



**M**usic touches special places in almost everyone — from the church music we heard as children to the rock ‘n’ roll we danced to as teenagers. For these survivors, music has taken on a healing role, a way to get beyond their deficits and find joy where once there was only despair. Whether they’ve played before or are learning anew, music has helped them make connections in their brains and in their communities.

# Healing through Music

by Jon Caswell

# Jazzing Up Life for Others

## Music is life for John Hopkins.

A jazz pianist, the former Army sergeant-first class has played for presidents and generals around the world, first as a member of the U.S. Army band system. After his military experience, he performed at musical venues throughout Europe and Asia. His performances came to a sudden and permanent end in October 1999.

As he was about to go onstage at the famous Grill Room of the Grand Hyatt Hotel in Tokyo, John had an embolic stroke that left him in a coma for 10 days. He was 46 years old. Doctors gave him 48 hours to live, and his sons, both in the military, flew in to be by his side.

“While I was in the coma,” John said, “my father, who had died of Alzheimer’s several years before, came to me. He said, ‘If you are ready to go, I will take you, but God has something else for you to do. He’s not ready for you to leave yet.’ I told him that I wasn’t ready to go, and at that moment I sat up in bed. For the first time in weeks I had a conversation that could be understood and made sense.”

John was in the Tokyo hospital for three months, but because he didn’t have insurance, he didn’t receive any therapy. Paralyzed on his right side, he also lost his speech,

or at least part of it. Then, on Christmas day 1999, with financial help from some friends, John flew out of Tokyo, lying down and still attached to medical equipment.

He arrived at his son’s home in Washington State, where he began therapy at a local hospital. That was interrupted when he went to Russia to be

with his life partner who was working in Moscow at that time. “When I went to Russia, I was in a wheelchair,” John said. “They worked with me there, and when I came back to the U.S. two months later, I was walking.”

He settled in Leavenworth, Kansas, to be near his son and a VA hospital. He could walk, but he still couldn’t use his right hand, and he knew his professional playing days were over. Restless and ready to be purposeful again, John began looking for another way to share his music with the



*John Hopkins working with an Age & Play client*

world. “So many friends and family members had helped me, I wanted to give something back.”

Out of this commitment, and in honor of his father, John contacted a local aging center. “My idea was to teach music to seniors, to stimulate the minds, bodies and spirits of people with mental and physical handicaps,” he said. Out of those visits, John has developed Age & Play, a nonprofit organization dedicated to teaching music to seniors.

In the three years since John started teaching, he has shared music with many handicapped seniors. Lessons last about 30 minutes, but are shorter for Alzheimer’s patients.

At one of the nursing homes, nurses told John of a woman who had not spoken for 15 years but who had taken piano lessons when she was younger. When he sat her down at the piano, she played beautifully, much to everyone’s surprise. “She’s still playing regularly,” said John.

John now teaches at three locations in Leavenworth, and the program has expanded to Kansas City, Kansas, and Colorado Springs, Colorado, where Age & Play board member Don Wagler handles the teaching duties. “We have recitals for our students so they can play for family and friends,” said John. “It gives them something to aim for.”

It gives something special to John, too. “When I see the courage and confidence my students have developed, when they perform before an audience of strangers or when my physically challenged students can memorize the terms that are meant to strengthen their minds, then I know we have achieved success. This is God’s way of saying to me, ‘Well done,’ and what more does one need?”

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# Surviving to Sing

**A**s a carpenter, Trevor Gibbons knew to step into a building through a door — not a window. But as he was framing windows on the 4th floor of a building in New York City, he suddenly got confused, his vision blurred, and he stepped out of a window into thin air.

A stroke can do that to you.

When he was found three hours later, Trevor was rushed to a hospital. A CT scan confirmed a clot, and he received treatment then was moved to rehab. “After a month there, I was still getting pain in my shoulder,” Trevor said in an interview at Beth Abraham Rehabilitation Center in New York. “I thought it was from the stroke, but when they did an MRI of my spine, they found herniation of the cervical spine.”

Doctors performed surgery, but the clot-preventing drug warfarin was not started soon enough, and he had another stroke.

“I couldn’t speak, and I was in a harness for 14 months. That’s when I came to ‘Beth Abe,’ September 2001,” he said. “I was flat on my back for 10 months, counting dots on the ceiling. I was very depressed.”

**“During my recovery, my key words were endurance, strength and courage, and they have brought me this far.”**



That’s when he met music therapist Lucy Butler, an intern at the time. “She would bring her piano to my bed and encourage me to sing ‘This Little Light of Mine.’ My vocal cords were damaged, but I began to try. Her motivational skills helped me overcome so many things. I have a limp on my right side, but I can walk now. I have upper-body motion. My hands are open. I can write.”

And he can sing “This Little Light of Mine.” In fact, through music therapy, Trevor found that he could not only sing songs, he could write them. “One day Lucy encouraged me to write my own feelings,” he said. “At the time, I was looking out the window, and that became the first line of my first song.” Then he sings in a clear, strong baritone:



*Trevor Gibbons performing at the Lincoln Center*

“Sitting at the window, watching the cars go by, wondering why I’m feeling so empty inside. Don’t know why my days are so short and my nights are so long, but I know one day I’ll go home again.”

