

UPDATE

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Music: Mind, Heart, and Spirit

By: David W. Luce, Ph. D., MT-BC

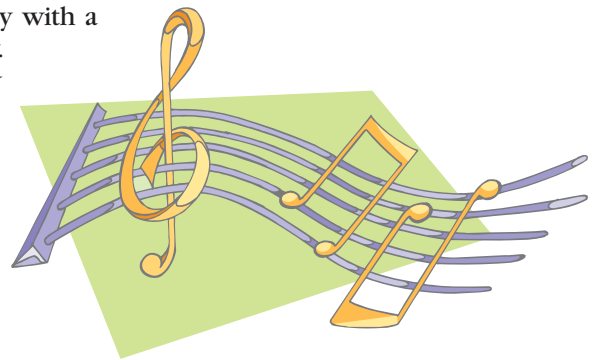
In *The Republic* (Book III), Plato wrote, “musical training is a more potent instrument than any other, because rhythm and harmony find their way into the inward places of the soul, on which they mightily fasten, imparting grace, and making the soul of him who is rightly educated graceful.” The healing rituals, ceremonies, and beliefs of indigenous cultures throughout the world are centered upon musical interventions or actions that facilitate communication with the spiritual entities that are revered by those cultures. In most churches, the voices of the faithful, a cantor or a choir, sing or chant to praise God, or to plea for intervention or intercession into their human experience. Nations around the globe rally and are emotionally bonded through anthems, while military organizations are aroused and inspired through music to march in unity with a firm sense of purpose and defend their country. And finally, we are most certainly aware of how in moments of grief, sadness, or despair, our human spirit seeks comfort, resolution, and connection through song.

For most of us, music touches our mind, body, and spirit. Imagine, if you will, the face of an older adult who is locked in an advanced stage of Alzheimer’s disease and seemingly unaware of time, place, or people. Yet, a familiar song can bring a smile, a look, or perhaps even a recalled memory that emerges in song. Contemporary music therapists use music within the cognitive, communicative, emotional, physical, and spiritual realms for rehabilitation and to provide comfort to people in need.

While the presence and interactions of the therapist define the therapeutic process, the healing power of music resides in the meaning that we assign to music. Our responses to music in terms of imagery, memory, reminiscence, recall, physiology, cognition, and communication are the essence of our human experience. Think again of the members of the United States Congress, standing on the Capital Steps, united in song, on a mournful September day.

Creating, making, or playing music is most often considered as an aesthetic response to our experience in the world. We build relationships and socialize with and through music. We dance or sing together, as we embrace or laugh together. We rely on music to set the mood for a special evening. We listen to music that matches our mood be it joyous or sorrowful, or to music that helps us to change moods such as from sadness to joy. We actively seek to reinforce or adapt our experience and feelings through music, whether it be playing music, listening to music, or creating music.

How do you use music in your life? Do you have an aversion to music, or certain types of music? Do you listen to particular music at particular times or for particular events or occasions? How does music support and nurture your life and your experience? What music or sounds do you allow to enter your experience? What music or sounds do you try to shut out? What sort of musical environment have you created for yourself? How does that nurture or support you, or does it have a negative impact on you? Perhaps, even more importantly, how does your musical experience challenge you to grow and expand your awareness, knowledge, and understanding of yourself, your place in the world? How does your musical experience connect you with a sense of aliveness and well-being? Does it



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have positive or negative effects? What control do you exert over your sound environment and its impact on your body, mind, and spirit?

A healthy sound environment is essential for your well-being. While music can be used for healing, it can also create disharmony, disease, or illness. A proper understanding of your reactions and relationship with the music you love and the music you dislike provides an opportunity for you to take positive action and affirm your responsibility for your own health and wellness.

Note: for a more extensive treatise on sound environment, see Halpern, S., & Savary, L. (1985). Sound health: The music and sounds that make us whole. San Francisco: Harper and Rowe.

