Music-Based Stress Reduction For Undergraduate Students: A Program Proposal

by

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A Program Proposal

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We, the thesis committee for the above candidate for the Master of Science degree, hereby recommend acceptance of this thesis.

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Executive Summary

Many college students find themselves subjected to stress for a multitude of reasons, and without being educated on healthy coping skills, they may fall victim to adapting maladaptive coping skills to deal with stress (e.g., Bland et al., 2012; Peer et al., 2015). Studies show how music therapy can lower the stress levels of college students (e.g., Garrido et al., 2015; Taets et al., 2021). The proposed 8-week resource-oriented psychoeducational music therapy program intends to support undergraduate students in managing stress and promoting wellness. The program aims to teach undergraduate students at SUNY New Paltz through music therapy based stress reduction methods, such as music-assisted relaxation, song discussion, songwriting. The program is resource-oriented and psychoeducational. This program has the potential to improve the SUNY New Paltz undergraduate student population’s mental health and well-being.

Statement of Need

College students often face stress due to academic, social, environmental, physical, and psychological factors; the most significant factors stemming from relationships, family, expectations, future career plans, extracurricular activities, personal appearance, and health (Hurst et al., 2012). Students may choose to engage in both healthy and unhealthy coping skills. Healthy coping skills include planning, acceptance, humor, positive reframing, religion, and seeking emotional/social support (Graves et al., 2021). In contrast, unhealthy coping skills include avoidance, self-blaming, self-distraction, denial, behavioral disengagement, and substance use (Graves et al., 2021).
Many college-age students resort to abusing alcohol and other substances to manage stress (e.g., Graves et al., 2021; Johnston et al., 2012). Young adults often begin or increase their drug and alcohol use during college making it a place for the potential to prevent the development of harmful coping behaviors (Johnston et al., 2012). Russell et al. (2017) reported that students were more likely to partake in an event involving alcohol on days with high-stress levels than on days with low levels of stress. Additionally, they consumed more alcohol on days with high-stress levels (Russell et al., 2017, p. 683). Many students use alcohol and drugs to escape student life anxiety (Coleman & Trunzo, 2015). In addition, many undergraduate students turn to other maladaptive coping styles, such as binge eating, an emotion-focused coping mechanism for stress (e.g., Sulkowski et al., 2011; Emond et al., 2016). College students also binge-watch movies and TV shows for stress relief, but the end of the binging sessions can result in feelings of more stress, loneliness, and anxiety (Panda & Pandey, 2017). Moreover, the increased stress levels for undergraduates correlate with the increased possibility of risk-taking and self-harming behavior for those students (Menon, 2018). College students are more likely to develop Internet addiction when they tend to cope with stress through mental disengagement (Chou et al., 2015). Programs are needed to provide intervention strategies that support students in finding more effective and safe alternatives to unhealthy reactionary behaviors to stress.

This program aims to teach undergraduate students at SUNY New Paltz music-based coping strategies to manage stress. Music therapy is defined as a “reflexive process wherein the therapist helps the client to optimize the client’s health, using various facets of music experience and the relationships formed through them as the
impetus for change” (Bruscia, 2014, p. 36). This program will be grounded in a resource-oriented framework. Resource-oriented music therapy encourages the “development of strengths and resources” (Rolvsjord, 2010, p. 39). The intention of using resource-oriented music therapy is to assist students in developing their strengths and resources to reduce stress. Music therapy methods, such as song-writing, improvisation, re-creation of pre-composed songs/music, and listening, offer students the opportunity to explore alternatives in order to change negative feelings, thoughts, and behaviors by finding the strengths within. Participation in this resource-oriented, psychoeducational music therapy program has the potential to help students reduce their stress. The program’s goal is to expose students to several music-based methods resulting in the development of a personalized stress management plan that they can use in place of unhealthy coping methods.

