An innovative approach of music therapy in kindergarten

Lioara FRĂŢILĂ¹

Abstract: The intent of this article is to explain the socio-economic benefits of music therapy in kindergarten. Early infancy and childhood development of social skills are crucial for the successful transition from one stage of life into another. Other important issue addressed in this article is an analysis of the status and development potential of music therapy in Romania, by estimating the costs of implementing the music therapy sessions in preschool education and professional status review of the music therapist in Romania. Music therapy is a form of therapy that is not more expensive than others, and there are countless benefits and long term. Extending this profession and its implementation in institutions in Romania could lead to significant economic changes, a more qualitative life.

Keywords: health economy, music therapy, sustainability, innovation, kindergarten

1. Introduction

Decades of research have been conducted on social skills training programs and their efficiency in teaching acceptable social behavior. As social development can start even as an infant, these programs have sought to cover appropriate training for all ages. Various methods have been attempted including, but not limited to, cognitive behavioral approaches, group versus individual sessions, social perception training, behavior modelling, direct teaching against unstructured play, and various other research-based interventions. The social elements of music are various in number and invaluable in their attempt to increase social skills.

In an overview of their book, Cornelius and Natvig (2011, 54) listed chapter titles as music and its relationship to multiple social elements encountered on a daily basis. These included experiencing music, listening to music, music and gender, music and spirituality.

¹ Transilvania University of Braşov, lioara_popa08@yahoo.com

Introducing kindergarten music therapy can have a major impact on children. Coroiu (2015, 278) states that the educational environment has an important influence on the child's mental and spiritual health. Chau et al. (2010, 132-134) analysed the interests of parents, teachers and businessmen regarding the influence that music has on children's development.

Because music therapy is used as a complementary therapy and has positive effects in depressions, anxiety, it can be used in the emotional and intellectual development of children (Wheeler 2015, 39-43).

2. Objectives

To justify the implementation of music therapy in kindergartens, there will be analysed the possibilities of developing music therapy in Romania, by estimating the costs of implementing music therapy sessions in preschool.

The reasons for introduction of group music therapy in the weekly program of children in kindergarten will be presented and debated, to understand the necessity of this form of art in the development of preschool children: motivation, creating of music as a way non-verbal communication by sounds; creating of music as an opportunity to explore control problems.

The implementation of music therapy into kindergartens in Romania requires an analysis of the costs which a music therapist have to support and the way in which he can earn his living. It will be analysed if this therapy is worth addressing, into current conditions of our country, what means the costs for a parent who wants to register their children at such meetings, and if the music therapist investment can be recovered in a short time.

The implementation of music therapy in kindergartens would be a way to facilitate this therapy and not to make the participation in music therapy sessions obligatory to anyone. To make such kind of therapy possible in all kindergartens in the country, without such sessions to be supported by the state, it should be demonstrated the reliability of music therapy, for both parents that earn gross average salary and for those who have a minimum gross salary.

3. Material and methods

Childhood development physically, emotionally and socially can be vastly different from one child to the next. While several factors affect a child's development, environment and disabilities to name a few, several social norms remain across children from one generation to the next. Children learn to be social beginning with infancy and continue to acquire new social skills with each new level of development.

Infants, toddlers, preschoolers and adolescents and teenagers all experience various levels of social skills introduction. Research on social interactions and development with these age groups over the last several years has produced valuable insight into early social skills development. Social skills are interactions with other people, involving initiation and response behaviours.

3.1. Social development in children

Beginning with infancy, LeCroy (2007, 287) determined that peer interactions aid in developing social skills and can provide fundamentals required for the acquisition of future social development.

In early childhood, the building blocks of social relationships begin to form. Young children dependent upon parents or guardians for social interactions, start to move away from parallel play when the toddler is beginning to indicate understanding and acceptance of the concept of sharing. Between this time and 30 moths of age, toddlers begin to form attachments to or friendship with individual social peers.

