stimulation of music can create synesthesias of other senses. Touch, taste, vision and smell are enhanced when music is deeply listened to, creating a basis for work with the sensorily handicapped. (Bonny, 1986, p. 4-5)

Music therapy is a broad field; it encompasses a

very wide range of diversified approaches that may be applied as indicated by the needs of specific client populations. Such client populations include the following: mentally retarded children and adults, handlcapped children and adults (blind, deaf, speech disorders, motor disabilities), alcoholic and chemical dependents, geriatric clients, behaviorally disordered children and adults, and children and adults undergoing psychotherapeutic treatment (Michel, 1976). Issues of relevancy to the designated topic, children of divorce, indicate that further discussion be limited to music therapy applications in psychotherapeutic treatment.

At the risk of oversimplification, one might separate music therapy situations into three basic categories: (a) music is present as background in the environment, (b) music is actively listened to, and (c) music is created.

Music As Background

Music as an element of the background can be a very powerful force. Rudolph Dreikurs (cited in Daklander, 1978) discusses the beneficial effects of music on several psychotic children:

Using music brought results in cases where other

approaches had failed. It seems that the pleasant experience with music, often merely in the background, stimulates participation, permits an increase in the child's attention span, and raises his frustration tolerance. External and internal tensions disappear, as reality becomes more pleasant and less threatening. The demands for participation are so subtle that they are not resented or defied.

(pp. 201-202)

Music and Active Listening

Recreational Music Therapy

The second category, which involves actively
listening to music, presents potentially unlimited
possibilities for therapeutic work. Within this category
lies a realm of recreational activities, particularly
useful in helping clients to achieve the following:

- Learning and relearning of constructive socialization skills
- Play therapy, or learning how to experience pleasure
- 3. Constructive use of leisure time
- Competitive games, or learning to cope with competition and conflict

(Plach, 1980, p. 61)

An excellent resource for developing recreational music therapy activities is <u>The Music Therapy Sourcebook</u>
(Schulberg, 1981). Included are activities such as:
Musical Bingo, Musical Crosswords, Musical Jigsaw Puzzle,
Name That Tune, Bean Bag Toss and Musical Charades.
Music Combined with Additional Expressive Media

A second group of music therapy resources which may involve actively listening to music are those which combine music with other expressive therapies (art, drama, writing, poetry, movement, etc.) to address issues, to stimulate the creative experience, and/or to aid in the development of group process stages. Examples of such techniques include the following (Plach, 1980):

(a) simultaneous application of media and music, (b) use of music prior to the application of secondary medium(s), and (c) use of secondary medium(s) prior to the application of music. Numerous examples of the techniques described above are provided in music therapy resource books (Plach, 1980; Schulberg, 1981).

Active Listening and Verbal Discussion

A very widely used technique is that of lyric discussion. This method involves listening to the lyrics

of a song that has been chosen on the basis of its content, followed by a verbal discussion of the thoughts and emotions it evoked in clients. (Schulberg, 1981; Plach, 1980)

Similarly, instrumental music of various moods and styles may be played, followed by discussion of personal reactions.

Guided Imagery and Music

Bonny (1973) developed the technique of Guided

Imagery and Music. This method uses music and relaxation
to facilitate an "Altered State of Consciousness." In
this state of heightened awareness, music is thought to
generate greater levels of emotional intensity and depth.
The melodies, harmonies and rhythms may take on meanings
to clients. This experience may provide greater insight
into the self, broaden one's perspective, produce a
heightened sense of empathy, unity, and a sense of the
divine. (Bonny & Savary, 1973)

This experience consists of a warm-up, the introspective experience, reorientation or "coming out" of the experience, and group sharing. There are four basic variations of Guided Imagery and Music (Bonny, 1973): (a) guided verbal imagery and recorded music;

(b) guided verbal imagery and live, improvised music;
(c) music with no verbal imagery (the imagery is
stimulated through the music alone); and (d) music with
no verbal imagery, traveler and guide (client works with
a nondirective, supportive guide).