Many studies have demonstrated the efficacy of music experiences guided by credentialed music therapists to reduce self-reported anxiety and stress in college students (e.g., Fallon et al., 2020; Hou & Rajakani, 2022). Music therapy can positively impact college students’ mental health by increasing their quality of life, fostering healthy personality development, and promoting physical and mental wellness (Wenqin, 2022). Studies have demonstrated that music has a particularly strong stress-reducing impact (e.g., Baste & Gadkari, 2014; Chi, 2020). Toyoshima (2011) found that listening to music and playing music improves one’s mental health due to its psychological implications, such as having a high stress-reducing effect (pp. 260-261). Fiore (2018) noted that participants in her pilot study reported a significant decrease in self-reported measures of stress and anxiety after listening to a pre-composed music selection.
Participants noted that changes in perceived stress and anxiety were primarily related to the melody and the instrumentation was the least effective. (Fiore, 2018). Baste and Gadkari (2014) found that music listening provided a source of relief for students identifying academic factors as their primary cause of total stress. They reported that perceived stress fell by 62.5% after listening to light instrumental music, whereas, after 20 minutes of rest, it only decreased by 30.6% (p. 300).

Accepting this proposal will allow SUNY New Paltz students to become more effective academics and healthier young adults by creating a space for resource-oriented, psychoeducational music therapy programming.

**Literature Review**

**Overview of the Issue**

Several aspects of the college experience can cause substantial stress for students. Recent studies have noted that undergraduate students are often subjected to significant levels of stress (e.g., Sharp & Theiler, 2018; Acharya et al., 2018) related to the adjustments to college life, such as a shift to a heavier academic workload than high school, roommates and living issues, and experiencing a new environment (e.g., Graves et al., 2021; Peer et al., 2015). Academic stress notably affects undergraduate students’ performance; low academic achievement correlates with high-stress levels (Khan et al., 2013). Living situation transitions related to affording rent, meal planning, and interpersonal conflicts with roommates have the potential to cause stress for undergraduate students (e.g., Aselton, 2012; Dargahi et al., 2012). Undergraduate students living off campus have reported higher levels of stress compared to students living on-campus (Beiter et al., 2014). The realities of leaving home also contributes to
the distress college students face during this transition (e.g., Peer et al., 2015; Shim et al., 2019). Many students endure overwhelming distress transitioning from high school to college due to intense homesickness and other transitional attributes (Acharya et al., 2018; Thurber & Walton, 2012). Experiencing a new environment may be challenging for college students when transferring from one college to another, which often results in higher levels of stress when compared with non-transfer students (Acharya et al., 2018; Beiter et al., 2014).

The pressures of college, such as finances, expectations, and career-oriented aspirations, can induce stress for undergraduate students and lead to negative symptoms and behaviors. The increased financial stress from paying for one’s education or having one’s parents pay for their schooling contributes to college students’ distress during this transition (e.g., Peer et al., 2015; Shim et al., 2019). Many undergraduate students experience anxiety from the pressure they feel from their families, friends and peers to achieve, keep a certain grade point average, and find a career path (e.g., Aselton, 2012; Böke et al., 2019).

Major world events, such as the COVID-19 pandemic, have the potential to heighten stress levels, and a substantial number of college students reported increased stress during this time (e.g., Haikalis et al., 2022; Kim et al., 2022). College students encountered elevated stress due to the COVID-19 pandemic’s impact on academics, such as in-person classes transitioning to an online format (e.g., Haikalis et al., 2022; Jehi et al., 2022). The restrictions of the pandemic caused increased isolation which led to heightened feelings of stress among college students (e.g., Son et al., 2020; Prowse et al., 2021). Changes in the job market as a result of the pandemic also was a
contributing factor to increased stress levels, as planned career paths became uncertain (e.g., Wang et al., 2020; Wolfe, 2021). Undergraduate students experienced stress during the COVID-19 pandemic due to job loss which led to financial uncertainty (e.g., Son et al., 2020; Wang et al., 2020). Lifestyle adjustments and living situation transitions were reported to cause increased stress among undergraduate students during that time (e.g., Kibbey et al., 2021; Wang et al., 2020). The fear of contracting COVID-19 was also a prominent stressor for undergraduate students during the pandemic (e.g., Jehi et al., 2022; Zhai et al., 2020).

The stressors students may face from college life may lead to negative physical and mental symptoms. The stress collegiate young adults endure can manifest in physical symptoms such as back pain and exacerbation of different skin diseases (Ben-Ami & Korn, 2020; Schut et al., 2016). The inability to manage one’s stress effectively may cause social isolation, depressed mood, concentration difficulties, anxiousness/nervousness, irritability/anger management difficulties, and hopelessness (Peer et al., 2015). Additionally, stress can potentially cause physical problems, such as increased heart rate, sleeping problems, tremors, gastrointestinal complaints, and appetite changes (Peer et al., 2015).

