AN EVALUATION OF THE MUSICAL CONNECTIONS SONG WRITING WORKSHOP OF CARNEGIE HALL'S WEILL MUSIC INSTITUTE AT JACOBI MEDICAL CENTER SPRING 2011

By

Dr. Thomas Wolf
Dr. Dennie P. Wolf
WolfBrown

FINAL DRAFT

TABLE OF CONTENTS

EXECUTIVE SUMMARY

BACKGROUND

In 2009, the Weill Music Institute of Carnegie Hall launched the Musical Connections Program. The program was founded on three core premises:

- *Music has the power to transform lives and bring hope and comfort to people in challenging circumstances.*
- *All people deserve to have great music in their lives.*
- *Carnegie Hall feels a responsibility to provide and develop programs that respond to community need based on the organization's mission and civic position.*

Musical Connections has taken musicians to settings as diverse as adult and juvenile correctional facilities, homeless shelters, senior service organizations, and hospitals. The activities offered have ranged from large-scale concerts for several hundred people to in-depth workshops extending over many weeks involving as few as five or six participants.

One of Carnegie Hall's important partners has been Jacobi Medical Center in the Bronx, New York. Over a span of two years, programs at Jacobi have included concerts for the wider Bronx community held at Jacobi in conjunction with health fairs, informal programs in public settings and in wards, staff development events, and a 12-week song-writing workshop conducted in the spring of 2011.

THE SONG WRITING WORKSHOP

The song writing workshop took place over three months. A group of adolescents infected with HIV met for 90 minutes each week with a composer to learn about song writing and to compose their own songs. There were additional work sessions and rehearsals with other professional musicians and the workshop culminated in both a private performance and a public concert featuring the participants' songs. The workshop design – with its emphasis on song writing facilitated by professional musicians culminating in a public performance – was based on an explicit design perfected in other settings by Carnegie Hall musicians. This paper provides an evaluation of the workshop.

Desired Outcomes: Numerous outcomes were formulated for the song writing workshop by a group of individuals from Jacobi and Carnegie Hall. These were arranged into three general categories:: creative development, general well being, and a group of desired clinical results. A number of qualitative and quantitative techniques were designed to assess whether the outcomes were achieved and to what extent.

Participants: All sessions were led by the composer and in most he was joined by a psychologist from Jacobi and the evaluator. Six adolescents ranging in age from 13 to 18 began the workshop in February 2011, including an African-American male, three African American females, and two Hispanic females (one of whom dropped out after attending five sessions).

Treatment for HIV has advanced considerably in the past decade and the condition for these individuals has moved from a terminal to a chronic illness. Those infected with HIV can generally expect to live a normal life span; yet psychological problems are common with this population. Loss is a common element in their lives (several have lost a parent), and many come from difficult home situations and economic circumstances. Many are non-compliant with medical visits and medications as was true with this group.

OUTCOMES – SURVEY OF PARTICIPANTS

In order to gauge which outcomes were achieved and to what extent, one of the instruments used was a detailed survey completed by participants prior to the workshop and again at its end. Among the most noteworthy findings are:

- The participants brought much creative energy and activity to the workshop mostly in the form of personal writing. Many were already keeping journals or writing poetry. The extent of this creative activity was a surprise to the adults involved in the workshop who had anticipated much effort would be required to elicit personal feelings in lyric writing. This included the Jacobi staff member who knew the participants best because the material had not been shared with her or in some cases with anyone.

- Consequently, one of the great achievements of the workshop was the nurturing of a community of trust and confidence where participants felt

increasingly comfortable about sharing their personal writing with each other and eventually with others outside the group. That trust grew from the sharing of writing to the sharing of feelings more broadly. A consistent theme in the well-being portion of the survey was the growing confidence about "sharing feelings with other people" and finding "people I can talk to about my problems."

- In addition to growing trust, there was less anger and more happiness among participants by the end of the workshop as expressed in the well-being and clinical outcomes sections of the survey.

- The workshop expanded the participants' range of creative activity especially in music. A typical response from a participant prior to the start of the workshop was that she never expressed herself musically and felt incapable of doing so. By the end of the workshop, she was making her own music, not only in the workshop but in her spare time.

- A great challenge with this population is adherence to a regular schedule of medical visits. One outcome of the workshop that impressed Jacobi staff was the loyal attendance of participants. Many travelled great distances on public transportation. Even in inclement winter weather with multiple buses required, they continued to come.

- When queried at the end, participants expressed universally positive views of the workshop. They liked being able to express feelings and experiences, hear what other people had to say, work with real musicians, and get a chance to write songs. They would recommend the workshop to others and in four out of five cases would take the workshop again (with the fifth saying she might take it again if it could be offered at a more convenient time).

- The one disappointment expressed by participants was with the private concert (necessitated by the fact that the identities of the song writers could not be disclosed and a private concert was the only way they could perform before family and friends). The complexity of respecting disclosure issues and allowing for a performance opportunity for the participants led to the specific approach taken. Improvements could

easily be designed to adjust expectations and make the event more enjoyable.

DIMENSIONS OF SONG WRITING – LEADER'S ASSESSMENT OF PARTICIPANTS

The workshop leader assessed each participant weekly on ten dimensions of song writing ranging from understanding the relationships between music, words, and mood; telling a story in music; committing personal experiences to song; creating melody; rhythmically placing text over pulse; and others.

- Every participant improved on the great majority of the song writing dimensions and improvement was often considerable.

- Ability to create a melody increased the most. This was not surprising since most of the participants came with virtually no ability to do so. The ability to make informed timbral choices also saw major improvement.

- Change week-to-week was sometimes gradual along these various dimensions but often there was a breakthrough moment when a participant suddenly appeared to develop a new skill.

- In spite of all the improvements, it is important to keep them in perspective. Out of 400 ratings, only one earned the highest score. The workshop was not intended to produce fully formed song writers, nor could it have done so given the extent of participants' prior training, the workshop design, the time commitment, and the various other outcomes being sought.

- It is also important to acknowledge that much of the heavy lifting of transforming nascent ideas into fully formed, harmonized, and ornamented songs was done by professional musicians. This was part of the design of the workshop as it was recognized that developing well crafted songs was well beyond the scope and capabilities of the adolescent participants. It is important not to overstate the musical skills they achieved based on observation of the final performance alone.

OTHER IMPACTS AND FINDINGS

Through further observations and interviews with staff and musicians, there were additional findings.

1. The impact on Jacobi staff (and in a couple of cases other patients) was impressive. In the case of the staff closest to the program (a physician and psychologist who played the most significant role in planning and monitoring the program), the workshop altered the way they viewed the patients and it gave them new insights about how to engage with them in the future. Beyond these two, there were notable impacts on other staff working with this population as well as people working in other parts of the hospital.

2. Musicians also spoke about the impact of the program on them. An important realization was that the process of writing, rehearsing, and performing songs could so immediately be shared, even with musically untrained youngsters who wrestled with medical and psychological challenges. In addition, the concept of "service" that the musicians brought to the sessions ("we are doing this for them") rapidly became transformed into a sense of mutual giving and receiving. "We got as much out of it as we gave."

3. One of the great challenges was in helping the adolescents get beyond their clichéd understanding and appreciation of songs. It required the workshop leader leading them away from a default mode of drawing on familiar pop and rap music, using their texts to inspire snippets of original melody. These were recorded and later subtly altered, harmonized, and put into interesting rhythmic patterns by professional musicians. Again it is important to acknowledge that much of this originality did not spring from the adolescents but came from the leader and other professional musicians who joined later.

4. The limited time period of the workshop and the fact that a high standard was required for a final polished performance meant that there was limited time for teaching. Might the participants have had more opportunities to learn if there had been less pressure to get the songs in shape for a public performance and more time for working on music, editing material, and curating the songs? On the other hand, the final

performance also had a dramatic impact on the adolescents, the staff, and to some extent, community people who attended. In the future, might a different kind of workshop be offered that is more about teaching and less about performance? Alternatively, could sessions be more widely spaced, with not only time but various forms of support between?

