

# A Retrospective Lyrical Analysis of Songs Written by Adolescents with Anorexia Nervosa<sup>†</sup>

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Song-writing plays a central role in music therapy with adolescents. A retrospective lyrical analysis of songs written by adolescents with anorexia nervosa was undertaken in order to identify common themes solicited through song-writing interventions. Fifteen participants contributed 17 songs, from which 368 lyrical units were identified. A modified content analysis approach was used with each lyrical unit being categorised to one of six themes determined from the literature and clinical experience. The theme of 'identity' was used most frequently (28%), with the sub-theme of 'exploring new behaviours, positive self-talk' being addressed most often (12.5% of total). The dominance of the developmentally important theme of 'identity' may reflect the relationship between adolescents, music and identity or may be related to the way in which anorexia nervosa has been theorised to assist the adolescent in managing challenges to the emerging sense of self. Copyright © 2006 John Wiley & Sons, Ltd and Eating Disorders Association.

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## INTRODUCTION

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Little is known about what specific elements of treatment of eating disorders are most effective. Indeed, some authors suggest that evidence of any interventions being helpful is yet to be demonstrated (BMJ, 2003; Rosen, 2003). Certainly, the high drop-out rate described in many interventions suggests that engagement with treatment for eating disorders is problematic for many patients (Szmukler, Eisler, Russell, & Dare, 1985).

Creative art interventions are commonly used as a part of the multidisciplinary treatment of patients with anorexia nervosa. As adolescents move from the non-verbal and concrete understandings of childhood towards more articulate and intellectualised ways of adulthood, creative modalities are particularly appropriate for supporting disclosure and facilitating insight (McFerran-Skewes & Grocke, 2000). Music therapy draws on the expressive function of music to facilitate self-expression and promote the development of insight and growth. Through the use of creative processes such as improvisation and song-writing, music therapy has been described to 'nurture the self, providing support for the patient's vulnerability, while addressing defensive patterns of control, rigidity and denial' (Robarts & Sloboda, 1994). This is consistent with theories that describe challenges to identity and separateness as integral to the experience of anorexia nervosa (Bruch, 1973). Music therapy is used not only to increase a sense of personal identity, but also to assist in the formation of close relationships by using creative and authentic self expression as the basis for the therapeutic alliance (Robarts, 1994).

A number of specific goals of music therapy have been described that serve to provide a context for understanding the application of music therapy with this population. Music therapy has been proposed to promote an increased sense of mastery over emotional expression (Nolan, 1989), facilitate greater personal autonomy and understanding of relationship patterns that may inhibit self-esteem (Robarts, 1994), and provide opportunities to experiment with alternative interpersonal behaviours in a creative and safe environment (Nolan, 1989). Within the field of eating disorders, a psychodynamic framework is most commonly applied by creative arts therapists (Dokter, 1995), although cognitive behavioural approaches with music have also been delineated (Hilliard, 2001). However, while there is some empirical music therapy research (Smeijsters & van den Hurk, 1993; Trondalen, 2003), the literature is replete with conceptual theorising underpinned by descriptive case studies, primarily with adults (Loth, 2003; Nolan, 1989; Robarts & Sloboda, 1994; Wiggle, 1994).

Statistics suggest that adolescents spend significant amounts of time engaging in music listening and music video watching (Poole, 1994; Steinberg, 1996). Laiho (2004) proposes that the psychological functions of this music listening are emotion, identity, agency and interpersonal relationships.

The high level of involvement with songs suggests that song-writing interventions may assist in the engagement of adolescents to explore emotionally charged themes. In this study, we sought to identify the most commonly described features of the lyrical material generated by teenagers with anorexia nervosa, and from these results to suggest whether song-writing interventions are clinically relevant.

## METHOD

### *Setting*

This study was undertaken at the Royal Children's Hospital, Melbourne, a tertiary hospital in the state of Victoria, Australia, which provides both inpatient and outpatient services for eating disorders. Admission to a general adolescent ward is undertaken in the context of clinical deterioration despite comprehensive and intensive outpatient treatment, with a mean length of stay of 21 days for adolescents with anorexia nervosa. Ethical approval was obtained from the RCH Research in Human Ethics Committee.

### *Participants*

The inclusion criteria for songs were that they were written by adolescents aged between 12 and 17 years old; who were admitted to hospital with anorexia nervosa; and had written at least one song during a music therapy session. The data set, collected retrospectively for analysis, comprised songs written by 15 female patients with disordered eating who attended the music therapy program over a 2-year period.