Later during childhood, preschool begins opening the child's social environment to new experiences both during structured classroom teaching and free play. Relationships are no longer a new commodity as the bonds of friendship begin to form and become a new social norm. This makes the transition through kindergarten and into first grade socially seamless in forms of relationships. Around six years old, the child moves from early childhood to middle childhood, which lasts from around age 6 to about age 11. Social relations are multifaceted while fine distinctions in interactions begin to develop. Middle childhood is the stage where social acceptance and group inclusion become strong aspirations and can have a strong effect on their social environment (Berk 2007, 40).

3.2. Social skills deficits

Social development discussed is the standard development for typically developing children. However, deficits often occur in social skills due to a variety of reasons, including environment, circumstances and disability. School-aged children suffering in social deficits from any of these situations need remediation and social skills training in order to function appropriately in society. Hoza (2007, 104) found that poor social interactions occurring during childhood can even predict psychological

functioning for their future, better than even IQ scores, grades, achievement tests or teaching ratings. It is imperative that these students receive remediation early in childhood, as to develop skills necessary to adapt in various social environments.

Social skills deficits are far too prevalent in today's young children. Research attempts to discover a means to remediate social skills deficits through various therapies.

3.3. Music therapy to improve social skills

Several studies have been conducted examining the effect of music therapy on improving various social skills. Several steps are needed to impact a child's social skills acquisition, the first of which is motivation to participate in the activity. Once motivation for the student is present, the child must personally make the decision to participate with both the therapist and the other children in the music setting. Next, the child must form a relationship with the music, the music therapist and the other students within the group. Only after a trusting, open relationship is formed can the child begin to acquire and develop new social skills that may be transferred to other environments.

Building relationships with the music, the music therapist and the other group members could potentially prove to be difficult for the child. Using traditional instruments to accompany familiar music can assist in the development of relationships while also promoting a safe environment (Behrens 2012, 214).

Music therapy's effect on social skills has long been documented. Walworth (2009, 36) indicated music therapy's effectiveness in improving parent-child interactions, a crucial social skill developed during infancy. In studying preschool age children with developmental disabilities, Sussman (2009, 58) found that musical objects are successful in growing peer awareness as a social skill through music therapy interventions. This study concluded that singing, toning and chanting was a social accessible experience that created opportunities for social interactions.

4. Results and discussion

In Romania, the music therapists training is just at the beginning. Development of such study programs in this area should include topics that provide information about the formation and perception of sounds, types of music that can be used during music therapy, data in order to facilitate recognition and understanding of temperament and personality, so the work should be based on adequate knowledge of music, psychology, medicine or physics. Also, in the training program

should be introduced study subjects in order to facilitate both theoretical and practical or carrying out research and educate future professionals in the spirit of respect the ethical and professional rules.

Being a border profession, music therapy covers those ethical issues that relate to the relationship with other members of the medical or psychological team.

Occupations covered by graduating music therapy master can be: music therapist in hospitals, clinics, health centres, private practices, schools, kindergartens, theoretical research, research etc.

4.1. Costs of practicing music therapy in a kindergarten

The costs that can reach a music therapist in order to equip a music therapy room depends primarily on the customer category to whom it is addressed.

The most effective organization of music therapy sessions are those which are taking place in institutions because it does not requires large investments, customers are already there and will ensure a continuously participation in music therapy sessions. An example of this is the work that the author is performing as a music therapist in a kindergarten in Brasov. Once a week, he organizes music therapy sessions for preschool children.

The facilities which a music therapist must do in order to practice in an institution are: a piano (organ, electric upright piano etc.), whose cost can vary between 400–2000 lei, a set of Orff instruments 500–600 lei, a CD - Player (400 lei), used music (500–600 lei) which needs to be purchased (a classical music CD costs about 50–100 lei). On this basis, it can estimate a cost of facilities 2.400 lei (Table 1).

Facilities	Music therapy sessions in institutions	Music therapy sessions on your own
Furniture	_	6000
Piano	1000	4000
ORFF Set	500	500
CD-Player	_	_
Sound tools	-	2000
Printed music CD-s	500	500
Total	2400	13000

Table 1. The value of facilities necessary to conduct music therapy programs in institutions and the expense of the music therapist in Romania

If the music therapist is not going to institutions where music therapy is needed and must arrange a room the costs are becoming much higher.