Creating Music

Analytical Music Therapy

Valuable resources for psychotherapeutic work with clients are provided by a group of techniques known as "analytical" music therapy techniques (Priestley, 1975). These techniques involve the creation of music or sound by the client and/or therapist using musical instruments. Some of the available examples of analytical music therapy techniques are:

- Group and individual improvisations (open or on a particular theme, emotion, etc.)
- 2. Musical role-playing: The "sounds" of conflicting feelings are played, or the role of another person in the client's life is "played" by the client through creating sounds. The client may play out both sides of a relationship or internal conflict, or the therapist/group may play one aspect, creating a dialogue between

client and therapist/group.

 Reality Rehearsal: The feelings stimulated by an imminent decision are expressed through improvisation.

Any idea, emotion, conflict, relationship, etc. may thus be expressed through sound, creating an audible projection of the internal world of the client. The sound improvisations may be taped and played back to the client if desired.

Creating Music Combined with Additional Expressive Media

This group of techniques includes exercises requiring clients to (a) use sound expressions in response to other stimuli, or (b) use sound expressions to stimulate other creative expressions. Examples include: (a) Clients use instruments to express their reactions to pictures, stories, poetry, etc.; (b) clients use instruments to accompany a group member's verbal sharing, creating "audible empathy" (Moreno, 1984); and (c) clients create music for other group members to respond to through art, movement, poetry, etc. Also included in this category are songwriting activities (Schmidt, 1983).

It is obvious that the field of music therapy offers

a wide variety of approaches that may be of use to psychotherapists. Clinical research indicates that many of the techniques discussed above have been effective tools in psychotherapeutic work.

SECTION II
MUSIC THERAPY ACTIVITIES

Lyric Discussion

Lyric discussion is a technique that uses song
lyrics to evoke thoughts, feelings or reactions
concerning an issue which is of particular relevance to
group participants. It may be advantageous to present
the lyrics in typewritten form for reference purposes; it
is frequently difficult to understand all of the lyrics
while listening for the first time.

In its most basic form, this technique is used as a simple stimulus for verbal discussion. Session #1 provides an example of a plan for such a session. When used with step number five (optional), it illustrates the use of the word analysis technique combined with another expressive therapy form, writing.

In addition to writing, lyric discussion may be combined with other expressive therapies such as poetry, movement, art and visualization to create any number of possibilities for group experience. Session #2 is an example of such a combination. This session begins with a drawing exercise, then incorporates music, visualization, and verbal discussion.

SESSION #1

ACTIVITY: Lyric Discussion-- "Your Mother and I"*

MATERIALS: Tape recorder and musical selection

Lyric sheets Paper and pencils

GOALS:

- Facilitate group interaction and development of group cohesiveness through sharing of emotions and experiences.
- Facilitate the emergence of issues specifically relevant to children of divorce: guilt and self-blame, reunification fantasies, loss of the family unit, redefinition of family.
- Encourage communication of feelings and needs to family members.

PROCEDURE:

- 1. The facilitator may introduce the activity with a statement such as, "I am going to play a song for you. In this song, you will hear a father telling his children about his plans to separate from their mother. I would like for you to listen carefully and to notice any feelings, thoughts or reactions you experience while listening. After listening to the song, there will be an opportunity for you to share your reactions with the group."
- The musical selection is played, followed by a group discussion. The facilitator may ask questions such as the following:
 - "What thoughts and/or feelings were you aware of as you listened to the song?"
 - "Were you aware of any reactions in your body?"
- The lyric sheets are passed out. The group is asked to listen to the song a second time, reading along silently.
- The group members are asked to circle the line(s) that are most meaningful to them

individually. Group members are asked to share their choices with the group. Group interaction and/or personal work may follow.

The facilitator may initiate other questions if relevant to the discussion, such as:

"How were you told of your parents' plans to separate? What was your reaction (surprise, relief, etc.)?"

"Have either of your parents ever implied that you or the other parent were responsible for the failure of their marriage? If this did happen, how do you think you would react?

"Describe any actions by your parents that made you imagine they might get back together. Do you think that children can bring their parents back together?"

