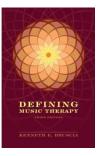


Book review

Defining Music Therapy (3rd Edition) (Kenneth Bruscia)

Reviewed by Theo Dimitriadis



Title: Defining Music Therapy (3rd Edition) | Author: Kenneth Bruscia | Publication year: 2014 | Publisher: Barcelona Publishers | Pages: 417 | ISBN: 978-1-937440572

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In this 3rd edition of *Defining Music Therapy* Bruscia offers the reader a "culmination of a 25 year project aimed at conceptualising music therapy in a critically inclusive and integrated way" (Barcelona Publishers, no date, no pagination).

Most music therapists will be familiar with Bruscia's previous attempts to define music therapy as a fusion of art, science and humanity. Contrary to the views of those who believe that "music therapy is too complicated or multidimensional to fit in a definition", Bruscia meets the challenge of "defining our own identity" (p. 19). The 2014 music therapy definition is a major update of the two previous ones and Bruscia describes in detail the process of finding the exact words that can define music therapy; a difficult, inspiring and utterly fascinating process that he shares step-by-step with the reader. It is clear from the first pages of the book that the author's main intention is not so much about finding a universally accepted definition: this might be rather utopic. Bruscia guides us in a carefully progressive manner to the process of (re)defining music therapy, through constructing, deconstructing and reconstructing definitions that

best match the core of current music therapy practice. This process reflects Bruscia's visions on research, influenced by phenomenology and/or constructivism.

As a senior theorist, researcher and a wellknown author in the field of music therapy, Bruscia collaborates here with an international panel of experts, the so-called "deconstruction party" (p. 27), including Brian Abrams, Brynjulf Stige, Susan Hadley, Randi Rolvsjord, Dorit Amir, Jane Edwards, Carolyn Kenny, Even Ruud, Rudy Garred, Jennifer Adrienne, Kenneth Aigen and Henk Smeijsters. The purpose of the 'deconstruction party' was to critically evaluate the 1998 definition according to one criterion: "to what extent did the [1998] definition include or exclude significant approaches to practice that have evolved in the interim years?" (p. 26).

The book consists of a detailed introduction, 29 main chapters, and an extensive section with notes. In the introduction Bruscia makes it clear that this is his last addition to the long project of defining music therapy: there will be (most probably) no fourth edition, not so much because "defining doesn't

seem to be on the top of popularity charts" (p. 13) but because Bruscia would like someone else to take up the challenge of "defining our field". The introduction ends with the presentation of the 1989 and 1998 definitions, along with useful background information on what has changed in the history of music therapy the last 30 years.

Chapters 1 to 3 refer to the need and challenges of defining something that seems 'indefinable': music therapy as a discipline, profession, art, science and humanity. The author describes the (qualitative) analysis of all known existing definitions (over 100 definitions were analysed for the 2014 'working definition' of Bruscia). The purpose of the analysis was to further illuminate the issues inherent in the task of defining music therapy, to aid in making revisions in the 1998 definition, and to clarify how the 2014 definition compares to existing ones.

In chapter 4 Bruscia presents the updated 2014 definition of music therapy:

"Music therapy is a reflexive process wherein the therapist helps the client to optimise the client's health, using various facets of music therapy experience and the relationships formed through them as the impetus for change. As defined here, music therapy is the professional practice component of the discipline, which informs and is informed by theory and research" (p.36).

The following chapters (5- 26) are dedicated to the extensive description and thorough analysis of each word/term of the above *working definition*. Here the author explains why and how he replaced certain terms from the 1998 definition¹, in order to better match the theoretical thinking as well as the professional identity of the current music therapy practitioner.

According to the author, music therapy is not any experience that happens to be positive, beneficial, or health-enhancing. It is a process based on health-focused interaction between client and therapist. Bruscia describes very eloquently the difference between beneficial experiences with music (i.e. musical activities) and music therapy: what turns out to be *therapeutic* does not qualify as *therapy*. Whether it is music as or *in* therapy, the therapist's main goal is to address the needs of the client through whatever medium seems most relevant or suitable, whether it is music, the relationship, or other therapeutic modalities.

The so-called 'deconstructive' analysis of Bruscia's definition contemplates the nature and language of theory and practice. It is valuable information not only for students or newly qualified practitioners, but also for the more experienced music therapists, researchers and, of course, theorists. In some ways it is beneficial for everyone to 'go back to the basics' and consider possible answers to questions such as: Who is the therapist and who is the client? Why is a therapist needed in order for therapy to take place? And why is the client-therapist relationship unidirectional and should lack the give-and-take character of most personal relationships with family and friends?

