

Interview

The third edition of 'Music Therapy Research': An interview with Barbara Wheeler

Barbara Wheeler & Daphne Rickson

ABSTRACT

In this interview Professor Barbara Wheeler reflects on the development of the third edition of *Music Therapy Research* (Wheeler & Murphy 2016). Through a historical lens spanning more than two decades, she points to key and influential colleagues in the field and notes how each of the editions of the book has broadened to include a wider range of international perspectives and approaches to research. In explaining the important changes that she and her co-editor Kathleen Murphy have made in the third edition, she signposts current emergent trends and contemporary issues in the significantly changing landscape of music therapy research.

KEYWORDS

music therapy research, quantitative research, qualitative research, objectivist research, interpretivist research

Barbara L. Wheeler, PhD, MT-BC, holds the designation of Professor Emeritus from Montclair State University, where she taught from 1975-2000. She initiated the music therapy programme at the University of Louisville in 2000, retiring in 2011. She presents and teaches in the US and internationally with current faculty appointments at the University of Applied Sciences Würzburg Schweinfurt, Department of Social Studies, Würzburg, Germany; and Karol Szymanowski Academy of Music, Katowice, Poland. She has been an active clinician throughout her career and worked with a variety of clientele. Barbara edited *Music Therapy Handbook* (2015) and the three editions of *Music Therapy Research* (1995, 2005, 2016) and is co-author of the two editions of *Clinical Training Guide for the Student Music Therapist* (2005, in press). She is also the author of numerous other articles and chapters. She is a past president of the American Music Therapy Association (AMTA) and was Interview Co-editor for *Voices: A World Forum for Music Therapy*. Barbara received an Award of Merit from AMTA in 2016.

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Daphne Rickson is a senior lecturer on the Master of Music Therapy programme at Te Koki, the New Zealand School of Music, Victoria University of Wellington. She has practised music therapy with a range of populations but particularly with children and adolescents in schools. Her recent research projects have involved critical analysis of the concept of disability and investigation into music as an inclusive resource; including participatory action research with young people who have intellectual disability. She is currently investigating singing for wellbeing with teachers and children in a Christchurch school severely affected by earthquakes. She is the author of numerous journal articles, and is co-author of the 2014 book 'Creating Music Cultures in the Schools: A Perspective from Community Music Therapy'. Daphne is an associate editor of Approaches: An Interdisciplinary Journal of Music Therapy.

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Daphne: Firstly, congratulations to you, Barbara, and to Associate Editor Kathy Murphy, on the publication of the third edition of *Music Therapy Research!* It's been a long journey since you published the first edition in 1995 entitled *Music Therapy Research, Quantitative and Qualitative Perspectives.* Shall we start at the beginning?

Barbara: Yes. Around 1991 Ken Bruscia. mv colleague and friend, called me to suggest music therapy needed a research methodology book and that I should be the person to edit it. He has a very good perspective on what music therapy needs and that's why he's done so well with Barcelona Publishers. He knew that I could do it and also thought it would help people to place me - taking advantage of some of my skills and knowledge that people weren't aware of - to become known as someone who does "that research stuff". My PhD was in educational psychology which was really a research-focused degree so it was a good thing for me to be doing. I don't think at that time I knew anything about interpretivist (qualitative) research it was just emerging - but I was trained well as an objectivist (quantitative)1 researcher and he was correct that I could do it although I've learnt a huge amount along the way! And it is now the way people know me, which has been great for me in the final years of my career.

Daphne: What did this opportunity mean to you as a practitioner?

Barbara: I've always believed that research is important for music therapy practitioners. One of my main reasons for getting the Degree in Educational Psychology was that I wanted to be able to contribute to music therapy research which I felt, way back in the early 1980s, was not very relevant to what clinicians did. A lot of the research was with people who had 'mental retardation' as it was then called, and looked at their responses to reinforcement such as the amount of eye contact they might give... and it had very little to do with what I saw clinicians doing or what I did as a clinician. And so from very early times, I've had a feeling that research should apply more to clinical work than it does. One of my early objectivist studies - which was not a good study! - was at various interventions that music looking

therapists did in psychiatric work and trying to see the effects of the different interventions. Looking back it was very naive to think we could even begin to figure that out in that way but I was trying because that was relevant to what clinicians were doing!

When I left the University of Louisville in 2011 when I thought I was actually retiring - I decided not to do any more clinical work. And that's probably the only thing I actually did stop at that point! But in general, as a clinician, I'm aware of the research and the importance of the research for informing what we do as clinicians. I spent some time recently with Lori Gooding from Florida State University and I was so impressed that with everything she talked about she would add "and the data show this..." and "the data show that..." and "therefore we did it this way". I don't rely on the data in that way but I really admire that. I am a firm believer that we have to do things that are grounded in what we know from research. And I would like to emphasise that that is not always objectivist research! I'm sure you're familiar with Brian Abrams' (2010) article in the Journal of Music Therapy in which he talks about Wilber's 'Four Quadrants' and how music therapy practice and research are viewed differently in these four quadrants. I think that's a brilliant article.