RECOMMENDATIONS

Based on the findings, the evaluator made several recommendations as follows:

1. **Focus the Workshop and Its Design on Fewer Goals**: On the basis of what was learned, refine the desired outcomes and target activities appropriately to realize them. This process can be enriched by involving more people in the discussions including, perhaps, alumni of the program, musicians, and other Jacobi staff.

2. **Incorporate A "360 Degree View" of Impact Into Program Design**: The workshop, even without trying to do so, had a profound impact on people other than the adolescent participants. This should become more consciously part of the design. Some examples include:
    - Shift the activities to include more staff
    - Develop clearer goals for musicians
    - Think about opportunities for other patients
    - Consider the Hospital and the community as another constituency to be reached (i.e., consider institutional impacts as well as individual ones).

3. **Expand the Cost-benefit Analysis**: Given the considerable resources required, the workshop should be described as benefitting more than half a dozen people. It has the potential to affect the lives of scores (or even hundreds) of people beyond the song writers – Jacobi staff, other patients, musicians, and audiences. A similar approach might be employed in all Musical Connections programs.

4. **Address More Explicitly the Balance Between the Need for a Polished Performance and the Therapeutic Needs of the Participants:** The professional musicians transformed threads of musical material quickly and skillfully into finished cloth. This was part

of the design of the workshop and was discussed at some length with musicians and medical staff. But a fair question might be when does the need to produce polished songs for a high quality concert trump meaningful opportunities to teach and learn and the therapeutic needs of the participants? The question is fundamental to the design of the song writing workshop and many other Musical Connections programs.

5. **Forge Institutional Partnerships for Follow-up Activities for Participants**: Some participants in this workshop and in other Musical Connections programs have a serious interest in continuing with more instruction and several have real potential. While Carnegie Hall is not set up to run a community music school program or to provide long-term instruction, there are many institutions in New York that are and might have a great interest in partnering to provide follow up.

6. **Consider an Advanced Workshop**: There might be some merit in considering an advanced workshop where there is more emphasis on musical learning. Many of these adolescents would benefit from a more rigorous and demanding workshop and it could draw on other similar programs to fill out the numbers. In addition to music, the participants would be acquiring life skills – hard work, persistence, practice, and related interpersonal skills – that perhaps would allow them to be mentors down the road. Furthermore, with the trust gained in the introductory workshop they might be more open to having additional Jacobi staff, Carnegie Hall musicians, and others circulating through and observing them at their work. With the understanding that confidentiality would still be required, it would allow more people to participate and learn from the process.

7. **Think More Carefully About Facilities**: The workshop sessions were held in a small, often overheated, windowless room that was cramped, given the equipment needs and space required for participants and musicians. While a search was made for an alternative space, people agreed to try this one. In the future, a larger more appropriate space should be a priority especially if additional people are going to be involved.

8. **Make Better Use of the Private Concert:** The private concert was designed with the best of intentions (and late in the planning cycle).

Given disclosure issues, it seemed the most appropriate opportunity for the young people to shine in front of family and friends given that they would not be permitted to perform in the public concert. But few family and friends came and the program was held in a space that did not lend itself to a performance atmosphere. What did make the event very special was that many of the medical staff attended and acted as a cheering section each time one of the patients performed. One wonders whether the emphasis of the program (with the awarding of certificates and post concert dinner) should be more on a Jacobi audience. Family and friends could still be invited but the pressure would be lessened to have someone show up. In addition, there may be additional creative ways to acknowledge participants in the public event – not by name but by descriptors scripted into the event. Finally, the young people should be alerted, after rehearsing in a theatre with several hundred seats, that "their" event will be in a much smaller, more intimate venue.

ACKNOWLEDGEMENTS

Many people made this evaluation possible. Special thanks to workshop leader Thomas Cabaniss and to the planning team from Jacobi, Dr. Kendra Haluska and Dr. Andrew Wiznia. Also from Jacobi, thanks to Barbara DeIorio and Hannah Nelson and from Carnegie Hall, Manuel Bagorro, Ann Gregg, Leah Hollingsworth, Sarah Johnson, and Elizabeth Snodgrass. Particular appreciation is due to the talented professional musicians who did so much to make the work successful: Jo Lawry, James Shipp, Matt Aronoff, Rogerio Boccato, and Gilad Hekselman. Finally, our thanks to the remarkable group of adolescents who, though they cannot be named here, were the real stars.

INTRODUCTION

In 2009, the Weill Music Institute of Carnegie Hall launched the Musical Connections Program. The program was founded on three inter-related premises:

- *Music has the power to transform lives and bring hope and comfort to people in challenging circumstances.*
- *All people deserve to have great music in their lives.*
- *Carnegie Hall feels a responsibility to provide and develop programs that respond to community need based on the organization's mission and civic position.*

Musical Connections has taken musicians to settings as diverse as adult and juvenile correctional facilities, homeless shelters, senior service organizations, and hospitals. The programs offered have ranged from large-scale concerts for several hundred people to in-depth workshops extending over many weeks involving as few as five or six participants. Initial program evaluation has indicated not only profound impact on those for whom the programs have been designed (patients, clients of homeless shelters, and prisoners) but also on the staffs of the host institutions, the institutions themselves, and the musicians involved.

One of Carnegie Hall's important partners in the Musical Connections program has been Jacobi Medical Center in the Bronx, New York. Jacobi is a major public teaching hospital of nearly 500 beds that is part of the HHC North Bronx Healthcare Network and is affiliated with the Albert Einstein College of Medicine. With nearly 400,000 out-patient visits a year and over 100,000 emergency room visits, the sheer size and scope of its activities over its large campus provided the kind of setting that would allow Carnegie Hall to test the many ways that the Musical Connections program could have significant impact.

In Jacobi, Carnegie Hall found a willing, enthusiastic, and energetic partner. Under the guidance of Barbara DeIorio, the Director of Public Relations and Marketing, the staff has made many facilities available to musicians, provided remarkable access to different patient populations, and has welcomed the broader local community of the Bronx to many of the musical events. Jacobi medical and administrative personnel have spent hundreds of hours planning and coordinating a wide variety of programs.

In many ways, Carnegie Hall and Jacobi have discovered a mutuality of need and aspiration. Both are large traditional institutions redefining themselves for the 21st century. For Carnegie Hall, that redefinition includes expanding the role that music and musicians can play in the life of the community. For Jacobi, similarly, there is a desire to redefine the role of a hospital in promoting wellness throughout its community of the Bronx. The two have discovered that each can assist the other in achieving these goals.

Over a period of two years, Carnegie Hall's musical programs at Jacobi have included large-scale concerts promoted to the larger community of the Bronx (often tied to health fairs),

smaller concerts for specific hospital populations, informal programs in public settings and in wards, targeted events for staff (including professional development programs linking music and health), and a multi-week song writing workshop spanning three months for a group of adolescents infected with HIV. Initially, two questions have guided the development of musical programming at Jacobi:

- How can the Musical Connections program enhance and promote Jacobi's health care messaging to the community?
- What could it mean to be a "musical hospital?"

This paper is an evaluation of one of the activities at Jacobi – a song writing workshop that involved a small group of adolescents who were regular patients at a Jacobi pediatric unit.
Our thanks to Jacobi staff for assistance in so many aspects of this work.

I. THE SONG WRITING WORKSHOP

The idea of a song writing workshop grew out of successful pilots that Musical Connections staff carried out in the first year of the program as well as the developing vitality of the partnership with Jacobi Hospital. The particular workshop format had yet to be tried in a hospital setting and with a group of adolescents. The concept as it developed was to tap the creative energies of young participants and, with the help of professional musicians, encourage them to generate lyrics, then melodies, and ultimately to harmonize and arrange the material so that it could be sung and played by professional musicians at a culminating concert, open to the community. In the interim, it was hoped that other benefits would come to the young people as a result of their participation including feeling good about themselves and their accomplishments.

The workshop was to consist of twelve 90-minute weekly sessions led by composer-leader, Thomas Cabaniss, who would be joined in later sessions by a vocalist and instrumentalists. At the end of the workshop sessions, the vocalist and a supporting band (Nos Novos) would develop the song material (with input from the youngsters) into the final repertoire and this would be offered first in a private concert (for families) and then in a large public concert (that would be linked to a "Mothers Day Health Fair" devoted to women's health issues). The reason for the dual concert format (one private and one public) was that the identity of the participants had to be kept confidential and it would not be possible to celebrate openly with them at a public concert.