Dr. David Luce is the Coordinator of Music Therapy at the University of Wisconsin Oshkosh. As a practicing music therapist, Dr. Luce has worked in a variety of health care environments including acute and chronic psychiatry for adolescents, adults and older adults, skilled nursing facilities, a sub-acute medical unit, a developmental center for children with special needs, and hospice. Dr. Luce received his Master of Music Therapy degree from Southern Methodist University in 1992 and his Ph. D. from Michigan State University in 2001.

The Agony and Ecstasy of “Emerging Adulthood.”

Susan E. Barbour, Ed.D.

We have the opportunity to share students’ lives at an exciting time. For many, the college years are the most meaningful and sometimes profound time of life.

For most students, college is a “journey” filled with both excitement and sometimes dread. College offers the place and resources for students to define their values, identity and goals. Along the way they will likely be rebuffed and may feel insecure. These and other interpersonal fears may color students’ self-image and their academic success. Some do well at developing social skills, defining identity and/or meeting internal or external expectations. Others are less adaptive and become confused, depressed, anxious or caught in a cycle of substance use.

Many UW Oshkosh students are the first in their family to attend college. They do not have the benefit of their parent’s experience and must rely on peers and university resources to learn about college life. More so, these students set a precedent for their family. They must adjust to the fact that their life style is different from their parents.

The transition from reliance on parents to self-reliance is exciting for many students and they find immediate and successful results. These are the students who use the academic environment well. For others, the process of self-definition is shaky but they experience a range of success and ultimately

feel good about what they have accomplished. Self-reliance is a rocky path for a smaller percentage of students.

Some students struggle to balance study with socializing, or they put a great deal of effort into their preparation and are disappointed by mediocre grades. Some are unmotivated to study because the end result seems so far removed from the upcoming physics test. Others with high ideals for themselves worry about disappointing their parents or themselves. They may experience test anxiety, writer’s block, or difficulty receiving and applying the information in their classes.

Students who come to the UW Oshkosh Counseling Center most often have relationship difficulties. The second most frequent problem is career uncertainty. However, students come to the Center for many reasons: academic problems, roommate problems, substance use or mental health problems. Assessing the source of the problem allows for a solution that meets the need. As university counselors, we assess the student’s presenting problem and what course of action will help.

A recent article in the American Psychological Association’s Monitor discusses how students nationwide are reporting more mental health problems and problems adapting to college life and how campuses are responding. “Campuses are increasingly recognizing that mental health is a critical factor in students’ academic success...”¹

Educational and Preventative Programs Address Mental Health Before it Becomes Illness

Productivity in work settings can increase as a result of programs that address how to maintain mental health and aim to reduce sources of workplace stress. One study showed that from employers in a national representative sample of companies from three major branches of industry:

- 69% state that motivation increased
- 60% that absence due to sickness decreased
- 49% that the atmosphere improved
- 40% that productivity increased

Encyclopaedia of Occupational Health and Safety. Vol. 1, Chapter 5, P. 4



For some students, routine tasks such as doing laundry, what to eat and getting places on time are a hurdle. We tend to underestimate the adjustment that is necessary as students grasp the reins of their lives



“By the end of this period, the late twenties, most people have made life choices that have enduring ramifications. When adults later consider the most important events in their lives, they most often name events that took place during this period”

Jeffrey Arnett commenting on the transitions that occur from late adolescence into the twenties.²

Take a look at what the research shows:

- In a 4-year study of college students who received counseling from CAPS (University Counseling Service), 91% thought that their academic performance had improved following counseling, 98% of these students recorded that counseling had assisted them to deal more effectively with their problems.³
- Students' adaptation to college (ability to cope with educational, interpersonal and societal demands) significantly improved when compared to the adaptation of students who did not receive counseling.⁴
- In a study of 122 students who were considering dropping out of college but sought counseling, 86% of the students enrolled for at least one more semester. Only three of the students who sought counseling chose to leave the institution.⁵
- A study of 187 students substantiated that counseling increases the likelihood that students who are identified as retention risks will remain in college. Most students reported that personal counseling was influential in their remaining in college. Results dispelled the perception that retention is predominately related to academic preparation or study skill deficits.⁶

