



Episode 148 | Tune In: Music Therapy for Kids (Transcript)

Ike:

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Hi, welcome to Into the Fold, the Mental Health podcast. I'm your host, Ike Evans, and today we're delighted to bring you episode 148, In Tune: Music Therapy for Kids. But first, some mental health headlines.

We have just recently published an op-ed about the Austin State Hospital redesign. We argue that for a true upgrade of Austin State Hospital, just building a newer, better building isn't enough. But rather that we should go all the way toward creating a full continuum of care for Texans who need it. To read the full op-ed, go to the blog on our website, hogg.utexas.edu, where you will find a link.

In Texas News, a recent Texas Tribune story reports that despite recent investments of billions of dollars, Texas still lags nationally when it comes to mental health services. It is still the case that 98% of Texas's 254 counties are wholly or partially designated as mental health professional shortage areas by the federal government. And in 2022, the state ranked dead last when it comes to access to mental health services. According to a report by Mental Health America, the story also focuses on the weak connection between mental health funding and mass shootings. There have been seven mass shootings in Texas during Governor Abbott's term. State Representative Ray Lopez is quoted as saying, "While mental health is undoubtedly a critical piece of the puzzle when it comes to preventing mass shootings, it's also essential to address the opportunity for individuals to acquire firearms."

And in other Texas news, the Dallas Morning News recently ran an editorial arguing for better collection of data on suicide attempts in foster care youth. A 2022 state report on suicide prevention revealed that the number of suicides among foster care youth jumped from one in 2017 to four in 2021, which may not sound like a lot, but with 50,000 foster care youths in the system is a rate that is three times higher than for the general youth population. The editorial urges the passage of House Bill 4065, which would require the Department of Family and Protective Services to maintain records and collect data on suicide attempts of children in foster care. The Senate now has to take up the bill.

And that does it for mental health headlines. Don't be left out of the loop. Become a Hogg insider by subscribing to mental health headlines. You can find a signup link on our main website at hogg.utexas.edu.

Today Into the Fold, we're talking about music therapy as a uniquely powerful way to help kids with their mental health, including getting to know a unique organization, Sparks for Success, that partners with organizations around the Austin area, among them communities and schools, to offer music therapy services for kids who could benefit from it.

We are joined today by one of their music therapists, Amber Sarpy and Cynthia Smith, the organization's founder. Amber and Cynthia, thank you so much for joining us.

Cynthia: Thank you.

Amber: Thank you for having us.

Ike: So my first question for both of you, quite simply, why music therapy and what is the

case for it?

Cynthia: Well, I can give some formal terms for music therapy. It's an evidence-based allied

health profession that is particularly suited to working with elementary age children. And in addition to being a tool of therapeutic engagement for the children, music itself is indicated as a treatment in helping heal the parts of the brain that are impacted by

trauma, those are the children that we serve, those experiencing trauma.

Amber: So a lot of the time when we look at music therapy as a viable option for treatment, we go in and we initially say, "Would this student benefit by music therapy?" In a general term, and it's because they respond to it in some way that's beneficial to either their educational experience or their social, emotional learning experience or their awareness

of how they can access language or just be able to engage in a therapeutic intervention.

Simply put, music can engage both parts of the brain, and so it comes around the back door of the situation. So we look at a talk therapy session and the person may sit there and they may not say anything for a long time because it's just, how do I put all this together in my head? And when we're looking at small children, or children that are elementary, middle school, high school, whatever, they may not want to be vulnerable in that way to talk about what's going on for them, what their experiences have been. But when you sit and you build rapport by simply being in a space with someone to play a song. How many of us know that when you connect with people over music it's instantly a bridge, it's a pathway, and it leads to forming connections that build rapport to allow folks to be able to open up and become vulnerable in a space where they wouldn't ordinarily be vulnerable.

But there's also a need to be mindful of that because when we open up too soon with a very powerful tool like music therapy, the students may not be able to control how much they say or how much they're feeling viscerally, they may just shut down. So it

requires a lot of awareness on the part of the practitioner to be mindful about how they're using music therapy as well. So I'd say the why is because it can get at the heart of the matter in a short amount of time. It builds capacity and it builds a bridge between both sides of the brain, neurologically speaking.

