

## ARTICLE

# 'Sewing together': An idiographic study of a music therapist's experiences of a group at a special school for children and young people with severe and complex special educational needs

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### ABSTRACT

This research was commissioned by a school in London which provides for children and young people aged 2 to 16 with a wide range of learning difficulties. This single-participant study uses video annotation, video elicitation interview and interpretative phenomenological analysis (IPA) to explore perceptions of processes in a music therapy group, from the point of view of a music therapist. Two tables of annotations present a description of events in each video clip in a timeline. The IPA interview analysis produced 25 emergent themes, grouped into four superordinate themes ('Balancing diverse needs'; 'Spontaneity'; 'Therapists' musical stance'; 'Group dynamics'). Parallels are drawn with other music therapy groups described in the literature and with Foulkes' group analytic psychotherapy. The study elucidates an approach to group music therapy which provides a space for spontaneous and meaningful interaction, both through music and other modalities.

### KEYWORDS

group music therapy,  
interpretative  
phenomenological  
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learning disability

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### INTRODUCTION

#### Background for the study

At the 16th World Congress of Music Therapy, Gary Ansdell (2020) called for the exploration of 'what's inside the black box' in music therapy. Identifying a tendency for research to focus on inputs and outcomes, but ignore what happens in between, he made the case for diving into the 'messy' details

of music therapy practice. Rather than using the 'spotlight' of intervention research, where music therapy might be identified as 'doing something,' but with little exploration of what that 'something' might be, he made a plea for a focus on process, on what happens in between the 'input' of beginning music therapy and the 'output' of specific changes in health or behaviour. This study takes one approach to embracing this idea. The complexity and individuality of music therapy has been identified by DeNora (2006) as being problematic for certain kinds of research (for example randomised control trials) and she has advocated for research methodologies which respect the unique quality of music therapy in each setting and local context, where there can be a "focus on the music therapist's craft as the active ingredient in music therapeutic effectiveness" (DeNora, 2006, p. 90).

While the authors acknowledge the need for more focus on service user/family perspectives in music therapy research, and have indeed conducted recent studies which contribute to this (Annesley et al. 2020a, 2020b), the value of exploring the music therapist's craft, from the clinician's perspective is also, in our view, worthy of further exploration, especially where there is potential for informing practice about new ways of approaching specific client cohorts. Simon Procter, in a recent podcast interview (Annesley, 2019), drew attention to the neglect of 'craft' in the profession in favour of theory. The authors of this study attempt to make links between both, using the lens of the experienced clinician to elucidate practice in a singular context.

## Relevant literature

The detailed exploration of interactive processes in music therapy can usefully inform practice. Such exploration can be achieved through microanalysis. Microanalysis in music therapy encompasses a well-established range of methods and can be incorporated into both quantitative and qualitative methodologies (Wosch & Wigram, 2007). Where improvisation is a feature of therapeutic work, it is impossible to predict in advance when 'important' events in a therapeutic process will take place. It may be difficult, during the actual experience of therapy, to be fully aware of the multiplicity of interactions, and to judge their significance.

Exploring the relationship between therapeutic processes on macro and micro levels has been shown to deepen understanding of therapeutic work. Findings in previous studies have identified the notion of 'pivotal' or 'significant' moments as being informative of processes in music therapy (Ansdell et al., 2010; Gavrielidou & Odell-Miller, 2017; Grocke, 1999). This concept can be linked to Stern's 'present moment' in psychotherapy (2004), where discrete experiences are identified as drivers of change in a therapeutic process. In music therapy, specific processes can be identified which contribute to practice, and may influence clinical choices made by the therapist(s) (Amir, 1993; Ansdell et al., 2010; Grocke, 1999; Trondalen, 2003; Ullsten et al., 2017).

