

Journal of a Musical Nurse

Becoming who we are through our everyday experiences

In the movie “You’ve Got Mail” Meg Ryan’s character, Kathleen Kelly, challenges the notion our working lives should be separate from our personal lives. Kathleen wonders how work can be anything other than personal given all one invests in it. I am a registered nurse, a registered music therapist, a wife and a mother. I want my children to see how my work, and my choices in life, shape who I am becoming. I hope this will anchor signposts in their psyche that help them live a fulfilling life. My roles define me and love is my motivator. My work is personal, and while this makes me vulnerable, I wouldn’t want it any other way. After all, it is the common ground I share with my clients. There can be no doubt any kind of health crisis is a personal experience for the client.

My life must have meaning. Yet, what is meaningful is not always clear. Not knowing what we really want or can expect from life can be unsettling, and again, this is common ground we share with our clients. Life has taught me the answers to what we find meaningful rest somewhere deep within and are woken by the profound moments that occur in our everyday experiences. These are the moments that take us by surprise and fill us with a sense of awe and wonder. They sometimes leave us lost for words. In these moments we are confronted by the mysteries of life. This can be uplifting or disconcerting. Through these moments we can discover more about ourselves and what we seek from life – if we are brave enough. While I remain unsure of what lies ahead for me professionally, the following extracts from my clinical journal describe profound moments that have invigorated and guided my drive to combine my nursing and music therapy careers. These moments assure me this path is worth pursuing. In each of the extracts the characters (pseudonyms are used) take steps beyond their comfort zones, and in doing so discover something new and surprising about themselves.

Reaching out to new experiences

2011 - Andy

The other day I nursed a retired doctor named Andy. We began our first meeting with a bright and lively conversation about our experiences in the health profession. We shared stories about the changes and developments we had witnessed. At a break in conversation, and prepared to effect the conversation either positively or negatively, I told Andy I was studying music therapy. Personally, I found his reaction extremely funny (though I didn't let on), but I have no doubt many others would have been extremely offended by his reaction. The notion of music therapy was almost offensive to Andy. I cannot write what he said.

At junctures such as these basic nursing tasks provide a lifeline and an ongoing connection to the therapeutic relationship. I let Andy's comment pass and said I needed to check his blood pressure before giving his morning pills. As I worked we continued our lively conversation around topics of Andy's choice. Music therapy was avoided. Then, as I was preparing to leave the room, Andy asked me what on earth possessed me to study music therapy. I did not delay in getting to heart of the matter. I quickly identified experiences that led me to strive towards personal fulfilment ahead of financial gain. The issues I raised challenged Andy in many ways, but this time the conversation did not stop. We became engrossed in a fifteen minute "yeah, but..." conversation. During this time Andy began to talk about significant life changes he had experienced, including the recent and devastating loss of his wife. Andy asserted the importance of mental health. At this point I highlighted the value of music therapy in the mental health field and described how group songwriting can support the practise and development of social skills. From this point Andy began to list populations for whom he thought music therapy might be useful; specifically, head injuries victims, children with disabilities, and adolescents with behavioural problems. I then explained to Andy I would be running a session at 2pm and he would be welcome to come. Bright-eyed and enthusiastic he said: "...hmmm...I might come along – thank you."

Before the group music therapy session, one of the nurses commented they had not seen Andy come out of his room since he'd been in hospital. I then noticed Andy walking quietly towards the music therapy room - twenty minutes before the session was to start. However, when I arrived to start the session I was surprised and disappointed to discover he wasn't there. Shortly after this I found Andy sitting quietly alone in the room beside the music therapy room. I use this room to tune my guitar once all the participants have arrived and are seated for the session. I entered the room, excused myself and said: "I just need to tune my guitar."

Halfway through the session Andy entered the music therapy room, joined the group, and was the last participant to leave. Andy's case highlights the subtle intra-personal and inter-personal dynamics at play in a person's healthcare experience. Exploring the common ground Andy and I shared played a very important role in the development of our therapeutic relationship, which in turn influenced his readiness to engage in therapy.

2012 – The group improvisation

On this day I worked with Sarah. Sarah and I had not nursed together in a long time. Sarah and I once shared a very significant and difficult life experience. We had a great day catching up and working together again. Sarah was interested in sitting in on the music therapy session and discovering more about it. Sarah joined us at the mid-point of the session. She entered the room talking about the music at her wedding. I asked the group if they would like to hear "Annie's Song". I offered this song for the following reasons:

- 1) a participant had requested it in a previous session;
- 2) it is often sung at weddings;
- 3) Shona, a patient not at this session but in her bedroom nearby, had previously commented on how beautiful she thought this song sounded; and,
- 4) the lyrics of the song bring the creative and symbolic representation of our senses into focus.