As facilities, the music therapist will need furniture – comfortable seating for both children and adults (6000 lei), a furnished room for individual sessions with patients, a piano (preferably a quality one 3000–4000 lei), an advanced sound system (2000 lei), classical music CDs and not only (a collection diversified to cover a wide range of conditions and types of customers etc. – 500 lei), Orff instruments (500 lei). Thus, the value of the facilities can be estimated that will be of 13.000 lei.

In terms of current expenditure the music therapist would need to rent a generous space (unless it has one) whose rent is about 1400 lei. Secondly, you have to pay monthly utilities (300 lei), supplies for cleaning, maintenance etc. (200 lei) advertising in order to promote music therapy sessions. Finally, another current cost is the advertisement for promoting the music therapy cabinet.

Type of expenses	Music therapy sessions in institutions	Music therapy sessions on your own
Furniture	-	6000
Piano	-	4000
ORFF Set	100	500
Advertising of promoting the music therapy cabinet	200	-
Transport	200	2000
Total	500	500

Table 2. The amount of monthly expenses necessary to conduct music therapy programs in institutions and on their own

It is noted that the current expenses level per month is in the case of the music therapy programs which are perform on your own is 4 times higher than of their performance in the institutions. In the second case, current expenses per month include the transport of the music therapist (200 lei), the facilities maintenance (100 lei) and advertising in order to promote music therapy sessions (200 lei).

In terms of the costs which a person pays for attending in a individual session of music therapy varies from 50–100 lei, while for a price group can be between 5–20 lei per person, depending on how many people attended and the prices determined by each individual music therapist etc. If we refer to individual sessions that last 50 minutes and take place once a week, a person must spend a minimum

of 200 lei per month to benefit from this therapy, a large sum considering that the gross minimum wage is 900 lei. So, the amount of 200 lei represents 22% of the minimum salary.

For people with an average gross salary (2298 lei) the weekly participation in individual meetings constitute only 8.8%. However, for people with low incomes, can be chosen the group meetings, whose benefits are sometimes larger than the individual sessions in order for the meeting with several people who are facing the same problems and have the same goals are a form of an appropriate treatment.

For example, in kindergarten in Braşov in which the author elaborated the group meetings of music therapy, one hour of music therapy would cost 8 lei per person. For a group of 6 children for example, a parent would pay each month 33,3 lei. Having regard of the many benefits that music therapy can bring to preschoolers or students, this amount is a tiny and can be successfully supported by most parents. Despite the group meetings, the music therapist is performing individual sessions in which usually teaches the child to play an instrument, preferably the piano. For this activity it needs the same organ for your child to play and the scores that the music therapist will bring or compose himself.

One hour of piano can cost around 50 lei, because this instrument is taught individually in order to have significant results and is a cost that must be supported by parents. Hours of piano are not a must but helps a lot to the music process of which the child belongs. So, in addition to 33.3 lei per month, a parent should pay another 200 lei for 4 hours of individual music therapy. The amount of 233.3 lei per month is 26% of the gross minimum salary and about 10% of the average gross salary.

For those who can not afford this amount they may chose to participate in group meetings, reducing costs amounted to 33.3 lei per month. In what concerns the music therapist, the initial investment is about 1.800, less transportation which needs to be paid monthly.

Assuming that in a kindergarten / school the music therapist would have two groups of music therapy, of 6 persons each would earn a monthly gross income of 400 lei. And if he would work every day in a new school, he could go to two schools /kindergartens, where he would perform a minimum of two sessions of music therapy group, which means he could win 3600 lei per month. If the facilities depreciation is accepted in six months, it will result that will allocate 400 lei per month for this purpose. Taking into account the running costs (500 lei) gives a monthly income of 2.700 lei in the first stage, when the facilities are amortized and

3.100 lei in the second phase, when no money are allocated for the facilities depreciation.

