

The Effectiveness of Music Therapy and Speech Therapy Collaboration in Special Schools in Kenya

Clinton Onaya Kenyatta University

clintononaya@yahoo.com

Abstract

Children with special needs face: delayed language, difficulty making eye contact, disturbed social interaction, problems with pragmatic language and poor comprehension leading to poor communication skills which include both receptive and expressive skills. Impairment of ability and skill in communication can affect negatively the quality and quantity of social interactions with adults and peers. Likewise, improvement in communication abilities and skills may have a correlation, or relational effect on social skills and quality of life. This therefore calls for a lot of intervention/ therapy strategies to beput in place for teaching communication skills to children with special needs without forgetting the emerging therapy approaches which include Music therapy. Music as therapy strategy has helped to improve communication deficits and stimulate nonverbal communication through shared play, turntaking, listening and responding to another person. It also has a unique ability to evoke memories the moment we hear it. Humans think in terms of pattern, repetition and connection and what is involved in the music structure, hence, singing simple phrases with lots of repetition encourage imitation of words that promotes language development. Vocal warm up and activities in reference to posture, breath control and articulation support individuals with weak articulatory muscles and posture for effective communication. Dancing on the other hand help to stimulate sensory system hence enhances fine motor skills. Speech therapy helps individuals with communication disorders to develop language whereas Music therapy specifically promotes development and strengthens language, communication and social skills through engaging music intervention.

Key Words: Music therapy, Speech therapy, Speech, Language, Autism

Introduction

One billion people (15%) of the world's population, experience some form of disability, and disability prevalence is higher for developing countries. One-fifth of the estimated global total, or between 110 million and 190 million people, experience significant disabilities (World Bank). According to the 2011 World Report on Disability, globally there are between 93 and 150 million children with disabilities under the age of 14. In Africa, 6.4 percent of the children in this age range have moderate to severe disabilities. In Kenya 10% of the population (4.44 million) comprise of persons with disabilities having 43.4 % (1.92 million) of this population being children from age 0-14 years (Kenya National Survey for Person with Disabilities, 2008).

A lot of research conducted indicates that children with special needs comprise of challenges which include delayed language, difficulty making eye contact, disturbed social interaction, problems with pragmatic language and poor comprehension leading to poor communication skills which include both receptive and expressive skills (DSMV-2013). Impairment of

ability and skill in communication can affect negatively the quality and quantity of social interactions with adults and peers. Likewise, improvement in communication abilities and skills may have a correlation, or relational effect on social skills and quality of life. This therefore calls for a lot of intervention/ therapy strategies being put in place for teaching communication skills to children with special needs without forgetting the emerging therapy approaches which include Music therapy.

History of Music Therapy

The American Music Therapy Association (2005) defined music therapy as the clinical and evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program (AMTA, 2005). The definition indicates that music therapy is a musical treatment incorporating various models of musical approaches and different formats in a therapy process. The American Music Therapy Association website states: Music Therapy is an established health profession in which music is used within a therapeutic relationship to address physical, emotional, cognitive, and social needs of individuals. After assessing the strengths and needs of each client, the qualified music therapist provides the indicated treatment including creating, singing, moving to, and/or listening to music.

Through musical involvement in the therapeutic context, clients' abilities are strengthened and transferred to other areas of their lives (AMTA, 2005). This demonstrates that music therapy as a treatment incorporates various models of musical approaches in the therapy process, including song singing, improvisation, musical composition, listening to music, instrument playing, movement to the music, music story, etc. In addition, various session formats are employed as needed based on the therapeutic objectives. For instance, group format of music therapy creates opportunities for social interaction (Ghasemtabar, Hosseini, Fayyaz, Arab, Naghashian, &Poudineh, 2015; Jemison, 2010; LaGasse, 2014); Family-centred music therapy, which involves clients' family members in the session, has the advantage for parent0-children relationship construction (Thompson, McFerran, & Gold, 2014)

Music Therapy and Speech-Language Therapy Collaboration

When describing how music can be added to a speech-language therapy setting as treatment, Zoller (1991) stated, "Musical activities stress nonverbal forms of communication and often surpass physical, cultural, intellectual, and emotional limitations (p. 272)." Zoller continues by describing specific musical strategies that can be incorporated: relaxation exercises, breathing and vocalization exercises, song articulation experiences, word and phrase rhythm chanting experiences, and vocabulary and concept development singing. Music therapy adapts elements of music (e.g. tempo, rhythm, melody, harmony and texture) to promote effective expressive and receptive communication skills. It's argued that the babies begin to hear when they are in the mother's womb and the relationship between human and starts in pre-natal period. So much so that, at very young ages children can comprehend two elements of music sound and rhythm they can produce sound in measured tones in harmony with their mother's lullabies and they can move their body parts in accordance with the rhythm of the piece (Eren, 2014)

Music as therapy strategy has helped to improve communication deficits and stimulate nonverbal communication through shared play, turn-taking, listening and responding to another person. Music therapy has indicated positive outcomes in improving social

functioning, social awareness and cooperation, decreasing disruptive behaviours and emotional disturbances. It is highly motivating and engaging and may be used as a natural "reinforcer" for desired target behaviour. Speech therapist can add structure and predictability of a word to a treatment intervention through a song, use power of music to access centres in the brain responsible for language, use music, rhythm and melody to access speech areas in the brain hemispheres and encourage communication. Music provides motivation to communicate and engage and help aphasia children regain the ability to speak. Music has a unique ability to evoke memories moment we hear it. Human think in terms of pattern, repetition and connection and that what comprises in music structure hence singing simple phrases with lots of repetition encourage imitation of words that promotes language development.

Methodology

Methods that were used to collect data were both qualitative and quantitative method in which interviews, video recording and observation were employed. The children were observed under soundproof environment/ music studio.