**How College Students Cope With Stress and Anxiety**

Addictive behaviors and disengagement strategies are common coping mechanisms college students use to manage stress. Addictive behaviors include alcohol and drug misuse, undereating, or binge eating (e.g., Dennhardt & Murphy, 2013; Emond et al., 2016). Russell et al. (2017) notes that college students who are more likely to drink on high-stress days are at a greater risk for alcohol problems by the end
of their schooling. Disengagement strategies include overreliance on the Internet and binge-watching TV and movies (Cheng & McCarthy, 2013). These coping mechanisms, while helpful in the short term, have the potential to lead to increased stress levels and dependencies on substances and behaviors (e.g., Cheng & McCarthy, 2013; Deatherage et al., 2014). For example, Cheng and McCarthy (2013) found that although some disengagement strategies can positively help one cognitively avoid and psychologically detach from their role responsibilities, using these strategies in an escapist coping manner may have a negative effect on them.

**Addictive Behaviors**

One way college students cope with stress is by using and abusing substances, such as alcohol and marijuana. Numerous undergraduate students rely on alcohol to cope with stress; the daily stressors faced by college students correlate with the likelihood of students drinking on a high-stress day, often resulting in binge drinking (e.g., Böke et al., 2019; Chen & Feeley, 2015). Academic stress may cause stress-eaters to consume more calories, carbohydrates, and sugars, while stress-undereaters consume fewer calories, carbohydrates, and sugars due to academic stress; stress-eating often results in unhealthy eating patterns and dietary behaviors for collegiate young adults (Choi, 2020; Emond et al., 2016).

**Disengagement Strategies**

College students use disengagement strategies, such as psychological detachment, cognitive avoidance, and cognitive distortion, to cope with stress. These strategies may lead undergraduates to over rely on the Internet to cope with and avoid life problems, which can result in higher stress levels (e.g., Cheng & McCarthy, 2013;
Chou et al., 2015). Many college students use distraction tactics to cope with stress, such as binge-watching TV shows, movies, and online videos (Panda & Pandey, 2017). Although students may gain a sense of relaxation while binging, the ending of a binge may lead to more stress, and many students tend to binge again as a form of avoidance of stressful feelings (Panda & Pandey, 2017). This vicious cycle mirrors addictive behavior associated with substance dependence (Panda & Pandey, 2017). College students who employ maladaptive coping mechanisms correlate significantly to low-stress tolerance compared to students that utilize adaptive coping strategies for stress (Bland et al., 2012).

**Music Therapy and Stress Reduction**

Participation in music therapy treatment has been shown to reduce stress and promote healthy coping strategies for college students. Music experiences, such as music listening (e.g., Fiore, 2018; Linnemann et al., 2015) and improvisation (e.g., MacDonald & Wilson, 2014; Garrido et al., 2015), are used to promote self-expression, develop new ways of thinking, and cultivate healthy emotions. Engagement in both active music listening and music creation may reduce physiological and psychological stress-related symptoms (e.g., Liu, 2021; de Witte et al., 2022). Music therapy methods such as singing, improvisation, and songwriting have been shown to reduce and improve coping with stress (e.g., Garrido et al., 2015; Taets et al., 2021). Many college students listened to music as a means of coping with pandemic related stress while social interactions were limited, showing the importance and perceived benefits of listening to music (Finnerty et al., 2021). College students also indicated their interest in music therapy during this stressful time (Finnerty et al., 2021). Although listening to
music on one’s own time may benefit one’s well-being, attentive music listening that occurs in receptive music therapy experiences can have more substantial effects on stress reduction than passive music listening (Jiang et al., 2016).

