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Autism and Music Therapy

A Research Paper
presented to
Mr. George Kock
Ouachita Baptist University
Arkadelphia, Arkansas

In Fulfillment
of the Requirement for
Honors

by
Gennie Eldridge
Fall 1973

The human personality is a richly varied fabric.

AUTISM AND MUSIC THERAPY

Gennie Eldridge

EARLY INFANTILE AUTISM

In 1943, in Autistic Disturbance of Affective Contact, Leo Kanner described eleven children whose symptoms appeared to constitute a unique syndrome. This was termed "early infantile autism" in 1944.¹ Early infantile autism is a syndrome of which the symptoms can usually be traced back to the fourth month of life, but that often does not become disturbingly evident until the first or second year. Outstanding characteristics include extreme withdrawal from contact with people; an obsessive need for sameness in the environment; skillful manipulation of objects and often an affectionate relationship to them; a physical appearance of intelligence; and speech pathology ranging from bizarre language, a private metaphorical system, and other uncommunicative forms, to complete mutism.

Autistic children look normal. In fact, they usually seem bright because of an alert, thoughtful expression. Their motor coordination seems normal; they usually move quickly and are energetic and skillful with their fingers. Their problem is soon evidenced by their ~~lack of~~ avoidance of another's eye and by a lack of visual or auditory response to others. They are deaf and blind to people. In retrospect, one can detect the first signs of psychopathology in infancy. There are no social smile, no evidence of pleasure in the mother's company. One mother complained, "He didn't look at me when I fed him in my arms," and another

typical complaint includes, "He never noticed when I came into or left his room" or "He was never cuddly."² There was no reaching out; the autistic child did not get set to be lifted into his parent's arms. There was no particular reaction to strangers, either. Usually, these children were regarded as especially good babies, because their demands were few; they were content to be left alone and did not make the normal fuss at bedtime or other moments of separation. Such information regarding early infantile characteristics is admittedly tenuous, because it is always obtained after it is well established that the child's affective relationships are very limited. However, there is no doubt by the end of the first year. There is no imitation of gestures (e.g., waving bye-bye) or sounds, and also the baby remains uninterested in social games like peekaboo and pattycake.

The failure to imitate, derived from a lack of personal relationships, is the beginning of another major symptom-- the failure to use speech for purposes of communication. In most autistic children speech is totally absent. When they do speak, their language has a strange, parrot-like quality. The child doesn't appear to be talking to anyone nor to expect any answer; he utters repetitious, stereotyped phrases and engages in no conversational give-and-take. For example, the autistic child seldom answers "Yes" or "No", but is likely to echo the question. Personal pronouns are also repeated as heard; consequently, the child speaks of himself as "you" and of the person addressed as "I".

The autistic child's facility with objects is in striking contrast to his response to people and language, but his interest in toys is more restricted than that of the normal child. Things that spin, puzzles, reflections of light and shadow, for example, have been known to engross

an autistic child for months on end. For him, everything is form. If he likes to look at books, it is for the form of the letters and words, not for the accompanying pictures. S. Ritvo and S. Provence, speculating on the autistic child's absorption with playthings, noted that a toy given to a normal child becomes important largely because it comes from the parent of an adult. To autistic children, the plaything is important because it can be manipulated, rolled, spun, fitted together, juggled, clutched, and so on. It makes no difference if a picture is upside down when they assemble a puzzle-- the handling of the object is an end in itself.³

Many authors have commented on the phenomenal memory of autistic children; very young ones have been known to recite great quantities of poetry, a list of the Presidents of the United States, and other factual material at an age when the information probably couldn't be meaningful to them. Also indicative of their astute memories is the obsessive need for sameness; minute, ordinarily unnoticeable changes of environmental arrangements or the order of events sometimes precipitate violent temper tantrums, even though the child shows no further interest after the deviation has been corrected. Intricate patterns constructed from one-hundred blocks have been used to test this trait by changing one block at the second viewing. Deviations are noticed immediately, even when the viewings are separated by several days.⁴

At the outset, it is well to differentiate between autistic behavior, which occurs in other mental illnesses and in mental deficiency, and the syndrome of early infantile autism, which is a separate classification. The child with early infantile autism can be distinguished from the mentally deficient child on the basis of his normal motor development and

his intelligent and thoughtful facial expression. He has excellent rote memory and memory for tunes, and sometimes he possesses an amazing vocabulary. Infantile autism is distinguishable from the chronic brain syndrome because of its lack of the incessant pressure of impulsive hyperactivity that is so typical of brain damage. In the brain syndrome, it is usually the motor rather than the speech development that is slow. The reverse is usually true with autism.

Although autistic children outgrow some of their autism, they remain egocentric. They are unable to see themselves as others see them; they lack tact and poise; they cannot join a group; they remain socially isolated. They may learn to travel in company, but not with company.