The author makes a very useful and deep theoretical analysis of the term 'helping' someone: up to which degree can someone help another person? A therapist should, by definition, have certain qualities such as to empathise with the client, to interact and motivate through giving him/her voice, or to guide and intervene when needed. But what are the limits of 'helping'? Bruscia very appropriately invites the reader to consider the thoughts of the English anthropologist and social scientist Gregory Bateson on the clienttherapist relationship:

"You can take a horse to the water, but cannot make him drink. The *drinking* is his business. But even if your horse is thirsty, he cannot drink unless you take him. The *taking* is your business" (Bateson 1980: 80).

Looking critically towards the 1989 and 1998 definitions, Bruscia explains why he (together with the panel of experts) replaced (or removed) certain words of the 'old' definitions with new, more appropriate ones. The purpose of those changes was to better match the essence of music therapy, together with the current theoretical and evidence-based thinking. Table 1 outlines the changes or corrections between the new and the previous definitions together with my summaries of the reasons for these changes.

One of the sections of the book that has received significant attention is the one about 'integral thinking' and 'integral practice' (chapters 27-29 and notes/appendix), which contains very interesting but always easy-to-follow not information on (amongst others) Bruscia's theoretical perspectives on different levels of practice, namely the auxiliary, the augmentative, the intensive and primary levels. These chapters are clearly more accessible to (post) graduate

¹ The 1998 working definition of Bruscia was: "Music therapy is a systematic process of intervention wherein the therapist helps the client to promote health, using experiences and the relationships that develop through them as dynamic forces of change" (Bruscia 1998: 20).

1989 definition	1998 definition	2014 definition	Reasons for change
	"[music therapy is a] systematic process of intervention'	"[music therapy is a] reflexive process"	The word intervention has been removed, as it was felt that it carried many unintended but undesirable connotations of power, hierarchy and client passivity. 'Systematic', a word that often implies a certain rigidity or inflexibility was replaced with 'reflexive', a term that is more inclusive than systematic, closer to the main things that therapists have to monitor while they work.
[the therapist helps the client to] "improve health"	[the therapist helps the client to] "promote health"	[the therapist helps the client to] "optimise the client's health"	The author here attempts to go beyond the vision of health as a dichotomous phenomenon (healthy versus sick), conceiving it as a "process of moving beyond the present way of being into increasingly richer and fuller ways" (p. 304).
	"using musical experiences and the relationships that develop through them"	"using various facets of music experience and the relationships formed through them as the impetus for change"	Bruscia divides musical experiences into four methods: improvising, re-creating, composing, and listening. Each of these methods is being scrutinised by the author and the team of scholars using the following facets of musical experience: physical, emotional, mental, relational, and spiritual.
	"as dynamic forces of change"	"as the impetus for change"	Dynamic was regarded as a word with various connotations, including 'psychodynamic', something that was not intended. The word impetus was chosen to convey how the various agents in music therapy both induce change and provide the space where change can take place.

Table 1: Changes between the new and the previous definitions

students and professionals interested in theory underpinning the practice. Chapters 1-27 are, according to the author, appropriate for undergraduate and graduate students.

The third edition of *Defining Music Therapy* is a great and useful addition to the existing music therapy literature, a carefully presented reflection of the process of trying to find the words to better describe the identity of the music therapist in the second decade of the 21st century, which might be significantly different from the one 30 years ago

There are, however, some flaws in this book, some of which the author himself points out in the preface as a "warning to the reader" (p. 18): the book contains a lot of repetitions, and tends to consist of 'clusters' of information rather than a flowing text. There are also significant differences between chapters that are easy-to-follow, for the absolute beginner, and chapters that contain specific jargons that are only suitable for advanced readers. On many occasions the reader might feel that the author gives a very elaborated academic lecture about the essence of music therapy to (at the same time) a group of absolute beginners and a group of PhD students. This makes the book an important reference point for everyone practising or interested in music therapy, but at the same time almost uncomfortable to read from the beginning to the end. The author gives hereby very useful information on how to use the book in the preface. It seems indeed that the book comes with the authors "instruction manual" (pp. 16-19).

Regardless of the above points, the 3rd edition of Bruscia's *Defining Music Therapy* is an important update to the previous editions and seems more internationally oriented, as well as consensus based. It is of great value that this edition benefits from the input of international scholars who provide perspective on a range of topics including culture, power and empowerment, and the therapeutic relationship. Bruscia's unique ability to deconstruct, analyse and reconstruct (theoretical) ideas might prove that it is possible to define something that seems vague and/or multifaceted as music therapy.

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