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CONFERENCE REPORT

Open ground: Music therapy in collaboration and exchange

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CONFERENCE DETAILS

Open ground: Music therapy in collaboration and exchange British Association of Music Therapy (BAMT) conference 9-11 April 2021, online

AUTHOR BIOGRAPHY

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INTRODUCTION

In August 2019, the call for abstracts opened for the 2020 British Association of Music Therapy (BAMT) conference. The conference was due to be held in Belfast, but in early 2020 the world gradually became more aware of an unfolding health crisis. As the pandemic progressed it became clear that it would be impossible to predict when it might be safe to host an in person event for large numbers of people from across the country. In light of this, the conference was delayed by a year and the BAMT conference committee decided to transition to an online platform.



Photograph 1: Conference logo

Online conference

The decision paid off. The existing themes of collaboration and exchange were conserved with a call to presenters to showcase their "diverse and varied" work in partnership with other professions, partners, organisations and artists. This provided a timely opportunity to look at how the profession is working with others and reaching outside of siloed practice. Paper presentations were pre-recorded,

and round tables and workshops were live to support their interactive nature. Presenters were able to elect whether their session would be available post-conference.

The programme contained a total of 127 presentations, 65% of which focussed on the conference theme of collaboration and exchange. The digital book of abstracts (a hefty PDF) was made available the day before the conference started; with so many presentations to choose from, I felt this was not soon enough. Until the abstracts were received, titles of presentations and sessions were the only guide for personal planning. The content of these titles therefore needed to be informative and accurate. However, many titles were missing key data such as client group, lifespan or type of clinical intervention.

At its busiest moments there were 15 concurrent events. I wonder if a reduction of presentations on offer could have provided delegates with a higher quality and easier experience. The counterview to this was being able to catch up on almost all sessions post-conference. Data on how many sessions were viewed by delegates post-conference would be interesting to explore.

The online status of the conference had clear pros and cons. Accessibility was increased due to reductions in costs and expenses, as evidenced by the 400+ delegates in attendance, but for some delegates the in person contact and the random connections over coffee breaks were missed. I found that random connections were still possible thanks to the virtual lounge tables where I was discussing vaccine status ethics one moment, and the joys (or fears) of wild swimming in the brown and murky waters of Bristol the next. Unfortunately, there were some sound issues even with pre-recorded talks. For a music-based profession, this was frustrating to experience throughout the weekend and could have been the result of a number of possible issues. This would be a key area to improve upon for future online offerings.

Keynotes

The Tony Wigram lecture was given this year by Gro Trondalen, and hosted by Helen Odell-Miller. It covered four research projects with a broad spectrum of client groups, topics and lifespan, and not exclusively music therapy. This range spoke well to the conference theme of "Music Therapy in Collaboration and Exchange" and set the scene for the weekend ahead.

Wendy Magee used her keynote to petition the profession. She challenged delegates in a clear and factual manner on their responsibilities and roles in examining their privilege, power, capacity to oppress and cultural competence. She asked us to consider what our implicit biases might be: "Through which lens [gender, race, ability, class, sexuality, religion] do we see the world?" And her final challenge: "What are you *actively* doing?"

The online platform did not get in the way of this message being felt in homes, studios and headphones up and down the country. Showing that you liked what was being said by clicking the blue thumbs-up button felt somewhat inadequate as an individual response but seeing the storm of thumbs that billowed up at key points in the keynote went some way to communicating how the content was being received and valued. Following Magee's challenge, the virtual audience had their potentially privileged positions further illuminated as the panellists shared the realities of their lived experiences.

The second keynote was led by Hilary Moss and focussed on her viewpoint that "arts and health is an umbrella term under which we all coexist." From the outset, she invited arguments and disagreement. She asked if it mattered whether an intervention was music or music therapy-based, as long as the focus was: "What do you need? How can I help?" Alongside another billowing storm of blue thumbs-up, the chat held interesting opinions with many describing their experience as feeling like a breath of fresh air was sweeping through the virtual space. In contrast, others accepted the speaker's permission and encouragement for argument and disagreement, and expressed their concerns around boundaries being blurred, potential lack of consultation with existing arts therapists, and the risks of what may or may not be transferred between non-psychologically trained artists and patients.

Presentations

Sessions started automatically at their scheduled time and after I had missed the very start of the first two it became clear that punctuality was going to be an important facet of this online conference. However, due to the presentations being available post-conference I was able to take more breaks than usual. I enjoyed being able to change my mind on which talks to attend more easily than I would have at an in person conference. The following are just two examples of the rich and challenging papers that were available that I managed to attend.

