REPORT

Special Feature | Music therapy in dementia and end-of-life care: Mediterranean perspectives

Music therapy in the Occupied Palestinian Territories: An overview and some perspectives on dementia and end-of-life care

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ABSTRACT
This report discusses the practice of music therapy in the Occupied Palestinian Territories (OPT), with a focus on the field of dementia and end-of-life care. It reviews music therapy in general in this part of the world, and also explores the extent to which music therapy is implemented and made available to the general public. Matters relating to access to music therapy trainings are also examined. The impact of culture and lack of trained music therapists in the OPT mean that at present, music therapy work in general is limited. The report concludes by offering glimpses into current initiatives and potential developments for the profession.

KEYWORDS
music therapy, Occupied Palestinian Territories (OTP), dementia end-of-life care

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MUSIC THERAPY IN THE OCCUPIED PALESTINIAN TERRITORIES
This report explores and discusses music therapy in the Occupied Palestinian Territories (OPT). In order to clarify the use of the term OPT, it should be stated that since 1999, this descriptor has been used to describe the following geographical areas: the West Bank, East Jerusalem and Gaza.
Although the focus of this special feature is music therapy in Mediterranean countries in the field of dementia and end-of-life care, the authors found such work was extremely limited if not completely absent in the OPT. This report, therefore, focusses on providing an overview of the profession in the area with some thoughts from local professionals and academics as to the potential for the future development of music therapy generally and in the featured clinical areas.

Music in the OPT

The musical tradition of the OPT is rich and varied. The varying cultural backgrounds and religions present in the country offer a rich underpinning to Palestinian music, enabling it to thrive and develop. From traditional working, wedding and protest songs (Macdonald, 2013; Massad, 2003) as well as performers such as Reem Kelani, music therapist and performer Basel Zayed, and contemporary hip-hop and rap collectives, the Palestinian music scene is eclectic and vibrant.\(^1\) Instruments such as the oud, quanoun, daaf, Arabic drum and ney, together with the use of Arabic modes known as maqams and traditional rhythmic patterns, give Palestinian music a specific colour and shape that is being used creatively by contemporary artists to explore identity and break new ground in this artform.

Music therapy in the OPT

Although at the moment access to music therapy delivered by trained music therapists in the OPT is limited, there remains a positive attitude to the use of music to achieve therapeutic goals. There are few Palestinian music therapists practising in the region, although the exact number is hard to ascertain. According to information gleaned anecdotally (Buran Saada personal communication, 18\(^{th}\) February 2019) there are less than five Palestinians who have postgraduate qualifications in music therapy. All of them are located in larger areas of population with none operating in Gaza. When one considers these serve a population of approximately five million people (roughly three million in the West Bank and East Jerusalem and two million in Gaza), it is clear that access to music therapy delivered by Palestinians is severely limited. In addition, there is no generally accepted definition of music therapy which means that the term can be loosely applied to any therapeutic or even educational use of music.

Music therapy training in the OPT

Developing the music therapy profession in this part of the world has many challenges. To some extent, this is due to the lack of university undergraduate or postgraduate level training in music therapy. There is also a difficulty for Palestinian musicians, who may wish to train in this discipline, in accessing any training in this subject area. Although there exist undergraduate and postgraduate courses for social workers, psychologists and other healthcare professions in which seminars on the topic of music therapy are delivered, there is a dearth of any music therapy training in these territories.

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This means there are considerable barriers to the development of this profession. Indeed, some Palestinians have accessed training in Israeli universities and this is the case for the few Palestinian music therapists currently working in the OPT. However, such courses whether located in Israel, neighbouring countries such as Lebanon where a course does exist, or further afield, can be difficult for Palestinians to attend. There may be issues relating to obtaining visas, as for any potential student wishing to study abroad, as well as the language barrier. As a result, and also because of the large number of foreign aid agencies operating in the area, several short courses offering music therapy skills take place in the OPT. These can be accessed by Palestinian musicians, teachers and healthcare workers, and provide skills and training in the use of music for therapeutic outcomes.\(^2\) In cases where the organisation is based abroad and not in the OPT, training is often delivered by music therapists who are not native to the region. This in itself brings up questions relating to the relevance of training materials and theoretical approaches, the accuracy of translation of music therapy specific terminology and post-colonial assumptions that are beginning to be explored by music therapists (Comte, 2016; Coombes, 2018).

Music therapy practice in the OPT

Despite these challenges, there do exist pockets of music therapy work being undertaken by Palestinian music therapists. Much of this is group work, partly due to limited resources but also due to the prevailing societal structure. Buran Saada, a Palestinian music therapist who works primarily with children with special needs but also with women with breast cancer and young people who have been imprisoned for offences against the state of Israel, believes that “While there exists a will to use music to support children with special needs, provision for autism and other associated conditions mean any music therapist faces an uphill struggle to develop the work” (personal communication, 18 February, 2019). Furthermore, Souha Shehadeh, a child and adolescent psychiatrist at the Bethlehem Arab Society for Rehabilitation Hospital in Beit Jala, believes that music therapy offers communicative and expressive opportunities for children with autistic spectrum conditions. Her organisation participates in a project organised by a UK based charity, ABCD (2019), who employ UK-trained music therapists for time-limited periods of work in and around the hospital. While this input is relatively short in duration, she believes that “Music therapy offers the children the opportunity to express themselves in music, and gives their parents a sense of hope for their children’s future” (personal communication, 15th March 2019).