**Physiological Responses**

Engagement in music therapy can have a positive impact on college students’ well-being and health. College students that engage in music experiences, such as instrumental improvisation, effectively reduce physiological stress from playing music freely and spontaneously (Fallon et al., 2020). Music-based interventions such as listening to preferred relaxing music may improve the adverse effects on people’s health that stress incites, including positively affecting cardiovascular responses (de la Torre-Luque et al., 2017). Music listening reduces stress by allowing students’ minds to sit with emotions, which can influence other aspects of their well-being (Ferrer et al., 2014). Stressors have the potential to cause an acute decrease of dopamine, sometimes resulting in pathological consequences due to prolonged acute stress responses; music listening affects the central nervous system by releasing dopamine, which improves how the brain uses its resources (Belujon & Grace, 2015; Gebauer et al., 2012). Singing in groups, such as choirs, can reduce salivary cortisol levels for college students participating in them (Taets et al., 2021).

**Emotional Responses**

Engaging in both receptive experiences and active music making, such as singing and music listening, may effectively reduce stress levels in college students as they allow for creative and emotional expression. According to Taets et al. (2021), university students experienced a reduction in stress from singing in a choir with their
fellow classmates. College students that utilized music listening and other pre-composed receptive music experiences significantly decreased their perceived stress levels (e.g., Fallon et al., 2020; Fiore, 2018). Music listening with the intention of relaxation reduces stress, which is relevant to receptive methods, such as music-assisted relaxation (Linnemann et al., 2015; Linnemann et al., 2017). Often classical music is used in music-assisted relaxation and unguided imaginal listening experiences, which is beneficial for college students because long-term exposure to soothing classical music can relieve stress caused by student life (Chi, 2020; Ferrer et al., 2014).

**Purpose For The Program**

Academic stress may lead to negative consequences such as mental and physical health issues, poor sleep quality and insomnia (Gardani et al., 2022). Self-blame, denial, and behavioral disengagement are key predictors of perceived stress among college students (Eisenbarth, 2019). Peer et al. (2015) suggest that college students have the potential to manage stress and avoid maladaptive coping mechanisms when they have been exposed to healthy coping strategies. Therefore, college students would benefit from developing stress management strategies in order to lessen the impacts of stress related to academic life and the transitions of young adulthood. Khan et al. (2013) suggest that students who effectively manage their stress perform better than those who do not. Additionally, social support and the perception of being cared for by others in a group setting may help develop a foundation for high-stress tolerance (Bland et al., 2012).

This 8-week program is being proposed as one option for the SUNY New Paltz student population to learn creative coping methods. It is designed to enable group
members to recognize and correct maladaptive coping styles through musical self-expression, discussions, and psychoeducation (Eisenbarth, 2019). This program is vital to the student population of this university because it will strive to encourage students to incorporate effective coping mechanisms and reduce stress through the use of music therapy methods.

**Detailed Description of Proposed Program**

This program will assist undergraduate students in learning how to manage stress and the associated negative symptoms using music-based coping strategies. By the end of this 8-week program, participants will be able to define stress-related symptoms, describe unhealthy coping skills they have used, identify music-based coping strategies to manage stress, and develop a self-care plan. Each session will be 90 minutes and follow this structure: 1) check-in, a review of the last session, opening discussion, and an introduction of the goal for the current session (15 minutes); 2) primary music experience (60 minutes); and 3) reflection, self-care journaling, and wrap-up (15 minutes). At the end of each session, the music therapist will encourage students to add any healthy coping skills they resonated with during the session that they want to incorporate into their self-care plan. The program will include the following music experiences: 1) music-assisted relaxation; 2) song discussion; 3) songwriting; 4) instrumental referential improvisation; 5) singing and breathwork; 6) vocal re-creation; 7) unguided imaginal listening; and 8) projective movement to music. The specific resources the program needs to utilize are a room on campus to hold the sessions, instruments such as drums and auxiliary percussion from the music therapy department, the ability to print lyrics, and a whiteboard/chalkboard/smart board.
The music therapist’s responsibilities for delivery and administration of this program will be to 1) facilitate music experiences within the scope of the music therapist’s education and training; 2) be at every session on time; 3) take attendance 4) clean up after each session; 5) notify the school of any students expressing suicidal ideations and 6) making a report if a student discloses about a sexual assault/other behavior covered by Title IX. The expected outcomes of the program are to 1) reduce self-reported levels of stress; 2) foster the development of healthy coping skills; 3) develop decision-making skills (the ability to choose a healthy coping skill); and 4) develop a personalized stress management plan.