In the workshop, *Music* and the unthought unknown: exploring a method for peer supervision and work groups (Catherine Warner, Joy Rickwood and Hilary Storer), we were able to improvise with the leaders and to have an authentic experiential session of the model of group supervision being demonstrated. The experience for the attendees was powerful, with space for shared resonances and reflections. Would I have felt able to join in, in person? Would there have been a cacophony of improvisation with all of us in the same room? Perhaps not as we would hopefully have been sensitive to one another, but in this online workshop I was able to have a personal and independent musical interaction with the material with the awareness that others were alongside me having their own independent yet shared experiences.

Exploring the cultural model of disability in disability arts and music therapy with adults with PMLD (Hilary Davies) posed the challenge that the arts therapies work in the medical model of disability and outlined the cultural model of disability. In the medical model the focus is on a deficiency that needs to be treated, whereas in the cultural model disability is described as a social construct. It is the barriers placed in the way of people with disabilities by society which disable people. This thought provoking and well laid out paper from Davies was one that I benefitted from in the catch up weeks post-conference that I might not have seen otherwise.

Below is a funnel chart I created following a brief analysis of the 127 presentations (keynotes, posters, papers, workshops) which displays the topics and client groups covered by them (Figure 1). It is important to point out that there was no renewed call for submissions with the delay to the conference and that submissions from 2020 were rolled over. This seemed to be the fairest way to proceed however it meant that there may have been a lack in contemporary relevance to the content as a result. I found some unexpected results in this data. There were only 16 presentations around 'physical or learning disabilities' which is one of the most frequent areas of work for music therapists (Carr et al., 2017), and just ten concerning 'palliative care or loss' which seemed surprising considering

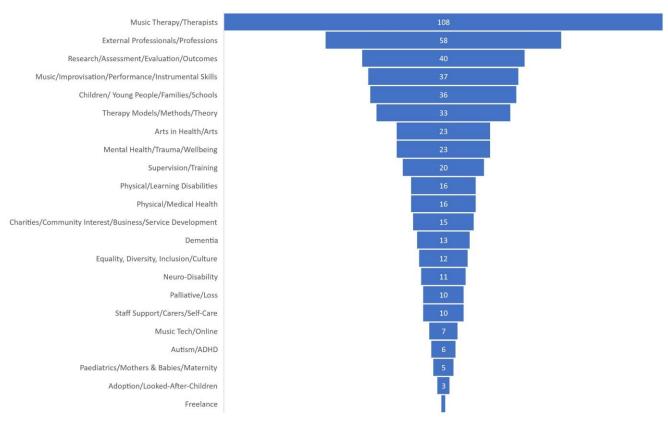


Figure 1: Number of presentations per topics, client groups and professionals

the context of the pandemic. Perhaps this topic will receive more focus in future conferences. It was encouraging to see that 58 involved 'external professions or professionals' as it demonstrated that the themes had been adhered to and kept in mind both by presenters and the peer reviewers of the abstracts.

A third of the presentations concerned the 0-20 age group of clients, which correlates with the most prominently worked with lifespan for the UK profession (Carr et al., 2017). There was an equal distribution among the other ranges including those that covered all lifespans or that did not cover clinical cases (Figure 2).

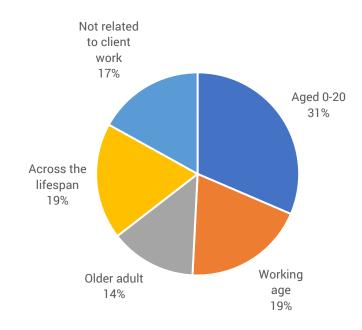


Figure 2: Distribution of client lifespan in presentations

CLOSING THOUGHTS

BAMT demonstrated strong leadership with their promotion of the *Equality, Diversity and Inclusivity* agenda that has been at the forefront in the news and our communities in recent years. They embraced an understanding of the deep relevance of this topic and responded to provocations, challenges and

confrontations during the conference with compassion and from a position of honesty.

The online conference increased accessibility with closed captions provided for pre-recorded talks, recordings being available post-conference, cost reductions and removing the barriers of geography. For some less comfortable with technology or without the required equipment or a private space, the experience could have been less accessible therefore I would be keen to see a blended online/in person approach to BAMT conferences going forward (pandemic permitting), with the advances in accessibility being maintained and developed further. The importance of co-production with people with lived experience will be vital in establishing additional accessibility options at future conferences.

As I write, I am listening to the #OpenGroundConference playlist on Spotify, just one of the excellent resources made available to delegates. After spending the previous year out in the creative wilderness of online working, the conference provided me with a grounding experience of 'coming home.' I felt a sense of reassurance and holding through the wealth of talks and workshops of my peers. The online platform sourced was impressive and BAMT managed to host a rich and stimulating event that served to nourish and replenish tired and struggling therapists and professionals.

REFERENCES

Carr, C., Tsiris G., & Swijghuisen Reigersberg M. (2017). Understanding the present, re-visioning the future: An initial mapping of music therapists in the United Kingdom. *British Journal of Music Therapy*, *31*(2), 68-85. doi:10.1177/1359457517728379