When the song was finished I commented on how much I liked the song, particularly for the fourth point listed. I talked about how music can help us connect with our primal being and understand ourselves more fully. A couple of group members acknowledged how as babies we learn and discover the world through our senses. Because I felt the group was in a place of shared understanding I broached the idea of doing a group improvisation. Roberta, who was partially hearing impaired, then asked if we could play our instruments together. I proposed we base the improvisation on the new ocean drum. Rebecca and Joan eagerly accepted the offer to play the new instrument. They played it together as they both had one broken arm. Only one participant chose not to take an instrument. All the others were eager to play. The youngest participant in the group was seventy.

Clinical improvisation was still very new to me, and I told the group this. I had to manage feelings of uncertainty regarding their expectations of me and my contributions on the keyboard. I offered my presence in the music through harmonic grounding in the middle to lower registers. I also played light glissandos in the treble to reflect the washing sounds of the ocean drum. When the wave sounds grew more dramatic I synchronised with the participant playing the congas. Together we exaggerated and extended the rising tension of the music through rhythmic grounding and a crescendo to forte. Roberta watched for my non-verbal cues of eye contact and a head nod to start playing her rock blocks at various points in the improvisation. The improvisation lasted approximately five minutes. One of the participants commented afterwards on how we came together at different points and then blasted apart - just like the waves of the ocean breaking on rocks. This comment was consonant with how I felt throughout the improvisation. My vulnerability made me feel this was a very intimate experience. All participants commented on how lovely they found it. Rebecca and Joan described their experience as a privilege. Was it the shared intimacy that made this experience lovely and a privilege? I believe so. I was deeply moved by the participants' comments. They celebrated and deeply respected the ambiguity of the experience. Have I underestimated the value and role of improvisation for older adults because of what I think

their expectations are? This population has so much to offer and I have so much to learn from them.

This session reached beyond the therapy room.

Shona was a seventy year old lady who experienced long periods of hospitalisation. The session described took place during Shona's second admission. Shona did not attend the session, but her bedroom was close to the music therapy room. Shona had a history with music therapy. During her first admission she attended a group music therapy session. Shona was a prominent participant for the first half of this session. She made requests and was often the first to talk after a song. About halfway through the session I sang "Marble Halls" - a popularised aria written by Irish-British composer Michael William Balfe. I used this song for its aesthetic and reflective qualities. Following the song Shona fell silent and did not talk for the rest of the session. Shona has not attended a group music therapy session since. I have been cautious not to pressure her to attend. I have, however, often heard Shona promoting the sessions and encouraging her new roommates to attend. This was not the first time I had seen this type of response to group music therapy. During a session in 2010 the impact of Sam's engagement with the therapeutic process took him by surprise too.

Sam was a man in his late 50s who had suffered a trauma. Sam was a dominant participant during the first half of the group session he attended. His contribution significantly influenced the trajectory of the group process. During an improvisation Sam started singing the melody of a familiar song. The group decided to use this melody to write a song parody. They wrote at least one new verse every session. The lyrics employed black humour. During the session Sam attended the group wrote two verses and the chorus. After Sam contributed some particularly dark lyrics he fell silent. He did not contribute to the group process for the rest of the session, and did not attend again.

Shona and Sam's responses to the group music therapy sessions helped identify their need for more regular psychiatric care.

I return now to Shona's second admission and the session involving the improvisation that followed "Annie's Song". Given Shona's previous experience with music therapy, I felt it important to make contact with her when the session had finished. I decided to take the new rock blocks to show her. Shona was sitting on her bed reading. She greeted me and reminded me of why she was reluctant to attend. Shona commented again on finding "Annie's Song" emotionally stirring. I showed Shona the rock blocks and demonstrated how to play them. She was fascinated and had a play. Shona started to speak lovingly of her husband who had passed away. She talked brightly about how the rock blocks reminded her of music she and her husband heard during a trip they shared in Africa. She described how they were on top of a mountain and could hear amazing music down below that they just had to investigate. This interaction felt more like the interactions we shared in the first half of the session Shona had attended, but this time it felt more genuine. Shona kept talking. She talked about the picture in the room and how it reminded her of another trip with her husband. Then Shona started to offer her song preferences - "Mull of Kintyre" and "Cockles and Mussels". Shona had heard me sing "Cockles and Mussels", but "Mull of Kintyre" coming to mind was of interest to me. She had not heard me sing this song, but I have had participants comment on the rolling imagery of this song and the sense it gives of being rocked gently on the sea. I wondered if the group's improvisation with the ocean drum had brought this song to mind for Shona, and given her a sense of being gently rocked.

Finding our way in life together

These journal extracts trigger so many wonderings about the deeper meaning of these experiences for my clients and me. These wonderings are a place of growth, where the answers to the questions about who we are becoming can be found. We shared our vulnerabilities. We shared our humanness. Together we were transformed, at our own pace and in our own way, by our

meeting and the intimate moments we shared. Every aspect of my life is enriched by being witness to the courage and humility of my clients.

How do your actions, subtle and overt, transform your clients' world?

How do your clients transform your world?

What do your special encounters tell you about what you seek from life?