When discussing these issues, the facilitator can help the group to clarify that the failure of a marriage is the responsibility of the adults involved; although children and their behavior can be the subject of parental arguments, they are not powerful enough either to destroy or repair a marriage. Children can be encouraged to ask parents to refrain from blaming/criticizing each other in their interactions with the children. Children can be encouraged to ask for more consistent and/or more satisfactory arrangements for time spent with the noncustodial parent, etc.

5. The group session may be brought to a close at this point or the following activity may be added. The group members are asked to write a message to each of their parents, expressing any thought, emotion or request. These are then shared with the group. The group members may or may not choose to actually share these messages with their parents.

*"Your Mother and I," recorded by Loudon Wainwright III on Demon Records.

YOUR MOTHER AND I

Your mother and I are living apart
I know that seems stupid but we weren't very smart
You'll stay with her, I'll visit you
At Christmas, on weekend, in the summertime too

Your mother and I are not getting along Somehow, somewhere, something went wrong Everything changes, time takes its toll Your folks fell in love, love's a very deep hole

Your mother and I will do all we can do To work this thing out and to take care of you Families get broken, I know it's a shame It's nobody's fault though and you're not to blame

Your mother and I are both feeling bad But things will get better, they won't stay this sad And I hope when you grow up, one day you'll see Your parents are people that's all we can be

(Quoted from Wainwright, 1986)

SESSION #2

ACTIVITY: New Attitude

MATERIALS: Taped musical selection "New Attitude" *

Colored markers or crayons

Paper

GOALS:

 Facilitate group interaction and development of cohesiveness through sharing of emotions and experiences.

- Facilitate individual awareness of present mental/emotional state.
- Facilitate awareness of desired mental/ emotional state and related changes in attitude, behavior, and/or external events which may be necessary to realize this goal.

PROCEDURE:

- Group members are asked to close their eyes and take a few moments to get in touch with their present mental/emotional state or "attitude."
- 2. Group members are asked to use lines, shapes and forms to create a visual representation on paper of this "attitude." Clients may be told to experience their feelings, and then without thinking, simply allow these feelings to "flow onto the paper" in their appropriate shapes and colors. It may be helpful to emphasize that there is no "correct" or "incorrect" way to do this exercise; it is merely an expression of an internal experience. Allow 5-10 minutes for this activity, encouraging simplicity.
- Group members briefly comment/explain their drawings.
- 4. The facilitator introduces the listening portion of the activity with a statement such as, "We are going to listen to a song in which a woman sings about her attitude. Although you have probably heard the song many times, please listen very carefully to the words. What is

the message that the song conveys to you?"

- The musical selection is played. Group members are asked to share comments and/or reactions.
- The musical selection is played a second time. preceded by an introduction such as the following: "As we listen to the song a second time, I would like for you to close your eyes and visualize yourself. Imagine that the song is about you, personally. As you listen to the words, see the image of yourself reflect the message of the song. You may see changes in your face, body, clothing, movements, feelings. or surroundings. Let yourself experience a "new attitude" in some way. Let this be an enjoyable, relaxing experience, as the music carries you." Group members may choose to lie down during the visualization. The facilitator may do a warm-up relaxation exercise first if necessary. The facilitator may continue to provide verbal suggestions during the song if additional structure appears to be necessary.
- 7. Group members share their visualization experiences. The facilitator may encourage group and/or individual discussion with questions such as:

"What differences and similarities are there between the attitude you were aware of at the beginning of this session and your 'new attitude'?"

"What external changes in your life would help you to have the 'new attitude' represented in your visualization? Are these realistic possibilities?"

"What internal changes would help you to have the 'new attitude' that you imagined?"

^{*&}quot;New Attitude," recorded by Patti LaBelle on MCA Records.