This type of research can focus on therapeutic processes or mechanisms, whereby change is enabled (Ansdell et al., 2010). Trondalen (2003) identified the importance of self-listening in work with a client suffering from anorexia. This involved three music therapists listening in detail to musical excerpts, and employing triangulation to identify agreed 'significant moments' in musical interactions. It was found that the music therapy client "got in contact with the positive feelings she experienced during the active improvisation" (p. 11). Gavrielidou and Odell-Miller, in a study of music therapy with a man with a diagnosis of schizophrenia, found that "the patient showed emotional change...after a

pivotal moment" (2017, p. 56). This involved key observations about therapeutic technique, for example, that "during pivotal moments, the therapists seem to hold their patient's state by containment, reverie and intuition" (p. 56).

Studies which focus on the experiences of just one or two people can be helpful in providing a focused perspective on therapeutic processes. The representation of the complexities of individual experience can provide a higher level of detail than is possible even in qualitative studies with several participants. This has been demonstrated by Flower (2014), who used video recordings from sessions to explore the responses of the therapist and a parent, where the parent was participating in their child's music therapy. The study revealed that "the music therapy trio of child, parent, and therapist is experienced by the parent and therapist as a fluid, dynamic web of musical and interpersonal relationships" (p. 843). Sokira (2007) embarked on an autoethnographic process in exploring the responses of clients with a diagnosis of Rett syndrome to music therapy. This study embraced the complexity of therapist-client interactions and used reflective writing as a tool for recording this complexity. Sokira notes that "my experience of using self-inquiry has provided me with a deeper insight that has facilitated my self-awareness as a therapist" (p.128), indicating the benefits of conducting this kind of research for deepening understanding of therapeutic processes.

## Aims of the study

The current study aimed to explore musical and communicative processes in music therapy in a group for young people from a specialist provision with learning disabilities, from the perspective of one of the music therapists facilitating the sessions. The following research question was addressed: How does a music therapist experience and describe therapeutic processes and 'meaningful moments' in a music therapy group with young people with learning disabilities?

The focus here was on the experiences of the lead music therapist, Nicolette O'Neill (referred to throughout as 'Nicky'), in order to understand more about her experiences of group processes, moment-to-moment.

## METHOD

### Settings and participants

This study was commissioned by a special school in London, which provides for children and young people aged 2 to 16 with a wide range of learning difficulties, including Autistic Spectrum Disorder (ASD), and complex learning and medical needs. Music therapy has been a well-established service within the school for over 20 years. This NHS service provides music therapy for children and young people across the school's age range. Research into intervention, impact and process is integrated into the commissioning of the service, and this project was designed in consultation with the headteacher, and with the lead music therapist, Nicky (also the second author of this article).

### *The Jammin' Group*

The focus of the authors was to explore processes in an established music therapy group. The Jammin' Group had been running for four years since the beginning of an expansion of the school's

age range into a new secondary school provision. The purpose of the group was to align itself with the philosophy of the secondary provision, focusing on independence and development of musical and social skills in a musical environment. The group was normally facilitated by two music therapists, Nicky and Anthony. The group was 'slow-open' (Foulkes, 1983), meaning that membership was curated by the music therapists, based on referrals and on limited numbers. In slow-open groups, new members can be added to a group, but group membership tends to be fairly consistent over time, with any changes taking place gradually. In this case there was a core membership of 3-4 young people who were musically motivated and able to socially relate and express themselves through free improvisation, both vocal and instrumental. They formed a stable core group since the group's inception, into which were added two or three additional members on a termly or bi-termly basis.

The Jammin' Group was run with an open, improvisatory approach, where events in each session were client-led, rather than pre-determined by the therapists. Parallels could be drawn between this model and group analytic psychotherapy approaches in both music therapy and talking groups (Davies et al., 2014; Foulkes, 1983). The group members also gave occasional performances, which might link it to Community Music Therapy, which addresses "mechanisms of exclusion and inclusion in broader contexts and requires a more socially engaged practice" (Stige et al., 2017, p. 9). Exploring this wider context is beyond the scope of the current study, which confines itself to interpretation of the details of events within the music therapy sessions.