There are also music therapists from other countries who have undertaken short-term work in the area. A common theme arising in their writings is the importance of identity that can be expressed through music using traditional instruments and rhythms (Behrens, 2012; Coombes, 2011, 2017; Tsolka, 2016). It can be seen, therefore, that there exists a patchwork of music therapy initiatives in the OPT. Local music therapists deliver sessions in a variety of settings, with short or longer-term

 initiatives, while other projects largely funded from outside the OPT provide music therapy and therapeutic music work.

**MUSIC THERAPY IN DEMENTIA AND END-OF-LIFE CARE**

Bearing in mind the limited provision of music therapy in the region, it is no surprise that access to this intervention in the fields of dementia and end-of-life/palliative care remains virtually non-existent.

In the OPT there are little or no services offering dementia or palliative care. With a relatively young population where average life expectancy is around 75 years, there are few statistics available for dementia, and those that are available include Israel, which makes it difficult to ascertain the extent of the disease in the OPT (Bhalla et al., 2018). Organisational care for dementia and also palliative care is lacking, in part due to a paucity of appropriately medically trained staff, but also due to the prevailing cultural norms. In Arab society, “the desire of appearing strong and to please others at all costs, bearing physical pains, hiding emotions, staying at the head of responsibility, performing duties and playing roles without admitting the need for help or showing signs of weakness” (Abu Seir & Kharroudi, 2017, p.57) means that many people delay seeking treatment and do not wish to receive such palliative care that is available. The same paper discusses the importance given to the family unit in Palestinian culture. The norm would be for “family members [...] to take the patient home to be around him to provide comfort and company” (Abu Seir & Kharroudi, 2017, p.57).

Rana Abu Seir, assistant professor in haematology at the University of Al-Quds in Palestine who also specialises in cancer care, acknowledges the lack of access to music therapy for those receiving palliative care (personal communication, 22nd March 2019). She suggests that those of the Muslim faith (98% in the OPT with the remainder largely identifying as Christians) may draw comfort from listening to recordings of the Quran, specifically prayers for remission. These include the concept of hope in the afterlife as a reward of withstanding the pain without complaint. Equally, adherents of other religions, including Christians, may benefit from listening to or singing religious texts from their Holy Books which also contain similar sentiments.

While no literature on the potential of playlists to offer support to those living with dementia and receiving end-of-life care exists specific to the OPT, there is a growing body of such literature in the international community (Leggieri et al., 2019; Murphy et al., 2018; Porter et al., 2017; Warth, Kessler, Hillecke & Bardenheuer, 2015). It is suggested, then that it may be possible to implement the use of playlists as part of a music therapy programme for this client group in the OPT.

**LOOKING FORWARD**

It is clear that the profession of music therapy faces many challenges in the OPT if it is to develop and be offered to the wider population. The lack of university level music therapy courses in the OPT means that Palestinians who may wish to receive such training struggle to access it. While some level of music therapy training is currently offered by a variety of organisations, without university-level music therapy courses there remain challenges to the development of a system whereby music therapy can be provided by Palestinians to their fellow countrymen.
More positively, the music therapy initiatives that are already being offered, mainly to children and young people, are viewed very favourably by recipients and their families. Comments from staff who had received training from one such initiative offered by Music as Therapy International (MasT) demonstrate their belief in the efficacy of music therapy and their commitment in delivering such work. One school counsellor stated, “The program allows me to help as many students as possible with behavioural and psychological problems and reduces the impact of these challenges on my students”. Another stated “I became very close to my students through the music therapy sessions and the confidence and communication between us increased” (Music as Therapy International, 2019). Parents have also commented on their children’s music therapy experiences, with one parent stating of her son, “The [music therapy] programme encouraged his own abilities and provided a channel for hidden positive energy. It enhanced his self-confidence and played a role in improving his relationships with his peers in the group” (Evangelical Lutheran Church in Jordan and the Holyland 2018). It could, therefore, be said that developing the music therapy profession and provision in the OPT is a work in progress that, while facing challenges, is ripe for development.

REFERENCES
Μουσικοθεραπεία στα κατεχόμενα παλαιστινιακά εδάφη: Μια επισκόπηση και ορισμένες προοπτικές για την άνοια και τη φροντίδα στο τέλος της ζωής

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ΠΕΡΙΛΗΨΗ
Αυτή η αναφορά συζητά την πρακτική της μουσικοθεραπείας στα κατεχόμενα παλαιστινιακά εδάφη, με έμφαση στην άνοια και τη φροντίδα στο τέλος της ζωής. Εξετάζει γενικά τη μουσικοθεραπεία σε αυτό το μέρος του κόσμου και διερευνά επίσης τον βαθμό στον οποίο η μουσικοθεραπεία υλοποιείται και είναι διαθέσιμη στο ευρύ κοινό. Εξετάζονται επίσης θέματα σχετικά με την πρόσβαση σε εκπαιδευτικά προγράμματα μουσικοθεραπείας, την παρούσα στιγμή το μουσικοθεραπευτικό έργο είναι γενικά περιορισμένο λόγω των πολιτισμικών συνθηκών αλλά και της έλλειψης εκπαιδευμένων μουσικοθεραπευτών στα κατεχόμενα παλαιστινιακά εδάφη. Η αναφορά καταλήγει προσφέροντας σύντομες ματίες σε τρέχουσες πρωτοβουλίες και πιθανές εξελίξεις για το επάγγελμα.

ΛΕΞΕΙΣ ΚΛΕΙΔΙΑ
μουσικοθεραπεία, κατεχόμενα παλαιστινιακά εδάφη, άνοια, φροντίδα στο τέλος της ζωής [end-of-life care]