Ike:

And so Amber, and yeah, I want just to make it clear to our audience, you two know each other and you two work together.

Cynthia:

Yes, we do.

Ike:

Yes. Right. How did you begin with Sparks for Success?

Amber:

Well, so short story is I met Cynthia at a back to school fair. And I was working for a nonprofit prior to approaching her to pitch a therapeutic drumming circle to her. And when I did that, she said, "Okay, we can give this a try." Because at that point, I think she was not sure about music therapy and she said, "Let's see what happens." And so over the course of that school year, I looked at how the students were responding and she looked at how they were responding. And we started off that way where I just pitched a music therapy drumming program to her.

Cynthia:

Yeah, and actually that came at a crossroads for us because previous to that, before we had even incorporated as Sparks, we were the Texas branch of a Pennsylvania organization that I helped to get started. And we had started in 2012 and getting up to about our third year, we were realizing that our kids were not having positive changes. And I had a discussion with the principal that we were working with and decided we needed to do something differently. And then that's when Amber made contact with me and we started that therapeutic drumming, which became actual music therapy sessions. And immediately we were getting positive feedback from counselors, from classroom teachers, life skills teachers, where I mean, six to eight weeks into having these actual music therapy sessions, getting that positive feedback where we had not been seeing that previously with the model that we were using before.

Ike:

I see. So Amber, we've sort of covered the theory behind music therapy. I am more interested kind of in you personally, your goals, what it is that you're hoping to accomplish. What looks to you when you're working with kids like a breakthrough, and how your particular methods help you to achieve that?

Amber:

It's a multi-layered question. So when I look in general, my goals as a music therapist, I look at establishing rapport and client-centered methodology and trying to meet folks where they are, no matter language or demographics, whatever demographics that they represent, just meeting people where they are. That's my ultimate goal. That's the underpinning of the work.

It's just meet people where they are and use music as a way to do that, to build relationship, build capacity, build rapport, and really walk alongside the family or the student as they discover ways to make meaning of what their situations have become so that they can formulate some goals for themselves, be it to be able to make deeper

connections with their friends in class, or to talk about their experience that has impacted them in a way where they may feel shut down or closed off, that's inhibiting them from excelling in school or in their homes where they're behaviorally acting out, where they may just be melting down. They don't even really have that language emotionally to express, yeah, this is how I'm feeling, so along those lines.

So primarily just meeting the client and the family where they are, and building that capacity to see change in a breakthrough looks like something as simple as a child saying, "Oh, I'd like to do this today." Advocating for themselves. Because when you look at generalization of a therapeutic goal, it's to have that understanding of how they can advocate for themselves, where they weren't previously able to say, "I don't like that. I don't feel that way. This is what I want. This is what I need for myself." Because you're building in that ability for them to have awareness of self, awareness of others and the environment in which they live so that they can excel and be successful in their lives. So that's that resiliency piece that a lot of them may come in with, resiliency at different levels. So tapping into that and seeing where they are from a strengths based perspective as well.

Ike:

And I can't help but wonder, I mean, kids are like everyone else, they're individual, you can't really generalize, what one likes another won't like, or even hate, vice versa. But I tend to think that once you've been in it for a while, you kind of have a sense of when it is that you're breaking through with somebody. And I'm just kind of wanting to know from you, what those moments look and feel like.

Amber:

Okay, one moment may look like what yesterday's group did. There is a particular child who has experienced some profound loss recently, in terms of a family member's passing, and they are really angry. So that sense of loss of control because of death. And from the contact that we have at that school, I was told that this particular student is behaviorally acting out and they want to control every aspect of their environment. And a breakthrough for this child look like, let's do this. We can keep some things as the same and we can change because maybe your other group mates might want to see something different.

And previously I was told that this particular child would have melted down, screamed and had issue with it, and allowing that space to first hear what this child was saying. We started with a grounding technique with drumming, and we also stated, "This is what's going to happen next." And I gave time for that to sink in. And the other kids chimed in as to how they felt about what was going to happen next. And that particular kid was like, "No, we don't do it that way." And I said, "Oh, I understand that." I said, "Well, how do you do that?" And I gave space for that to be explained. And then I said, "Well, how about we do X, Y, and Z, and we also use your idea too." And the child simply just looked and said, "Sure, that's fine with me."