The workshop design included the following steps to ensure a successful experience for all involved:

I. Assessment and getting to know the place
II. Creating expectations and planning a performance
III. Starting the workshop

IV. Listening, documenting, and encouraging first attempts
V. Collaborating on editing and arranging
VI. Collaborating with performers
VII. Rehearsing and keeping creativity vibrant
VIII. Performing the songs
IX. Reflecting on the songs and the creative process
X. Planning for future work

In developing a set of desired outcomes and hypotheses to be tested in the evaluation of the workshop, Dr. Andrew Wiznia and psychologist Dr. Kendra Haluska joined composer and workshop leader, Thomas Cabaniss, and evaluator Dr. Thomas Wolf in multiple discussions and preparation of interview and survey material. Three categories of desired outcomes were discussed:

A. *Well-being*: Youngsters would feel better about themselves, others with whom they came in contact, and about their lives.
B. *Clinical outcomes*: The participants would demonstrate a level of commitment to the process (through regular attendance), to their treatment, and to taking medications. They would also display improved "mood" and feel better physically.
C. *Creative outcomes*: Students would show progress in a number of areas related to song-writing. These ranged from understanding the relationship between music and words to the ability to create a melody to making informed timbral choices to the ability to tell a story in music to developing a willingness to commit personal experiences to song.

One of the outcome areas that was not considered was "institutional outcomes" – that is impacts that the program might have on the hospital and its community. Since the design of the workshop, these have become important components of Carnegie Hall's aspirations for the Musical Connections program and might be considered in the design of future song-writing workshops as discussed in the Recommendations section of the report.

II. THE PARTICIPANTS

The participants (six began the workshop; one dropped out after five sessions) were patients at Jacobi's Pediatric Consultative Services (PCS), a primary care HIV clinic for patients ages newborn to age 24. Jacobi cares for approximately 2,000 HIV-infected adults, about 300 HIV-infected children, and about 400 children born to an HIV-infected mother who are not infected themselves. PCS provides not only HIV-specific care, but comprehensive, integrated pediatric care, including complete psychosocial care. Dr. Haluska, a member of the psychiatric staff, volunteered to recruit the youngsters into the workshop and participate in all the sessions.

The adolescent participants in the song-writing workshop ranged in age from 13 to 18 and the group consisted of one African-American male, three African-American females, and two Hispanic females. The group had dealt with much loss in their lives (often losing one or

more relatives, including parents, at a young age). For the most part, they came from troubled home environments. In half the cases, Jacobi medical staff felt that the patients could not reliably be expected to take medications – a frequent challenge with this population – even though these medications are essential to keep them healthy.

The following provides more detail on participants:

- A, an African-American female, age 14 at the time of the workshop, lived with her maternal grandmother (with whom she has a conflictual relationship) and with an older brother. There was another older brother living out of the home. A regular patient at Jacobi, she was adherent with regular medical visits and ARV medications.

- B, an Hispanic female, age 18, lost her mother at a young age and at the time of the workshop, lived with her maternal grandparents (with whom she had a conflictual relationship) and with her older brother. She was not attending school and though she was receiving regular medical care, was intermittently non-adherent with her ARV medications.

- CP, an African-American female, age 13, lived with parents and a younger brother. There was discord at home with parents and the family had a history of being guarded with the PCS team. CP was adherent with medical visits and with ARV medication.

- N, an African American female, age 17, lived with her biological mother (with whom she had a conflictual relationship) and a 3-year-old half-sister. She had a serious aspiration to attend college. Though adherent with medical visits, she was nonadherent with her ARV medications.

- S, an African-America male (and the only male in the group), age 16, lived with his sister, the sister's husband, and their two children (younger). His mother had died a year prior to the workshop (one of multiple losses) and it was at that point that he found out about his HIV status. He was adherent with medical visits and ARV medications.

There was one additional participant who started the workshop, stayed for five sessions, and then did not return.

- CR, an Hispanic female, age 15, lived with an adoptive maternal aunt, uncle, biological brother, and cousin though she frequently visited her biological mother. She was reportedly intermittently nonadherent with ARV medications though generally adherent with medical visits. She encountered social problems at school and was struggling with adoption.

As explained by Jacobi's Dr. Andrew Wiznia, at one time this population of HIV-infected adolescents had short life expectancy. Today, with medications, they could expect to live a

relatively normal life span. However, though medical treatment for their condition had progressed remarkably, psychological problems were common. As mentioned, many of these adolescents had lost parents and other relatives, many came from problematic home situations, they did not get a lot of positive reinforcement, their condition when known was often a stigma, and it was difficult for them to enter into trustful relationships. Many felt ostracized and believed they had little to live for – a reality clearly reflected in the pattern of non-adherence with medications. According to Wiznia:

> *Most of the adolescents in our care are born to HIV-infected mothers. Some of those mothers, over the years, have actually died of their illness, and those adolescents are either being cared for by extended families, a number of children are in foster care, and now we have a number of adolescents who have been through those systems who are now 18 and living independently… A large number of the population also ended up through the foster care system, which is a system which provides care, but over the years the care tended not to be as consistent as one would expect, so we've had some adolescents in our care who have been in four or five foster homes. And each time that they're moving from one home to another it's another expression of loss. They've lost their normal childhood. A project such as Musical Connections gave them something that they can grasp onto and really express themselves, and to trust in a project that they then saw to come to fruition in the sense of a musical production.*
>
> *If you had to use one word to characterize the lives of the participants, it was "loss." They have lost lots of things. They have experienced more loss as a 17 or 18 year old than most people do in their life. And it's physical loss: they've lost parents, they've lost fathers, and they've seen other members in our clinical population who've died. They lost normalcy at school. The secret ("I have HIV") and not disclosing it to the school separates them. They start losing their ability to become part of their peer group because they're always on the periphery: "I'm happy here, but I don't want that person to know me too much, because what if they find out I'm HIV-infected?" (interview with Dr. Wiznia)*

Dr. Kendra Haluska amplified how the challenges manifested themselves in terms of psychosocial development of these young people as they go through adolescence:

> *As they become older and they want to have intimate relationships and friendships, it's this elephant in the room. "I want to be accepted as a whole person, and for someone to know me as a whole person, how do I do that when I am HIV positive?" There's always that question of disclosure and who to disclose to, so they struggle with that in their personal lives (some within their own families). There's that stigma…In society as a whole we haven't caught up to understanding and really knowing about this illness, so that stigma continues and we fight that every day. (interview with Dr. Haluska)*

III. THE EVALUATION

Carnegie Hall has been committed to rigorous evaluation of the Musical Connections program since the outset. For such a large program with so many parts, it has been important to have objective outsiders documenting, monitoring, and assessing the program in a formative way, pointing out strengths and weaknesses and making suggestions for improvements. But there has also been a need to assess the impact of the program.

Historically, extravagant claims have been made about the power of arts programs to change lives. Especially in the area of arts education and so-called "community outreach programs," arts organizations have advanced assertions that are backed up by little more than informal anecdotal evidence from those already biased in favor of the programs. Much of the evidence is produced in order to justify funding and as a result, there is often little incentive to find out what is really happening.

To its credit, the staff of Carnegie Hall has wanted to understand what outcomes it could confidently assert for the Musical Connections program. Of special interest was the song-writing workshop which, given the length of time and number of musicians involved, was consuming significant resources. In a simple cost-benefit analysis, it was fair to ask what the activity was harvesting.

Measuring impact requires comparisons – either comparisons of the same group at different moments in time (preferably at least the beginning and end of a treatment) or comparisons of the target group receiving the treatment with a so-called control group of individuals with similar characteristics not receiving the treatment. Medical science generally uses the latter approach to judge the efficacy of a treatment; but for something like the song-writing workshop, looking at the treatment group over time was a much more practical approach. Thus, a rigorous multi-faceted evaluation design was formulated that included:

- Surveys and interviews with participants pre- and post-workshop. These assessed creative measures, measures of well-being, and clinical measures as will be described in Part IV of the report.
- Weekly assessments of each participant by the workshop leader on several creative measures related to song writing (as described in Part V).
- Weekly observations by the evaluator.
- Interviews with staff and musicians connected with the workshop.