Just as the autistic individual is unable to identify with someone else, so he is unable to empathize with others. He can neither accept their personalities nor put himself in their position.

Interestingly, none of the follow-up reports on autistic children contains any information about romances or marriages. (Autistic boys outnumber girls about 4 to 1). It seems highly doubtful that even an ex-autistic boy would ever acquire enough social interest or skill to approach matrimony. There is also curiously little known about the sexual development of these youngsters. There is little evidence of masturbation. And there are few signs of specifically sex-oriented interests, which would seem to be a natural corollary of the lack of identification with the parent of the same sex or with peers of the same sex. Their interest in mechanical objects may look masculine, but this impression is counterbalanced by their complete disinterest in sports.

AUTISTIC CHILD AND MUSIC

A common observation is that autistic children show unusual interest, and often talent, in music. Schulman (1963) cites the case of an autistic child who sang operatic arias at the age of eighteen months, although he didn't develop speech until nearly three years of age. Ritvo and Provence (1953) report a child who at about 2½ years old, developed a strong interest in phonograph records, which he played continually; however, he would skip over the parts that used the human voice.⁵

In one case, unusual because in adulthood the patient is considered recovered, became a composer. The subject was such a fine pianist that professional musicians would go to his home to perform with him, despite his unreasonable personality.⁶ A study of over thirty autistic children revealed only one who didn't show deep interest in music. In another study, one of four autistic children displayed interest described as "extraordinary knowledge of recorded music," two were considered in the class of "musical genius", and the fourth had an "extensive repertoire of popular and classical music."⁷ The conclusion is that musical ability and interest are "almost universal in autistic children."

Singing

Group singing provides a range of stimulating, liberating experiences for the autistic child. Each musical attribute or structural characteristic of the songs they sing directly influences the quality and extent of their participation. Melodic color and freshness vitalize their awareness. Harmonies with impact and movement give emotional fiber to their singing experiences. Expressive variety in the rhythmic structures in melody and accompaniment enlivens the words of the songs and enlivens the singers.

Songs with content they find meaningful are sung with conviction. A comfortable pitch range for their voices maintains participation throughout the song. Tempos that give time for the forming and enunciation of words help them to sing with satisfaction.

An autistic child singing intently is deeply committed to his singing. The musical instrument he uses is his own body, his voice, and he experiences his singing as a direct extension of himself. The child's personality becomes integrated in the act of singing and functionally organized by the musical structure and content of the song itself. Suffusing his whole experience, and inseparable from any part of it, are his feelings about the song, about himself singing, and the particular quality of his pleasure in the singing group situation.

Singing can thus be an experience of arousal. He becomes able to use personal capacities with greater consciousness and can experience, as a result, direct, substantial fulfillment.

This happens to individual children within the group setting. The overall responsiveness of the children, their mutuality of concentration and uplift, supports each individual's personal experiences and gives them a positive social foundation. In this way experiences in group singing can influence the development of social relationships among the children.

Such are the broad effects that singing can have upon autistic children. Particular results, such as any lessening of behavior disturbances in individuals, the stimulation of speech formation, the overcoming of fearfulness and the like, also become positive factors in the group dynamics and further in cumulative benefit for all.

Rhythm Band

Often, in the name of the "rhythm band", autistic children are given an assortment of percussion instruments and encouraged to beat freely to music. This use of the instruments is frequently haphazard and can give little in the way of musical or developmental experience.

The benefit of the rhythm band results from the organization of its activity. The class should be divided so that different types of instruments are grouped together, thus bringing about a contrast of several sections--one of drums, one of tambourines, one of triangles, etc. Each section plays to specific parts of the music, and perhaps all the instruments play together to give the composition a rousing conclusion.

In the rhythm band the children beat time to music or outline its structure with percussion. This gives an experience of "following" or "Accompanying" music. Almost always the music is complete in itself--it does not require the children's participation. Its rhythmic pulse leads, and its structure defines their beating, but essentially the children are "external to the music".⁸ Their activity rarely has any part in creating the musical-tonal stimuli to which they are exposed. Hence their involvement is limited.

Another musically limiting aspect of rhythm band work is that the children experience their own beating activity as much as they do the music. Repetitive beating is a strongly physical experience in which autistic children often lose themselves, thereby losing the music, too, or feeling it merely as a stimulating accompaniment to their physical activity. The child who beats with enthusiasm and pleasure while totally unaware that he is not beating in time to the music is a familiar example of this.

The effectiveness of instrumental activity as music therapy can be increased by finding ways to open up the experiences of music to autistic children, and to bring them into activity "within" music through the instruments they play.

The part each instrument plays should be set in a composition so as to become "musically essential to it,"⁹ thus drawing the child who plays it into a specialized, but nonetheless real, making of music. Compositions can be arranged for a number of such simple instrumental parts so that they become components of a music unity. Each child's part, with its own musical meaning, will then become integrated into a total experience that will contain, and require, the work of all the children participating. An arrangement that carefully and inventively makes use of the various instruments' sounds can also serve to set off each part distinctly. This will make each child's efforts clear and his "music-making" will stand out in the combined work of the group.