Table 1

Proposed Program Outline

<table>
<thead>
<tr>
<th>Week #</th>
<th>Topic/Intervention</th>
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<tbody>
<tr>
<td>Week 1</td>
<td>Finding Inner Calmness</td>
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<td></td>
<td>Music-Assisted Relaxation</td>
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<td>Week 2</td>
<td>Words That Sing Your Truth</td>
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<td></td>
<td>Song Discussion</td>
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<tr>
<td>Week 3</td>
<td>Free Your Mind, Put It On Paper</td>
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<tr>
<td></td>
<td>Songwriting</td>
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<tr>
<td>Week 4</td>
<td>Play Your Stress Out</td>
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<td></td>
<td>Instrumental Referential Improvisation</td>
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<td>Week 5</td>
<td>Use Your Breath</td>
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<td></td>
<td>Singing &amp; Breathwork</td>
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<td>Week 6</td>
<td>Singing is Self-Caring</td>
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<tr>
<td></td>
<td>Vocal Re-creation</td>
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<tr>
<td>Week 7</td>
<td>Discovering Resources Within</td>
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<td></td>
<td>Unguided Imaginal Listening</td>
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</tbody>
</table>
Move Away From The Stress
Projective Movement To Music

Descriptions of Weekly Groups

**Week One: Finding Inner Calmness**

Week one of the program will center around using music listening for stress reduction. The music therapist will use supportive and grounding music that meets established guidelines for relaxation and stress reduction. The session will start with a conversation with the group about how they use music listening to reduce stress, using the Healthy-Unhealthy Music Scale (HUMS) (Saarikallio et al., 2015) they filled out prior to the session as a basis of the discussion (see Appendix A). The music therapist will ask the students to rate their stress levels, mood, and pulse rate during the discussion. After the discussion, the music therapist will invite the group to get comfortable in their chairs, concentrate on breathing, and close their eyes. The music therapist will play a supportive and grounding instrumental piece of pre-composed music. After the music ends, the music therapist will invite the group to discuss how their stress levels, mood, and pulse rate changed from the beginning of the session. The process of listening and discussing will continue until the end of the session. The final discussion will involve how the students intend to utilize music listening as a coping mechanism for stress moving forward and in what stressful situations this method would be most beneficial. The music therapist will ask the students to practice this method within the upcoming week. After the discussion, the music therapist will invite the group to create self-care
plans that they can change or add to during the span of the 8-week program. The goals of this session are to reduce stress and tension and develop healthy coping skills.

**Week Two: Words That Sing Your Truth**

The intention for the second group session will be to create a safe space for verbal expression about feelings, thoughts, and behaviors as they relate to the perceived stress and anxiety students are experiencing. Before the session, students will be invited to email a song corresponding to their life stressors or reasons for feeling anxious. Participants will receive printed lyric sheets of the songs so they can follow along with the music. The songs will serve as a springboard for discussing therapeutically relevant issues. After listening to each song, students will analyze the music and lyrics' meaning and examine the relevance to their lives. Students will have the opportunity to share similarities and differences in their lives during the discussion. The goal of this session is to identify current stressors.

**Week Three: Free Your Mind, Put It On Paper**

During the third week, the intent will be to have the group express themselves through songwriting. As a group, the students will compose an original song structured by the 12-bar blues, accompanied and facilitated by the music therapist. The group will create and make decisions about parts of the song, such as lyrics and melody. The music therapist will give the students a prompt involving stress and coping skills for the song. The lyrics students provide will be written on the whiteboard/chalkboard to record the progress and structure of the song and to be used as a reference when singing the song back. Once the song feels complete, the group will sing it from beginning to end. The music therapist will ask the students to use the blues song as a chant to refute
negative thoughts within the upcoming week. The goals of this session are to develop skills in creating a structure within which to express one’s thoughts and emotions and release feelings within a safe and appropriate medium.