The advantage of this multi-faceted approach is that it allowed different perspectives on the same activities and the same individuals using different tools (some quantitative, others qualitative) and different observers. (For a description of the limitations of the methodology, cf., Appendix A.)

IV. Survey of Participants – Outcomes Realized

A survey of participants given prior to the beginning of the workshop and at the end was one of the major tools used to measure whether desired outcomes had been achieved over the course of the three months of the workshop. It was administered initially to six participants and a second time to the five who completed the workshop (a copy of the survey is contained in Appendix B). The survey considered three categories of questions corresponding roughly to the outcome areas described on page 3.

1. The first section was a so-called "creative inventory" that measured the level and extent of participants' creative activity as well as the place of music, lyrics, poetry, and song in their lives.
2. The second section looked at "measures of well-being," asking a number of questions about how participants felt about themselves and others.
3. The third section constituted items for clinical review. These related to issues that were import to clinical staff in the treatment of this population – things like feelings about health, physical and emotional well being, and commitment to taking medications.

In addition, there was a fourth set of questions administered only at the end of the workshop. These had to do with participants' reactions to the sessions, whether they would do the workshop again, and whether they would recommend it to others.

The survey was designed with advice from Jacobi and Carnegie Hall staff. The creative inventory was based on other surveys developed by WolfBrown for situations involving adolescents in creative endeavors. The measures of well-being were based on standard items often used in such surveys as documented in the professional literature. The clinical review was formulated around outcomes sought by Jacobi staff for this group of patients.

A. Findings – The Creative Inventory

High Degree of Creative Activity: Perhaps the biggest surprise in the creative inventory was just how much highly personal creative energy and activity this group of participants brought to the sessions initially. It had been hypothesized that considerable effort would have to be expended to get the young people to express themselves. Yet all of the participants indicated in their surveys that they were already writing – "I make up my own music/lyrics/poetry/songs" – with three indicating the highest ("always") in their answer. All but one liked to write in their spare time. This emphasis on writing was revealed early in the workshop when participants brought material from private journals or poetry they had written on their own. Much of it was quite revelatory in nature – poems and prose about feelings of survival, doubts about self-worth, struggling to stay alive, and so on. Many of these words became the basis for song lyrics as the workshop progressed (cf., Appendix D for a complete transcription of song lyrics). Interestingly, there had been much discussion among staff about how hard to push the youngsters to express themselves creatively about their feelings since it was anticipated that this would be a difficult area for them. Instead, the medium of poetry (and writing song lyrics) seemed to make this easy for all the participants (without exception).

From Private to Public: Dr. Haluska, the psychologist who recruited the participants and came to the sessions, knew many of the participants prior to the workshop since she met with them on a regular basis for therapy. She was surprised at the level of creative activity that was happening privately, much of which she was learning about for the first time. The young people appeared to keep this material quite private and at the beginning of the workshop, two of the participants said in their surveys that they *never* shared it with others.

Two said they sometimes did.[1] This discovery is something that Haluska and other Jacobi staff will be more conscious of in the future since so many of the deep feelings of the young people are contained in this writing.

Trust: One thing that the workshop clearly achieved was a level of trust that increased as the sessions went on. There was a growing comfort level to share private material. Two participants who said initially in the survey that they "never" shared this material had changed their response at the end saying that they now "sometimes" shared it with others. This change was amplified in responses on the well-being section of the survey to the question "I have people I can talk to about my problems." Three of the five moved higher on the scale with one going from "strongly disagree" to "strongly agree." Interviews also indicated a growing level of trust. As one participant put it in an interview:

> *I usually limit myself to one friend, but I didn't. I learned to trust more people, so I got more connected with them instead of just keeping away and isolating myself…We would all support each other…Even though things happened, we always came together, and we never took each other down, saying, "This wasn't good enough," or, "Yours wasn't the best." We never judged anybody. Whatever someone brought, if we didn't like it we just helped the other person make it better, giving suggestions… Nobody's here to judge anybody; nobody's here to make anybody feel like they're nothing. To be in a place where there's so much positive and nobody's downgrading you, you're going to want to come back. You don't want this to end. (interview with A)*

The individual in the workshop who knew the participants best was Dr. Haluska. She amplified the findings about trust.

> *The things that they brought away from the workshop seemed to be they saw themselves as shy, not confident, unsure of what they really could do in the workshop, and they see now that they have become more open, more creative, more confident in themselves and their abilities, and more open to other people. One girl said, "I don't trust people very easily." Now she feels like she can trust at least a small group of people, and felt encouraged and supported. It was a nonjudgmental, safe environment for them to do that. I think that was so important for them. (interview with Dr. Haluska)*

Expanding the Range of Creativity: While the participants did not need the song writing workshop to spark creative activity, for many of them, it expanded their range of creative possibility. A, for example, was a prolific poet, but her initial responses to the survey indicated that she did not express herself creatively in music nor did she make music in her spare time. Her lack of musicality was evident from the first day when she read her poetry in a monotone and was unable to make or recreate melody. After several weeks, she began to find that she could express her poetry in song – a major breakthrough – and at the end of the workshop, her survey indicated that she was now making her own music in her spare time. As she put it in an interview:

[1] The lone male in the group indicated at the outset that he "always" shared his music/lyrics/poetry/songs with others but by the end of the sessions he had changed this to "sometimes."

Music is a part of my life because I usually listened to songs, but I never really thought about writing one of my own. I would always just use poetry as a way…. If I was mad or feeling down or probably even happy, I would write. I never thought of making a song about how I felt. I would just always go to poetry, because that was the only thing I knew that I was really good at...Now it's like I have options. I have music. I know I can write a song. (interview with A)

B. Findings – Measures of Well-Being

Taken by themselves, the changes in well-being indicators do not show powerful group patterns among the participants. This may indicate the diversity in the emotional states of the participants and/or the limitations of a three-month song writing workshop in addressing a common set of the larger life issues that this population faces. On the other hand, looking more closely at the responses for *individual* participants, many positive patterns emerged and support other data in the evaluation:

- For example, in the case of C, well-being indicators on the survey indicated a number of positive changes. C showed positive movement on 7 of 12 indicators as follows:

  - I have much to be proud of
  - I know what I want for my future
  - I have people I can talk to about my problems (one person especially)
  - I feel sad a lot of the time (a lesser rating at the end of the sessions)
  - I often feel worried/nervous/scared (a lesser rating at the end)
  - I know what to do to help myself relax
  - I can control what happens in my life

  Only on "I sometimes have trouble getting things done" did her response indicate more of a life challenge at the end than at the beginning of the workshop.

Two of the other participants also showed more positive changes than negative ones.