Although he has no formal musical training, writing and singing became the focus of Trevor’s life. “I wrote three more songs,” he said. “By the time I was able to sing, the harness was off me.”

He met the well-known recording artist and music producer Moby when he made a visit to Beth Abraham. The entertainer donated money for a recording studio at the rehab hospital.

Within a few months, Trevor had recorded a CD with 10 original songs. Then last fall he was asked to perform at the Music Has Power awards at Lincoln Center. “After I came home that night — I’m in a long-term care unit at ‘Beth Abe’ — I wrote another song and went into the studio the next morning and recorded it. It’s called ‘One Thing Sure.’”

Trevor’s first CD, “Trevor’s Melodies,” was released in spring 2004, but it was only the beginning. “During my recovery, my key words were endurance, strength and courage, and they have brought me this far. I keep writing songs, and they have to do with my life. I already have 10 more songs. Music is my inspiration, my escape from sadness and loneliness and pain. When I start to sing, it opens up my mind and I think, ‘There’s nothing I can’t do.’”

# Spreading Healing Vibrations

Lynn Marks never thought about playing the harp till she had a stroke in 1997. In fact, she had never played any musical instrument, nor could she read music.

The stroke was the result of an arteriovenous malformation in her left temporal lobe that left her with aphasia and anomia. Lynn, who was 42, also had significant right-side weakness, couldn't even use her right hand for such simple tasks as washing her face, and walked with a cane.

"I went several months where I couldn't communicate easily because I had lost my nouns," she said. "I would cry and scream in frustration because I could understand

**"I knew from the beginning that I survived the stroke because I had a mission. When you get a second chance, I believe you have an obligation to give back."**

everything that was going on — no memory problems, intellect intact. The frustration level was tremendous because I was locked inside my head with all these monologues going on."

During this time she saw a television

documentary called "Healing Harps." It was an account of how Dr. Ron Price, a professor of music, was teaching multiple sclerosis (MS) patients to play the harp to increase their motor skills. Some were even kept out of wheelchairs.

"The harp has a vibratory impact," Lynn said, "and he believed that was what helped the MS patients. I felt like that might help stimulate my brain, since music is stored in the right side. It was hard to find ways to stimulate my brain because I couldn't read, since words are stored in the left side. Reading is still very labor-intensive for me. If I read even a page, I have to sleep for hours."

It took another year for Lynn to regain enough strength to start taking harp lessons. "It's been wonderful because it's a difficult instrument. You have to read the music, pluck the strings and change the key with the pedals, so I must

use my arms and legs at the same time. About a year after I started, I noticed one morning that I was using both hands to wash my face, so playing the harp had worked. My internist can't believe how much it's benefited me," she said.

The benefits of Lynn's playing opened up a new life with special meaning. "I knew from the beginning that I survived the stroke because I had a mission. When you get a second chance, I believe you have an obligation to give back. It has to be about giving back to others or your life isn't going to have any purpose."

A friend from church asked Lynn to play the harp for an elderly choir member who was near death. "When I asked the woman if she wanted me to play, she smiled. I played for her for eight hours. As I said goodbye, she smiled and tears ran down her face. She died a few hours later. I told my husband Peter that this was what I was here for."

Once the word got out, Lynn got many requests to play for people making their final transition. Generally she takes her harp to the patient's home and plays every day until the person passes away.

"I work with them until the end. It's usually a week or two. That gives me very intimate time with the people and their families.

"The longer I work with them the more fulfilling it is," said Lynn. "It's nice to get to know them. One patient would direct me. Another would sing with me, even though he couldn't carry a tune in a bucket."

Lynn also plays twice a month at a 14-bed hospice and once a month at a nursing home. At the hospice, Lynn goes to each room and plays for the patients individually. "It's fabulous because you can see what it does for them. It can reduce their heart rate and blood pressure and increase oxygenation, so their pain levels decrease. It gives them a lot of pleasure, and it brings peace to the whole room.

"Playing at the nursing home is rewarding because the residents each have their individual personalities, and they are a hoot. Every activity is a big deal to them because their days are so small. It's fun.

"But my real passion is playing for people who are dying and helping them to make that transition."



*Lynn Marks making good vibrations*

# In Tune with One-Handed Jazz



Kay Breslin had always had music in her life.

She had been studying jazz with piano teacher Mark Miller for several years, when an arteriovenous malformation ruptured in August 1998 and paralyzed her left side. “After a lot of prayer and therapy, I got back on my feet,” she said from her home in Barrington, Illinois. But her left hand didn’t come back, and she gave up the piano because there’s not much music for one-handed piano players.

“Despite the urging of friends and family to get back to music, I wouldn’t even give it a try,” she said. Then a friend called Mark and commissioned him to make a musical arrangement for one hand as a birthday present for Kay. Intrigued by the gift, she started to practice.