**Week Four: Play Your Stress Out**

The fourth session will involve students using music-making as an act of self-care. Group members will discuss their relationship with music-making and their approach to dealing with stress. After the discussion, each member will choose an instrument. The music therapist will give a brief history of each selected instrument and demonstrate proper playing technique to avoid injury. The group members will have the chance to get comfortable with their instruments. Once all members feel comfortable, the music therapist and the group will begin an instrumental referential improvisation. The music therapist will begin the improvisation by suggesting a referent such as: "What does stress sound like?" Participants will then use their chosen instrument to create a musical representation of stress. Upon completion of the improvisation, group members will have the opportunity to reflect on their experience. The number of referential improvisations during the session will depend on how long the improvisations and discussions last. The group will determine subsequent referents based on the conversations following each improvisation. The goals of this session are to present music-making as a form of self-care and relaxation and reduce stress.

**Week Five: Use Your Breath**

Week five will involve the use of singing and breathwork to reduce stress. The session will begin by discussing singing and its benefits for stress reduction. Students will have the opportunity to share their experience with singing as a stress management
method. After the discussion, the music therapist will facilitate a short breathing induction to grounding instrumental music. The music therapist will ask the group to get comfortable in their chairs, close their eyes, and concentrate on their breath. After the induction, the music therapist will invite the group to slowly sing the C scale in unison with purposeful pauses for each inhale to increase the possibility of relaxation so that the idea of singing in a group is inviting rather than threatening to them. This vocal exercise intends to teach the students' bodies to move out of fight-or-flight in response to outside stimuli (Meashey, 2020). The music therapist will then demonstrate vocal toning, which is the act of using the natural voice to send sounds to a part of the body that is in discomfort (Meashey, 2020). The music therapist will ask the students to imagine a part of their body that is feeling emotionally or physically uncomfortable and join in the unstructured toning experience. Throughout the vocal experiences, the music therapist will remind the students to concentrate on their breathing. The music therapist will remind the students that they can sing or use breathing exercises to reduce stress, as needed. After finishing the experiences, the group will discuss how they affected them and their potential of being coping mechanisms for stress. The goals of this session are to reduce stress and practice using the breath to facilitate a relaxation response.

**Week Six: Singing is Self-Caring**

In the sixth week of the program, students will continue the discussion of the stress-reducing benefits of singing that started in week five. Prior to the session, students will be sent links to three examples of songs of empowerment suggested by Meashey (2020): 1) “Blackbird” (Lennon & McCartney, 1968); 2) “I Shall Be Released”
(Dylan, 1968); and 3) “Amazing Grace” (Newton, 1779). The music therapist will begin the session using the same vocal experience facilitated in week five. After the vocal exercise, the music therapist will ask the students to share the song that resonated with them most, with a short rationale for their choice. The students will then choose a song to be used. The music therapist will review the song’s structure, melodies, and lyrics by playing a recording of the pre-composed song for the group. The experience will consist of learning and vocalizing melodies and lyrics and rehearsing as a choral group. The group and the music therapist will practice each part of the song, accompanied by the music therapist’s guitar playing. Once everyone feels comfortable with the song’s structure, melodies, and lyrics, the group will sing the entire song. After the performance, the students will discuss how singing affected their stress levels and where singing might fit into their self-care routines. The music therapist will remind the students of all of the singing groups on campus that they can join to continue singing as a form of self-care. The goals of this session are to experience and release feelings within a safe and appropriate medium and develop healthy coping skills.

**Week Seven: Discovering Resources Within**

During the seventh week, the music therapist will use unguided imaginal listening to evoke and support imaginal processes and inner experiences. The session will begin with a discussion about imaginal listening and its process. In the discussion, students will be encouraged to share if they have experienced imaginal listening, or other meditative practices, and how it affected their state of being. After the discussion, the music therapist will ask the group to get comfortable in their chairs and close their eyes while a recording of pre-composed instrumental music plays. During the experience, the
group will have the opportunity to follow their imagery and explore their inner world freely. After the music ends, the music therapist will encourage the group to discuss their experience and how it affected their overall state of being. Group members will have the ability to share things they learned about themselves and how it can help resolve feelings of stress. The goals of this session are to reduce stress and develop healthy coping skills.