And that for me, given the previous information I was given, was a breakthrough, breakthrough for that child. The release of control to try something new, that rigidity, because of the traumatic event that's happened, that has caused, it was antecedent in the triggers and the consequences of, I've got to control every aspect because I don't

want to experience loss, I'll feel safe if I have everything how I think it needs to be. So that simple, "Okay. That's great. Okay. We can do that."

Ike: Yeah. Okay. Cynthia. Hi.

Cynthia: Hi.

Ike: Hi. So tell us the story of your organization and how you got it off the ground, and then

how your partnership with Communities and Schools began. So just so our listeners are aware, the Hogg Foundation has granted to a few, I want to say communities and schools, affiliates, and so we have a pretty good sense of their work and we're big fans.

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Cynthia: Yes. Well, actually it started out as quite a journey before Sparks existed in that my sister, who was a violinist and lives in Lancaster County, Pennsylvania, was asked to give a child whose father had just been convicted and was going to spend 13 years in prison, he wanted to take violin lessons. And so she agreed to give him violin lessons. Well, after she got to know him and his family and what other families were going through, she called me and said, "I've got to do something here because there's millions of children of the incarcerated." And even just in their small community of Lancaster County, there were quite a few. And because I'm also a musician and have an MBA and

worked for nearly 20 years in the nonprofit industry as director of administration and operations for the RGK Foundation, so I had every piece that we needed to help her get her organization started, which we did.

That was back in 2010, and a year later I told her, I said, "Okay, well now I'm in a position where I could do the Texas branch of your organization." And we did that using her model. We were into about the third year where we realized we were not making the impact we needed to make with the students. So we're working with one school, elementary school, and here we have students that were still cutting class, grades not getting any better, still misbehaving, while in the classroom, being disruptive, attacking kids on the way home from school, beating them up, stealing, different places in the school. And it's like, okay, something's got to change. We're not doing what we need to be doing for these children. Because I mean, our main goal is to stop that school to prison pipeline and the generational incarceration, the generational poverty, and to help these kids build the resilience like Amber was talking to, so that they can deal with whatever crises they have.

So the principal and I met, she really knew her students well, and we talked about that, and it was about that time that Amber made contact with me and the music therapy sounded like, "Okay, this is what we need." And so in 2016, we incorporated a Sparks for Success and started our music therapy program, along with our private lessons that we had been giving. And the private lessons were also an important part of that and lasted actually through up until COVID.

But anyway, so we started Sparks for Success and we were the only organization in Austin ISD offering music therapy at no cost to the schools or to the children. And as far as I know, we are still the only organization doing that. But as word spread from one

school to another, we started getting requests, and communities and schools played a large part of that because their partners schools were communicating with CIS and with other partners schools. And then, 2020, we know everything stopped. The only thing that stopped for Sparks was our private lessons. We tried to continue on with our private lessons virtually, but that wasn't working for the kids. We had two students that we had been working with for a while that we're in middle school, and it didn't work for them either.

But music therapy lends itself so well to the virtual platform, and our therapists had already been using music therapy with their private clients and with other organizations that they were working with. And we jumped from, and this is because of CIS, we jumped from six schools at the beginning of COVID to 16 schools in four different school districts. And the way that happened is our CIS of Central Texas created this database. I don't know what magic wand they had, but this database went out to their partner's schools. And so more people were knowing about the services we had, and of course, during that period of time, everybody needed therapy, including the adults.

So yeah, I mean, we grew and the students that we were helping to serve really increased. And just since 2016 through the present time, we have served in music therapy just under 500 students and unique students, and including our private lessons that we were doing up until COVID, over 500 children that we've been working with. And I'm hopeful that we can once again have the resources to start our private lesson program up again, because it really did, it was very beneficial.

Ike:

Okay. So you mentioned the school to prison pipeline, which is a turn of phrase that the Hogg Foundation is fairly familiar with. And so Cynthia, I'm curious, what led to your focus on children affected by incarcerated parents and what makes music therapy, because I'm sure our listeners are unaware that you can be specific about the population that you're trying to impact with this. What makes music therapy such an effective therapy for these kids?

