Full-Length Article

Addressing Community Concerns Through Music

Penny Brill[1], Emily Menhorn[2]

[1]PSO Music and Wellness; Pittsburgh Symphony, USA.

[2]Childrens Hospital Oklahoma Medical Center, USA.

Abstract

Orchestras are responding to changing demographics and concerns regarding inequality, poverty, community trauma and racial tensions by developing innovative programs that serve the community. My purpose in describing the 2 contrasting programs below is to illustrate the difference in the orchestra players' effectiveness when they are able to team with professionally trained music specialists. I will demonstrate how working alongside specialists with experience and training, and in particular, music therapists, to help plan and implement community programs, enables them to be more effective in addressing community concerns.

Keywords: ***community programs, music therapists, orchestras, special needs.*** multilingual abstract | **mmd.iammonline.com**

Introduction

For several decades, orchestras have been expanding their offerings to include not only concerts held at their primary hall, but programs before and after school and events at hospitals, prisons, homeless shelters and other venues. [1] Orchestras are responding to changing demographics and the increasing concern with inequality, poverty, community trauma and racial tensions with innovative programs and music collaborations addressing social issues.
But some questions remain:

- How *else* can we as both musicians and citizens connect to our community in meaningful ways?
- How effective are our current efforts?
- How could we be more effective?

In other words, we are asking ourselves *how we can develop high impact* ***client-based*** *programs to effectively address the primary concerns of our communities.*

It is heartening to note the large number of orchestra-initiated projects that are ongoing attempts to address community concerns. Getty Foundation Grants [2], for instance, issued through the League of American Orchestras, are speeding the process of developing programs. [3]

In looking at what small groups from our orchestras are currently undertaking to address community issues, projects seem to fall into 4 main categories, with some overlap:

- **Special Needs**: [4,5]

  Producing concerts, music camps or other interactive events for autism- spectrum and other special needs audiences.

  Producing sensory friendly concerts, events at special needs schools, and presentations for special needs classrooms.

- **Health and Healing**: [6,7]

  Playing in the hospital, hospice or eldercare facilities for patients and families; playing concerts for hospital or citywide memorial services or tributes; playing at cancer support centers.

  Presenting workshops at community centers, libraries or workplaces on the use of music for stress reduction.

  Promoting use of music for exercise and health at health fairs.

  Producing concerts or programs to reduce racial or ethnic tensions.

  Developing refugee programs using music to help with trauma and the transition into our communities.

PRODUCTION NOTES: Address correspondence to:
Penny Brill PSO. E-mail: pabrill@pittsburghsymphony.org | COI statement: The authors declared that no financial support was given for the writing of this article. The authors have no conflict of interest to declare.

Copyright © 2016 All rights reserved.
International Association for Music & Medicine (IAMM).

Playing with or for veterans in rehab, dementia units and hospice.

Playing as part of Justice System long-term projects to help former inmates reconnect with community and build self-respect.

Developing PTSD healing programs for vets and traumatized families or communities.

Working with homeless in the medical setting as well as in shelters.

Working as a team with music therapists in palliative care. [8]

- **Relief efforts**:

  Presenting concerts as fundraisers for food banks, earthquake relief, homeless programs, prisoner rehab or other causes

- **Education**

  Supporting El Sistema or similar programs for underserved schools or neighborhoods.

  Developing after-school or summer enrichment programs. Presenting a series of interactive workshops in the classroom.

  Teaching Artist multiple- week programs or workshops that encourage creativity and expression.

  Creating music fellowships, internships or other training programs.

  Creating cultural and other learning opportunities through music for refugees and other newcomers, connecting them to their new home.

As we look at the proliferation of orchestral community engagement programs in these areas, we see some common threads that are present in the more successful projects:

Goals are realistic, e.g.: the presentation "fosters and encourages community," "exposes the participants to arts and culture," or "provides a tool for reinforcing positive behavior." [9]

Musicians: Musicians can opt in but are not required to be part of the program.