### *Music Therapy Intervention*

Music therapy is offered to inpatients as part of our multidisciplinary eating disorder program. According to the availability of a part time music therapist, inpatients are invited to participate in either group or individual music therapy sessions where a range of approaches is used, including song-writing. Individual song-writing approaches are more likely to be offered when fewer inpatients are hospitalised at any one time. The data set for this study consists of songs written within individual sessions conducted at the bed-side by a single music therapist (K.M.). The song-writing procedure followed a previously described protocol that was developed for group song-writing (McFerran, 2005) and is

1. Introduction to idea of song writing
2. Selecting song style
3. Brainstorming song concept
4. Brainstorming lyrics
5. Selecting ideas for inclusion
6. Determining song structure
7. To rhyme or not to rhyme
8. Creating lyrics
9. Creating melody and harmony
10. Finalising musical features

Figure 1. Protocol for song composition

consistent with standard procedures used by music therapists (Baker & Wigram, 2005), and has been adapted as described in Figure 1.

### Analysis

A modified content analysis approach was employed (Baker, Kennelly, & Tamplin, 2005a, 2005b) whereby categories within lyric themes were constructed by the researchers, who then searched each lyric for each category. The process used to construct the categories involved:

1. Themes were created from the first researcher's clinical experience.
2. Further themes were created through searching the literature on adolescents with anorexia nervosa and music therapy with eating disorders.
3. Themes were tested on a selection of three songs to evaluate goodness of fit.
4. Themes were reorganised and combined to generate larger, more comprehensive categories.
5. Themes were retested across the data set.

A final set of 6 themes and 38 categories was defined as the basis of the lyrical analysis.

The data were generated by assigning each individual lyric within each song to 1 of the 38 categories based on best fit. Only one code was

assigned for each lyric, with a lyric defined as a complete phrase or sentence that represented a single idea, thought or feeling. The total number of coded lyrics was recorded for each category and for each main theme. Each lyric within a repeated chorus was coded each time the chorus appeared throughout a song: as the chorus of a song is used for emphasis, the repetitive phrasing needed to be recognised. All lyrics were rated individually by two of the authors (K.M., F.B.). Where there was inconsistency of coding, discussion between the researchers was undertaken in order to reach agreement about which code to assign each lyric.

### RESULTS

Fifteen of the 18 adolescent admissions invited to write songs as part of our ward-based music therapy intervention during the 2-year period agreed to participate, a response rate of 83%. Reasons for non-participation were lack of time, little interest in music or a general refusal to participate in hospital services. The mean age of the participants was 15 years, with 11 (73%) hospitalised for the first time. All adolescents who commenced the song-writing process completed at least one song. The 15 patients composed a total of 17 songs (1 patient composed 3 songs), which contained a total of 368 lyrics. The mean number of lyrics per song was  $21.65 \pm 9.53$ , ranging from 9 to 43 lyrics.

The same codes were selected by each of the two coders for 79% of the lyrics. Following discussion, 39% of the final codes for the remaining lyrics were in agreement with the first investigator/clinician's initial codes, 48% of the final codes were in agreement with the second investigator's initial codes whilst 13% of these lyrics were assigned a completely new code. Following coding, frequency was calculated across themes and sub-themes by lyric (see Table 1) and by song (see Table 2).

Table 1 details the frequency of lyric attribution to the themes and sub-themes constructed by the investigators. The greatest number of lyrics was attributed to the theme of identity formation, with a particular emphasis on exploring new behaviours. Lyrics in this category addressed topics such as desires for the future and reflections on the limitations of the world and self, as well as considering the perceptions of self by others and comparing self with others. The following lyric units (Excerpt 1) exemplify how this focus on identity formation was realised in the song-writing

