## Sound therapy for autistic people: 29-year-old Sabine's story

by Monika Hecker-Stepholt

Sabine (\*name has been changed), a 29-year-old woman affected by early childhood autism along with hearing loss and its associated muteness, is capable of making vocalizations. She communicates by pointing, making gestures, and drawing pictures. A childhood accident causes her left hand to remain noticeably clenched and she can only use her thumb and pointer finger. She has her own charms and can be cheerful and even-tempered; however, at the same time, she can be introverted, self-destructive, impatient, and restless.

Her mother's goal for her work with me was to establish a sense of wellbeing and, through this, she hoped to provide relaxation and better quality of life for her daughter.

Our sound sessions took place between August 2009 to May 2010 and were spaced 2-3 weeks apart. Sabine's mother took part in them so she could explain her behavior to me and sup-

port me in some of my interactions with her. With autistic people, the part of the brain responsible for emotions is less developed and therefore less active, so it has to be stimulated more. With that considered, sounds are an excellent form of communication and expression that we can use to address emotions via the limbic system. Singing bowls and their vibrations can also address tactile sensations in the same way.

Implementing sound therapy techniques provides a good opportunity to create a connection with hard of hearing, autistic Sabine, helps her experience new sensations, and in the end, improves her quality of life.

## Bringing sound home

I first met Sabine at her house so the familiar environment would help her feel secure and stabile. She sat in her usual spot on an armchair with her mother also in the room. I used the singing bowl on her first to pique her

interest and encourage trust - in both me and the sound vibrations that she was feeling. As the session continued, Sabine started getting fidgety and her mother explained to me that this was a sign that she was interested. I then placed a large pelvis bowl on Sabine's thighs. She seemed fine with this, observed the bowl, and it was apparent that she was concentrating. After I played the bowl five times, she shoved it away. I took the bowl and went to her mother. From then on, whenever Sabine would get restless, I would place a bowl on her and leave it until she shoved it away. Little by little, I started to incorporate a universal bowl into the sessions by placing it on her hands and feet. I always managed to get some brief, emotive eye contact from her. Her readiness to step into the large foot bowl and play it by the end of the session showed me just how powerful the effects of singing bowls can be.



The second session with Sabine and her mother took place in a room at my clinic. Now that she had been introduced to the sound bowls at home in a familiar place, she would encounter them in an unfamiliar place. Sabine looked around the sound room with interest and followed me while I got them acquainted with the new space. We had the session on a chair, as she's used to at home. She allowed me to place a footrest under her feet so they could be in contact with something instead of hanging; maintaining a



connection to the "floor" is important. I started to work with the help of her mother's feedback again, but little by little began placing a singing bowl on Sabine's thighs, hands, and feet, until she clearly made it known that she had had enough by making vocalizations or shoving the bowl aside. It was apparent that she was exhibiting introspective behavior during the session and she became calmer and more concentrated. The relaxed expression on her face indicated that she was at ease as the sounds from the bowl on her thighs faded away. When it was time to finish the session by stepping into the foot bowl, her eyes were pointed straight ahead and she took in the sounds as they faded away. She then stepped out of the bowl of her own volition. In the words of Sabine's mother, the amount of time she spent in concentration during the session was "unbelievably long".

## Reaching even more people with sound

Sabine's father joined us for the third session. This one was similar to the second

By the fourth session, Sabine was ready to start working while lying on the floor, and we continued to carry out every session after that on the floor. Sabine's mother lied down next to her daughter at a close distance, and I communicated with her in the beginning as usual. To end with, I placed a universal bowl and a pelvis bowl onto Sabine's feet and thighs to imitate a simple massage and I alternated playing between the bowls. For the majority of the session, I observed her as she sighed contentedly, made in-

timate eye contact with her mother, smiled softly, and all the while appeared at peace with herself. She also frequently made brief eye contact with me that I found touching. We ended with what had become our routine of stepping into the foot bowl, which she did with eagerness.

In the sessions that followed, Sabine was able to tolerate practicing with even more singing bowls. Now, with some prompting and encouragement, she was able to alternate playing the bowls by herself to her own rhythm. She was also, with the right assistance, capable of playing a heart bowl on her mother's chest of her own accord and making eye contact with her while she played.

Time and again, Sabine maintained this unique eye contact during our simplified form of sound massage. She was so focused and attentive during that part of the session that she would lean forward, take another mallet that was lying next to me, and then offer it to me. And just like that, she would interact with someone who was practically a stranger, something that is uncommon for a person with Sabine's form of autism.

The sessions visibly became more cheerful and relaxed and Sabine would allow more physical contact from time to time. When she returned home after the sessions, she was calmer, more personable and more even-tempered. Her nights were more restful since she was able to get better sleep. The good circulation she now had in her hands and feet undoubtedly had a connection with everything else too.







Sabine has a photo album at home with photos of the sound room, the singing bowls and the pattern we placed them in, and me. Each time before they head to the next sound session, her mother shows her the photos. She takes the photos one by one, places them at her feet, and looks at them. She gives the impression that she knows they are leaving for a sound therapy session soon, and she is always eager to go.

Right after the eighth session, Sabine opened up her clenched left hand, grabbed a glass of water that we had set out for her, and drank from it; she repeated this two times. Ever since, she has used her left hand more readily and also plays the bowls with it. For a short time now, Sabine has positioned herself down on the floor mat for a sound massage. This is an incredible sign of trust for her, and represents a milestone for her progress when you consider that she would also come to put herself to bed in the same position.

## Conclusion

While working on sound techniques with Sabine, it became clear to me that you have to proceed carefully and take small steps in order to gain trust and not scare off your client. You always need to establish a set of trusted, foundational steps to fall back on to be able to introduce new ones and integrate them into the practice. This is just one part of working with autistic people that should be supported by various other teaching methods, like the TEACCH method and the facilitated communication approach.

Taking small steps requires patience and time and I am eager to see what Sabine's future holds with the help of Peter Hess sound pedagogy.

Sabine's relaxed facial expression, her laugh, even temper, and the way you can feel how moved she is after having experienced a sound session all serve to show me that our educational work with singing bowls leaves a profound, valuable impact on those it touches. The involvement of Sabine's family in

the process was unexpected yet heartwarming, especially her mother, who was so important to the sound sessions that she still likes to come along with Sabine.

And so we end up in the same place again, taken aback by just how much "the sound of a singing bowl can touch not only Sabine but the innermost part of ourselves, and resonate within the soul" (freely adapted from Peter Hess).



Contact

Monika Hecker-Stepholt is a nationally recognized educator; qualified Peter Hess® sound massage practitioner, sound educator, and KliK workshop director; and is trained in Peter Hess® sound massage therapy.

Email: mhs-klangoase@t-online.de