- Staff determine the best instruments and players to suit the circumstances.
  Not all players are suited to the programs.
- There is a player who is experienced in Education, Special Ed, Music Therapy, trauma or music for healing who can help musicians select and obtain the music they need for the occasion.
- Musicians regularly undergo training by a Special Ed teacher or Music Therapist in what to expect from their audience. They learn the basics of *client-based* programming: they learn how to adapt their pieces and the playing on their instruments to the goals of the program, and how to choose music appropriate to the audience.
- Musicians include players who have the ability to adapt quickly to changing circumstances. The ability to improvise is a plus.
- Participating musicians are a specific small group authorized to do this work as part of orchestral services, or players from a subset of the orchestral musicians. Orchestras have more options and can create a better match to audience needs if they include a larger pool of musicians. The program may need someone to do the speaking who is not one of the players.

Documentation: Staff makes videos and gives surveys to document outcomes.

Facilitators: Special Ed teachers, early childhood specialists or Music Therapists help shape and guide the programs, and may participate in the actual program.

An orchestra often does presentations with musicians only, with staff providing support in transporting instruments and supplying music; but let us examine the difference in impact and effectiveness if symphony musicians team with a music therapist.

Let's examine two presentations we did recently.

Program I:

The **first** of these presentations involved a symphony cellist, and the author, playing violin. The program was held at a K-12 special needs school. We played twice, once for K-8 students and again for 9-12. There were 30-40 in the younger group and 20-30 in the high school group.

Having never been to the school, I knew very little about the students and how they would respond, so after we introduced ourselves I picked up the ocean drum from the collection on the tables behind us. I started tipping the ocean drum and asked the students what it sounded like (all answers accepted): "How many of you have been to the ocean? How many have been in the rain? So what do you think this instrument is called?" I had some of them try tilting the drum

and experimenting with it. With the children watching the beads move as well as actively making the sound change the ocean drum was a very effective way to engage the audience. Then I introduced the rain stick and asked them what it sounded like (Some thought it sounded like a creek or a waterfall)

By this time we were getting more comfortable with each other, so next I asked them to sing the tones that the cellist gave them, trying to match pitch. They were a bit hesitant at first but gradually produced a sound. The cellist and students kept up the drone while I played a bagpipe melody, Signal Mountain Sunrise, over it, so together we WERE the bagpipe.

Then I introduced the bagpipe version of The Water is Wide and ask if anybody knew what the song was called. I read the words, and then the cellist and I played the song. I encouraged them to hum or sing the melody if they knew it and fed them the next lines whenever I had a long note.

For the K-8 group we sang/played "Are You Sleeping," first together. Then we divided the room into two parts and sang it as a round. We sang/played "Row, Row, Row Your Boat." Then we had half the room sing "Are You Sleeping" while the other half sang "Row, Row, Row Your Boat" at the same time.

The next round, "Hey Ho, Nobody Home" I taught in sections: "Hey ho, nobody home," then "meat, nor drink, nor money have I none." Depending on the response, the cellist kept going with the song while everybody else stayed on "hey ho, nobody home."

When working with the high school students, I started with "Hey Ho, Nobody Home."

Next I asked everyone to stand.

(For the older students I asked someone to play a big drum.) I asked them to start marching and to listen to the sound of their feet so they all would all step together. (Add drum) I said, "Now listen as we start 'Old Joe Clark' because we may change speed..."

After we played that song, we had the students each receive percussion instruments.

We played the "Chicken Reel." I asked them "What movements does a chicken do; what sounds does it make? Why is this called 'Chicken Reel?' It suddenly stops and starts, so listen for the changes."

We ended this activity with "Pennsylvania Polka" (some sang and knew the words.) As the song ended, I played a loud tremolo note and encouraged them to respond loudly, then softly, then loudly; then we all did a big crescendo and then stopped together. Anyone with a percussion instrument put it under their chair.

They sat.

I ask if anybody had ever gone ice-skating or roller-skating. I indicated that their Phys Ed teacher would lead them as they moved to "Skaters Waltz" and "Take Me Out to the Ball Game" (they ended up moving and singing along.)

The cellist told them about his instrument: who made it, when and where. He played a Bach Prelude (On other occasions he has played erhu with someone accompanying on a drum.)

We ended with "Saturday Night Waltz." With the remaining time K-8 tried out percussion instruments.

For the older students, after the cellist played his solo they pulled out their percussion instruments, someone else started laying down the beat, and the cellist and I played "Swallowtail Jig."

Discussion:

I could imagine a second visit with different players, but I would be hard-pressed to come up with new material if only the cellist and I were the ones to return.