NEW ATTITUDE

Running high, running low I was running into overload It was extreme

I took it so high, so low There was no where to go Like a bad dream

Somehow the wires were crossed The tables were turned Never knew I had Such a lesson to learn

I'm feeling good from my head to my shoes Know where I'm going and I know what to do I tidied up my point of view I've got a new attitude

I'm in control, my worries are few Plus I have love like I never knew Ooh ooh ooh ooh I've got a new attitude

I'm wearing a new dress, new hat, Brand new ideas, as a matter of fact, I've changed for good

It must have been the cool night, new moon, Slight change, can't figure out Why I feel like I do

Somehow the wires were crossed, The tables were turned I never knew I had Such a lesson to learn

I'm feeling good from my head to my shoes Know where I'm going and I know what to do I tidied up my point of view I've got a new attitude. I'm in control, my worries are few Plus I've got love like I never knew Ooh ooh ooh ooh I've got a new attitude

Somehow the wires were crossed, The tables were turned Never knew I had Such a lesson to learn.

I'm feeling good from my head to my shoes Know where I'm going and I know what to do I tidied up my point of view I've got a new attitude

I'm in control, my worries are few Cause I've got love like I never knew Oooh ooh ooh ooh I've got a new attitude

(Quoted from LaBelle, 1983)

The following songs may provide appropriate material for the development of additional sessions (Plach, 1980):

- "Pen In Hand," recorded by Bobby Goldsboro, United Artists Records
- "Daddy's Little Man," recorded by Mac Davis, Columbia Records
- "Autumn of My Life," recorded by Bobby Goldsboro, United Artists Records
- "Never Was A Day," recorded by The 5th Dimension, Bell Records
- "Changes," recorded by Olivia Newton-John, MCA Records
- "You'd Better Sit Down Kids," recorded by Sonny and Cher, Kapp Records

Analytical Music Therapy

In Sessions #1 and #2, music was used as a stimulus to evoke thoughts and emotions. In Sessions #3 and #4, music or sound is used as a vehicle for the expression of thoughts and emotions of the group participants. These sessions provide examples of the use of analytical music therapy techniques. These techniques are often particularly effective with clients who have difficulty expressing themselves verbally. They also emphasize the importance of attentive listening. Analytical music therapy approaches provide unique opportunities for the individual and the group to interact, creating experiences and communication at nonordinary levels. Such experiences often generate new perspectives and facilitate increased insight.

As with the previous techniques, these various "sound improvisations" may also be used in combination with other expressive therapy techniques. For example, group members may be asked to express in a drawing the feelings conveyed to them through another person's musical expression. One half of the group may be asked to move in response to an improvisation by the other half of the group. Group members may be asked to "accompany"

a person's verbal expression using musical instruments.

The possibilities are unlimited.

SESSION #3

ACTIVITY: Group and individual musical improvisation

MATERIALS: Assorted rhythm and wind instruments

GOALS:

 Facilitate the awareness and verbal/nonverbal expression of emotions.

Facilitate group interaction and the development of group cohesiveness.

PROCEDURE:

- The musical instruments are placed in the center of a circle made by seated group members. The group is invited to experiment with the instruments by hitting and/or blowing to create different sounds. Each group member is encouraged to try several instruments.
- Each group member is asked to choose an instrument for a group improvisation.
- The facilitator may introduce the activity with a statement such as,

"Each week we meet and communicate with each other by using our voices to make sounds or words. These words convey messages. Today, we are going to communicate with each other by using instruments to create sounds."

- 4. The facilitator begins the improvisation by playing an instrument. The group members are asked to join in the improvisation one at a time. They may participate in the order in which they are seated in the circle, or whenever they feel ready. They are asked to listen very carefully to the sounds made by the group.
- 5. The group improvisation is followed by a discussion of the experience. The facilitator may ask questions such as:

"What did you experience as you played?"

"How did our improvisation change as it evolved?"

"What did you notice about the roles each of us assumed during the improvisation?"

"Are you aware of any similarities or differences in the roles we took during the improvisation as compared to the roles we each normally take in our group interactions?"

The discussion may provide insights as to which of the group members chose a leading role, a dominating role, a passive role, an inactive role, a conflicting role, etc.

- 6. The group is asked to create a group improvisation conveying a particular emotion. Group members suggest different emotions such as sadness, anger, confusion, happiness, etc. which form the basis for improvisations.
- 7. The group members are asked to choose instruments and to use them to convey to the group their feelings about life at the present time. During each individual's "solo" improvisation, the other group members are asked to listen to the sounds very carefully to hear the message being conveyed. After each "solo," the group responds with its interpretation of what was expressed. The soloist does not respond verbally until all group members have given their reactions. The soloist then explains verbally the message of the improvisation. The facilitator may respond with interventions at the group or individual level.