“It took about a week for me to master that piece,” said Kay. “When I saw that I was able to do it, I had Mark start coming to the house every week. I spend two hours a day practicing the pieces he brings. I’ve probably learned 20 to 25 pieces. Each arrangement seemed to get a little more difficult, so I was always being challenged. I’m always working on something new.”

Mark has worked with several stroke survivors like Kay. Although he goes to her house, he also gives lessons over the phone. And on a recent visit to Scottsdale, Arizona, Kay took her lessons long distance. “It was great,” she said, “because I got to continue my progress.”

Mark enjoys teaching people to play with one hand, but he notes that there aren’t many

arrangements. “And 95 percent of those that are available are for classical pieces and are written for the left hand only, so they wouldn’t have been much good to Kay,” said Mark. “Writing for one hand necessitates putting both harmony and melody within the reach of just one hand, which is about eight keys.”

Although Kay was a musician before her stroke, Mark is certain that a survivor without prior musical training could learn to play with one hand. “I write the arrangement to match the skill level of the individual student,” said Mark. “If they have a phone and a keyboard, they can learn to play jazz piano.”

For more information, contact Mark at [markmiller@pianoweb.com](mailto:markmiller@pianoweb.com) or 1-800-327-4266.



**When the time comes for one of you to carry on.**

Every thoughtful husband and wife knows the time eventually will come when one of them will have to carry on alone, and perhaps spend many years as a widow or widower. The American Heart Association has prepared a practical, supportive brochure to help spouses prepare for life without their marriage partner. It will help you be ready “when the time comes” not only to handle the details and decisions that follow a spouse’s death, but also to deal with financial and practical matters – in short, to resume life as effectively as possible.

For more information, please visit us at [americanheart.org/plannedgiving](http://americanheart.org/plannedgiving) or e-mail us at [plannedgiving@heart.org](mailto:plannedgiving@heart.org).

**Please send to:**

American Stroke Association  
Planned Giving Department  
7272 Greenville Avenue  
Dallas, TX 75231-4596

**American Stroke Association®**

A Division of American Heart Association 

- Please send me the free booklet *When the Time Comes*. (CCA)
- Please have a representative contact me to discuss how charitable estate planning can benefit me. (CCD)
- I am considering a gift to the American Stroke Association through my estate plan. (CCC)
- I have already included the American Stroke Association in my will/estate plan. (CCB)

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# What is Music Therapy?



*Dr. Connie Tomaino*

**T**revor Gibbons (“Surviving to Sing,” p. 16) benefited from the specific intervention of a music therapist. History is on his side.

Interest in the therapeutic value of music goes back about 2,400 years to Plato and Aristotle, but the modern professional discipline began only after WW II. Today music therapy is used in a wide range of rehab settings.

Dr. Connie Tomaino, who is both a doctor of music therapy and a board-certified music therapist (MT-BC), is vice president of music therapy at Beth Abraham Family of Health Services in New York City. She explained that music therapy can be part of rehab from assessment through treatment.

Music therapy has proven effective in improving balance

and gait as well as improving speech, memory function, attention and focus.

“The end result of music therapy is not necessarily to play music but to enhance mental function, speech production and breathing,” she said recently. “Music therapy helps patients who can’t control their muscles to organize motor movement.

“When people are spontaneously involved in an activity, they may move in ways they couldn’t if they thought about

it. That’s because in a lot of head injuries, there’s damage to what is called executive function, which is the ability to plan out and perform a task. Although there may be functionality that allows the muscle to move, the person may be more likely to move it if we can stimulate the muscle through a different network.

“When a person is encouraged to use their affected side, say with a keyboard,” said Dr. Tomaino, “they have to acknowledge that limb exists. Calling attention to that neglected side increases the chance that they will move that side at will.”

Survivors who can’t talk may be able to sing, as was the case with Trevor, who also regained his speech. “These abilities — whether speech or rhythmic movement

— are stored in people. The trick is how to get those networks lit up.

“Singing and speech use a parallel mechanism, so skills used to sing words may carry over to regular speech. Songs with predictable lyrics, popular songs and songs from childhood may be easier for survivors to sing than unfamiliar music.”

Many patients with brain injuries lack the attention span to perform a series of steps. But when music is added, often they can focus long enough to accomplish the movement. “Following is less difficult than initiating, so they can accomplish the same physical goals without having to instruct themselves how to do them,” Dr. Tomaino said.

Music, whether playing, singing, listening or writing, is always involved in a music therapy session. The goal is to involve the patient in responding. “We use a wide range of instruments. We use a lot of digital instruments because you can adjust the output. For instance, turning up the volume on digital drums allows someone who is weak to hear the effect, which can be very motivating.”

Insurance reimbursement for music therapy varies from state to state.

Accredited music therapists must earn a college degree in music therapy and pass a national certification exam. They carry the MT-BC credential. For help in locating a music therapist, contact the American Music Therapy Association at 301-589-3300 or send an e-mail to [findMT@musictherapy.org](mailto:findMT@musictherapy.org). **SC**