- For N, the most important change was going from disagree to agree on the item "It is easy for me to share my feelings with other people," once again demonstrating the trust factor that had built in the group. This was dramatically borne out in an interview at the end of the workshop when N talked about the growing friendship with the other participants:

  It's sort of nice to find friends that actually have a problem that you have, because there's definitely friends that will accept it and people that will accept it, and you're always wanted to feel included and accepted. I guess this is why we work so well together. We were shocked to find people who actually had it, just like us. It's nice to have those friends that you can go and talk to about it, like, "Oh, I cannot stand this and this." You may be able to have a friend that understands what you have, but they will never actually understand what you

> *have, because they're not in your shoes every day to day; they're not there taking medicine, going to the hospital visits and checkups and blood work, and all the other stress of having it….*
>
> *Yeah, I think I'll be in touch with them. I have their cell phone numbers, so we text each other. I'm like, "Are you coming?" I remember texting, "Are you coming to group? I hope you are, because you better be coming." It was nice to talk to them and chat with them and keep in touch with them, which I will. (interview with N)*

- B showed the same change on that item ("It is easy for me to share my feelings with other people") as well as going from agree (before the workshop) to disagree (after the workshop) with the statement "I feel sad a lot of the time." Here again, the interviews bear out how important these changes were:

> *I learned how to combat my shyness. Friends are family; friends are never going to look at you wrong, especially if they have the same circumstances as you. You just got to start believing that you're not the only person out there, that you can't be selfish with yourself. You got to think about others before yourself.*
>
> *I'm just a girl out of nowhere. Somebody told me to come to a group that I was sort of scared to come, at first. I came by myself, of course, so I'm like, "Do I think I'm going to like these girls, or do I think I'm not going to like these girls? Let me take a deep breath. I can't judge nobody until I meet them." Then I knew one of the girls, because I thought I saw her outside one day with one of my old friends, so I'm like, "Do I know you?" She was like, "I don't know." But I'm like, "I think I seen you before. Isn't your name whatever?" She was like, "Yeah," so I was like, "Oh, hi." After that, I think I should start liking the group, because a girl like me with HIV is not too bad and not too good, but I can always still do whatever everybody else can that doesn't have HIV, that doesn't have cancer. Everything is done for a reason, and I'm here because of that. I don't care about that or anything else, because I'm happy for who I am. (interview with B)*

For the two participants who displayed more inconsistent responses, there were some interesting patterns:

- A, one of the youngest participants, seemed particularly shy and withdrawn at the first workshop. Yet at the very end of that opening session, she guardedly (and in a complete monotone) offered her very revealing poem "Mirror, mirror on the Wall/Biggest Liar of Them All," which became one of the songs and a favorite of several. At the beginning of the workshop she had disagreed with the statement "I have people I can talk to about my problems" but by the end she agreed with the statement. Similar positive movement (from disagree to agree) was evident in her answer to "I can handle problems in my life." Nevertheless, even by the end she did not feel she had much to be proud of nor did she feel it was easy to share feelings with others.

- With S (the only male and probably the most naturally gifted song writer in the group), three sets of responses were revealing. It was S who, at one of the sessions, had walked out in anger after considerable teasing by several of the females. Much of the balance of that session had been given over to group therapy during which time the musicians had to shelve the planned activity and rely on the considerable skills of the social worker to guide the session toward some resolution. But based on the survey, perhaps that non-musical time was not wasted. For S, the tension between him and the other participants never recurred and three items on the Measures of Well-Being moved in a positive direction including:

    - I have people I can talk to about my problems
    - I get angry a lot (from agree to disagree)
    - I feel sad a lot of the time (from agree to disagree)

It is important to acknowledge that the sample size for this survey was very small and the evaluation was dealing with a group of adolescents whose mood swings may account as much or more for how they feel on a particular day than the workshop. Nevertheless, as the survey work was combined with the interviews, the power of changes in well-being measures becomes evident.

C. Findings – Clinical Outcomes

By far, the most impressive clinical outcome achieved in the workshop was the regular attendance of participants. Six adolescents began the workshop that was comprised of 90-minute late afternoon sessions plus additional rehearsals plus two performances. It was entirely voluntary. Five participants completed the workshop with only sporadic absences (the sixth attended five sessions and then quit). In a population that is often non-compliant with keeping medical appointments and taking medications, this, according to their psychologist, was nothing short of remarkable:

> *[I asked myself] would I be able to get teenagers committed to coming in for 12 weeks? Initially I thought that that would be a challenge not even I would want to take on. But then, thinking about it more and talking to the staff at Carnegie Hall and the staff with Musical Connections, I thought, "Let's try it." We managed to get six patients coming pretty regularly, so I'm pretty excited and very relieved…I think their attendance has been remarkable. As a clinic here, we're really challenged with getting people in on a regular basis. You're taking these teenagers who are getting here on their own; some are taking a train and two busses and then walking from the bus stop. They're coming in bad weather. I'm just amazed and floored that they are committed and have been coming. That's been definitely an area that I'm very pleased with. (interview with Dr. Haluska)*

With respect to other clinical outcomes, there were a few patterns of change worth noting, almost all of them under the category "MOOD."

- In responding to descriptors of their mood, perhaps most significantly four of five participants indicated "happy" at the end of the workshop whereas only one had done so prior to the start of the workshop.

- Similarly, the choices "motivated" and "calm" had climbed from one participant at the beginning to three at the end.

- "Confused" had dropped from two participants at the beginning of the workshop to none at the end.

One respondent said that in the past week she was taking her medication "all the time" while at the beginning of the workshop it had been "some of the time."

Given the number of items under clinical outcomes, however, it was difficult to see any patterns in such variables as eating, sleeping, energy level, concentration, fatigue, aches and pains, or overall feelings about health.

Even so, there was something that the survey did not look at (level of engagement) that could be an underlying factor in many clinical outcomes. As described by Dr. Kendra Haluska:

> *We've definitely seen them more engaged in their medical care here and their involvement in the group spilling over into involvement in other groups and aspects of their care here. They're more present. They're showing up more…Also, I know a couple of them said yesterday, just having these experiences has opened up their eyes and their minds to having other experiences, so I'm hoping that we can continue to foster those changes as well. (interview with Dr. Haluska)*

Impact on Another Patient: One of the most impressive reported clinical outcomes came not from a participant but from another patient who was an audience member. Dr. Andrew Wiznia brought a 23-year-old patient to the final concert, someone who was not being responsible about taking her medications. After congratulating a couple of musicians in an email, he told about the transformation that had occurred for this patient as a result of hearing some of the songs.

> *It was an unbelievable experience for the participants (and I have to admit that I was a little skeptical at the beginning) and, hopefully, it continues to reverberate. I can tell you that one of our more non-adherent HIV patients (23 [year old], mother of two negative children), who has been erratically adherent with her meds (and very, very immunodeficient), came to the concert and, when we talked afterwards in the clinic, her demeanor had changed, she told me that a few of the songs and words spoke to her ("mirror", "We Shall Stand Up") and we have a real concrete plan for starting meds (actually a clinical trial) and she has a therapy session with Kendra tomorrow at 11 AM. (interview with Dr. Wiznia)*

No one in designing the workshop planned for impacts on other patients. Perhaps in a future redesign, this might be considered.

D. Participant Evaluation of the Workshop

Participants had a positive view of the workshop. All of them would recommend it to others because (in their own words):

> *Everybody should get a chance to express themselves and show people they aren't what other people assumed they were. (interview with A)*
>
> *Who knows what talent they could bring? (interview with S)*
>
> *I believe every kid should have a variety of ways to express themselves (sic). And writing music or poetry is a great way to do it. (interview with N)*

Four of five would take the workshop again without qualifications (and the fifth said she might if it were at a more convenient time).

Everyone agreed on what they liked about the workshop:

- Expressing my feelings and experiences
- Hearing what other people have to say
- Working with real musicians
- Getting a chance to learn to write songs.

In addition, according to one of the participants,

> *I got to meet different people who was (sic) there for me and encouraged me to do good and they also supported me with everything I did. I learned…that I should always believe in myself. (interview with A)*

The one disappointment expressed by three of the participants in interviews was with the private concert that had been designed for family and friends (and that preceded the public concert by one day). It was to be the one where they could get to perform – in the public concert their anonymity had to be protected so it was entirely performed by professionals. Part of the problem was undoubtedly in expectations. The rehearsals in previous days had been held in a large auditorium space called the rotunda with a proscenium stage and a seating capacity of several hundred. This was where the public concert was to be held and the rehearsal included not only the instrumentalists but the sound crew as well. Undoubtedly, the youngsters had visions of performing in that space. But the private concert was held in an ill-suited long, narrow, very hot room that was both tiny by comparison and difficult to set up in a concert-style format with audience facing musicians. It was obvious as each adolescent came into that space that he or she was disappointed. In addition, very few family and friends actually came – the concert was populated primarily by Jacobi staff.

V. LEADER'S ASSESSMENT OF STUDENT COMPETENCIES

Another quantitative measure was used over the course of the workshop to measure change among participants. It was an assessment of ability along ten dimensions of song writing. These dimensions were identified by the workshop leader prior to the first session as his explicit goals for increased competencies among participants. Using a six point scale (0-5), the leader rated each student week-by-week. The dimensions were:

- Understanding the relationship between music and words
- Understanding the relationship between music and mood
- Ability to tell a story in music
- Ability to rhythmically place text over pulse
- Ability to create a melody
- Ability to distinguish song structure
- Creating music contrast through song
- Ability to make informed timbral choices
- Willingness to commit personal experiences to song

What do the results show?