SESSION #4

ACTIVITY: Family Sounds

MATERIALS: Assorted rhythm and wind instruments
Tape recorder and blank tape (optional)

GOALS:

- Facilitate the awareness and verbal/nonverbal expression of emotions.
- 2. Facilitate group interaction and the development of group cohesiveness.
- Facilitate insight into familial roles in both parental households.
- Facilitate the acceptance of parental separation/divorce and the redefinition of the family.

PROCEDURE:

- The musical instruments are placed in the center
 of the circle made by seated group members.
 Group members are asked to experiment with the
 instruments by hitting and/or blowing to create
 different sounds. They are encouraged to
 experiment with several different instruments.
- A group member is asked to choose a particular instrument to represent "Mom." The person then chooses someone to play this instrument, demonstrating to them the exact sound, intensity, rhythm, etc. to use as a representation of "Mom."
- The group member then chooses instruments to represent each of the other members of the mother's household, demonstrating the desired sounds and assigning them to group members.
- The group member chooses an instrument for selfrepresentation.
- All of the group members who have been assigned instruments play at the same time, creating a

"sound"representation of the person's family. The group member may instruct the individual players to change their sounds in various ways (sounds, volume, etc.) until the representation is considered satisfactory.

- 6. (Optional) The musical representation is recorded, then played back to the group. After listening to the recording, the facilitator asks the individual and the group for any thoughts, emotions, or other reactions to the exercise.
- If the exercise is not recorded, the group discussion should immediately follow the exercise.
- The exercise is repeated until each group member has had a turn.
- 9. The exercise may be repeated with the paternal household as the focus. This may be most effective if used as the basis for a separate session, depending upon the time available and the attention span of the group participants.

Gulded Imagery and Music

Guided imagery and music is a technique developed by Helen Bonny (1973). There are many variations of this technique available, some providing a great deal of structured verbal guidance over a background of music, others relying on the music alone for structure. The following exercise is an example of the use of a specific theme, the "safe place," as a basis for a visualization exercise, with a relaxing musical accompaniment. The background music is used with the intention of facilitating a relaxed mood, enhancing the visualized peaceful setting, and providing a nonintrusive structure for the experience.

SESSION #5

ACTIVITY: Safe Place (Guided Imagery and Music)

MATERIALS: Taped musical selection "Spectrum"*
Tape recorder

GOALS:

1. Develop stress reduction techniques.

- Develop coping mechanisms for dealing with a chaotic and/or changing environment.
- Facilitate group interaction and the development of group cohesiveness.

PROCEDURE:

 Warm-up: It is advisable to begin a guided imagery exercise with a short physical/mental warm-up. This is particularly helpful when working with a group that is unfamiliar with guided imagery and relaxation techniques.

Body stretches which slowly move from the neck and shoulder area to the arms, torso, and legs provide release from muscular tension, setting the mood for mental relaxation.

A short breathing exercise follows the physical warm-up. Group members are asked to close their eyes and to inhale slowly through the nose until the chest has fully expanded. The breath is gently held for a few seconds, then slowly released through the mouth. This is repeated three times. This may be performed while seated or while lying on the back.

2. The facilitator asks the group members to remain lying down on their backs with their eyes closed. The music begins. The facilitator speaks in a quiet tone of voice with frequent pauses, guiding the group members to a "safe place" within the imagination. The nature of the "safe place" should exclusively be the creation of each individual; the vocal guidance should provide some structure while remaining fairly nonspecific in content. The following is an example:

"As you listen to the music, imagine that you are walking in a very beautiful setting. As you walk, you become aware of the entrance to a path before you in the distance. As you approach the path, you realize that it is a path that has been created especially for you. It is the path to your very own completely safe place; a place in which you can feel totally peaceful, totally relaxed, totally safe. You begin to walk along the path, enjoying the beauty which surrounds you. You notice the colors around you, the sounds, and the smells. As you walk, you feel more and more relaxed, more and more peaceful. Soon you become aware that you are approaching your destination. Ahead lies the end of the path and a clearing which is your very own place of safety. When you are ready, enter your safe place. Here, there is only peace and calm; there is nothing that can disturb you or harm you. You may find that you are alone, or that other people or animals are with you. Let yourself be completely relaxed, and enjoy your "safe place." I will let you know when it is time to return. (Allow five to ten minutes).