Location of the Study

The study was conducted in two schools i.e. Kenya Community Centre for Learning (KCCL) and School of the Nation in Nairobi County in Kenya. Kenya Community Centre for Learning (KCCL) is a non-profit making community school providing alternative education for students aged between 6 and 21 years with diverse learning challenges. The school provides assessment and therapy services. These services are open to members of the public. The school offers therapy sessions including music and dance therapy. This school provides a supportive and enriching educational programs for children with Dyslexia, Autism, Communication Disorders, Attention Deficit and Hyperactive Disorders (ADHD), Emotional Disorders, Down syndrome and other Delayed Developmental Disorders. Secondly, the school has an existing club, *MuzikiChanga* meaning music for Young lead by teacher Jane Kizito (Music therapist), teacher Frank and Gabriel who are music teachers and double as instrumentalist. The club is specifically designed for children with communication disorder and this could be a great opportunity for the researcher to explore more. School of the Nation is an international Christian school that offers music learning and uses it for the special needs unit.

Presentation of findings

Children with communication disorders were able to imitate words after the teacher when incorporated in musical forms.

Children could easily predict the repetitive words, those who could not say the whole word there was efforts of pronouncing the first syllable or sound.

Children were able to relax and cooperate, with the teacher and socially interact with peers when music played or when engaging in a musical activity.

There was evident of joint attention when they sang in group especially those with hyperactive behaviour/emotional behavioural disorders.

Evidence of turn taking, maintaining eye contact, role play, playing of instrument, music movement and music story was noted.

Children could hold sound for a long period of time after taking in enough breath and releasing slowly especially those with weak articulatory and postural muscles.

Children were able to name animals on flash cards incorporated in a song.

A good number of children were able to differentiate colors using shakers.

Children were able to follow one step command after a number of repetitions when incorporated in music.

Discussion of Findings

Singing may be used as an intervention tool to initiate imitation to children with Special needs especially communication disorders. Singing emphasizes the singsong qualities of language and is associated with play. Singing can introduce sound imitation in a gradual succession. It can introduce repetitive patterns in an interactive setting. Singing encourages imitation with teacher and peer models at an individual pace allowing children to watch or participate, as they are able. Singing encourages symbolic social interactions and can tie language learning to a natural social setting group singing, enlarging two skill sets at once. Songs are constructed in such a way as to make them easier to imitate, children with Autism Spectrum Disorders and Down syndrome could sing them. Singing easier songs led to singing more songs setting up momentum for language acquisition through increased verbal imitation. In the research, music techniques promoted increased breath and muscle control, stimulated vocalization, developed receptive and expressive language skills and improved articulation skills, children with speech language disorders demonstrated social communication skills in basic group music activities with their peers.

Music therapy has ability to stimulate individual to reduce negative and/or self-stimulatory responses and increase participation in more appropriate and socially acceptable ways.

Vocal warm up and activities in reference to posture, breath control and articulation support individuals with weak articulatory muscles and posture for effective communication. Dancing on the other hand help to stimulate sensory system hence enhances fine motor skills.

Some children used gestures to protest or request actions. For example, to gain attention by tapping others and raised arms to be picked up. It was evident that they were familiar with social routines such as rhythmic clapping of hands, sleeping when relaxing music was played or lullaby song is sung and greeting one another at the end of class.

Music Therapy is a strategy that is not boring and tiresome. It's easy for the child to move along with and interact. This really supports the speech therapist to obtain the overall treatment objectives.

Conclusion

Both Music and Language are universal and specific to humans, both have pitch, timbre, rhythm and durational features, spontaneous speech and spontaneous singing typically develop within infants at approximately the same time, both have auditory, vocal and visual uses and are built on structure and rules, distinct forms of music and language exist and vary across cultures. Speech therapy helps individuals with communication disorders to develop

language whereas Music therapy specifically promotes development and strengthens language, communication and social skills through engaging music intervention. Although music therapists and speech language pathologists do collaborate in schools, hospitals, and other treatment facilities, the results of significant improvement in communication with children with communication disorders as a result of this collaboration are not evident in the literature.

This paper demonstrates positive results of Speech and Language Therapy and Music Therapy collaboration within a short time. There is need for the government /institutions of higher learning in Kenya to advocate for introduction of Music Therapy as a course. Currently we have a few individuals specializing in the area. There is a need to explore more the role of music therapist acting as a liaison between music teachers and Speech and Language Therapists to help children with special needs achieve classroom and communication skills

References

- Buday, E. M. (1995). The effects of signed and spoken words taught with music on sign and speech imitation by children with autism. *Journal of Music Therapy*, 32(3), 189-202.
- Cohen, N.S. (1994). Speech and Song: Implications for therapy. *Music Therapy Perspectives*, 12(1), 8-14.
- McCarthy, J., Geist, K., Zojwala, R., &Schock, M. (2008). A survey of music therapists' work with speech-language pathologists and experiences with augmentative and alternative communication. *Journal of Music Therapy*, 45(4), 405-426.
- Miller-Farmer, K. (2003). The effect of music vs. non-music paired with gestures on spontaneous verbal and nonverbal communication skills of children with autism between the ages 1–5, Tallahassee: Florida State University.
- Pelliteri, J. (2000). Music therapy in the special education setting. *Journal of educational and Psychological consultation*, 11, 379-391.
- Peters, J.S. (2000). Music therapy: An introduction. Springfield,
- Rossetti, L. (1990). The Rossetti infant-toddler language scale. East Moline, IL: Lingui systems, Inc.
- Zoller, M. B. (1991). Use of music activities in speech-language therapy. *Language, Speech, and Hearing Services in Schools*, 22(1), 272-276.