- Every participant improved on the great majority of dimensions. In the rare cases where there was no improvement, the student generally started with a high score (like a three or four) so there was less room for improvement. No student received a lower score on any dimension at the end compared with the beginning.

- Even the one participant who dropped out of the workshop after the seventh week showed improvement on all but two dimensions.

- Improvement overall was often noteworthy– as many as three or four points on a five-point scale.

- For two of the participants, improvement on average over all the dimensions increased more than two points (2.33). For others it ranged overall from one point to 1.89.

- For the dimensions themselves, ability to create a melody jumped the most (3.17 overall). Students came with virtually no ability to do so. A related dimension (ability to make informed timbral choices) jumped 2.33 overall, again an indication of where students began with very little demonstrable ability.

- The smallest degree of change was in "willingness to commit personal experience to song" (0.67 positive change). This reflects the fact that the majority of participants

came with this dimension already highly developed.

- There was occasionally some slippage from one week to the next – thus, a participant might show great improvement one week and slip back somewhat the next week.

- There was often a session at which a participant suddenly showed marked improvement on several dimensions.

- In over 400 individual ratings, there was only one 5. This is important because it puts the improvement in perspective – the workshop was not producing fully formed musicians rating the highest scores, nor was that the intention. Similarly, even when a jump was two points, it may have rated only a 2 (indicating a starting point of 0).

In cross referencing these findings with weekly observations by the evaluator and with interviews both with participants and with their social worker, further light can be shed.

- It was the hypothesis going into the workshop that most participants would need to be encouraged to express their feelings in words. There was considerable discussion in the pre-planning with the medical staff whether it was appropriate to push the adolescents to talk about their condition and life challenges. It was assumed that initial scores would be low on the dimension "willingness to commit personal experiences to song." This turned out not to be the case. Of the six participants, three started with an initial rating of 4 and another rated a 3 in the first week. Most talked in the first session of writing poetry or keeping journals. Much of this writing that was shared with the group was quite revealing of feelings and there was an ongoing willingness to bring fresh material to the sessions. This was a surprise to the social worker who was unaware of much of this activity and she reports that it will have an impact on her work in the future as she will be more on the lookout for this kind of personal private expression.

- It is tempting in light of the tremendous excitement generated by the final performance to overstate what was accomplished *musically* in the workshop. Especially among the audience members, there was unbridled admiration of the young people (obviously deserved) but also a feeling among some that they had become true song writers. Scores on the survey tell a different story – one borne out by observation. In all the items across all the participants, only one person scores a 5 (top score) on any item and that only once. Much of the real work of transforming nascent ideas into harmonized melodies was done by a very skillful group of professionals who masked the huge amount of shaping they were doing. Snippets of melody were transcribed and then smoothed out and made coherent. All harmony and ornamentation was added by the ensemble musicians. Instrumentation was also pretty much determined by them. The goal of this workshop had never been to

produce professional-level song writers and it is important to acknowledge that musical learning was limited.

VI. Observations and Interviews with Staff and Musicians – Other Impacts and Findings

The surveys provided an important quantitative benchmark by which hypotheses could be tested. However, it was important to supplement these with in-depth observations and interviews that could help amplify and give depth to the statistical findings. They might also reveal findings that were not anticipated and therefore not included in the survey work. This section of the report identifies some of the more important additional findings that are important to consider.

A. Impact on Staff

Pediatric Consultative Services (PCS) at Jacobi Hospital is staffed by nearly 30 people – five medical doctors, a ten-person research component, a six-person social work unit, three people performing patient navigating, one mental health professional, a part-time nutritionist, and three administrative staffers. Yet in the design of the workshop, there was no serious effort to involve these individuals with the exception of the two who participated in planning and coordination. No anticipated outcomes were formulated for staff and no hypotheses developed for this group or for any other staff members in the Hospital.

Yet despite this limited focus on staff, the impact on many of them was considerable. For Dr. Haluska, who spent the most time with the adolescents and who knew many of them well, there was the discovery that they had very extensive and personally revealing creative activity before the workshop began. This in turn has changed her outlook on her work:

> *It's definitely made me feel like there's maybe some other creative options to use in helping patients just explore their own struggles and find their own voice. It's changed my outlook on the population in general. We should be doing more of these workshops and groups for them. They need these opportunities and experiences. It's just made me more motivated to do those things or look for opportunities for them. It's also made me feel like I'm in a better mood, too. It can be a struggle to work sometimes as a psychologist and not always get to see hopeful sides of the work with patients, so that has been a great experience for me. (interview with Dr. Haluska)*

In addition, Haluska came to understand in a more clarifying way that it was the relationship building and the growth of trust that was key to the meaning of the workshop for the young people.

> *A couple of the kids didn't come to all the performances. As an adult, I have been curious: "Why not? You're missing the performance of your song." And I think I start(ed) to get it yesterday when they were reflecting on their experience in the workshop. They were saying how close they have all*

> *become and how wonderful it's been to meet each other (some of them didn't know each other before), build these friendships, get to know the professionals from Carnegie Hall and Musical Connections and the band. I think it was more the relationships and the process that was important to them, not the resulting performance and product. That was a surprise, because I didn't get that until the end; I didn't really understand that. (interview with Dr. Haluska).*

The impact on Dr. Wiznia was of a different kind and was quite powerful. A medical professional involved internationally in research in HIV, he was somewhat skeptical of how much a song-writing workshop could accomplish:

> *Personally, at the beginning of this workshop, I had no sense that this would actually be successful. I was as dubious as anyone on the planet. I'm looking at our population saying, "I don't know if they have any musical talent. I don't know if they can write." A number of our patients have trouble reading. As the workshop started happening, what I realized was, once again, I'm not as smart as I thought I was, and that my patients were proving me wrong. I was sitting back laughing at myself and regaling in how successful the workshop was. (interview with Dr. Wiznia)*

But the impact on Wiznia was more than a clinical discovery of the efficacy of the song writing approach. He was literally moved to tears – the impact was emotional as well:

> *The morning of the concert, I had three patients waiting for me to be seen in the clinic. I'm always late, so I said, "We're going to a concert"…I've been caring for children with HIV for 26 years…After 26 years, you think you've seen and experienced almost everything. I'm sitting in the concert next to one of my 21 year old patients (I've been his physician since he was two), and as the concert is going on, all of a sudden I said, "Oh my God. I'm crying." I was so moved by the words that our patients had created, by the performances, by how naked the feelings and emotions were that they were expressing. I'm sitting there saying, "That's unbelievable." And then I'm looking, saying, "And they're healthy." I just started welling up. My patient looks at me, sees me crying, turns to me, and says, "This is hot," which to an adolescent means, "This is unbelievably cool." I turned to him and I said, "Yes." I put my arm around him; he put his arms around me. And we watched the next ten minutes of the concert that way. Then he got self conscious and I got self conscious, and we separated, but there was a moment in the concert where I just could not believe how many emotions had evolved for me, had come out for me. (interview with Dr. Wiznia)*

.

The impact on other staff of PCS was also noteworthy, even though their only opportunity to observe what was going on was at one or both of the final concerts. According to Haluska, it is so rare for them to be able to see the patients in settings where they are engaged in activities that make them happy and demonstrate themselves succeeding at something. To be able to share these moments noticeably changed the climate of the Department. In the private concert especially, staff members entered into the spirit of the event, cheering ecstatically when patients were performing, moving and clapping to the music, and engaging with patients at the certificate ceremony and dinner afterwards.