Daphne: Things have certainly changed a lot since the first edition was published!

Barbara: Yes, in many ways. When we were putting together the first edition of *Music Therapy* Research that was published in 1995, I was aware the whole time that it was almost a miracle that the book was going to happen because we were asking people to write about things they hadn't written about and trying to pull so many things together. That information had not been 'put out there' in music therapy. We were really pulling things together and only used US authors. The reviewers from the United Kingdom correctly commented that this was too bad that it only had US authors yet I remember thinking at the time that it never could have happened any differently, it was so difficult to bring the material together that first time. The text included a section on qualitative research with two chapters by Kenneth Aigen, one of which was an and another which overview, was titled 'Interpretational Research' and covered several types of qualitative research that involved interpretation; as well as four chapters by Ken Bruscia. The first of those was about 'Topics, Phenomena, and Purposes in Qualitative

¹ 'Objectivist' is used in the third edition of *Music Therapy Research* to refer to what is generally known as quantitative research, and 'interpretivist' is used to refer to what is generally known as qualitative research. These terms are used to indicate a broadening of the understanding of ways of classifying research.

Research', and the other three described various stages in the process of doing qualitative research. And there was a chapter on phenomenological research that Michele Forinash wrote. Those chapters were important. But I don't want to forget other people were writing about research also, perhaps not quite at the same time but shortly afterwards – Henk Smeijsters, David Aldridge, Gary Ansdell and Mercédès Pavlicevic – all published books on research. And those added to our music therapy literature on research and research methodology.

Daphne: And so the second edition in 2005 incorporated more international perspectives?

Barbara: By 2005 we were absolutely ready for a more international group of authors! The second edition of Music Therapy Research not only reflected the fact that we had the first edition and could build from that but also at that point we had a much more international research community that was communicating. There were obvious people outside of the US to invite contributions from, like Brynjulf Stige - I couldn't imagine not asking him to write the two chapters that he wrote (participatory action research, and ethnographic research). There are many other people from outside of the US included in that second edition - Dorit Amir, Henk Smeijsters, Trygve Aasgaard, Denise Grocke, Eckhard Weymann, Rosemarie Tüpker - those are just the ones from outside of the US who wrote chapters on designs, of course there were many wonderful people from the US also and people from outside of the US who wrote chapters in other sections of the book.

International perspectives are important because across countries, research - even what we think of as 'research' - is quite diverse. People will describe their research to me sometimes and it's fascinating but I can't even understand how they think they're finding out what they think they're finding out! I'm not saying they're wrong but they have a very different way of thinking than I do. I've presented in most parts of the world at this point and I always make it clear that what we do clinically is not research. We really need to make some distinctions between what we do clinically, what we do in terms of good observation, and what we do when it's actually research. I'm not sure where the line is (sometimes it seems clearer than at other times), but I don't think it's all the same!

And there are broad differences in the way people approach research too. In New Zealand, for example, your participatory, collaborative, action research has been really important². Your work, and the work you have done with Katrina McFerran from Australia, has influenced what others see as legitimate research. In the US there's a big emphasis now on randomised controlled trials (RCTs), and on many interpretivist kinds of research, particularly phenomenological. I think there are trends in various countries, probably based on two things: partly on what people do clinically but partly on what some of the influential researchers have done. I point to you, for example. The research you have done, the action research³, has really made a difference in how people think about not only research but how they think about the areas that you research.

Daphne: In what other ways was the second edition different to the first?

Barbara: I would like to think that some of the changes had to do with what people were able to figure out from the first edition. As well as the international contributions there was expansion in the qualitative sections. Twelve chapters were included in the second edition, compared to three that were actually on designs in the first edition. And I think those chapters helped to define more of what we do! Prior to that, and unfortunately still a little bit, people would say "I'm doing a qualitative study". But it's not enough to say that. For years we've suggested you need to say what interpretivist methodology you are using and in saying that you're obliged to learn more about that methodology and explain more of what you are doing. And some things can be hard to define or describe! As an editor I had to work with the authors to make sure that their chapters were clearly differentiated. We tried in the second, and now in the third edition Kathy Murphy and I worked to have a lot of research examples. When you consult an actual research study as an example you really have to examine whether it meets the criteria for whatever design you're looking at. And that's where you get into "it doesn't quite use this design... but it's still an example..." or "it's this type of design, but it really looks more like that (other) design...". But I hope in each edition we get more and more refined in how we look at these things.