Program II:

For the **second** event, a music therapist, an orchestra percussionist and the author, playing viola, presented for a high school special needs class of 30-35 students at their local library. A year earlier I had done an interactive session with this same group, but with the orchestra cellist from Program I. So they were familiar with me and I recognized many of them.

Preparation: This time the music therapist and I made a number of planning phone calls and emails: she sent a tentative outline, I gave feedback and send her copies of possible pieces, and she chose from them. We decided who would bring what instruments and agreed that she would lead the session. We set goals for the session: we would work on impulse control, following directions, and responding appropriately.

Setup: We set up in a semi –circle, with percussion instruments in the middle, from which they could choose.

The three of us interacted with participants as they got settled and picked percussion instruments. The percussionist and the music therapist initiated some short one-on-one percussion conversations to get some of the kids on board and get acquainted. The percussionist and I also encouraged or showed kids how to tap or hit instruments gently.

We introduced our instruments and ourselves.

Since the students were eager to play their instruments, I played "Lannigan's Ball" while the students interacted with the music therapist and the percussionist. Next, the music therapist led "What is Your Name:" She played a rhythm for the phrase "What is your name?" and went around the semi -circle. Each person had a turn to play their instrument using the rhythm created by saying their name. The rest of the group responded back (in their own

way) by echoing the rhythm and name. The percussionist and I helped guide the students' responses.

We began a call and response: I played a walking bass line while the music therapist prompted her audience to repeat after her the rhythms she played on her instrument. Our percussionist reinforced her rhythmic patterns so the group heard them more clearly. The music therapist varied dynamics and tempo so that by the end of the experience the audience was playing fast and loudly. The percussionist supported the exchange as he saw opportunities, looking out for any who might find it too loud. This activity was followed by me playing the "Pennsylvania Polka" and letting the students improvise throughout the song. The percussionist helped engage kids who were not responding.

The music therapist initiated a story, "traveling through the jungle," using instruments. She started the story with the person holding the ocean drum, imagining we were near the ocean or a waterfall. Someone added the sounds of the rain stick, and then castanets as the story developed. The audience called out and played the sounds of animals they saw in the jungle. She sped up the tempo to signify running and otherwise varied the sounds to keep the students' attention.

Then the instruments went under the chairs and all who were able to stood up for a movement activity led by the music therapist. I played "Swallow Tail Jig" (an upbeat song). The percussionist provided percussion support and nonverbally suggested rhythmic ideas and variations. This went on for a while! Then they sat back down. Using foam balls, the music therapist introduced a game using the song "Take Me Out to the Ball Game." She asked her audience to choose a number that she could use as part of the game. She encouraged half of the audience to sing while the other half of the group held foam balls (working on impulse control). Once she called out the number, that was the signal for the kids to try to throw the balls into the laundry basket placed on the floor near her. Then the balls were handed over to the other half of the kids and they also tried to make a basket.

The next part of our program featured our percussionist playing a solo on a practice pad, because a snare drum would have been too loud for that group. The students were ABSOLUTELY quiet for this, with one student totally immersed in the sound, swaying his whole body in time to the tempo.

Later the percussionist did a demo of the talking drum as well as the free wing instrument.

Our final activity was relaxation movement - I played "Molly Malone" while the music therapist had the audience take deep breaths and use gross motor movements, stretching and breathing techniques. The movement quieted down until the students became very still, listening to the viola playing the song as a solo. The percussionist supported this activity on percussion as needed.

The music therapist played two guitar songs as the percussionist and I handed out fidgets [1] and picked up instruments. She kept playing as we all clapped in rhythm.

Results:

What did I notice about this follow-up event?
The class remembered me from last year, so they were immediately more comfortable and open to following directions trying out new activities. The group was more unified and outward directed, responding, listening, imitating and reacting to us. They were VERY attentive as the percussionist played. Our student tambourine player latched onto the same instrument this year as last year but was willing to try soft use of covered sticks and gentle taps with hand and fingers, as opposed to hitting the drum forcefully. And he stopped when asked, showing much more restraint and control. He paid more attention to what others were doing and to what the tempo was. Success!!!!