> *Pride in this experience has definitely spilled over…I know it spills over into the staff here in working with them and with other patients. It gives you that feeling like, "Hey, we could do*

> *something here and give them different outlets and different experiences. This doesn't have to be such a sad place to come to." (interview with Dr. Haluska)*

But according to Haluska, the impact may have been greatest in cementing a new and stronger relationship between patients and staff:

> *Their connection now to us is stronger. It was strong to begin with, but now it's stronger and maybe more uplifting. It's not just a place to come to get your medical care and do these begrudging tasks. I think that that has really added to their lives, as well as the staff here, just having the uplifting experience. (interview with Haluska).*

Finally, there was the larger community of medical staff in the hospital. Even at that level in a hospital that has thousands of staff, there was what Dr. Haluska referred to as "a buzz."

> *I run into not just people from my staff but other areas of the hospital, and there's definitely a buzz: "Oh, I hear you're working with Carnegie Hall and this Musical Connections program. What is it?" The curiosity is building, and the feelings that people are walking away from these events…. They're just inspired and uplifted. I think that that makes such a huge impact on not just our patients but the staff here who are working with patients. (interview with Dr. Haluska)*

For a program that is attempting to explore what it means for Jacobi to be a "musical hospital," this kind of growing awareness is critical and is especially impressive given the fact that it was not an explicit part of the program design. It is not insignificant that the Hospital administrative staff has begun to explore the possibility of investing more of its own resources into the Musical Connections program by the time the workshop ended. It is also impressive that several members of the senior staff, including the President of the Hospital, came to the final song writing performance and a subsequent Musical Connections event. Future design needs to take such positive signs into account in planning more explicitly how those connections can continue to be made.

B. Impact on Musicians

Based on observation, emails, and interviews, it is clear that each musician who participated in the song writing workshop was significantly affected by the experience. The most extensive documentation is an interview conducted with the vocalist Jo Lawry who shared some of feelings musicians experienced.

One of the most important was the sense of how normal and familiar it felt to work with this group of youngsters in spite of their significant health and emotional challenges. As with many musicians, there can be some anxiety and uncertainty about environments like hospitals, prisons, and homeless shelters that are non-traditional venues with unfamiliar clients. In this case, there were questions about how the patients were going to behave, what they were going to do and say. Coming to understand the universality of so much of what was shared may be one of the most important learning experiences for musicians.

> *We had a rehearsal on Sunday that was four hours long with a ten minute break, and they were with us and enthusiastic, and worked hard until the very end of that… listen(ing) back to the tapes from that rehearsal [Tom] said he was so struck by how ordinary it was. It sounded like a bunch of musicians telling each other what they wanted and trying to have a normal rehearsal. It sounded like a bunch of musicians and songwriters together doing what you would expect them to do. (interview with Jo Lawry)*

The trust and openness that the young people ended up sharing with the musicians was another revelation.

> *I'm just incredibly moved by the experience. The generosity and openheartedness of the participants was very moving. I feel, as I tend to at the end of a project, I realize just how honored I feel to be working with these young people. (interview with Jo Lawry)*

Like many musicians in similar situation, Jo Lawry came to the song writing workshop with a sense of what she would be giving to others but left thankful for the things she had received:

> *It might sound pretty cliché, but in this workshop, as with so many of the other ones that we've done before, you enter the workshop feeling like you're doing a service for them and you leave the workshop feeling like a service has been done for you. We just had to stop the interview a few moments ago because as one of the young ladies was leaving she interrupted, and she just gave me the ring off her finger because she wanted me to have a memento of the experience. Just before she left, she blurted out, "I love you, Jo." I said, "I love you too," and I felt, "I love you too." You don't expect to come away from these feeling such deep love for the participants and getting it back in return, so it's pretty amazing. (interview with Jo Lawry)*

C. Originality Versus the Persistence of Pop and Rap Culture

One of the most difficult tasks in the workshop was to open the adolescents to new possibilities in songs while still acknowledging what they know. This task was made more challenging by the persistence of a somewhat clichéd understanding and appreciation of songs well known to the participants. As obvious as this was to the trained musicians, it was also noted by medical staff. According to Dr. Haluska:

> *I remember one of the first tasks was to just make up your own title of a song. It could be anything, as simple as "I Hope." One of the girls just kept picking song titles that she knew. "I like this band, and I like this song." I was like, "Just create something of your own," and she was I think too scared to do that. (interview with Dr. Haluska)*

In the area of titles and lyrics, the challenge could be addressed rather early because there was so much originality in the work that the young people were already producing. But their ability to create original music was practically non-existent. From the very first week, the young people drew on well known popular songs for their inspirations and had difficulty getting beyond them. It is a testament to the skill of the workshop leader that he was able to lead them away from this default mode by encouraging them to use their texts to inspire

snippets of original melody. These were then recorded and transcribed and brought in the following week often subtly harmonized and/or put into rhythmic patterns that did not correspond to the pop and rap music that overwhelms the airwaves (though a few of the songs, especially those of S (the male participant), inevitably became rap songs). Band members added richness in harmony and timbre as the songs continued to develop toward final performance and their originality became even more pronounced.

But one should not be confused about where this originality sprang from. The originality of the lyrics and their intensity came directly from the participants. As to music, the majority of the originality (with the exception of some of the original melodic material) came from the professional musicians, especially as the lines of music became more complex and interesting. A small but amusing example from one of the songs came in the last session prior to performance when the guitar player added an overlay of the opening phrase from Mozart's "Eine Kleine Nachtmusik," a delightful touch that probably brought smiles to a few in the audience. The "composer-participant" was asked whether she liked it but other than that, the musical inspiration did not come from her.

D. Teaching, Learning, and the Realities of Preparing for a Performance

The question of whether it is appropriate that musical "originality" comes in large measure from the professional musicians is closely related to another issue: the pressure of having to take nascent and unformed material and get it ready in a short time for a polished performance. The limited time and the high standard required meant that moments that might have been opportunities for teaching and practice for the adolescents turned into simple questions and answers about whether they liked the choices the professional musicians were making and the music they were inventing. The musicians pulled this off with great skill and in many cases the young participants may have thought that is how song writing works. But one wonders what might have been gained and what lost had the pressure of performance not been so much in the background. Might the participants have gained more from the workshop? Might they have felt less excited had they not seen something that looked so much like what they undoubtedly saw on television? Clearly, one of the things that Carnegie Hall brings that many music education programs do not is the opportunity for such high level performances. If it remains central to the process (to the extent it trumps other musical goals or therapeutic goals), it should perhaps be more prominent and well explained in the goal setting process.

VII. RECOMMENDATIONS

What can we learn from the Jacobi song writing workshop of 2011? How successful was it and how might it evolve in the future? Certainly almost all those involved – from the adolescent participants to the musicians to Jacobi staff to Carnegie Hall personnel to audience members – seemed to agree that the initiative was a triumph in many ways. And, fairly universally, there was strong sentiment that it should be repeated.

But because the song writing workshop is a program of the Weill Music Institute of Carnegie Hall and because a strong emphasis of WMI is on generating new knowledge for the field, it would not make sense to simply repeat verbatim what was done. Rather, the partners have an opportunity to mine what was learned and develop the work further. The following represents a start in that direction.

1. **Focus the Workshop and Its Design on Fewer Goals**: In the design of this 2011 workshop, no one really knew what to expect. It was hard to imagine what impact the activities would have on the participating adolescents or indeed whether they would even stick it out. Many hypotheses were developed. Some were realized to an enormous degree (e.g., the amount of trust that could be developed among the small group, getting participants to write about their inner feelings). Others, like many of the clinical outcomes, had less impressive results. Still others might have been realized to a greater degree had there been more time for explicit instruction and less need to give a superbly polished performance. On the other hand, some spectacular outcomes were largely unanticipated – like the impact on Jacobi staff. In designing future workshops, information from this evaluation should be used to refine and focus goals and tailor activities around those goals. In addition, the process of goal setting could be enriched by involving more people in some of the discussions including, perhaps, one of this year's participants, musicians, and other Jacobi staff.

