

Trudi Kemp interview transcript 21.5.21

(**MJ**: Michael Jenkins and **TK**: Trudi Kemp)

MJ: You completed a music therapy program with me during your rehabilitation at the RHN in 2016. I'd like to ask you some questions about your experience of music therapy. First of all, was music a big part of your life before you brain injury?

TK: It was a very big part of my life when I was growing up. I played the clarinet. I started at the age of 9 and I played in the city of Leeds Youth Orchestra all the way through my school life.

MJ: So would you say that music was an important part of your life?

TK: It was hugely important yes

MJ: Would you say that it helped you to form some of your social connections?

TK: Yes. I'm married to someone who's very involved in sport and I didn't do team sports. I think music was my team sport because I was working together with people.

MJ: The primary aims of your music therapy with me were to strengthen your breath support, your voice skills, and your attention. We did this by singing some of your favourite songs. Do you feel that music therapy helped you with those aims?

TK: Yes, it did. When I was in hospital, I tired easily and I had not much concentration. When I had my trache out my voice was a problem, so speaking and singing were a really important part of my rehabilitation and I think the stuff we did in music therapy was hugely important with helping with that. I had visitors an awful lot so therefore my voice and talking was really important so music was a really interesting way of doing that rather than formal speech therapy which I also did.

MJ: Do you think that the music therapy sessions had any additional benefits besides those aims?

TK: I think a huge part of what happens after a brain injury is that you are mourning a life that you used to have. You didn't appreciate what you had until you don't have it anymore and the thing about music is that it allows you to go back to the person you used to be and the life that you used to have, and for me that was an incredibly important part of my recovery. I had to kind of work out that I still existed and that I could exist in a way that was fun and comforting and I think that music therapy is a really important part of that.

MJ: Would you say that music therapy helped you to adjust to your new abilities?

TK: Yes, exactly right.

MJ: In addition to your individual music therapy sessions, you attended a weekly music therapy group with other patients on the same ward. This group involved choosing songs to

listen to and sing with other group members. This group also offered opportunities to play musical instruments as an alternative way of expressing emotions. Can you describe some of the benefits of these group sessions?

TK: For a lot of people there, a lot of the songs that were played were very emotional. Both myself and other patients had moments where a song played and we started to cry, and I think that goes back to what I was saying before. You're going back into the person that you used to be and the life that you used to have, but now maybe you don't have in quite the same way anymore.

MJ: So it offered an opportunity to express emotions related to adjusting?

TK: Yes, and there was a togetherness there as well. Everybody was in the same boat.

MJ: Yes, and you're all doing something together. There were patients in that group of diverse ages, abilities, and cultural backgrounds and despite that, everyone was able to find something in the music that connected to them.

TK: I think that's absolutely right. I remember vividly that one time we played "Loch Lomond" and the lady sitting next to me started to cry. She was Scottish. So that touched something really important in her, and I can remember the song that I started to cry to. It was Bette Midler, "The Wind Beneath My Wings". You can just play that and I do cartoon crying.

MJ: Isn't it fascinating that a song can hold a memory? You can forget the memory, the memory can go, but when you hear the song again the memory comes with it.

TK: Yes, and that is a song that does exactly that for me, and everybody has at least one song that does that.

MJ: It sounds like music can be extremely powerful for not just the functional aspects of rehabilitation but also the emotional.

TK: Yes, and I think that what happens to people when they have a brain injury is that their emotional responses change, so things are not the same for them. I know that I cry more easily than I ever used to. I also laugh more easily than I ever used to. So after your brain injury you're not quite the same as you were in many ways.

MJ: How have you incorporated music into your life since your discharge from the RHN?

TK: I was always part of a choir. One of the things that we did in music therapy at the RHN was listen to and sing pieces from "The Messiah". One of the first things I did when I was discharged was I re-joined the choir. I was discharged in September and I sang "The Messiah" at the Royal Albert Hall in November. I knew from having done that that I could still read the music. I thought "what I *should* do is go and get my old clarinet out and see if I can still play it". I left school in 1981, shoved my clarinet under a bed, and left it there for 30 years. I thought that playing clarinet would be good for coordination because you've got to read the music, process the music, and make your fingers move at exactly the right time. So, I took my ancient clarinet to a lovely man in London who mends clarinets and he

transformed it into something that was playable. I found an agency that matched music teachers with pupils and I said “I’m 50-blah years old and I just spent a year in hospital following a big brain haemorrhage and I’d really like to have some clarinet lessons. I want a teacher who will be patient and kind and will happily come to my house” and that’s what I found. I started that at the end of 2017, about a year after I came out of hospital, and I’m still doing it.

MJ: Did having music therapy sessions at the RHN influence this inclusion of music into your life afterwards?

TK: Completely, totally, and utterly, yes. When you’ve had a brain injury one of the things that you’re worried about is what will happen to your brain as you get older, so you need to keep it active. I’m now in my late 50s. I do three things; I do *Duolingo* with French, I do my music lessons, and I listen to *Intelligence Squared* stuff because I’m determined that I’ve got to keep using my brain. Music for me now is incredibly important in a way that it hasn’t been for 30 years.

MJ: It’s interesting that you joined a choir straight after you were discharged from RHN. Perhaps you thought the benefits that you derived from group music therapy at the RHN could be continued in a choir after discharge. The music therapy group offered social bonding and a shared experience and you found something after discharge where you could also experience that.

TK: Yes, and also doing something reasonably skilful that I used to be able to do, and connecting back to my ability to do those things has been really important.

MJ: Yes, and it doesn’t take skill to benefit from music. I think music is a really wonderful thing because even if your engagement in music is small you still derive all of the benefits. Music never loses integrity, regardless of how big or how small it is, so everyone can engage and everyone can benefit.

TK: Yes, and it doesn’t matter how you do it I don’t think. What I needed was something that I could do, rather than something that I couldn’t do.

MJ: Would you recommend for people who are discharged from rehabilitation to find some way to be involved in music such as join a choir?

TK: Yes, I absolutely would, especially for the social side. I’m such an extroverted person so social interaction with other people was is really important for me.

MJ: It seems like the music therapy that you received at the RHN was beneficial at the time and also afterwards.

TK: Yes, absolutely, and still today.

(End of interview)