<u>The Music Therapist's Perspective</u>

When I was invited to collaborate with professional musicians on a session for high school student with special needs, I was eager to jump on board. My initial question was "what goals and outcomes do we want to set for these students?" It was very helpful having the musicians give me insight on the students from their previous experiences with them so that I could create goals for the session. Once I set the goals, and because of my extensive training as a music therapist, the musicians trusted me to create the activities we would do. Then we were able to collaborate in selecting music, instruments and timbres that would enhance positive outcomes. This was a key element of our pre-planning. Having professional musicians with their advanced skills and extensive repertoire made the planning process easy.

<u>Observation</u>

Working with a group of 30-35 students, each with very different needs, can be challenging in a group setting, but I found the experience was smooth and seamless. The support from the musicians only enhanced attention and responses from the students. From the ostinato bass line in one activity and the full percussion embodiment in another, to the traditional fiddle song that made students want to dance, having a musician-music therapist team created an environment and sound that benefited the students so they were able to grasp many aspects of the concepts presented. Because there were other musicians in the room, I could focus

[1] The particular fidget we used is in the form of a baseball, with added moveable arms and legs. Fidgets are used for calming and quieting agitation or anxiety.

on being the therapist and tend to the student's responses while the other players paid attention to the music. The different timbre, color, and styles that they provided only increased the effectiveness of our goals.

Inference

The collaboration of trained music professionals with a board certified music therapist provides a unique, powerful and stimulating environment that could benefit the needs of many individuals across their communities.

DISCUSSION:

What was the difference between the two events in the level and depth of the interaction?

From my perspective as a performer, with Program II the burden of planning and presenting was on the music therapist, so the percussionist and I were free to do what we knew best: play. The music therapist knew a great many ways of approaching the event, and could design many activities around the specific goals of the session. By the same token, the music therapist was also glad to have professional musicians as part of the team: because of this collaboration, the music therapist had a greater range of sounds, colors and styles of music. She could use the sound quality of live professional musicians to increase her effectiveness. She could keep her focus on the actions and reactions of the audience.

I could easily imagine further sessions using the same musicians guided by the music therapist: sessions designed to increase appropriate social behaviors and decrease inappropriate behaviors, increase attention to tasks, increase vocalizations, verbalizations, gestures, vocabulary and comprehension, increase communication and engagement with others, enhance body awareness and coordination, and reduce anxiety. Each session could build on the previous one, having a lasting, cumulative effect. Including a music therapist makes invaluable life skills training possible.

References

1. Polly Kahn. American Orchestras Making a Difference in our Communities. A Working Guide to the Landscape of Arts for Change. Animating Democracy, a program of Americans for the Arts. Available at: http://animatingdemocracy.org/sites/default/files/Orchestras_TrendPaper.pdf
2. The Getty Education and Community Investment Grants Program. LOA website. Available at: http://www.americanorchestras.org/youth-education-community/getty.html
3. Community Impact and Engagement: Orchestra Story Bank. Available at: http://www.americanorchestras.org/advocacy-government/orchestra-story-bank.html
4. Wise, Brian. New Notes on the Autism Scale. Symphony Magazine. Available at: issuu.com Fall 2015. 62-68.
5. Notes from the Heart Music Camp. Available at: Notes From the Heart Music Camps | The Woodlands mywoodlands.org/woodlands-programs/notes-from-the-heart/
6. Drinan, A. Orchestral Health and Wellness Programs. Polyphonic.org Website. Available at: http://www.polyphonic.org/article/orchestral-health-and-wellness-programs/
7. Lane, C. Sounds of Healing Symphony Magazine. Available at: issuu.com Spring 2013. 24-29.
8. Curtis, S. Music Therapy and the Symphony: a University-Community Collaborative Project in Palliative Care. Music and Medicine Vol. 3 no 1 (2011). Available at: https://www.researchgate.net/publication/258172723_Music_Therapy_and_the_Symphony_A_University-Community_Collaborative_Project_in_Palliative_Care,
9. NJSO Autism program. Available at: http://www.njsymphony.org./education-community/njso-autism-community-program

Biographical Statements

Penny Anderson Brill has been a member of the Pittsburgh Symphony viola section since 1980. She founded the PSO 's Music and Wellness Program, which she began to develop in 1999 as she was completing treatment for breast cancer. She is currently on the board on MAGR (Musicians as a Global Resource) as well as the board of IAMM and has won many local and national awards, including most recently a 2016 League of American Orchestras (LOA) Ford Musician Award for excellence in community service.