Cynthia:

Well, one of the reasons that we focus specifically on children of the incarcerated is because not many organizations do. Now, here in Austin, we've got the Seedling Foundation, called Seedling Mentors, that Mentor children of the incarcerated. But throughout the country, there are precious few organizations that understand the traumas that these kids go through. So when I get a call that says, "Okay, we have a fourth-grader. He was in the home when dad stabbed his girlfriend." He came to school, somebody might have looked at him wrong or whatever, he threw a chair across the room, he couldn't deal with that trauma. And then get another call, "Okay, we've got a first-grader. She, her sibling are being held hostage in a SWAT situation by their father."

Ike:

Wait, her-

Cynthia:

The child, her siblings and mother are being held hostage in a SWAT situation by her father. How does a five or six year old deal with that? Or anybody deal with that?

Got a call just a week or two ago adding two more students to a session because one parent murdered the other parent and the murderer is also deceased. This is a second and third-grader. So these are the situations that our kids are in. And when a parent goes to prison, they have prisoners' rights, they're guaranteed a roof over their head, three meals a day, probably more, I don't know the details. Medical and mental health care, but their kids don't have that.

We've got right now, this year, we have 35% of our children who have a parent currently in prison, but we also serve children whose parents have formally been in prison. 13% of those children are McKinney-Vento. And the definition of McKinney-Vento is individuals who lack a fixed, regular and adequate nighttime residents. 15 of our kids are McKinney-Vento. We have children living in a homeless shelter, 5% of those. So they don't even have the right, these are the innocent victims. They didn't commit a crime, but they still don't have the rights of their parent who was in prison. And of course then we've got the grief that they're suffering. Some of these kids blame themselves. If I had just made my bed that day, mom or dad wouldn't have done whatever it is they did. Or if I had gotten better grades. They start taking this guilt on themselves and they've done nothing wrong.

So anyway, because of the number of children suffering that, of course we have the financial costs of a parent in prison, or the children, if they're starting to go down the wrong road, might end up in juvenile detention. Well, one child for one week in juvenile detention is costing us taxpayers over \$3,000 a week. We could do a lot to help these kids forever, \$3,000 a week. But we're trying to prevent the kids from going down that path.

So the music therapy, it's an international language. It speaks to everyone in some form or fashion. So by using music therapy to help these children understand that they can make choices, and like Amber was saying, that they can identify with learning how to communicate, how to make these choices, how to deal with other people, how to build their resilience, because these events aren't one time events for our kids. When a parent goes to prison or they witness a parent's crime, or they're the victim of a parent crime, that lasts forever, that doesn't fall out of their head. So anyway, so the music therapy for this specific population of children we're finding to be very beneficial to the children that we're working with.

Amber: Can I add to that?

Ike: Yeah.

Amber:

So definitely solo music therapy is beneficial, and we look at the elements of music therapy. We look at lyric writing, lyric analysis, we look at playing instruments, we look at movement and music, as opposed to a talk therapy model. So when you look at talk therapy, the examples that Cynthia has given second, third-grader, or they've witnessed a stabbing. Who in second or third grade wants to really talk about that if you don't have the adequate language, or first of all, you're not stable enough to talk about that?

But you can come in and you can listen to a song that you might enjoy and it grounds you, or you can imitate movements to different songs. You can do movement and music, because we know trauma is stored in different parts of the body. So it gets at that unlocking the different parts of the traumatic event for that child from a different perspective as opposed to, "Hey, so how did that make you feel?" And how does that really allow them to enunciate how they're feeling if they don't have the language to talk about it, or if they don't want to talk about it. But they simply need someone just to be present to them and give them a space to slowly unravel their situation in a safe way. Because it's like a soda bottle. It's a traumatic event. If you shake it, shake it, shake it, and you ask someone, just open it up and all comes tumbling out. But if you ease it, ease it, ease it by let's sit together, let's play one beat together. That's part of that entrainment process. You're becoming a part of their experience.