Table 1. Incidence of themes and sub-themes contained in 368 song lyrics

Themes and sub-themes	Number of lyrics	Percentage of total lyrics
1 Relationship dynamics	64	17.4
a Mother	30	8.1
b Father	4	1.1
c Family	8	2.2
d Pets	1	0.3
e Peers	18	4.9
f Boyfriends	3	0.8
g Other	0	0.0
2 Identity formation	104	28.2
a Comparing self with others	2	0.5
b Considering how viewed by others	11	3.0
c Expressing emotions or views about peers	1	0.3
d Autonomy, independence from family	9	2.4
e Exploring new behaviours, positive self talk	46	12.5
f Exploring limitations of world and of self	18	4.9
g Self reflection—who am I?	17	4.6
3 Aspirations	61	16.6
a Positive relationships	8	2.2
b Feeling happy	14	3.8
c Achievements (e.g. holidays, education, sport)	21	5.7
d Seeking perfection	1	0.3
e Hope for the future	17	4.6
4 Reference to the disorder and its impact	56	15.2
a Description of food, weight, physical appearance	5	1.4
b Description of eating, exercise	5	1.4
c Aspects of treatment, experience of hospitalisation	9	2.4
d Wanting to go home	15	4.1
e Denial of illness	4	1.1
f Overcoming physical aspects of disorder	2	0.5
g Wanting to feel differently about self	16	4.3
5 Emotional awareness	63	17.2
a Isolated or alone	15	4.1
b Misunderstood	2	0.5
c Sense of failure, being unworthy, depressed	19	5.2
d Helpless to change (current) situation	10	2.7
e Hopeless about the future (perception)	5	1.4
f Fear	4	1.1
g Anger	4	1.1
h Other	4	1.1
6 Accessing support	20	5.4
a Wanting help	9	2.45
b Asking for help	4	1.08
c Feeling cared for	3	0.81
d Thanking support people	4	1.08

intervention. The codes assigned to each unit of lyric are placed at the end in brackets.

Excerpt 1: Example of song lyrics

I want to be like a white tiger (2e)  
 To have the courage to live my life (2e)  
 Not to be savage to other people (2e)  
 Coz that doesn't make me feel right (2e)  
 Its courage, bravado and beauty  
 Is too overwhelming for me (2a)

But that rare white tiger is  
 What I want to be (2f)

For another young woman, her song-writing (Excerpt 2) reflected her desire to claim her identity through honest communication.

Excerpt 2: Example of song lyrics

There's no point in lying.  
 You'll just get caught out (2e)

Table 2. Theme dominance, by songs ( $n = 17$ )

Theme number	Theme title	Dominance by songs %	Dominance by lyrics %
2	Identity	41.2	28.2
1	Relationships	17.6	17.3
3	Aspirations	17.6	16.6
4	Reference to disorder and its impact	17.6	15.2
5	Emotional awareness	5.9	17.2
6	Seeking emotional support	5.9	5.4

I just wanna speak my mind (2e)  
Why doesn't everybody be straight up? (2f)

Within the next most commonly utilised theme of relationship dynamics, diverse descriptions of young women's relationships with their mothers formed the next most commonly attributed sub-theme. Within this sub-theme, some told stories of maternal behaviours that the adolescent felt had been the cause of their difficulties. In contrast, other lyrics described an ideal mother with whom the adolescent identified strongly. Another strategy used in describing the relationship with mother was in the form of an apology, where the adolescent outlined her own difficult behaviour and sought forgiveness for the stress this had placed on the mother-daughter relationship. The following lyric units (Excerpt 3) exemplify processes of individuation through a comparison between self and mother.

#### Excerpt 3: Example of song lyrics

She drives a Barina, I drive a Gemini (2a)  
(types of cars)  
She likes 693, I like 101 (2a) (radio stations)  
Even though we're different (2a)  
We have something special together (1a)  
Coz she is my mum (1a)

A summary of the incidence of the dominant theme for each song is reported in Table 2, which compares the dominant theme of each song with the main themes within each song. While the same pattern can be seen between individual lyrics and songs, the theme of identity became even more overt when the dominant theme of each song was sought.

In this study, songs were often effective in soliciting information not disclosed to other team members. The following excerpt (Excerpt 4) is taken from a song that describes the onset of the disordered eating during a 60-minute song-writing session. Despite extensive assessment, the patient's

experienced paediatrician (SS) had been unable to identify any important information about family relationships.