Emily Menhorn MT-BC is a graduate of Shenandoah University. She interned at UPMC Childrens Hospital in Pittsburgh and is currently working in a Contract Research position at Childrens Hospital at Oklahoma University Medical Center.

Resources for enriching the design of orchestral community-based programs

Hesser, B. and Heinemann, H. *Music as a Global Resource Compendium,* Solutions for Social and Economic Issues. Available at: http://unpan1.un.org/intradoc/groups/public/documents/un-dpadm/unpan048664.pdf
United Nations, NYC; 2011. Accessed January 19, 2016

Berger, D MT-BC *Eurhythmics and Autism* Dorita Berger is a concert pianist, educator and music therapist.

Musicians Without Borders. Available at: www.musicianswithoutborders.org,

American Voices www.americanvoices.org

Lim, Hayoung. *Developing Speech-Language Training through Music*, for children with Autism Spectrum disorders. Philadelphia, PA: Jessica Kingsley; 2012.

Turino, T. *Music as Social Life*, the politics of participation. Chicago IL: U of Chicago Press; 2008.

Wilson, B., Editor. *Models of Music Therapy Interventions in School Settings*: from institution to inclusion. AMTA: Silver Spring, MD; 1996.

Loewy, J., Frisch- Hara, A. Editors. *Caring for the Caregiver:* the use of music and music therapy in grief and trauma. AMTA: Silver Spring MD; 2007.

Hanser, S and Mandel, S. *Manage your Stress and Pain Through Music.* Berklee Press; 2010.

Costa, A. Editor. *Developing Minds,* a resource book for teaching thinking. Chapter 54 Loring, R. *Music and Skillful Thinking.* Association for Supervision and Curriculum Development (ASCD): Alexandria VA; 2001.

Saul, J. *Collective Trauma, Collective Healing*. Promoting community resilience in the aftermath of disaster. Routledge: New York, NY; 2014.

Jensen, E. *Engaging Students with Poverty in Mind.* Chapter *7: Engage for energy and focus. Action #4 Influence energy levels with music*. 126-30. ASCD: Alexandria, VA; 2013.

Gorski, P. *Reaching and Teaching Students in Poverty*. Strategies for erasing the opportunity gap. Chapter 2 *Imagining equitable classrooms and schools for low-income youth. Effective strategies: art and music programs*. 32-33. Teachers College Press: NYC; 2013.

Barone, D., *Narrowing the Literacy Gap.* What works in high poverty schools. Guilford Press: NYC; 2006.

Foundation for Art and Healing. http://www.artandhealing.org/

Center for Arts in Medicine. http://arts.ufl.edu/academics/center-for-arts-in-medicine/

Turnaround Arts. http://turnaroundarts.pcah.gov/ "Turnaround Arts brings arts education programs and supplies to a group of the lowest-performing elementary and middle schools in the country."

Community MusicWorks. http://communitymusicworks.org/mission/ A model "centered around the teaching, mentoring, program design, and performance activities of musicians-in-residence, the Community MusicWorks Players."

NEA Military Healing Arts Partnership. https://www.arts.gov/partnerships/nea-military-healing-arts

America Music Therapy Association (AMTA). *http://www.musictherapy.org/*
"AMTA's purpose is the progressive development of the therapeutic use of music in rehabilitation, special education, and community settings."

Adding music to medicine. https://stanfordhealthcare.org/stanford-health-now/2008/music-program.html

Music Together Program. https://www.musictogether.com/

The Arts Education Partnership. http://www.aep-arts.org/
"The AEP of the Council of Chief State School Officers is dedicated to securing a high-quality arts education for every young person in America."

Department of Human Services. http://dhs.dc.gov/ Discusses SNAP (supplemental nutrition), PASS (parent and adult support), support for teen parents, housing and shelter programs, strong families program, family social services (protection, intervention), youth service shelters, homeless support services, refugee support, VA housing and support.

McCall, R. *Human Services- Do you know what they are?* Pittsburgh Post-Gazette [pub. December 13, 2015.] http://www.post-gazette.com/opinion/Op-Ed/2015/12/13/Human-services-Do-you-know-what-they-are/stories/201512130122