

Single-Session Educational Music Therapy in Acute Mental Health Settings

Michael J. Silverman, PhD, MT-BC
silvermj@umn.edu
www.researchgate.net



Brief Treatment

- 25.6 days in 1990 → 10 days in 2000
(National Association of Psychiatric Health Systems, 2002) →
7.2 days in 2015 (Centers for Disease Control & Prevention, 2015)
- Shift → Acute care/crisis stabilization
- Time limited therapy
 - Single-session therapy
- Music therapy: Cassity 2007 Delphi Poll



Contributing Factors

- Health Maintenance Organizations (HMOs), insurance companies, capitalist society
- Need to lower healthcare spending (Dobson & Dobson, 2009)
- Limit number of sessions/days (Nathan, Stuart, & Dolan, 2000)
- Treatment advances



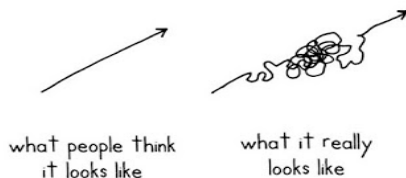
Personal Experiences

- 3-7 days: adult acute mental health units (Apalachee Center for Human Services)
- 72 hours: new unit (Austin State Hospital)
- 3-5 days: adult acute unit (Tallahassee Memorial Behavioral Health)
- 3-7 days: adult acute unit (Minnesota Health)
- 2-4 days: adult detoxification unit (Minnesota Health)
- Outliers



Acute Mental Health Care: Ideal versus Reality

<http://www.illgaming.in/2013/07/pushing-the-limits/>



Contemporary MT Literature

- Systematic review of music therapy for acute mental health care inpatients
 - Need: music therapy model specific to acute care adult mental health consumers
 - (Carr, Odell-Miller, & Priebe, 2013)
- Silverman (2015): Not psychotherapy; direct educational approach → practical illness management and recovery knowledge and skills



Contextual Parameters Dictate Approach

- Group-based (Silverman, 2007; Thomas, 2007)
- Brief treatment & acute care + group-based → Cognitive behavioral approach → Education
- Illness MGMT & Recovery = EBT
- Educational music therapy (EMT) for illness management & recovery (Silverman, 2015)
 - Education vs. psychoeducation
 - Congruent with aspects of medical model
- Direct, elegant, highly structured: Creative & engaging narrative to identify problems & solutions within lyrics & process



Single-Session Therapy

- Ultimate brief therapy
- Most common (Talmon, 1990)
- Mainstream (Cameron, 2007)
- Reduction of resources & demand for services (Bloom, 2001; Campbell, 1999)
- Approach philosophically different but NOT condensed (Bloom, 2001; Kaffman, 1995; Talmon, 1990)



Single-Session Techniques

- Variety, but idiosyncratic to person & needs (Talmon, 1990)
- Help identify & prioritize problems
- Explore potential solutions & develop new approaches to problems (Campbell, 1999)
- List assets & resources
 - Depressive lens; handouts (NAMI)



Single-Session Objectives

- Enhance motivation, readiness for change, empower patients, inspire hope and autonomy, help patients identify resources & alternatives (Talmon, 1990)
 - Crisis overwhelming → lens
- Change is possible, identify a problem, attentive listening (Talmon, 1990)
- Offer advice, and reframe/normalize the presenting problem (Campbell, 1999)



Approach

You treat the patients you have.

- Plethora of approaches
- Utilize most appropriate
 - Patient and context
- Long-term versus short-term
- Change = inevitable
- Direct → leadership; empower; self-efficacy
- Cognitive behavioral → educational & collaborative
- Change cognitions to behaviors



Talmon (1990): Attitudes for Single-Session Therapy

- This is it.
- View each and every session as a whole, complete in itself.
- All you have is now.
- It's all here.
- Therapy starts before the first session and will continue long after it.
- Take it one step at a time.
- You do not have to rush or reinvent the wheel.
- The power is in the patient.
- Never underestimate your patient's strengths.
- You don't have to know everything in order to be helpful.
- Life is full of surprises.
- Life, more than therapy, is a great teacher.
- Time, nature, and life are great healers.
- Expect change. It's already well under way. (pp. 134-135.)