And it grounds it steadies, it stabilizes, and so it builds in that rapport and you'll say, how's their day going? And maybe the child will talk about their day, maybe they won't, but that's good. That's where they are. You're meeting them. And it could also look like a lyric analysis, where you take a song and you ask them, "What is your song choice today? What do you want to listen to?" And they may choose a particular song that can talk about their feelings or emotions better than what they're able to express on their own.

And you can do exercise with called Contra [inaudible 00:28:22], where you take and you eliminate certain words and you have them put their own words in, and you can build an emotional vocabulary. You can even have them put in their own experiences based upon the lyrics that are already existing because it's an existing structure that provides a safe space for them to be able to explore whatever that event is.

So it's a viable option because it doesn't immediately require a person to just spill their guts when they may not want to, may not be able to talk. And when you look at children of varying abilities that this may impact, they may not have a language to talk, they may use pictures, they may use an AAC device. So LAMP Words for Life, or Proloquo2Go. So how do you allow this space to be accessible for everyone, and music is something that can do that. Hitting a drum or different rhythms that help to ground or help with the stress tolerance.

So it gets at a lot in many different ways, and it's accessible to so many different populations. And when we look at children of the incarcerated, it's accessible to them because it's... I don't know how to put it, but it's sort of benign, it's non-invasive.

Ike: Yeah.

Amber:

Ike:

So those, I would say, are the biggest reasons why I believe that music therapy is

beneficial for this population.

Okay. So Amber, we are about to hear an example of you in action. It is called, I see, I

hear, I feel, and I think. For the benefit of our listeners, here is a taste.

Okay. So Amber, tell us what it is that we just heard and kind of point out the significances of it.

Amber:

So what you just heard was an example of stabilization and grounding and building in a container for children who may be dysregulated to become regulated, grounded in their immediate environment, because often the traumatic events or whatever their transition from will not allow them to immediately access the music therapy interventions in the room. So it's creating that space is, it's grounding and it's stabilizing them so that they can be able to say, "I think," or, "I'm thinking," or, "I feel this way." And in more of an abstract way of not just saying, "Oh, I feel cold," but "I feel sad today," or, "I feel excited today," or, "I'm thinking about what happened in my home two days ago," or whatever. But it gets at that abstract and that social emotional communication and connection for the students.

Ike:

Okay, wonderful. So my last question is for the both of you. Can either of you share a personal example that shows the difference that you are trying to make. And Cynthia, why don't we start with you?

Cynthia:

Yes. There are two students in particular that we had worked with since first grade. Both of them are getting ready to graduate high school right now. These were private lesson students, both with parental incarceration, one of them with some other major traumas that occurred. And the summer before COVID hit, so 2019, someone had donated two full scholarships to UT's Longhorn Band to Keeling Middle School and the donor wanted Keeling to choose two band students, outstanding band students, to receive those scholarships.

Well, none of this was known to me until I got a phone call from the band director who said that they wanted to give those scholarships to Sparks, our two Sparks middle school students. And was that okay with me? Well, of course, yes, it was okay with me. And this wasn't just a musical journey for them, a musical reward for them. But these two girls were able to attend, they stayed in the Jester dorm for that week. The important thing is they walked across campus back and forth during the day to the music school, back to the dorm, wherever else they were going, alongside of university students.

And these two girls whose mothers, who were their caretakers, had not graduated high school, are now seeing that they are just like these college students. So this thought of college that wasn't even on their radar at all, all of a sudden that, that's broken. They see, these kids look like me. These kids are acting like me. These kids are doing the same activities that we were doing. So they had a great music experience, but they also had, all of a sudden, that vision that they could be at the university, that they could be one of these students, that there was nothing different about them than these people that they were seeing and opened it up.

Like I mentioned, both of them are getting ready to graduate high school right now. They're in two different schools. We did have to stop music lessons because of COVID, and we weren't able to get that started back up again. One of them is bound for college. The other one has had some other traumas occur in the last year and a half and is not quite ready, just emotionally, to do college yet. But she has a lot of potential, very bright

young lady, and we hope to see her eventually in the next year or so, make that decision to go further to further her education.

So yeah, I mean, those are the two biggest shining stars that we have seen as a result of our program.

Amber:

Okay. Can you tell me a bit one more time so I can... Because I got so excited about... I just lost thread.