In a few minutes, it will be time to leave your safe place. Although you will be leaving, you realize that it will be easy to carry back with you the experience of calm and safety that you are now enjoying. (Allow two to three minutes).

It is now time to begin your journey back. Say good-bye to your "safe place," but know that it will be there whenever you choose to return. As you begin your walk along the path back, you are aware that you feel completely calm and relaxed. (Allow one minute). When you are ready, you may become aware once again of your presence here in this room. (Pause) When you are ready, you may open your eyes.

 Group members are asked to share their guided imagery experiences. Optional: Group members may be asked to draw their "safe place" with crayons or colored markers before sharing. 4. The facilitator may bring up the issue of the "safe place" in reality. During separation and divorce, there are usually many physical and emotional changes which occur. Group members may discuss issues such as the following: "Which people, places and/or situations in your life feel 'safe' to you?"

"Which people, places, and/or situations in your life feel 'unsafe' to you?"

"Are you aware of which qualities make a place or person seem 'safe' or 'unsafe' for you?"

"How can you help to create a 'safer' environment for yourself?"

^{*}Spectrum Suite, recorded by Steve Halpern on Sound Rx.

SECTION III SELF-TEST FOR CREATIVE APPLICATION

Review Section on Lyric Discussion

- 1. Define lyric discussion.
- 2. Use the song "Your Mother and I" (Session #1) to design a new session plan that combines music and a secondary expressive medium such as art, drama, or movement.

3. What current songs could be used to form the basis for additional lyric discussion sessions?

Review Section on Analytical Music Therapy

Define the following:
 group improvisation

individual improvisation

reality rehearsal

audible empathy

Design a session that combines analytical music therapy techniques and art.

3. How would you use analytical music therapy techniques to help a child who feels torn between two parents?

Review Section on Guided Imagery and Music

- 1. Define Guided Imagery and Music.
- 2. Name the four variations of GIM.

a)

b)

c)

d)

- 3. What are the stages of a GIM session?
- Create another GIM exercise that would address an issue(s) of children of divorce.

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APPENDIX B

QUESTIONNAIRE

Evaluation of Instructional Guide

Check Ye	es or No.			
1. Did	the activities	presented	in the guide	
(a)	individual then			cussion and
(b)	use music in comedia to expres the basis for	ss ideas a	nd emotions w c work?	expressive which formed
(c)	use music creathe expression	ted by cli of ideas Yes No	and emotions?	icle for
2. In your		w valuable	was the musi	c therapy
1	2	3	Valuable	Verv
Value	Of Little Value	Sure	valuable	Valuable
mig	valuable do you ht be in work wi	th childre	en of parenta	l divorce?
1	2	3	4	5
Of no	Of Little Value	Not	Valuable	Very
Value	Value	Sure		valuable
	would you rate sentation of act		ty of style in	n the
1	2	3	4	5
Not	Slightly	Not	Clear	Very
Clear	Clear	Sure		Clear

•	PROPERTY AND ADDRESS OF		4	
Not	Slightly	Not	Effective	
Effective	Effective	Sure	E	Effective
6. How va	luable was th		n preparing you	to
	ent music the	rapy techn	iques?	
implem	ent music the		iques? 4	5
implem				5 Very

7. Comments:

APPENDIX C

COVER LETTER

Dear

I am writing to request your input concerning the enclosed instructional guide. Please take the time to review it and to answer the accompanying evaluation questionnaire. Your feedback is very important and will help to determine any changes made to improve the guide.

Thank you very much for your assistance with this project.

Sincerely.

Kathy L. Bearman

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