#### Excerpt 4: Example of song lyrics

It all started when Dad went away (1b)  
I missed him and I begged him to stay (5a)  
He said he couldn't, had money to earn (1b)  
And I began to feel depressed (5d)

## DISCUSSION

Engaging adolescents with eating disorders in therapeutic interventions can be difficult (Golden et al., 2003) and the specific nature of the brief relationships established within a weight-restoration program at an inpatient paediatric hospital setting is an additional challenge. The high participation rate following invitation to take part in song-writing confirms its appeal and relevance to this population of young people with anorexia nervosa. Interestingly, song-writing was able to reveal information that had not been discussed with other members of the multi-disciplinary team. It is unclear whether this reflects greater engagement in song-writing than other therapeutic modalities. Certainly, the combination of verbal and imaginal self expression facilitated through musical interaction has been described as effective in enhancing autonomy and developing a sense of personal identity for adolescents (Robarts, 1994). Alternatively, as proposed by creative arts therapists (Smeijsters, 1996), creative mediums such as music may more readily solicit material from the subconscious that are less accessible to more conventional forms of therapy. The nature of the paediatric hospital setting is oriented towards short-term remedy of the life-threatening aspects of the condition. The role of music therapy in this context is closely related to diagnosis and the provision of



short-term support. The results of this study confirm the literature suggesting that music therapy could also have a role in the medium to long-term therapeutic treatment of adolescents with anorexia nervosa, although this was not specifically investigated in the current study.

The relevance of music to adolescents is well understood and has been examined within many disciplines (North & Hargreaves, 2000; Sun & Lull, 1986; Tarrant, 2002). Teenagers use music as a badge of group membership (Frith, 1981), as well as identifying with music that reflects their self perception (Roe, 1987). The song-writing protocol acknowledged these important roles by including choices about the song style as well as development of lyrics. In introducing the song-writing concept, the music therapist would regularly emphasise this relationship by stating: 'Now, it is really cool if you write a song that describes something important about your life. Songs that don't seem true just sound a bit false. You know the kind of song I'm talking about, where it just doesn't seem real. Powerful songs draw on something real'. This prompt was used to remind adolescents of their already existing relationship with music and their identification with particular songs or artists who resonated with their life experience.

This context for song-writing emphasises the importance given to the dominant theme of identity formation, with many songs making additional specific links between their sense of self and aspects of their disordered eating. Identity formation has been conceived as the fundamental developmental task of adolescence (Erikson, 1965), and the onset of disordered eating during adolescence has historically been considered as a form of identity crisis (Strober, 1985). Early theorising is exemplified in the observations of Lawrence (1984), who proposed that the struggle between independence and dependence was the primary issue underlying the disorder. Bruch (1973) described that young people with eating disorders experience a sense of ineffectiveness and fear of growing up, possibly underpinned by the nature of family relationships. The inclusion of 'relationship with mother' as the second most prominent lyrical type also supports this interpretation.

There were challenges categorising each lyric into only one sub-theme, with significant debate required before agreement about attribution of some lyrics. The complex, subtle and metaphoric nature of the material shared by these young women with eating disorders is one explanation. The lyric examples offered above illustrate that on

many occasions a number of sub-categories could have been selected, and the rigorous process utilised to achieve agreement did not fully overcome this complexity. Not surprisingly, the difficulty of lyric attribution greatly contrasted to more simple and straightforward songs written by patients recovering from Traumatic Brain Injury (Baker et al., 2005a, 2005b). A prospective study that involves member checking (returning researcher interpretation to participants to confirm correct attribution) could be helpful, although the psychological functioning of adolescents with anorexia nervosa may limit the usefulness of this approach in comparison to other patient groups. A repeat study of a similarly aged cohort hospitalised for chronic illness could also provide useful insight into whether the dominance of relationship with mother is linked to the disorder itself, or to the experience of life threatening hospitalisation during adolescence. In contrast, approaching the analysis of lyrics from a qualitative perspective may also be helpful in identifying unanticipated themes within the lyrics, such as the grounded theory analysis conducted by O'Callaghan (1996) of songs written by palliative care patients.

The results of this retrospective analysis indicate that song-writing interventions can promote processing of significant therapeutic issues by adolescents with anorexia nervosa. It appears that adolescents do relate to the use of creative interventions in a way that is meaningfully related to the pressing issues in their lives. The combination of popularity and relevance resulted in fresh insights about the nature of their predicament for many of these young women, especially in relation to individuation and identity formation. Multimodal treatment models are recommended for adolescents with eating disorders (Fisher et al., 1995). Although music therapy is not explicitly identified within accepted treatment approaches to young people with eating disorders (Golden et al., 2003), this study affirms the value of music therapy and song-writing in particular as an engaging therapeutic modality in treating adolescents with eating disorders. As one patient stated, 'Please hear me and stop me going crazy. I just want to feel comfortable, I want to be in control'.

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