Ike:

Yeah. Any any personal story or account that if you were making the brochure of your life, you would use... I'm a comms guy. Sorry. You would use an as an example of the impact that you hope to achieve in general.

Amber:

With music therapy?

Ike:

Yeah.

Amber:

Oh my goodness. So I enjoy working with all different types of populations. My niche happens to be with families that have children with diverse abilities, specifically autism spectrum disorder. And I see that in Sparks for Success, there are a number of children who are on the spectrum, and when they come into the portable for music therapy, it's amazing to see how they are able to connect with their peers in a way that traditionally a lot of folks don't think children on the spectrum can do so.

Even with that added layer of the trauma that's external because of a parent or a guardian that has been incarcerated. So the impact that I hope to make is, number one, just continue to observe and learn how to create effective and sustainable interventions for children that are of the incarcerated, as well as the children that represent varying abilities within that population. Because it's easy to get caught up on one population, which is the overarching population, and not really understand how to formulate ways in which the students that do represent varying abilities within that population are trying to access the same goals of increasing resilience and distress tolerance and opening up the trauma to be able to heal from it in ways that make sense for them. So my overarching goal is to make sure that things are accessible across the board for all students accessing this particular therapy with Sparks for Success.

Ike:

Okay. Cynthia, I'm sure that our listeners would love to know where they can go to learn more about your organization and how they can give support, so maybe-

Cynthia:

Yes. Well, our website is Sparksforsuccess.org. For spelled out F-O-R. Or just to make contact with me, my email is Cynthia@Sparksforsuccess.org, and I would be happy to talk to anyone who has an interest in this population of children and our work through music therapy in whatever way someone might be interested in helping. So yes, I welcome inquiries.

Ike:

All right, Amber, Cynthia, thanks so much for taking the time to talk to us today. We really do appreciate it and good luck with everything.

Cynthia: My pleasure. Thank you very much.

Amber: Thank you.

Cynthia: We appreciate the opportunity.

Ike: This isn't our first look at the healing power of the arts. We've had on the podcast

musicians, visual artists and poets. What you're about to hear is spoken word artist,

Marlon Lizama from episode 88, Young Minds Matter.

Marlon: Where I'm from, we live in summer. We speak in family tongues about family through

neighbors eyes. Our dialects changed, forever changing [foreign language 00:39:12]. Where I'm from [foreign language 00:39:15] all become curfews and there is no tox of American birds and bees. Reputations follow you like 14-year-old backpacks on our 14-year-old soldiers. Where I'm from education is the thought as crazy as equality, tree branches become a sign of disciplinary actions. Moms, our [foreign language 00:39:30],

grandpas are Popas. Fathers have always been gone.

Where I'm from, music is our narrator, moving us like revolution once did. Young developing flowers shaken and stepping to beasts they do not understand yet. Perversion is the uncle not allow near the kids, but is always welcome to home. Where I'm from, the dinner table is time of conferences of who needs to go get a job, who needs to go get some water or who just needs to go? [foreign language 00:39:54] our

doctor.

Mosquitoes are always ignored for the immune system of our ancestors is too strong. Where I'm from, neck dirt necklaces tell you when it's time to go in. Along with [foreign language 00:40:04], because you see, where I'm from everyone is Christian and has a Catholic neighbor. Love is what is allowed or how good a young couple is sneaking around, babies make babies and make families close, and my chest is even closer. Where I'm from, my grandmother is beautiful. Aunts and uncles are extended parents, and everyone has a right to beat your butt, boom [foreign language 00:40:22]. Where

I'm from is yellow, purple, green, and gold. And it is beautiful.

Ike: I've included a link to this past episode in the show description, so check it out.

And that does it for this episode. We're so glad that you could join us. Production Assistance by Anna Harris, Kate Rooney, and Daryl Wiggins. And thanks as always to the Hogg Foundation for Mental Health, for its support. Just as taking care of ourselves enhances our ability to help others, so it is that by helping others we enhance our own resilience.

Leave us a review. Subscribe to us on Apple Podcast, Google Play Music, TuneIn or wherever you get your podcast. And taking us out now is Anna's good vibes. Thanks for joining us.