Instrumental musical activities of this kind can create special situations in which we can intensify autistic children's commitment and give them opportunities to develop perceptiveness, concentration, and initiative. Through consistently directed work they can experience purposefulness, perseverance, responsibility, and self-confidence-- central and essential qualities for the growth of an integrated personality.

OBSERVATION

The three weeks between Thanksgiving and exams I spent Tuesday and Thursday afternoons observing the music classes at the Children's Colony in Arkadelphia. The first week I observed the class as a whole to get an

idea of how the children reacted and also to pick out a child that I could observe for the remaining time. On the whole, the children really like coming to music class. At the present time the class is considered an extracurricular activity. The main purpose is to allow the kids a way of letting out their frustrations and emotions. I could tell how this helped, because when they really got involved in the music they became hyperactive and would use their bodies a lot. Body motion seemed their best way of expression. Such motions as rocking in their chairs or dancing to the music let off their steam, but also showed good rhythm and sense of time. This class was started in August and the reported progress of these children's is remarkable.

I remember the first day in the class, a very cute little boy, about six years old, came slowly into the room. Let's call him Bryan. He is autistic. His nose was running, and he was slobbering a little. His pants were almost around his knees, and in his hand he clutched a dirty old stick. In spite of his disheveled appearance he looked very bright. He made his way to the corner of the room where he sat away from the rest of the children. He crossed his legs in the chair and stuck that stick in his mouth and looked at the teacher, Gary, and said, "Cigar." After that one word he sat staring ahead. It seems that the stick is his constant companion, and everyday he would tell them whether it was a cigar or a cigarette.

An average class period consisted of a great deal of singing, usually upon request. They liked "Do Lord", "Jesus Loves Me", "He Has the Whole World in His Hand", and "Old MacDonald". Usually Bryan would sit staring ahead, though occasionally he would rock back and forth in his chair.

He never responded to anyone talking to him or to a smile. He'd sit and stare at a person, but I really don't think he was really seeing the

person. It really surprised me one day when he was sitting there staring at me, that when I smiled at him, he actually smiled back. Then he just rocked vigorously back and forth in his chair, hitting himself on the head with his stick, as if he were punishing himself for showing any kind of feelings toward a person.

During one class period they were having what they call "The Star Hour", where each child could sing a solo in front of the class, if he wanted to. They feel really proud when they get up in front of the class, because to them it is a big step to make. It is a big step, because it shows they are learning a little self-confidence, and they have overcome the fear of doing it. Everyone had sung, all but Bryan, and when Gary asked if he wanted to sing, he nodded his head, got out of his chair and started singing (or what I suppose was singing). It consisted of a lot of ooo's and eee's, and really not a melody, but to him it was music.

But that was not the only time he really participated. One day they played "Simon Says" with a record. The first time through Bryan didn't do anything but stare and "smoke" that stick. But the second time through, Gary told them that they would have to participate before they could leave, and if they did take part, he would give them a jelly bean. As the record started, Bryan looked at Gary and then at me and got slowly out of his chair and took part in "Simon Says". He grinned when Gary gave him the jelly bean as if he only did things when he would get a reward.

Another day, rhythm instruments were passed out ~~at~~ he used with "Michael Row the Boat". Most of the kids had fairly good rhythm, but Bryan's rhythm was exceptional. He not only used the instruments correctly as far as beating the time, but he rocked in his chair as he beat the rhythm, and all

these motions were in time. I tried it, and I had trouble getting the two motions coordinated.

Since I'm not qualified to give an expert conclusion, I'll just say that in the three weeks I observed I could see how music was helping Bryan. He is very musical, and he sometimes would completely lose himself in the rhythm and the music. Occassionally he would respond to a smile, but on the whole he kept away from the children or any kind of human contact.

I think that music therapy is a good way to reach the autistic child, not only them but also the other mentally retarded children. It builds up all parts of their personality that ^{are} ~~is~~ lacking and lets them be themselves. It has made me more aware of these kids as being children with feelings and has done me good by working with them. I've learned to be open with them, as they are with me. And through music they can express this openness and freedom.

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FOOTNOTES

1. Jane W. Kessler, Psychopathology of Childhood (New York: Prentice-Hall, Inc., 1966), p. 265.
2. Ibid., P. 266.
3. Ibid., p. 267.
4. Thayer E. Gaston, Music Therapy (New York: Macmillan Company, 1968), p. 182.
5. Ibid., p. 184.
6. Ibid., p. 184.
7. Ibid., p. 187.
8. Paul Nordoff and Clive Robbins, Music Therapy in Special Education, (New York: John Day Company, 1971), p. 81.
9. Ibid., p. 82.