2. **Incorporate a "360 Degree View" of Impact into Program Design**: The designers of Musical Connections have, over the last couple of years, come to realize that the impact of their programs' activities reach well beyond the patients, prisoners, homeless, and other populations for whom they were designed. The staffs of the host institutions, the oversight agencies, the broader community, and certainly the musicians involved are often greatly changed by the program. The designers of the song writing workshop focused primarily on the adolescents in designing the program. Other groups were thought about less in the discussions about outcomes. Some examples include:

    - ***Shift the Activities to Include More Staff***: As the program developed and moved toward completion, the impact on staff became obvious. For the participating psychologist (and perhaps for others), it will change forever the way she thinks and interact with patients. For other staff in the unit who had only limited opportunities to observe the youngsters, the experience was tremendously affirming and moving. In the hospital as a whole, the "buzz"

of the workshop was felt, moving the institution a small step forward toward understanding the power of this kind of program in patient care and community outreach. In a redesigned workshop, strong consideration should be given to how to involve unit and Hospital staff in more ways in more sessions and whether specific staff development activities should be planned.

- ***Develop Clearer Goals for Musicians***: Every participating musician talked about how much the workshop meant to him or her and how it changed their perspectives on their work. Yet there was minimal effort to document or share this learning with other musicians in the program or with Jacobi staff. For example, it might have been interesting to offer a sit-down session between medical staff and musicians to discuss the work. To date, there are no formal mechanisms to share the experience with other musicians and program designers around the country. In the future, there should be explicit outcomes for musicians with appropriately developed activities. There should be a means to assess how well these outcomes were met, and a way to take the valuable knowledge and share it with the broader field.

- ***Think About Opportunities for Other Patients***: As reported in the section on clinical outcomes in Part IV of this report, the song writing workshop may have had a major impact on a patient who was not one of the participants. In the case of this HIV-infected 23-year-old who was not taking her medications, the songs spoke directly to her and she wanted to begin a new program of therapy as a result. Though there are issues of confidentiality to be negotiated, one wonders whether other patients could also be inspired by hearing the work of the participants and whether this could be built into the goals for the workshop.

- ***Consider Impact on the Institution and the Community***: If Musical Connections is to become institutionalized at Jacobi and music is to become part of its mission, then activities like the song writing workshop must reach more broadly into the fabric of the organization – especially into the higher administration, governing boards, supervising agencies, and so on. Ways to leverage the good work in this way will be most effective if they involve the CEO of Carnegie Hall and certainly the Director of Weill Music Institute. At the same time, Jacobi's health care messaging to the community can continue to be served through the Musical Connections programs in general and future song writing workshops in particular.

3. **Expand the Cost-Benefit Analysis**: The recommendations in #2 are critically important not only as a means of improving the reach and impact of the program, but also in making a cogent argument about the value of such a program in relation to the resources expended. Though no one spoke openly about it, the resources devoted to the workshop were considerable, including three months of weekly

professional time by highly trained professionals (a musician and a Jacobi psychologist), many hours of rehearsal and performance time by six Carnegie Hall musicians, other musician and staff involvement at key moments along the way, and three months of an evaluator's time. It would have been easy to say in criticism, "All of this for six kids, one of whom did not even finish the program?" And in deciding whether to make the case for future programs, such words will inevitably be spoken. On the other hand, if the formula is based not just on six adolescents but on the impact the program had on members of Jacobi's staff, musicians, hundreds of community members, and the hospital itself, the equation appears quite different. It is therefore important to ensure that the language about the program encompasses this broader view. Indeed, the same logic should be applied to other Musical Connections programs.

4. **Address More Explicitly the Balance Between the Need for a Polished Performance and the Therapeutic Needs of the Participants:** The song writing workshop at Jacobi produced a remarkable, polished performance. But as has been suggested earlier, that performance was achieved at some cost to the accomplishment of other goals. The professional musicians transformed threads of musical material quickly and skillfully into finished cloth. But did the need for a high quality concert trump meaningful opportunities to teach and learn as well as other therapeutic outcomes? When does the need for the finished product dictate how long musicians spend on a song, whose songs get developed, and which participants will get musicians' attention? The question is fundamental to the design of the song writing workshop and many other Musical Connections programs. Musicians and others should continue to address it at every stage of program development so that they are clear how the balance should fall in any given situation and how to continue to refine the supporting and facilitating skills so crucial to the success of the effort.

5. **Forge Institutional Partnerships for Follow-up Activities for Participants**: The Musical Connections program is, to some extent, a victim of its own success. Particularly with the longer term residency programs that involve participants in the act of musical creation or performance, some inevitably want to go further. Sometimes this comes in the form of a request for instrumental lessons, or more instruction in how to compose, or how to use electronic equipment in song writing.

   The Musical Connections program was never set up to run a community music school program or to provide long-term instruction. Yet, there are many institutions in New York that have this as part of their basic mission and might be delighted to partner with Carnegie Hall. Such partnerships could greatly expand the impact of the program without involving Carnegie Hall in a lot of additional work. But someone has to make the connections and, perhaps, develop a local working group of institutions that would be interested in participating. Following some of the participants and documenting their life stories through music might be a further selling point for the program.

6. **Consider an Advanced Workshop**: It may be premature, but at some point in the future there might be some merit in considering a more advanced workshop where there is more emphasis on musical learning. Most of the participants wanted to go on though perhaps not all would have been qualified to move to the next level musically. Assuming the workshop continues, perhaps there would be a pool of first year students who might be ready for the follow up. Why consider this? There are three reasons:
    a. First, it is clear that many of these adolescents would benefit tremendously from a more rigorous and demanding workshop that focused on acquiring musical skills. If there was less time spent on developing a polished performance, far more learning could be accomplished.
    b. Second, and perhaps just as important, participants would be acquiring life skills as well – hard work, persistence, practice, and related interpersonal skills. One might hypothesize that some of the non-musical outcomes sought in the 2011 workshop might be more achievable in a situation where the expectations were higher.
    c. Third, having navigated successfully through the shoals of trusting peers in workshop 1, the participants might be more open to having other Jacobi staff, Carnegie Hall musicians, and others circulating through and observing them at their work (which caused occasional tension in the 2011 workshop). With the understanding that confidentiality would still be required, it would allow more people to participate and learn from the process.
    d. Finally, it is possible that the alumni of the advanced program might themselves become mentors in the future, providing role models for first-timers.

7. **Discuss the Impact of Facilities More Explicitly**: The workshop sessions were held in a small, often overheated, windowless room that was cramped, even for the equipment and the eight people (and sometimes nine) who regularly attended (i.e., 5 or 6 adolescents, the workshop leader, the psychologist, and the evaluator). When additional musicians and instruments were involved, it became even more cramped. It was difficult to break the group up when they were working on different projects. When others came in to participate or observe (people who the adolescents did not know), their proximity contributed to a feeling of discomfort. If the workshop goes forward again – perhaps with an additional participant or two – this room should not be used.

    The same can be said for the room used for the informal concert. As mentioned previously, it contributed to the unhappiness of many of the young people that it wasn't a "real" performance. Musicians had to spread out in a line format, audience members were on top of them, and the room needed to be air conditioned with window units, detracting from the sound. Again, a more appropriate space should be located.

8. **Make Better Use of the Private Concert:** The private concert was designed with the best of intentions – to address disclosure issues and to give an opportunity for the young people to shine in front of family and friends given that they would not be able to perform in the public concert. But given their troubled home lives and unpredictable social lives, there were few relatives and friends in attendance and those young people who had them there seemed discomfited by their presence. What made the event very special was that many of the medical staff from the unit attended and acted as a cheering section each time one of the patients performed. One wonders whether the emphasis of the program (with the awarding of certificates and post concert dinner) could be more on a Jacobi audience. Family and friends could still be invited but the pressure would be lessened to have someone show up. All of this, of course, would have to meet the standards of confidentiality required by the hospital. But to the extent that more medical staff could see the young people in action, the more the work of Musical Connections could resonate through the institution.

As the various participants have reflected on the 2011 song writing workshop at Jacobi, they have done so with a great deal of nostalgia and pride. Something special happened not only for a few adolescents but for scores of other people – some deeply involved, others only peripherally so. In the end, the workshop leader, Thomas Cabaniss, may have said it best in a personal reflection sent in an email to the professional musicians who he worked with:

> *There are silences in the world, and songwriters (who might not know that's who they also are) fill in the gaps with what they feel and what they want to say. To their impulses, your artistry brings life and eloquence, urgency and vitality, delicacy and power.*