Talmon's Components of Single Session Therapy (1990)

- | | |
|-----------------------------------|---------------------------------|
| 1. Starting the session | 5. Strengthening |
| 2. Search for a therapeutic focus | 6. Attempted final intervention |
| 3. Working with metaphor (what) | 7. Last minute issues |
| 4. Practicing solutions (how) | 8. Follow-up |



Problem Solving

- 1) Define the problem and goal;
 - 2) List all possible solutions;
 - 3) Discuss advantages and disadvantages of each potential solution;
 - 4) Choose the solution that best fits the situation;
 - 5) Plan how to carry out the solution in detail;
 - 6) Review the implementation of the solution.
- (Fallon, Boyd, & McGill, 1984; family-based care of schizophrenia)



Effectiveness

- "...their therapeutic impact appears to be underestimated" (Bloom, 1981, p. 180).
- "these studies tentatively suggest that desirable client-level outcomes are achieved following single session psychotherapy" (Cameron, 2007, p 246)
- Ideal versus realistic



Topic Areas (McGuire et al., 2014)

- | | |
|--|---|
| • Recovery | • Reducing relapses |
| • Practical facts about mental illness | • Coping with stress |
| • The Stress-Vulnerability model | • Coping with persistent symptoms |
| • Building social support | • Meeting needs within the mental health system |
| • Using medication effectively | • Living a healthy lifestyle |
| • Drugs & alcohol | |



Multimodal/Holistic Wellness

- Holistic health: Psychological, mental, emotional, intellectual, spiritual, social, physiological...(creative, musical?)
- Selfish?
- "You gotta look out for number 1."
- Foo Fighters: Times like these: "It's times like these you learn to *love/live* again..." (Silverman, 2016)

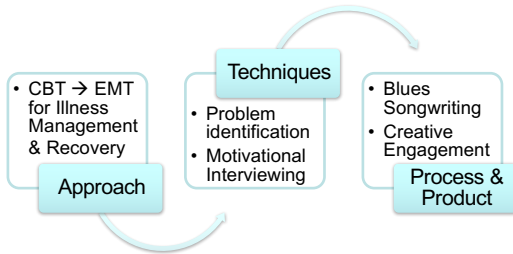


Rapport and Working Alliance

- | Techniques | Interventions |
|--|--|
| • MUSIC therapy <ul style="list-style-type: none"> - High quality, live - ASAP | • Research vs. practice |
| • Positivity; empower; end | • Songwriting <ul style="list-style-type: none"> - Blues & brainstorming - Focused; V1; V2 |
| • List resources and assets | • My Song (Silverman, 2016) |
| • Clinical focus → solutions | • Lyric analysis <ul style="list-style-type: none"> - Times like these - Directed; Therapist vs. Patient |
| • Cognitions → behaviors <ul style="list-style-type: none"> - Unit vs. home | - "Homework" on back |
| • "Homework" | |



Motivational Problem Solving via Single-Session Educational Blues Songwriting



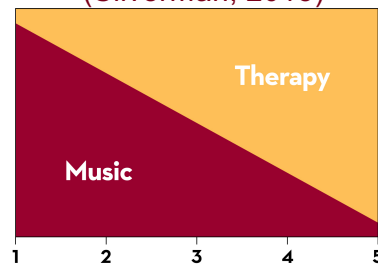
Hope for Recovery Songwriting (Silverman, 2016): WHY (V1) & HOW (V2)

| | |
|--|---|
| Tired of them med lines Ain't got no shower curtains Regain my clean time Staff is always observing | Gotta make my appointments And keep on my meds Let go or resent And make time for my family and friends |
| Chewin' on coffee Sick of them green beans | These are the rules To keep from the blues |
| I'm missing my family I just wanna go on home. | I got them station... I got them station X blues. |

Recovery Songwriting (2): WHY (V1) & HOW (V2)

| | |
|--|--|
| Ain't got no shoelaces Wanna get on with my life Wanna feel better So tired of this mental strife | Making my list Keeping it real Talkin' with my peeps And learning how to deal |
| So sick of fighting These racing thoughts | So sick of fighting These racing thoughts |
| I want my shoelaces...so I can get on back home. | I want my shoelaces...so I can get on back home. |

Continuum Model of Music and Therapeutic Interaction in PMT (Silverman, 2015)



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Thank you for attending!

Go Gophers!

silvermj@umn.edu

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