



A descriptive analysis of music therapists working with consumers in substance abuse rehabilitation: Current clinical practice to guide future research

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ABSTRACT

The purpose of this descriptive study was to examine music therapists working with consumers in treatment for substance abuse with the intention of using these data to design realistic and practical research studies and inform future music therapists of what to expect as a Board-Certified Music Therapist working with this population. The secondary purpose of this study was to assess job environment factors of music therapists and their perception of influence on clinical effectiveness within the substance abuse population. Participants reported that communication, coping skills, emotional expression, decision making, and self-esteem were the most frequently addressed clinical objectives. The 12 Step, cognitive behavioral, and dual disorders were the most frequently utilized treatment approaches while lyric analysis and music assisted relaxation were the most utilized music therapy interventions. Participants had been working with the substance abuse population for a mean of 11.69 years, enjoyed their work, and felt they had a positive impact upon treatment. A significant relationship was found between years as an MT-BC and perception of positive impact of music therapy, possibly indicating that therapists who had practiced longer felt they were more effective. There was a significant relationship between the music therapists' enjoyment of clinical practice and their perception of positive influence upon their consumers' treatment, possibly indicating that the more a music therapist enjoyed their work, the more impact they felt they had upon their consumers. Finally, a significant relationship existed between the music therapists' perception of treatment influence on their consumers and the percentage of consumers who had met their clinical objectives during the last week. Suggestions for additional research, implications for treatment, potential biases, and limitations of the study are provided.

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Review of literature

Drug abuse and addiction is a huge problem in contemporary society. In 2005, the Department of Health and Human Services estimated 22.2 million Americans were diagnosable with substance dependence or abuse based on DSM-IV criteria. Results of this intensive study also found that 23.2 million people in the United States required treatment for substance abuse related issues.

In 2005, an estimated 19.7 million Americans aged 12 and older were considered current illicit drug users. This estimate constituted 8.1% of the population in this age range. Approximately 2.4 million used cocaine and 6.4 million used prescription-type drugs in

a nonmedical manner in the last month. More than half (51.8%) of Americans in this age bracket reported being current drinkers of alcohol (Department of Health and Human Services, 2006).

The financial and personal costs of drug abuse are difficult to accurately measure due to various related health problems, lost productivity, failure to report, and under or misdiagnoses. One estimate noted that 25% of Americans die as a resultant of addictions. Further, 60–70 million Americans are directly affected by drug abuse. The report also noted that 33% of all suicides and 67% of felony arrests are addiction related (Bourdette, 2008).

Music therapy is an intervention that has been used in substance abuse treatment. According to 2007 data from the American Music Therapy Association (AMTA), 149 music therapists work in the substance abuse setting (AMTA, 2007). This constitutes approximately 4.6% of the AMTA membership. Although some literature exists, there is a considerable lack of quantitative research in the music therapy base concerning this population.

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Table 1
Responses to yes/no questions.

Question	Yes (%)	No (%)
Did you complete a music therapy internship in a substance abuse setting?	7 (28)	18 (72)
Do you present at national and/or region conferences?	18 (72)	7 (28)
Do you present in-services for your institution to educate staff about music therapy?	17 (68)	8 (32)
Do you supervise practica students?	8 (32)	17 (68)
Do you supervise interns?	7 (28)	18 (72)
Do you have access to a piano?	18 (72)	7 (28)
Do you have a music therapist as a supervisor?	4 (16)	21 (84)
Do you work with forensic consumers?	10 (40)	15 (60)
Do you educate your consumers about legal issues during music therapy treatment?	8 (34.8)	15 (65.2)

Jones (2005) conducted a study with 13 inpatients in detoxification. She utilized a pre-/post-test design and found that both songwriting and lyric analysis interventions induced positive emotional change in participants, but there were no differences between the effectiveness of songwriting and lyric analysis. In a related study, Cevasco, Kennedy, and Generally (2005) compared movement to music, rhythm activities, and competitive games with 10 females in long-term substance abuse rehabilitation. Similar to the positive results of Jones (2005), decreases were found in dependent measures of depression, stress, anxiety, and anger but there were no differences between different types of music therapy interventions. Silverman (2003) compared songwriting, music games, lyric analysis, and music and relaxation interventions in women in long-term addition treatment. A ceiling effect was noted for measures of therapeutic effectiveness and enjoyment but no differences existed between interventions. During single session music therapy, treatment was found to facilitate enjoyment and motivation to participate (Dingle, Gleadhill, & Baker, 2008) and provide patients with positive emotional experiences (Baker, Gleadhill, & Dingle, 2007).

