

# Music Therapy and Traumatic Brain Injury: A Light on a Dark Night

Simon Gilbertson and David Aldridge

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Traumatic brain injury is a sudden and often debilitating event with far reaching consequences for the individual and their loved ones. Its effects on physical, cognitive, social and emotional areas of function may be comprehensive and the subsequent rehabilitation required can place a substantial burden on society. Early anecdotal reports on the use of music therapy in neurorehabilitation began in the 1980's. More rigorous research on the effects of music therapy for specific outcomes in neurorehabilitation has recently started to emerge.

This new publication by Simon Gilbertson and David Aldridge adds a unique contribution to this body of research. *Music Therapy and Traumatic Brain Injury* focuses specifically on early neurorehabilitation with severely brain-injured patients and presents the results of a qualitative research study in this area by Simon Gilbertson. The book provides brief background information on traumatic brain injury and neurorehabilitation (chapter 1), and a literature review on music therapy interventions in neurorehabilitation (chapter 2). The next chapter describes therapeutic narrative analysis in detail provides and an account of how data was analysed in this study (chapter 3). Three case studies are then presented in detail (chapters 4-6) and the final chapter presents an explanation of the narrative analysis (in reference to these three cases) and conclusions (chapter 7).

The authors propose that music therapy research in neurorehabilitation has predominantly focused on functional rehabilitation to the exclusion of emotional and psychosocial needs. Magee (1999) suggested that this may be due to the difficulty in quantifying the outcomes of music therapy interventions targeting social and emotional needs. *Music Therapy and Traumatic Brain Injury* attempts to fill this gap in the research literature.

The music therapy interventions described are based on Nordoff Robbins' Creative Music Therapy, where both patient and music therapist participate in active musical improvisations. As such, the book may have been titled to more accurately reflect its focus on improvisational music therapy. The current title may lead the reader to expect more information on the wider range of music therapy methods that are used in traumatic brain injury rehabilitation.

This book is written in a different way to many others in its field. It uses a narrative style rather than the scientific writing style often used in health publications. This seems to be an intentional decision of the authors and reflects their holistic focus on individual quality of life rather than functional outcomes alone. Aldridge's (2005) concept of 'performing health' strongly underpins both this type of music therapy intervention and the rationale for the case study research presented in this book. The approach is described as "an intended mutual performance of music as an aesthetic experience in a therapeutic setting" (p35).

*Music Therapy and Traumatic Brain Injury* particularly focuses on early neurological rehabilitation with severely brain-injured patients. The authors propose that music therapy has unique diagnostic potential in this phase of rehabilitation due to the observational perspective used and the subsequent sensitivity to patient responses. Similarly, given the unique nature of traumatic brain injury, case study methodology is well suited to research in this clinical area. Therapeutic narrative analysis, as presented by Aldridge and Aldridge (2007), is a form of case study research and was adopted in Gilbertson's study. It involves selecting episodes that illustrate the focus of interest and generating bipolar constructs through comparison of these episodes. Episodes are ranked along the continuum of constructs. Constructs are then grouped into overarching categories. The categories developed in this study were: musical expression, communication, agency, emotionality, motility and participation.

Three case studies are presented in detail to demonstrate the development of these constructs and categories. Transcriptions of four musical episodes for each case study are included to illustrate the interpretation of constructs made by the music therapist from the musical excerpts. These transcriptions are helpful in understanding the process of analysis; however an audio recording of these episodes would have further assisted the reader's understanding of this process.

The analyses of these 12 episodes of dyadic musical improvisations are extremely specific and detailed. The analyses indicated that in early rehabilitation following TBI for the three cases observed, behaviour was initially isolated and idiosyncratic (both musical and otherwise). Over the course of music therapy intervention, these individuals demonstrated a general pattern of change towards conventional-integrated behaviour (as interpreted by the music therapist). The core narrative category developed from the analyses is 'relationship'. The authors thus suggest that music offers unique possibilities for understanding social and relational events.

This book is primarily a research publication and as such may be of interest to professionals from outside the music therapy discipline to facilitate greater understanding of musical analysis in music therapy research. The findings of this research may also be of interest to music therapists who work in improvisation with clients in minimally responsive states and to those interested in musical analysis. However, in a clinical setting, probably few music therapists (including myself) are afforded the luxury of such in-depth and time consuming musical analysis.

*Music Therapy and Traumatic Brain Injury* identifies the lack of attention given to emotional and psychosocial aspects of rehabilitation in music therapy research and presents qualitative research to rectify this imbalance. At the very least, this book should encourage health practitioners from all disciplines not to overlook the patient who is labelled 'unreachable' or 'non-responsive'.

## References

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