Taking into account the large number of kindergartens, schools etc. whether public or private, the supported above assumption is realistic and can be achieved successfully and even doubled as number of hours. If are taken into account the social security contributions, earned by the employer, results that the music therapist income is equivalent to a gross salary of 2.213 lei in first phase and of 2541 lei in the second phase.

In the case of performing the music therapy activities on your own, is necessary both to extend the depreciation of facilities and increase the volume of services. Otherwise, if the amortization period will be 20 months and the monthly benefit amount will be 50% higher will be obtained the following results during one month: gross income = 5400 lei, facilities depreciation = 650 lei, current expenses = 2000 lei.

Salary income of the music therapist = 2750 lei in the first stage (in the depreciation is paid) and of 3150 lei in the second stage (when the depreciation is not paid anymore). Income equivalent to the gross salary = 2254 lei in the first stage and 2582 lei in the second stage.

5. Conclusions

"Each group has their own specific characteristic and needs and the flexible nature of music makes it an effective medium for addressing these multifarious needs (Kalas 2012, 104). Strong social skills are crucial for a student's successful functioning the classroom, social settings and life in general. Without appropriate social skills, children's ability to interact with others effectively is unattainable. It is imperative that music therapists continue to research social skills training with preschool children, as a deficit during childhood in social functioning has been linked to several negative outcomes later in life (Gooding 2007, 74).

In Romanian literature there are currently no economic analysis of the costs of implementing music therapy in any institution. The implementation of music therapy in the weekly program of kindergartens is an innovative idea, easy to implement.

Music therapy sessions conducted in kindergartens provides children equal opportunities, regardless of the parent's financial situation, the possibility to opt for starting vocational schools (music school) and thus increase the number of

students in these institutions. Another important economic issue would be the increasing of the number of students in music schools by developing a program music therapy during kindergarten. This provides economic continuity for the existing music faculties in the country, whose student number is constantly decreasing.

Also, by increasing the number of students in music schools, it will ensure the sustainability of employment of teachers from music schools and music faculties. The implementation of music therapy sessions in kindergartens can be a first step towards familiarizing the Romanian population with this therapy and enable pre-schoolers to grow with another vision about music, benefiting from a special education. All these benefits will ultimately lead to the development of music therapy concept in Romania and its inclusion in the list of professions.

This study sought to use music therapy as an effective means of social skills training in preschool—aged students. Further research is needed to determine the ideal setting and procedure necessary to impact preschool student's acquisition of social skills to increase their potential of a successful future.

References

- Behrens, Gene Ann. 2012. "Use of Traditional and Nontraditional Instruments with Traumatized Children in Bethlehem", West Bank. *Music Therapy Perspectives* 30 (2), 196–202.
- Berk, Laura. 2007. "History,Theory and Research Strategies". In *Development through the lifespan* (4th edition), 3–43. Boston: Allyn & Bacon.
- Chau, Christopher and Theresa Riforgiate. 2010. "The Influence of Music on the Development of Children". *Spring Quarter* 132–134. San Luis Obispo, California.
- Cornelius, Steven and Mary Natvig. 2011. *Music*: A Social Experience. Boston: Pearson.
- Coroiu, Petruţa. 2015. "The Role of Art and Music Therapy Techniques in the Educational System of Children with Special Problems". *Procedia–Social and Behavioral Sciences*, 278.
- Hoza, Betsy. 2007. "Peer Functioning in Children with ADHD". *Music Education Research* 101–106.
- LeCroy, Craig Winston. 2007. "Problem Solving and Social Skills training groups for Children". In *Cognitive Behavior Therapy in Clinical Social Work Practice*, ed.

by Tammie Ronen and Arthur Freeman, 285–300. New York: Springer Publishing Company.

- Sussman, J.E. 2009. "The Effect of Music on Peer Awareness in Preschool Age Children with Development Disabilities". *Journal of Music Therapy* 46, 53–68.
- Walworth, D.D. 2009. "Effects of Developmental Music Groups for Parents and Premature Infants under two years on Parental responsiveness and Infant Social Development". *Journal of Music Therapy* 46, 32–52.
- Wheeler, Barbara. 2015. Music Therapy Handbook. Oxford: Guilford Publication.