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² See Rickson et al. (2014) and Rickson and McFerran Skewes (2014).

³ See Rickson (2012).

Daphne: And as we are refining our methodologies, the music therapy field is expanding!

Barbara: So the third edition of Music Therapy Research has many more chapters. There have been huge increases in both the 'objectivist' and 'interpretivist' sections (which in previous editions 'quantitative' and 'qualitative' respectively). We decided on these terms for a number of reasons. They are terms that are used in the broader literature (e.g. O'Callaghan 2009; Schwandt 1994) – we just didn't come up with them on our own - and we thought that they made some of the bigger issues clearer. It's easy to think that you can talk about objectivist and interpretivist (methodologies) and that they're starkly different one uses numbers and the other doesn't. But it's so much more complex than that. And so after much discussion those are the terms we decided to use. I think it is consistent with other writing although I'm not suggesting in general around the research world that people are going to start talking about objectivist and interpretivist research. But I hope that music therapists will find the changes useful while still being able to talk with others about 'quantitative' and 'qualitative' methodologies. And so the book has a lot of changes including information on many new designs.

Daphne: What led to the decision to have a coeditor for the third edition?

Barbara: Ken Bruscia chose not to be as involved in the third edition as he had been in the first two. And when I realised he was not going to help me in the same way as he had with the previous books (where he had an enormous impact), I didn't think I could do it alone! Kathy was my choice. She's a fabulous researcher and scholar who really wants to get to the heart of things. We work well together and we like each other. So we worked together on everything although we had different roles. Although I have overall responsibility as editor, in many cases we split duties, with one of us writing and the other one looking at it. In some cases we did the same thing but with different chapters. It was a very, very nice process working with her. She shares responsibility for the good things as well as the problems of the book I think, because we did this together!

But Ken still had a large role particularly at the beginning in the planning stages, then again near the end. Towards the end of the process we decided to have an introductory book, which is just a portion of the big book. It largely leaves out all the design chapters. Ken wrote three chapters for the introductory book — one each of 'objectivist', 'interpretivist', and 'other' methods. In working through all that, in an effort to ensure it made sense, we reorganised the book. The microanalysis chapter for example has been divided — there is now one on objectivist microanalysis and one on interpretive microanalysis. But they're in a third section of the book called 'other' designs that includes designs that did not fit easily into the objectivist and interpretivist sections. So a number of things changed because they made sense organisationally.

Daphne: What advice would you have for music therapy researchers moving forward?

Barbara: One of the most important things for contemporary music therapy researchers moving forward is the need for continued quality. We see in the objectivist Cochrane Reviews that much of the music therapy research that they find is judged to be of "not good enough quality", to have "high possibility of bias" and so on. And this has helped our research because many more people are now aware that we just can't do some of these little designs that just don't work very well. If we're doing RCTs let's make the RCTs really decent! One of the chapters in the book that I ended up spending a lot of time on was the 'Crossover Design' chapter. And one of the things we learnt when doing that chapter with Darcy DeLoach was that most of the music therapy designs don't use a 'washout' period as is required for that design. If there is no washout period between the time you do one treatment and the time when you cross it over to another control, you can't tell if there are real results or just carryover effects. So a lot of our research that uses crossover designs really doesn't work according to the standard. Also, many RCTs have not used true random assignment to groups. So I think that continued improvement of quality is really important.

For interpretivist research I think we need to be surer about our designs, so if we go to another design – a mixed methods research study of any kind, whether it's interpretivist or objectivist – we need to be really clear of what we were doing initially, and then what we are changing to. I sometimes call it 'mixed up methods' when I see people aren't clear! They just kind of go back and forth. Ken Bruscia has talked for decades about the need for epistemological clarity in what we do and that's also emphasised in the book. Interpretivist

research needs to be better and better in terms of using the designs well and getting the most you can out of it. We've included in the book a bunch of interpretivist designs that have not been done much in music therapy – some of the critical approaches which involve analysis of text for example. I realised music therapists have concentrated on phenomenology and grounded theory because that helps us find out what we are interested in. But there are whole areas of research - feminist research, for example (included in this book as part of the interpretivist section, in the chapter titled 'Critical Inquiries: Feminist Perspectives and Transformative Research') - which is really important, and other disciplines have used them. I'm hopeful that this book will prod people to do research in some of those other areas also.

Daphne: A final word?

Barbara: I've done objectivist and interpretivist research using a few different designs in each of those areas, including a bit of historical research. I like to think my main contribution is in helping other people to learn and think about research. Obviously I couldn't talk and write about research if I didn't have some experience in doing research myself but I think my contribution has been to help people to understand and think about it, and I continue to do this as I write and present.

Daphne: Thank you, Barbara, and congratulations again on this super contribution to the music therapy profession – a resource that will have an important influence on music therapy research, and practice.

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