Week Eight: Move Away From The Stress

Projective movement will be used in the last session to express their experience of stress through movement. The session will begin by reflecting on the past seven weeks of the program and how it has affected the group's relationship with dealing with stress, and how they integrated music into their self-care routines. The discussion will also involve how movement accompanied by music affects perceived stress levels. After the discussion, the music therapist will play recorded music for the group to freely interpret their experience of stress through movement. After the experience, the group will discuss how experiencing a nonverbal means of expression affected them and how they can use movement in their stress management plans. The goals of this session are to reduce stress and experience and release feelings within a safe and appropriate medium.

Table 2

Definitions of Music Therapy Terms

<table>
<thead>
<tr>
<th>Terms</th>
<th>Definitions</th>
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<tbody>
<tr>
<td>Accompaniment</td>
<td>A musical part that supports or partners an instrument, voice, or group.</td>
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<tr>
<td>Terms</td>
<td>Definitions</td>
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<tr>
<td>Chord</td>
<td>A group of notes sounded together, as a basis of harmony.</td>
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<td>Chord progression</td>
<td>A succession of chords.</td>
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<tr>
<td>Fight-or-flight</td>
<td>The instinctive physiological response to a threatening situation, which readies one either to resist forcibly or to run away.</td>
</tr>
<tr>
<td>Imagery</td>
<td>Visuals experienced in the mind.</td>
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<tr>
<td>Improvisation</td>
<td>The creative activity of immediate musical composition, which combines performance with communication of emotions and instrumental technique as well as spontaneous response to other musicians.</td>
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<tr>
<td>Induction</td>
<td>A technique that involves the therapist helping individuals reach a deeply relaxed state through visualization, focusing on one's breath.</td>
</tr>
<tr>
<td>Instrumental</td>
<td>Music performed on instruments, with no vocals.</td>
</tr>
<tr>
<td>Lyric sheet</td>
<td>Printed words to a song.</td>
</tr>
<tr>
<td>Non-referential</td>
<td>Without references or allusions.</td>
</tr>
<tr>
<td>Physiological responses</td>
<td>The body's automatic reactions to a stimulus.</td>
</tr>
<tr>
<td>Pre-composed</td>
<td>An existing song or piece of music that was composed and/or recorded.</td>
</tr>
<tr>
<td>Projective movement</td>
<td>The extemporization of expressive movements.</td>
</tr>
<tr>
<td>Psychoeducation</td>
<td>The process of providing education and information to those seeking or receiving mental health services.</td>
</tr>
<tr>
<td>Rapport</td>
<td>A close and harmonious relationship in which the people or groups concerned understand each other's feelings or ideas and communicate well.</td>
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<tr>
<td>Terms</td>
<td>Definitions</td>
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<tr>
<td>Receptivity</td>
<td>Willingness to consider or accept new suggestions and ideas.</td>
</tr>
<tr>
<td>Referential</td>
<td>Containing or of the nature of references or allusions.</td>
</tr>
<tr>
<td>Resource-oriented music therapy</td>
<td>Music therapy that focuses on the inner potentials of every individual.</td>
</tr>
<tr>
<td>Scale</td>
<td>Musical notes ordered by fundamental frequency or pitch, informed by music theory.</td>
</tr>
<tr>
<td>Spontaneity</td>
<td>Performed or occurring as a result of a sudden inner impulse or inclination and without premeditation or external stimulus.</td>
</tr>
<tr>
<td>Unguided imaginal listening</td>
<td>The use of music listening to evoke and support imaginal processes or inner experiences where the individual images freely, without the presentation of images by the music therapist.</td>
</tr>
<tr>
<td>Vocal Toning</td>
<td>A form of vocalizing that utilizes the natural voice to express sounds to open vowel sounds and humming on the full exhalation of the breath.</td>
</tr>
</tbody>
</table>

Assessment

The music therapist will conduct initial assessments with each participant to determine their musical preferences, musical histories, self-care strategies, and cultural considerations. Participants will complete the Healthy-Unhealthy Music Scale (HUMS) (Saarikallio et al., 2015) and intake music evaluation form prior to the first group session and send it to the music therapist via email (see Appendix A & B).
Evaluations

The music therapist will conduct evaluations with the students halfway through the program and after the last group session (see Appendix C). The evaluation will allow students to provide the music therapist with feedback on their experiences with the program and express their progress. The music therapist will use these notes to reflect on the program's final report and future planning.