Descriptive research techniques are valuable in that they can provide a wealth of information about specific questions they address. Results can be used to educate future clinicians about contemporary clinical practice or to design experimental research. In the music therapy literature, these studies have described aspects of the profession such as correctional psychiatry (Coddling, 2002), collaboration (Register, 2002), regional practice (Lacy & Hadsell, 2003), children with attention deficit/hyperactivity disorder (Jackson, 2003), and private practice (Silverman & Hairston, 2005; Wilhelm, 2004). These studies have helped inform future music therapists of what the profession involves within the framework of a certain clinical population. Further, data from these studies may be used to design realistic research studies that are based from current clinical practice.

A recent descriptive survey study examined psychiatric music therapists and their practice (Silverman, 2007). While the study provided an overview of this population of music therapists, the

method in which data were collected prohibited statistical analyses. Only descriptive results were provided due to the way the online survey tabulated data, thus limiting further analyses and potential generalization. Therefore, the purpose of this descriptive study was to examine music therapists working with consumers in treatment for substance abuse with the intention of using these data to design realistic and practical research studies and inform future music therapists of what to expect as a Board-Certified Music Therapist working with this population. The secondary purpose of this study was to assess job environment factors of music therapists and their perception of influence on clinical effectiveness within the substance abuse population.

Methods

Instrument

The 32-item survey was designed by the researcher and approved in advance by the researcher's affiliated institution and the American Music Therapy Association. Similar to Silverman (2007), therapeutic objectives were adapted from Coddling (2002) who, in turn, noted these objectives were identified by Nolan (1983), Thaut (1999, 1987), and Dunn vs. Voinovich (1995, 5). Separate Likert-type scales were used to evaluate how much participants enjoyed working with the substance abuse population and how effective they felt they were in addressing the needs of their consumers via music therapy treatment. Both scales were based on a 10-point range with 1 indicating not much enjoyment/not effective and 10 indicating much enjoyment/very effective. Throughout the survey, the term "consumer" was used synonymously with client, patient, or person receiving music therapy services.

Research participants

Research participants were all professional members of the American Music Therapy Association listed in the 2007 *Member Sourcebook* (AMTA, 2007) who identified themselves as working with the substance abuse population. A total of 149 members were listed in this section.

Procedure

The researcher emailed potential participants an introductory letter, consent form, and the survey in the body of the email. The researcher also attached the survey to the email in a locked word document. Participants were able to complete the survey in the body of the email or by downloading the word document, completing and saving it to their computer's hard drive, and sending it back to the researcher. If potential participants did not have an email address in the *Sourcebook* ($n = 10$) or the email was returned to the researcher ($n = 14$), the researcher mailed potential participants a survey with a self-addressed stamped envelope.

Table 2
Responses to quantitative questions.

Question	<i>n</i>	<i>M</i>	<i>SD</i>	Minimum	Maximum
How many years have you been MT-BC or RMT?	25	16.90	9.17	4	32
How many years have you worked at your institution?	25	9.88	6.66	.25	21
How many years have you worked with clients with substance abuse problems?	25	11.69	7.82	1	32
At maximum capacity, how many consumers can your facility accommodate?	21	286.90	461.01	16	1300
Approximately what percentage of your consumers are unemployed?	23	75.43	29.19	0.00	100.00
Approximately what percentage of your consumers have a DUI or DWI?	16	36.69	29.54	0.00	100.00
How much do you enjoy working with the substance abuse population?	24	7.42	2.41	3.00	10.00
How much positive impact on consumer's treatment do you have?	23	8.15	1.81	4.00	10.00
Approximately what percentage of your consumers have met their clinical objectives during the last week?	23	64.04	27.58	0.00	100.00

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