The events of September 11th, student tragedies (for instance the recent student suicide at MIT) and an influx of students seeking psychological assistance (up from the national average of 10% to 13% of the

student population) along with the increasing prevalence of disruptive, life threatening problems is prompting universities to provide increased counseling and psychotherapy services to campus communities. Counseling services at Columbia University and the State University of New York at Purchase have seen a 40% and 48% increase in counseling center use since 1994-95 and in the last three years, respectively.⁵

In addition to the increase in use of the center, Robert Gallagher, Ed.D. former director of the University of Pittsburgh Counseling Center, comments that psychologists have noted an increase in the severity of psychological symptoms for students coming to Counseling Centers over the past ten years.

Gallagher's research shows increase in students presenting to counseling centers with alcohol abuse (44.5% increase), illicit drug use (49% increase), diagnosed learning disorders (71% increase) and eating disorders (37% increase). Campuses have increased the numbers of mental health professionals in their centers as they recognize that many students cannot succeed academically without counseling support; 21.1% of University Counseling Centers have gained new counselors since 1996. In addition, University counselors are working more closely with residence halls and faculty to help them help students and refer students to counseling when such a referral might be beneficial.

It is not up to you to attempt to determine if a student is experiencing growing pains or is in more severe or chronic distress. Nevertheless, you see students everyday and are often the first to talk with a distressed student. **University Counseling Center staff members are available to talk with you.** We can do that in person or by

phone. We welcome your concern and the chance to consider students' needs with you. In some situations you might just want to recommend that a student come to the Center and talk with a counselor about how to make a referral. We can talk with you about that as well. To reach a counselor at the University Counseling Center, phone:

University Counseling Center
(920)-424-2061

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5. Bishop, J. & Brennehan, K. (1996). "An initial assessment of a counseling center's role in retention." *Journal of College Student Personnel*. 27, 461-462.
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Susan E. Barbour, Ed.D. is Director of the University's Employee Assistance Program and senior staff psychologist at the University Counseling Center.

UPCOMING

EAP Brown Bag Seminars: Spring 2002

Sports Psychology for the Recreational Athlete

Ann Malain, Ph.D., Senior Psychologist University Counseling Center
Friday, March 29, 2002
Noon-1:00PM
Reeve Union 306

An introduction to some sport psychology skills that can help you prepare for competition, manage pre-competition butterflies, and maximize your physical skills. Skills that will be outlined include imagery for relaxation and skill building, and developing a pre-competition routine. Handouts and resources for further learning will be provided.

Violence and How it Affects the Workplace

Vicki Moss, RN, DNSc Associate Professor of Nursing
Wednesday, April 24, 2002
Noon - 1:00PM
Reeve Union 306

Violence in the workplace and at home affects us all. This seminar will focus on the cycle of violence, signs, safety, intervention, the effects on co-workers and colleagues and what you as friend or supervisor can do.

Looking ahead to the Fall! Mark Your Calendars!

Parenting Our Parents

Margaret Olson, Ph.D. Associate Professor of Counselor Education
Wednesday September 25th, 2002
Noon- 1:00PM
Place To Be Announced.

Role reversal, when we take over the care for elderly or frail parents, almost inevitably leads to caregiver stress, especially when other life/work roles demand our attention as well. This Brown Bag Seminar will emphasize the impact of role reversal on both parent and adult child, anticipatory grief, sources of stress, and resources available in the community.

Letters to the Editor

EAP Update invites comments related to EAP articles of interest to employees, or relevant to the University community. Space limitations may prevent all letters from being published, however, every effort will be made to accommodate submissions. Letters must be constructive, civil, and present a serious discussion of your point of view and suggestions. EAP staff retain the sole right to edit provocative, inflammatory, and devaluing usage or refuse publication that would fuel controversy in a counter-productive manner. Submit letters of 250 words or less in Microsoft Word to

Barbour@uwosh.edu
or by campus mail to 201 Dempsey Hall. Anonymous letters will not be published.

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