

Essay/Personal Reflection

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The efficacy of “rapid tele-psychotherapy” with single-session music therapy: A personal reflection as a founder

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Nowadays, the COVID-19 pandemic still occurs in various locations. Variant after variant of the virus, currently increasingly mutating in various countries (Poudel et al., 2022). This indicates that the pandemic is not over, and we do not know when this outbreak will end (Situmorang, 2021a). The need for remote mental health assistance is increasingly needed to help many people because face-to-face processes cannot currently be carried out. In addition, many people in the current situation desperately need a quick counseling/psychotherapy process, even just one meeting. Based on this, I founded a new theory called “Rapid Tele-Psychotherapy,” which I combined with music therapy (Situmorang, 2021b). It is hoped that workers in the helping professions can use this new theory to help many people around the world.

My experience applying this theory is quite satisfying and successful. As I explained earlier in a previous article (Situmorang, 2021b), a 33-year-old widow was hospitalized in her own home without severe symptoms of COVID-19. After being examined by PCR, she had a comorbid condition, asthma, and a cycle threshold (CT) value of 17. She was exposed to COVID-19 after taking her grandma to the hospital’s emergency room a few days before. She couldn’t say for sure how COVID-19 was transmitted. She had a persistent headache, was quickly exhausted, had body pains, inflamed eyes, and impaired eyesight for three days following the occurrence.

On the other hand, she did not notice shortness of breath or a loss of scent. She was diagnosed with COVID-19 after a PCR test revealed she was infected. She exhibited a high level of anxiety, panic, fear, sadness, acute stress, sleeplessness, and death fantasies, as measured by a score of 10 on the rapid tele-psychotherapy with single-session music therapy (Krout, 2001) process’s scaling questions (Strong et al., 2009). She was terrified of dying and passing cancer on to other family members, including her three children. She offered a reasonably decent answer and was able to participate well in the execution of the two strategies, namely “Invite Them to Sing a Song that They Love” and “Invite Them to Create New Lyrics using The Song that They Love” throughout the working stage, especially while giving the miracle question (Strong and Pyle, 2009). She produced fresh lyrics for the songs she liked at the end of the process, which she used to create a “Soundtrack of My Life.” At the end of the session, she stated that her anxiety, panic, fear, despair, acute stress, sleeplessness, and death fantasies had all decreased to 5.

After the rapid tele-psychotherapy process, she felt the benefits and felt much better than before. She was very grateful for being helped even with just one meeting because she thought that after the meeting, she was able to independently apply the “Soundtrack of My Life” when the problem resurfaced. Honestly, I feel delighted to hear this, because as a founder of this theory, I feel that this theory is quite helpful and provides benefits for hers. I hope she can independently reduce her anxiety, panic, fear, despair, acute stress, sleeplessness, and death fantasies to an even lower scale. May God always be with her, and her life can be happier day by day. I hope that this theory doesn’t just stop at her. I will apply this theory to others who need more help. Hopefully, this theory can also be an insight for professionals to use in their respective countries to benefit from it.

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