Program Budget

The costs for the program will include the payment for an independent music therapy contractor (see Table 3). The music therapist will work 3 hours a week at a rate of $85 per hour based (American Music Therapy Association, 2021). This time will include preparation, facilitation, evaluation, and setting up and tearing down the physical space. Preparation of the final report will be billed at $85 an hour, and it is expected that the report will take 2 hours to write. The music therapist is requesting an in-kind donation from the SUNY New Paltz Music Therapy program of instruments for use in the program. Additionally, the music therapist will use his personal equipment as needed. The music therapist is requesting funds from the Holistic Hawks Committee to print posters to put up around campus. Additionally, the music therapist will ask the Holistic Hawks Committee to send email announcements to the SUNY New Paltz student body. The music therapist will also connect with the Office of Communication and Marketing and have them include the program in the Daily Digest.
Table 3

Projected and Initial Expenses

<table>
<thead>
<tr>
<th>Expenses</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary</td>
<td>$2210</td>
</tr>
<tr>
<td>Total</td>
<td>$2210</td>
</tr>
</tbody>
</table>
References


https://doi.org/10.1016/j.comppsych.2015.06.004

https://doi.org/10.24839/2164-8204.JN20.1.52


https://doi.org/10.1080/07448481.2013.843536

https://doi.org/10.1016/j.addbeh.2013.06.006

https://link.gale.com/apps/doc/A594832698/AONE?u=nysl_oweb&sid=googleScholar&xid=2a6709b3


https://doi.org/10.1016/j.appet.2016.01.035


https://link.gale.com/apps/doc/A387058977/AONE?u=nysl_oweb&sid=googleScholar&xid=b26e8536


### Healthy-Unhealthy Music Scale (HUMS)

Please read each statement and mark how much it applies to you. Mark only one answer for each question.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>When I listen to music I get stuck in bad memories</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>I hide in my music because nobody understands me, and it blocks people out</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Music helps me to relax</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>When I try to use music to feel better I actually end up feeling worse</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>I feel happier after playing or listening to music</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Music gives me the energy to get going</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>I like to listen to songs over and over even though it makes me feel worse</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Music makes me feel bad about who I am</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Music helps me to connect with other people who are like me</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Music gives me an excuse not to face up to the real world</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>It can be hard to stop listening to music that connects me to bad memories</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>Music leads me to do things I shouldn't do</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>When I'm feeling tense or tired in my body music helps me to relax</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix B

Intake Music Assessment Tool

Name:_________________________                            Age: ____________

Preferred Name:_________________________

☐ She/Her/Hers        ☐ He/Him/His        ☐ They/Them/Theirs

☐ Other (please specify) _____________

1. Do you like to listen to music?

   Yes           No

2. Do you play any instruments?

   If yes, what do you play?

   ___________________________________________________________________
   ___________________________________________________________________

3. When do you like to listen to music? (Check all that apply)

   ☐ Relaxation        ☐ Stress Reduction        ☐ While Exercising
   ☐ During School Work ☐ Background/Passive    ☐ Sleep
   ☐ Driving           ☐ Social Events          ☐ Spiritual/Prayer

   ☐ Other:

4. What types of music do you enjoy? (Check all that apply)
5. What are some healthy self-care strategies you use?

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

6. What are some unhealthy coping strategies you use to deal with stress?

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
7. Which of these coping mechanisms do you use to deal with stress? (Check all that apply)

- □ Drinking Alcohol
- □ Consuming Cannabis
- □ Taking Other Drugs
- □ Undereating
- □ Overeating
- □ Using The Internet
- □ Using Social Media
- □ Binging TV Shows/Movies
- □ I Prefer Not To Answer

8. What do you hope to get from this program?

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

9. Are there any cultural considerations or is culture an important aspect to your music selection?

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

General Information & Comments:

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
Appendix C

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The music therapist helped instill useful, healthy coping skills</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>for my stress.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The program aided me in reducing stress.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The music therapist is on time and prepared with materials,</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>instruments, and information.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Music-based interventions have changed the difference between</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>healthy and unhealthy coping techniques to stress.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The group and music therapist valued my opinions and expression</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The music therapist made me feel safe to be vulnerable in the</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>group setting.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have learned valuable things about myself and self-care that</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>I will take with me outside the program.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Additional Comments: