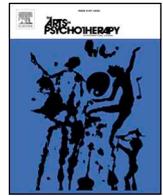




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## Research Article

## Songs created by military service members in music therapy: A retrospective analysis

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## ABSTRACT

A successful transition to civilian life is challenging for many service members returning from deployment. Psychological and physical injuries may hamper successful reintegration into home life and communities and, as a result, many service members report feeling lonely, isolated and misunderstood. This study analyzed 14 songs written by 11 active-duty service members with post-traumatic stress disorder, mild traumatic brain injury, and psychological health conditions, who received music therapy services at the National Intrepid Center of Excellence, a Directorate of Walter Reed National Military Medical Center in the United States of America. Service members wrote songs over the course of two or more individual music therapy sessions. Latent thematic analysis of the song lyrics yielded four main themes: (a) personal struggles and barriers to recovery, (b) moving forward, (c) relational challenges, and (d) positive relationships and support. The songs offer a window into service members' lived experiences of military service, injury, recovery, homecoming, and transition from active-duty. Songwriting enabled service members to share their thoughts, emotions, fears and hopes with family, friends and other providers, often for the first time, and as such played an important role in their personal growth and recovery process. This is the first study to examine the therapeutic benefits of songwriting in a military population.

## Background

A successful transition to civilian life is challenging for many service members returning from deployment, especially those who served for a prolonged time in combat (Peace, Billera, & Gerard, 2016). Both physical and psychological injuries can interfere with reuniting with family and re-entry into daily life (Resnik et al., 2012). Returning service members often report an array of adjustment issues including disorientation, loss of identity, struggling to find meaning, inability to fulfill social roles and family duties, and loss of collectivist values experienced while serving in the military (Peace et al., 2016). These issues often lead to relationship problems with their spouse or partner and difficulties reconnecting with their children (Resnik et al., 2012). As a result, many service members report feeling lonely, isolated, and misunderstood. Studies of service members returning from Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) have found that a perceived lack of social support puts service men and women at greater risk for suicide (Pietrzak, Johnson, Goldstein, Malley, &

Southwick, 2009). In contrast, perceptions of adequate social support have been shown to be an important buffer against post-deployment stressors and can serve as a protective factor (Lemaire & Graham, 2011). It is therefore important that returning service members are offered a variety of opportunities and pathways to explore, identify, and communicate their struggles and needs.

At the National Intrepid Center of Excellence (NICoE), a Directorate of Walter Reed National Military Medical Center (WRNMMC) in Bethesda, MD, service members receive treatment through different care models including a 4-week Intensive Outpatient Program (IOP) and long-term rehabilitation program tracks. The IOP program enrolls service members with traumatic brain injury (TBI), post-traumatic stress disorder (PTSD) and other psychological health concerns, and provides a combination of conventional medicine and innovative treatment through an interdisciplinary care model. The long-term treatment track is aimed at treating symptoms of moderate to severe TBI and chronic PTSD (Vaudreuil, Avilla, Bradt, & Pasquina, 2018). Service members participate in music therapy programming as part of

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their comprehensive treatment (Walter Reed National Military Medical Center, n.d.). The Creative Forces®: National Endowment for the Arts (NEA) Military Healing Arts Network is an initiative of the NEA in partnership with the Department of Defense (DoD), Department of Veterans Affairs (VA), and state arts agencies that support a continuum of clinical creative arts therapies and community arts engagement for military and veteran populations. The Creative Forces initiative supports creative arts therapies, including music therapy at the NICoE and 11 different sites located on military bases across the United States, including a VA hospital and a telehealth component that provides creative arts therapies remotely (Bronson, Vaudreuil, & Bradt, 2018; Vaudreuil et al., 2018). The music therapy program at the NICoE provides service members in both the IOP and long-term rehabilitation tracks with a variety of intervention options - from music-guided relaxation, to creative engagement in music-making, to songwriting. This article focuses on songs written by service members during their music therapy treatment (4-week and long-term) at the NICoE.

Many music therapists use songwriting with clients in their clinical practice. Songwriting is often incorporated in music therapy sessions to help clients explore thoughts and feelings related to their past, present and future as well as examine intra- and interpersonal dynamics (Baker & Wigram, 2005). Through songs, clients can express their struggles and fears as well as their hopes and joys. Songs can furthermore play an important role in documenting a client's therapeutic journey. It can be powerful for clients to look back at songs written early on in their treatment, and to notice the growth that has occurred over time. Bruscia (1998) wrote that songs "express who we are and how we feel, they bring us closer to others, they keep us company when we are alone. They articulate our beliefs and values. As the years pass, songs bear witness to our lives" (p.9). Songwriting encompasses creating (music and lyrics), arranging, and, when desired by the client, recording songs as a final product and possibly performing them. The skillful music therapist guides the songwriting process in such a way that clients feel that the resulting song truly is their own and accurately expresses their feelings or thoughts (Baker & Wigram, 2005).

The music therapy literature contains many case examples and a few research studies on the use of songwriting with clients. However, to date, no publications have addressed songwriting with military service members. Yet, the physical injuries and trauma experienced by many service members during military service often result in difficult recovery and re-entry processes. Some of the many needs service members could possibly address through songwriting include the exploration of: (1) pre-injury (who was I?) and post-injury (who am I now?) identities, (2) post-injury abilities (what can I do now?), (3) survival guilt (why am I still here?), (4) shame, (5) depression, and (6) other issues related to TBI and PTSD such as social isolation, and difficulty communicating. As service members are trained to be strong in all situations, showing emotions is often interpreted as a sign of weakness (Peace et al., 2016). This can make direct expression of emotions in therapeutic work challenging for some. For these service members, songwriting, through its ability to convey messages in music and metaphors, may help lower the resistance to exploration and expression of emotions. In addition, songwriting can be used to address cognitive and communication issues that may result from TBI such as problems with executive functioning, auditory processing, memory, and expressive/receptive speech. For example, executive functioning is supported by asking service members to select lyrics and make decisions regarding musical accompaniment. Communication and cognitive skills are honed by deciding how to express oneself, clarifying thoughts and feelings through lyrics, and then externalizing them using music. The process of songwriting also engages memory and recall by encouraging service members to reflect on past experiences, process associated emotions, and express them through music. Overall, songwriting supports service members with TBI and PTSD in experiencing mastery through developing self-confidence and sense of self through telling their story through song (Baker, Wigram, Stott, & McFerran, 2008).

At the NICoE, all service members who are enrolled in the IOP program receive group songwriting during their 4-week treatment, and they have the option to further explore songwriting in individual sessions. Those who receive music therapy as part of their long-term rehabilitation process have the option to explore songwriting as part of ongoing individual or small group music therapy treatment. Service members from both treatment tracks may also participate in therapeutic writing sessions, creative writing workshops, maintain journals, or experience writing in other treatments such as cognitive behavioral therapy or wellness sessions. Written works that service members have previously created can be restructured, given new meaning, and contextualized through songwriting processes or with the addition of customized musical accompaniment in music therapy sessions.

The purpose of the retrospective analysis of songs written by service members during their treatment is to enhance understanding of the struggles and triumphs experienced by these service members during their rehabilitation processes from service-related, combat, and moral injuries, and to demonstrate that songwriting can be a powerful and reflective medium for expression of fears and worries as well as determination and hope.

## Method

### Participants

This retrospective study analyzed songs written by 11 military service members during treatment at the NICoE. Four service members were exclusively in the 4-week IOP treatment track, five service members were in the long-term program, and two service members first completed the 4-week IOP program and continued to receive ongoing care. The majority of the service members were male ( $n = 10$ ), nine of whom were white, and one white woman. Their age ranged from 20 to 50 years of age with an average age of 36.18 ( $SD = 9.48$ ). Six service members served in the Army, one in the Marines, one in the Air Force, and three in the Navy. The average time in service was 15.8 ( $SD = 8.49$ ) years. The majority of the service members had been assessed for posttraumatic stress ( $n = 10$ ), depression ( $n = 9$ ) and generalized anxiety disorder ( $n = 8$ ), as part of their standard care. Eight out of 10 service members reported moderate to severe posttraumatic stress on the PTSD Checklist – Military Version (PCL-M) (Blanchard, Jones-Alexander, Buckley, & Forneris, 1996). Three service members reported moderate to severe depression on the Patient Health Questionnaire – 9 (PHQ-9) (Kroenke, Spitzer, & Williams, 2001) and four service members reported moderate to severe anxiety on the Generalized Anxiety Disorder – 7 item (GAD-7) (Spitzer, Kroenke, Williams, & Lowe, 2006). Five out of 11 service members had previous musical experience (i.e. playing instruments, singing, formal instruction) before attending music therapy sessions.

### Data source

The dataset for this study was collected retrospectively and included 14 songs written by 11 service members over the course of 2–3 individual sessions facilitated by a board-certified music therapist (RV). All songs were stored on a laptop computer and iPod and secured in the music therapy clinic. The iPod was available in the clinic for providers, patients, and families to access the songs with the permission of the service members. The service members also granted permission for their songs to be used in this analysis. The song lyrics were transcribed by a music therapist not involved with this study. De-identified song lyrics were transmitted via a secure electronic platform to the external researchers (JB and JB). The external researchers were not permitted to receive the actual recordings of the songs because the voice recordings are considered personal health information that cannot be de-identified.

### Music therapy intervention

The music therapist used various techniques to assist in the creation of the songs included in this analysis such as: (1) lyric substitution to create adapted lyrics and custom song arrangements; (2) transformation of previous written works by service members (e.g., trauma narratives, journal entries, etc.) into song; (3) lyric restructuring of written works that service members had started to create outside of the music therapy sessions and incorporating custom instrumentation; and (4) assisting service members in creating original songs.

The creation of original songs was the most commonly used songwriting method. Seven out of the 11 songs were written entirely in the music therapy sessions - lyrically and musically. The songwriting process was individualized to each service member, but typically commenced with identifying thoughts, beliefs, or experiences, which service members might have been struggling to express. These thoughts and experiences were then reviewed for underlying similarities and differences and categorized into themes. This exploration assisted them in gaining a deeper understanding of themselves and their experiences. It was helpful for service members to identify the intended audience (e.g. immediate family, significant other, fellow service members) for the song in the early stages as this helped them to select the main themes and supporting content for the song. The main themes were then used to create the chorus. Supporting content was used to form the verses and could be sequenced in various ways: 1) starting with benign topics and moving to deeper issues; 2) starting with the more important topics and then growing lighter in subject matter; 3) starting with the past and moving to the present and future to tell a story; or 4) starting with the present, exploring the past, and projecting the future to tell a story. Once the main theme(s) and supporting ideas were identified, the music therapist guided the service member in incorporating elements of songwriting such as phrasing, rhyme scheme, overall song structure (ABA, AAB, etc...), and utilizing metaphors to convey more difficult topics and relay messages through imagery and implications rather than stating literal meaning.

The customized musical accompaniment also played an important role in how the service members shaped their songs. As the service member and music therapist explored the emotions explicitly or implicitly expressed by the song, they reviewed different musical modes and progressions to capture, match, and contextualize the “feel” and emotional content of the song. Service members often expressed that the addition of music accompaniment - melody and harmony - created a safe and supportive environment for them to engage in honest expression. During the songwriting process, one patient said, “Jimi Hendrix said that music doesn’t lie and so, I can’t lie in my song, I want to tell the truth.”

For most songs included in this analysis, the songwriting process started with the lyrics and the music was added after. However, in a few instances, the music was created when the song topic was identified and the lyrics were developed after the musical composition.

### Data analysis

Song lyrics were imported into MAXQDA 11 (MAXQDA, 1989-2014) and analyzed by two coders using inductive thematic analysis procedures as per Braun and Clarke (2006). An inductive thematic analysis uses a latent approach to the coding of the text; this means that the researcher looks beyond “the semantic content of the data, and starts to identify or examine the underlying ideas, assumptions, and conceptualizations—and ideologies—that are theorized as shaping or informing the semantic content of the data” (Braun & Clarke, 2006, p. 84).

After reading the song lyrics as a whole and writing memos about

initial impressions of the songs, each song was individually coded. The second author (JB) served as the primary coder. When assigning a code to a data excerpt, care was taken to include some of the surrounding lyrics so that the codes would remain sufficiently contextualized. After JB completed the coding of a song, the primary author (JB) reviewed the codes and added additional codes and/or further refined the codes. The two coders then met to discuss these additions and refinements, and to resolve any disagreements. Disagreements were rare and typically involved a difference in interpretation of code labels. This was resolved by clarifying the intent of the code and revising the code label so that the meaning of the code was clear. This process was repeated for each song. After the coding was completed, the secondary author organized the codes into categories. This process was aided by reviewing memos written during the initial read-through of the songs as well as memos written during the coding. In addition, an excel file that included the codes with all of the associated text excerpts was generated by MAXQDA. After initial ideas of categories were created by the primary coder, the two coders met several times to review these initial categories and explore alternate ways of categorizing the codes. During these discussions, the excel file with coded excerpts was invaluable. After JB and JB were satisfied with the map of categories and associated codes, they began to connect categories to form broader themes. In addition, preliminary definitions were developed for each theme and category. JB and JB then jointly reviewed the categories, initial themes and definitions, and compared these against the original dataset. Themes were further refined or permuted where needed, and representative quotes were identified for each category. At this point, the themes, categories, definitions and representative quotes were presented to RV for her input. RV was the music therapist who wrote the songs with the service members. Her input was essential in further refining the definitions and making adjustments to the categorization of the codes.

### Results

Thematic analysis of the service members’ song lyrics yielded four main themes: (a) personal struggles and barriers to recovery, (b) moving forward, (c) relational challenges, and (d) positive relationships and support. Table 1 outlines the four overarching themes, their corresponding categories, and example quotes from the songs.

Service members faced many challenges related to their military service on various levels including cognitive, emotional, and physical difficulties. Their song lyrics reflected personal struggles they encountered along with *Personal Struggles and Barriers to Recovery* (Theme 1). The songs portrayed feelings of helplessness and uncertainty, and described how those emotional states often restricted their wellness as reflected by the following lyrics: “Please don’t let me lose my way. How do I face my own issues? How do I know what my issues are? I hate what I have become.” Also represented in the lyrics were personal limitations related to injuries sustained during service, loss of identity upon returning home after deployment, and feeling a lack of control in their lives as represented in these lyrics: “I’m overwhelmed. Will it ever pass? I’m drowning, Lord.” In describing emotional barriers, one service member wrote, “How am I supposed to share this with people? How am I supposed to be close enough to someone to trust them? The walls between me and everyone kept me safe, but also forced me to change who I am.”

Often through the lyrics, service members shared a negative self-image associated with feelings of being overwhelmed: “Keep the blinds closed. I like the dark. It’s where I belong.” Negative self-perceptions were also expressed through self-directed anger. This was evidenced in lyrics that expressed self-loathing and suggested struggles with depression. Several songs expressed feelings of paranoia, isolative

**Table 1**  
Themes, Categories and Exemplar Quotes.

Theme and definition	Categories and definitions	Exemplar quotes
<p><i>Theme 1. Personal Struggles and Barriers to Recovery:</i> Service members faced many cognitive, emotional, and physical issues related to their military service.</p>	<p><i>Feelings of helplessness:</i> Service members' song lyrics often depicted a sense of helplessness.</p>	<ul style="list-style-type: none"> <li>● There's a monkey in my head. His chitter chatter turning green to red. He claps and clatters, swings between "was" and "might be." My confusion makes him smile so happily.</li> <li>● I know I do not have physically visible wounds! What do I do? Who have I become? Where do I go? What am I meant to do now? WHO AM I SUPPOSED TO BECOME?</li> <li>● Depressed, reclusive, afraid. Thankfully drinking can take the edge off. But for how long I wonder?</li> <li>● I walk around and I shall find people GAZING...Wondering "what is wrong with him?" Not knowing how much I am broken on the inside.</li> <li>● I was compelled to double check everything. Constantly be on the lookout for terrorists so they don't mess with any more people, any more kids who had nothing to do with anything. I can feel the eyes watching me all the time. They want me dead. I can't trust anyone.</li> <li>● Knives in every drawer, no one will dare come through my door. I'm always ready—I have to be. I'm always scared.</li> <li>● Making peace with my past, releasing my anger. Embarking on my journey to all things better.</li> <li>● I was not the cause for all the negative things in my life. For all that I have been through, I am blessed. As the walls come down, I can move forward.</li> <li>● Because this feeling here is superior to the greatest rest that I could ever attain and store down on Earth. Yeah, something pretty spectacular has transformed and replaced the blood, which gave me life to a stardust, which now holds me in suspense, glistening in ebullience with a greater understanding of the things to come.</li> <li>● As the sunlight appears, a new opportunity takes shape. We grow strong trying to push the weeds away. Sometimes we overcome. Others we wait for a new day. And we bloom where we are planted.</li> <li>● You make yourself, not the people to your left or right...You are the driver on your own bus. Only you can tell us the way you want to go.</li> <li>● With music, it doesn't matter if I am feeling bad or sad. It uplifts me in a positive way and always tells the truth.</li> <li>● What time won't heal the heart must bear. Doesn't really matter if you think it fair. It only matters that we can move past, the fickle things that put our love last.</li> <li>● When you feel stressed don't take it as a time to stop. Take it as a time to group and molt your shell. Embracing the stressful moments in your life is the way to embrace life.</li> <li>● Yesterday has come and gone. But where has our love gone? Has it faded like some old love song, that we've all known.</li> <li>● I know that you are blind to how I feel about you deep inside. If you'd only open your heart. Nothing will ever tear us apart.</li> <li>● The walls must go higher. I never get to relax. I just want to protect everyone. Especially my guys, they rely on me, I'm responsible to their families. I can't let them go thru this bs.</li> <li>● Only God can judge us, most will agree. You worry about you and I'll worry about me.</li> <li>● When you came into this world, you brightened everything I am. As we get closer, I can see, all that you mean to me.</li> <li>● I am thankful for my friends and family who give me support and love. When I feel I can't do something, they are there to motivate and help me out.</li> <li>● Girl you know that I love you. And I'll always be true. I will never leave you. Need you here with me.</li> <li>● Music makes me happy! It gives me connection to hear other people sing and play. Music motivates me to listen, sing, play, and create.</li> <li>● When you smile, if only it would light a room. But you light the entire world. And only I can see how amazing you are to me.</li> </ul>
	<p><i>Negative self-perception:</i> Negative self-perception was expressed through anger towards self, and at times a lack of self-care.</p>	
	<p><i>Self-preservation: Maladaptive coping strategies hindered healthy progression and sense of self.</i></p>	
<p><i>Theme 2. Moving Forward:</i> Motivation for betterment of self and others and positive risk taking led to personal progress and inspiration for others.</p>	<p><i>Perseverance:</i> Service members strove forward physically, emotionally, mentally, and spiritually.</p>	
	<p><i>Resilience:</i> Struggles were overcome through growth, adaptation, and hope.</p>	
	<p><i>Insight and self-discovery:</i> Self-reflection, increased emotional expression, and coping skills supported personal growth of service members.</p>	
<p><i>Theme 3. Relational Challenges:</i> Disruption of healthy relationships inhibited service members' wellness and interpersonal growth.</p>	<p><i>Helping others move forward:</i> An integral part of self-progression was helping others learn through their adversities.</p>	
	<p><i>Barriers to healthy relationships:</i> Difficulty with communication and relating to others stifled the development of stable relationships.</p>	
<p><i>Theme 4. Positive Relationships and Support:</i> Service members were able to increase their capacity for positive relationships.</p>	<p><i>Fears related to relationships:</i> Service members' fears hindered their processes of creating and maintaining healthy relationships.</p>	
	<p><i>Feeling supported:</i> Service members expressed an appreciation and acceptance of support from others.</p>	
	<p><i>Offering relational supports:</i> Positive relationships were established through joining and supporting others.</p>	
<p><i>Relationship growth:</i> Service members developed improved relationships with families, peers, and colleagues.</p>		

behaviors, and hypervigilance. Whereas self-preservation strategies such as hypervigilance are essential for survival during combat, prolonged states of exaggerated alertness, guardedness, and hyper-arousal severely limits service members' ability to connect with family and friends and reintegrate with the community post-service. Reflecting on his transition, a service member wrote, "I was different and I didn't know what to do. I didn't realize how much the violence over there changed me. I didn't realize how different I became. Isolation. Avoidance. The walls became my life."

Despite the service members' struggles, their song lyrics expressed positivity that fostered progression and resilience. Service members not only wanted to better themselves and further their own growth, they often took pride in supporting others with similar and shared experiences. This was frequently referenced in the second theme of *Moving Forward*. Past hardships inspired personal and posttraumatic growth and acted as a motivational factor in helping others. Perseverance was frequently identified as a common virtue in song lyrics. One song reflected the sense of determination as follows: "Take it as a running back in football. He gets handed the ball and he quickly looks for the hole or gap in the defensive line and shoots for it. He may only get a couple yards, but those yards add up to getting closer to the goal... So, that's what you have to do, if you see your opportunity to shoot the gap and make a run. Go for it! Put all your effort in and run!" Finding ways to live in the present moment and letting go of the past were noted as important steps to support forward movement as reflected in the following lyrics: "Breathe in deeply... release what does not serve me. Breathe in deeply... exhale demons inside me."

Along with perseverance, service members showed great resilience in their lives and service. Several of the songs spoke about feelings of empowerment and hope for the future. For example, one service member wrote about the metaphorical "monkey" in his head, referring to the phenomenon of "monkey brain" or mental chatter. He wrote, "No matter who wins the war, my monkey is less when I am more." Service members' songs reflected new perspective-taking and skill development such as knowing to take the time to breathe during stressful situations, or understanding that acknowledging emotions, although difficult at times, can be a positive asset and an assertion of their humanity. One service member expressed acceptance of his past and self-forgiveness through his song noting, "I was not the cause for all the negative things in my life. For all that I have been through, I am blessed. As the walls come down, I can move forward."

Acknowledgment of personal growth sparked awareness of the ability for service members to help others move forward as well. Specifically, through their songs, they expressed the desire to share their knowledge and hope with fellow service members: "Basking in the sun – we live in new moments, and as we grow, our roots take hold. And we bloom where we are planted." Song lyrics were written with specific intentions of motivating others and instilling hope in those who may not see it on their own: "Yourselves are the key to humanity. Keep striving forward with your ideas. You may have roadblocks, but those roadblocks you hit, you can easily get around."

The third theme *Relational Challenges* focused on struggles service members experienced in their relationships with others. Disruptions in their personal relationships with family and loved ones often created significant challenges leading to isolation and a sense of instability. Several songs reflected difficulties relating with others. Whether songs expressed feelings of perceived disrespect from others or the inability to relate with people, there was a clear message of barriers to healthy relationships. Service members expressed fears of losing relationships, responsibilities they felt for others' safety, and acknowledgment of a guardedness that obstructed closeness in relationships with family and significant others. These feelings brought an awareness of relational difficulties and how their actions played a role in the establishment of

healthy relationships. One service member shared his relational struggles in his song recalling, "We used to make love. Now all we do is make up. One thing leads to another. And feelings get hurt." Another service member expressed in songwriting what he could not express at home: "I know that you are blind to how I feel about you deep inside. If you'd only open your heart, nothing will ever tear us apart."

At the same time, the song lyrics reflected an appreciation of growth and change in relationships made possible by receiving as well as giving support (*Positive Relationships and Support, Theme 4*). Some service members wrote about different levels of support including relational and spiritual support. The idea of accepting support from others was represented metaphorically in the following song lyrics: "Overtaken by the weeds, overtaken by the darkness. The flowers struggle to survive. The garden rallies to support our lives, and we bloom where we are planted." Despite past difficulties, service members were able to join and support others, establishing positivity within their relationships. This was represented through song lyrics expressing loyalty to others, relating to others' experiences, and seeing the goodness in themselves and others. Moreover, relational growth was prevalent in several of the songs. Lyrics reflected positive familial impact and growth within family dynamics. One service member shared his desire for unity and acknowledgment of the changing roles within his family. "Dear family, here's my message to you: I want you to behave, save money, and be safe. Most importantly, take care of each other. Respect and love each other. That's what makes our family strong." There was an indication of belief and trust in others, familial pride, and the building of positive relationships with others. "I am thankful for my friends and family who give me support and love. When I feel I can't do something, they are there to motivate and help me out." After acknowledging relational challenges faced by service members' partners and spouses, a service member expressed growth and hope in a once difficult relationship: "And tomorrow when I wake, what will take place? A smile is on your face. Tender words upon your lips."

## Discussion

The 14 songs included in this analysis offer a window into service members' lived experiences of military service, injury, recovery, homecoming, transition from active duty, and the importance of family throughout their journeys. The songs represent a wide array of post-deployment intra- and interpersonal struggles expressed by the service members in their own words using literal and metaphorical prose. The songs speak about difficulties with physical injuries as well as invisible wounds of war, adjustment issues, loss of identity, uncertainty, depression, and anger and frustration towards self and others. Several songs describe issues and behaviors characteristic of PTSD such as hypervigilance, paranoia, and isolative behaviors. Many service members also expressed difficulties sharing their feelings and experiences with loved ones. For many, these struggles resulted in feelings of loneliness and disconnect. In spite of this, several songs reflect resilience and perseverance, love for family and friends, hope for the future, and camaraderie through offering advice and support to other service members who are experiencing similar struggles.

Among OEF/OIF/OND Veterans, the high-incidence rates of PTSD, depression, and TBI (Coll, Weiss, & Yarvis, 2011) have become a recognized concern that has, among other systems drivers, resulted in an even greater emphasis within the VHA to help wounded, ill, and injured Veterans reintegrate in their homes and communities (e.g., Resnik et al., 2012). Successful reintegration includes finding purpose and meaning in life, having fulfilling interpersonal relationships and being able to engage in various roles (e.g. familial, social, and occupational) independently (Resnik et al., 2012). Sayer et al. (2011) furthermore emphasize that a sense of belonging, acceptance, connectedness to

others, and involvement in leisure and community activities are of paramount importance to successful reintegration. Service members at the NICoE receive many valuable services aimed at helping them achieve successful reintegration. For some service members and veterans, however, engaging in narrative (i.e., talking about personal experiences and sharing life stories) can have added benefits in helping them find meaning in their lives (Demers, 2011; Ricoeur, 1992; Whitty, 2002). A study by Burnell, Hunt, and Coleman (2009) indicated that veterans found that sharing their service stories with others was an effective way to cope with combat experiences, memories of service, and gain meaning-making.

The songs included in this analysis demonstrate that songwriting enabled service members to tell their stories in a novel way. Songs can also offer insight into where service members are on their journeys of recovery, and as such, provide valuable clinical information. For example, some of the songs discuss feeling misunderstood by the civilian sector (e.g. “This lady asks what annoys me and when I opened up she cut me off early due to her own beliefs. She says that’s political, but I’m smart enough to know that was hypocritical”). This aligns with findings by Demers (2011) from a study with active-duty service members and veterans; through focus groups, participants expressed that they felt misunderstood and disrespected by civilians who they feel had limited comprehension and appreciation for their service. They contrasted this with the respect that they feel they had earned in the military and the sense of purpose they had while serving. Service members often struggle with reconciling two very different social contexts, namely military life and the civilian world. Adler and McAdams (2007) discuss how living in social contexts that offer incompatible cultural narratives may lead to a significant identity crisis if individuals are unable to find an integrated personal narrative. Through songs, the service members in this study were able to share their experiences of such incompatibilities and begin to explore possible paths forward within a therapeutic context.

In several of the songs, service members were asking for help (e.g. Please GOD, tell me and show me what I am meant to become now! Where do I go from here? Who have I become?). Given the high prevalence of stigma and barriers to receiving mental health care in OEF/OIF veterans (Hoge, Castro, & Messer, 2004), and a general distrust of traditional psychotherapy in service members (Bryan & Morrow, 2011), music therapy, as well as other creative arts therapies, may offer opportunities for exploring mental health issues that are potentially more accepted by service members. Although certainly not the only possible intervention to reduce barriers to emotional expression, songwriting has some advantages worth noting. First, the musical structure of the song can aid in organizing and expressing service members’ thoughts while, at the same time, offering an audibly supporting environment (Baker & Wigram, 2005). Second, finding oneself in a ‘musical groove’ can help reduce resistance to exploring feelings and can result in opening up about long suppressed thoughts and fears. Third, although not unique to songwriting, in songs one can use metaphors to express that which is difficult or too painful to externalize. This indirect expression of one’s most inner feelings makes the use of songs powerful in therapeutic work. Many songs included in this analysis reflect the service members’ feelings and struggles through metaphors (e.g., being overtaken by weeds). Besides facilitating expression of feelings that feels less threatening to the songwriter him or herself, metaphors also offer a protective mechanism for the listener. Service members have shared that this is especially important when they choose to share their songs with family members. All songs written by service members were recorded and, if so desired by the service member, a CD was created to archive their experience in music therapy and share with friends and loved ones. This enabled service members to share with their family members, often for the first time, their inner-selves, including the

depths of their emotional turmoil and the intensity of their struggles in recovery. Throughout the process of songwriting and recording, service members were often cognizant of the fact that these lyrics may be disturbing or even hurtful to their loved ones. The use of metaphors seemed to be a way to soften their expression.

The songs also pointed to the strong collectivist values of the military including the importance of accomplishing missions as a team. *Bloom where you are planted* and *Damaged Shield* (Appendix A) both offer empowering/motivational perspectives that can be helpful to others. The songs instill perseverance and determination, offer hope, and advise others to allow oneself to be vulnerable in order to grow. Peer support is increasingly recognized as an important component of mental health services for improving psychological well-being among veterans, as this is congruent with military values of unit cohesion and camaraderie (MacEachron & Gustavsson, 2012). Recordings of songs written by service members and veterans could function as a valuable resource to other service members. In fact, many service members at the NICoE opt to keep their songs on the clinic’s iPod once they have completed treatment so that they are available to other service members who are going through treatment.

Based on these findings and the extant literature, we would like to offer some recommendations for music therapy clinical practice when using songwriting with service members. First, it is important that clinicians understand military culture and values such as honor, courage, loyalty, integrity and commitment (Coll et al., 2011). Throughout their training, service members are taught the importance of perseverance, indomitable spirit, and enduring strength and commitment. This may unintentionally instill beliefs that seeking help is a sign of weakness and potentially betrayal of core military values (Coll et al., 2011). Understanding service members’ worldviews is essential in building a therapeutic relationship that respects gradual exploration of personal issues and trauma through songwriting.

Many service members experience grief related to loss of comrades as well as loss of physical abilities, uncertainty of identity, shattered world views, and disillusionment. Therefore, it is important for music therapists to be knowledgeable about current clinical thinking related to grief processing (e.g., framing grief processing from a stage approach is no longer considered an effective way to approach bereavement). For example, in songwriting, music therapists may wish to incorporate cognitive reframing, a technique frequently used in grief work (Myers-Coffman, 2018). Cognitive reframing can help service members explore cognitive distortions and consider replacing these with more helpful thoughts. For example, in “Who am I Supposed to Be?” (Appendix A) the service member’s first verse states, “I walk around, and I shall find people gazing, wondering ‘what is wrong with him?’ Not knowing how much I am broken on the inside.” The music therapist assisted the service member in working through thoughts of “being broken” by identifying strengths in service, recovery, and hope for the future. Though verbal processing and creating specific musical accompaniment to support the service member’s emotions expressed through lyrics, the end of the song reflects hope, “Why be like everyone else and like a machine just repeating the same thing over and over again when you can be yourself and make change? Either you win or you will learn but you never lose. My life is finally feeling whole again.” Thus through cognitive reframing the music therapist acknowledged the service member’s thoughts and feelings while at the same time inserting thoughts of hope and resilience. It is important that suggestions for cognitive reframing align with current research related to grief processing (Myers-Coffman, 2018).

Scholars and clinicians have also advocated for incorporating strengths-based conceptualizations in mental health care of active-duty service members and veterans (Bryan & Morrow, 2011). Strengths-based approaches aptly fit with the warrior mindset and can help

engage service members by framing the therapeutic work as learning to develop strategies and skills to “tackle” the mission (e.g., successful integration). Framing songwriting as a way to learn from the reflection of past and current experiences and to positively project the future enhances their ability to “tackle and complete” the mission ahead. For some service members, framing adversities as opportunities for growth may be more helpful than introducing songwriting as a way to explore and work through issues (Bryan & Morrow, 2011). Research with veterans has indeed shown that many report that their struggles with dealing with service-related trauma eventually led to positive personal changes. This is often referred to as “post-traumatic growth” (Tedeschi, 2011).

It is important that the songwriting process is documented through the music therapy clinical notes included in the service members’ medical records. This, in addition to receiving permissions from the service members to share their songs with others, allows providers on the interdisciplinary treatment team to gain insights into: 1) the service members’ experiences, 2) how music therapy contributes and plays a pivotal role in therapeutic progress of service members, and 3) how non-traditional forms of therapy may be essential in lowering barriers to mental health care in this population. In some cases, service members invite other interdisciplinary team members into their music therapy sessions to observe the progression of their songs. Others opt to perform their songs openly, for example in open areas of the clinic (e.g., lobby). Team members have shared that these opportunities have been meaningful in enhancing their understanding of the service members and that the therapeutic work that was done in music therapy often ‘spills over’ into other therapeutic encounters outside of the music therapy clinic. In certain cases, team members have performed with their patients, both within the music therapy session and in public performances.

Finally, it is important to note that the completion and recording of the song is not the endpoint of the therapeutic process. Once the song is completed and the recording is produced, it is imperative to verbally process the completed song with the service member as they may have strong reactions to listening to their own song. Aigen (2004) writes “The therapeutic process with the song continues...as the song is performed for other therapists, friends, or family, or sometimes even performed in concert. The meaning of a song and the therapeutic potentials of songwriting in music therapy then, is not only connected to the song as a certain expression, but to the relational experiences of the songwriting process and to the use of the song inside and outside of the music therapy room” (p. 98). At the NiCoE, service members listen to their final songs with the music therapist and discuss their response. In some instances, the service members opt for their families to be present during this session so that they can all listen together, or families are invited after the initial listening. This interaction with the final song is critical for the music therapist to gauge if further processing needs to take place with the music therapist and/or another behavioral health provider. Potential next steps are sharing the song through performance in the clinic or greater community. Several of the service members who wrote songs included in this paper chose to perform their song at a Creative Arts Café while they were still in treatment. The Creative Arts Café model is an initiative that was developed through Creative Forces music therapy programs to provide a performance platform for patients and staff to share various facets of creative expression through performance. This may include, but is not limited to, music, art, creative writing, poetry, drama, dance/movement, wellness topics, and other forms of creative expression (Bronson et al., 2018). In other cases, service members have had found platforms to perform their original pieces, months, even years after they completed treatment and had

ample time to process their songwriting experiences.

This secondary analysis had several limitations. First, the analysis included a relatively small number of original pieces written mostly by male service members. Second, to protect the songwriters’ identity, we were only able to provide aggregate demographic data rather than demographical details for each of the songwriters. Finally, because sharing of identifiable information of DoD service recipients with external research teams is prohibited, we were unable to obtain the actual recordings of the songs. This limited this analysis to the song lyrics; analysis of the actual music would have enriched this analysis.

## Conclusions

The songs included in this retrospective analysis enhance our understanding of some of the challenges that service members face upon homecoming as they attempt to return to duty, transition from active duty to veteran status, and reintegrate into their families and communities. The themes addressed in the songs align closely with post-deployment issues discussed in the literature. The songs enabled service members to share their thoughts, emotions, fears and hopes with family, friends and other providers, some for the first time. In many cases, songwriting was an important stepping stone in the psychotherapeutic processing of intra- and interpersonal conflicts. Given barriers surrounding seeking mental health care services in military populations, music therapy, and specifically songwriting, can offer a venue for psychotherapeutic work that may be perceived by service members and veterans as ‘different’ than traditional mental health services and the associated stigmas. As such, music therapy, and other creative arts therapies, may play an essential role in providing opportunities for service members and veterans who seek much needed mental health treatment and overall rehabilitation.

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## Disclaimer

The views expressed in this manuscript are those of the authors and do not reflect the official policy of the Department of Army/Navy/Air Force, Department of Defense, or U.S. Government. The identification of specific products or scientific instrumentation is considered an integral part of the scientific endeavor and does not constitute endorsement or implied endorsement on the part of the author, DoD, or any component agency.

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## Appendix A

### Bloom where we are planted

Wounded, sick, ill or injured  
 The weeds overtake us  
 The wind takes our seeds and  
 Sends us to new areas.  
 Basking in the sun – we live in new moments  
 And as we grow, our roots take hold  
**And we bloom where we are planted.**

As the sunlight appears  
 A new opportunity takes shape.  
 We grow strong trying to push the weeds away  
 Sometime we overcome  
 Others we wait for a new day  
**And we bloom where we are planted.**

Overtaken by the weeds overtaken by the darkness.  
 The flower struggles to survive.  
 The garden rallies to support our lives  
 As we continue to grow and thrive  
**And we bloom where we are planted.**

New hope breaks on the dawn of a new day  
 Instead of sunshine, this time we have rain  
 Watering our roots so that we may  
**Bloom where we are planted.**

### Damaged Shield

Yourselves are the key to humanity, Keep striving forward with your ideas  
 You may have road blocks, but those roadblocks you hit, you can easily get around...

Don't think that times of struggle is the end,  
 Lobsters are fleshy under their hard shell, that does not grow  
 When they get confined with their shell,  
 They go under a rock and molt that shell to grow a new one.  
 When you feel stressed don't take it as a time to stop  
 Take it as a time to grow and molt your shell  
 Embracing the stressful moments in your life is the way to embrace life.

For you to become a stronger person, you will have to molt your shell.  
 Don't take a stressful situation as a bad situation.  
 Take it as a learning experience and being life's teacher...  
 You make yourself, not the people to your left or right...  
 You are the driver on your own bus  
 Only you can tell us the way you want to go.

So, believe in yourself...  
 Don't shoot for goals under the bar,  
 Shoot for goals way over the bar,  
 Because you will end up surprising yourself and go farther than you ever thought you would or could go

The reason why you did and have come as far as you are right now is because you are shooting for something that you desire or need and you just shoot for it.  
 Take it as a running back in football, he gets handed the ball and he quickly looks for the hole or gap in the defensive line and shoots for it.  
 He may only get a couple yards but those yards add up to getting closer to the goal...  
 Every once in a while he is able to shoot the gap...and just keep running to the goal...  
 And sometimes scores a touchdown!  
 So, that's what you have to do if you see your opportunity to shoot the gap and make a run.  
 Go for it! Put all your effort in and run!!!

Now who makes up your goals? You do!  
 Who makes your determination to push? You do!  
 Who finds that gap and shoots towards it? You do!  
 So stop thinking things are going to fall into your lap because one day you will be older and needing something done for you and you can't do it alone.  
 So, you look for help but everyone is so worried about opportunities to fall into their laps.  
 So, lead by example and strive and become the best that anyone has ever seen.

One of the greatest challenges in life is being yourself in the world that's trying to make you like everyone else.

### Who Am I Supposed to Be?

I walk around, and I shall find people **GAZING**  
 Wondering "What is wrong with him?"  
 Not knowing how much I am broken on the inside.

I know I do not have physically visible wounds.  
 What do I do? Who have I become? Where do I Go?  
 What am I meant to do now? **WHO AM I SUPPOSED TO BECOME?**  
 "No, we see who you are" that's what people say.  
 I do not see that person they see today.

We all wear masks, everyone, every day.  
 And sometimes, we wear them so much we forget  
 Who we really are and are supposed to be.

Sometimes, if we are lucky someone comes along  
and shows us who we really are.

Please GOD, tell me and show me what I am meant to become now!  
Where do I go from here? Who have I become?

We all have days when we feel alone.  
We don't see the true light in ourselves.  
What am I supposed to see?  
Everyone needs someone or something.  
I am not what I began to see!  
No one should have to walk through the fire alone

The miracle about life is you will always find who you are  
and who you are meant to become.  
Why be like everyone else and like a machine  
just repeating the same thing over and over again  
when you can be yourself and make change?  
Either you win or you will learn but you never lose.  
My life is finally feeling whole again.

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