## Procedure<sup>1</sup>

This was a qualitative idiographic study with n=1. Data collection took the form of video annotation by the principal investigator (PI)/first author and video-elicited interview. Video-elicited interview is a method of data collection in which participants are invited to respond to video footage, encouraging them to reflect on moments and personal experiences of interactions (Henry et al., 2011) and has been recently used effectively as a research method in music therapy by Flower (2014), which was part of the motivation for the choice of method in this study. The interview was analysed using interpretative phenomenological analysis (IPA). This method of analysis is widely recognised as being appropriate for exploring life experiences (Smith & Osborne, 2015).

### *Stages of the study*

The study consisted of the following stages:

1. Repeated viewing of video excerpts
2. Tabular annotation of video excerpts
3. Interview with participant (digitally audio recorded)
4. Transcription of interview in full
5. Interpretative phenomenological analysis of interview transcription
6. Key quotes added to tabular annotation

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<sup>1</sup> From here on, for clarity, 'I' will be used for the first author, and the second author, will be referred to as 'Nicky'.

### *Ethical considerations*

The study was approved by the NHS Trust's Research and Development department and identified as a 'service evaluation,' meaning that it was not required to be approved by an NHS Ethics Committee. Group members (GMs) in the video excerpts were not defined as participants. Approval had been sought prior to the study for video recordings to be used for research purposes. All GMs' names have been anonymised for the purposes of this summary report.

Nicky was sent a participant information sheet (PIS) and consent form prior to the interview. As gatekeeper and second author this included a waiver of confidentiality. Despite her close involvement with setting up the study, I made it clear that, just as with any research participant, she had the right to withdraw from the interview.

### *Selection of participant / reflexivity statement*

This was a single-participant study. The participant was Nicky, the lead music therapist at the school which commissioned the research. While there is precedent for including participants as co-researchers (Given, 2008), we decided to delineate clear boundaries in the process of data collection and analysis, positioning Nicky clearly as participant, rather than researcher, once data collection was underway. It was in discussions with her as we were planning the project that the idea crystallised. Since I do not work with Nicky in this setting, it struck me in our conversations how much insider knowledge and awareness she had of the processes of the group, and that finding a way to capture this should be the priority of the project. Delineating our roles in this way enabled Nicky to focus exclusively on her experience of therapeutic practice. The precedent of Flower's (2014) study, where the music therapist and parent are participants in the study, provided a helpful model. It is due to her close involvement with the set up and design of the study that Nicky is named as second author.

As the researcher, it is important to acknowledge my position in relation both to Nicky and to the setting. I did not work as a music therapist at the school which was the focus of the study, but I was a member of the same NHS music therapy team as the participant. Thus, we were likely to share some similar views in relation to theory and practice. I was also asked by her to conduct the study. While the question of 'bias' can be argued to be moot in qualitative research (Galdas, 2017; Stige et al., 2009), the importance of acknowledging a particular subjective position is essential. In this case, the rationale for the study includes an assumption of 'good clinical practice.' This study did not attempt to critique the practice of the music therapists or the service, but to understand more about Nicky's perceptions, experiences and rationale with regard to the work.

### *Video selection*

Video excerpts were chosen by Nicky as being representative of key moments in the group's therapeutic process. Ansdell et al. (2010) advocate the exploration of events in a music therapy session at different 'degrees of magnification,' where the '1st degree' might be a segment of approximately four minutes. The two excerpts chosen here were 4m22s and 3m25s, corresponding approximately to this '1st degree' magnification.

### *Video annotation*

Through close watching of the video clips I constructed a table for each video clip, describing events on a timeline using free text. The table (see Appendix A) followed a similar procedure to that of Pavlicevic (2007), using the tabular format to track parallel events on a timeline. Following the interview and analysis (see below), I selected what I perceived to be key quotes and added these to the tables as a way of linking the plain description of events to the reflections of the participant. The table is intended to inform and support the findings from the interview analysis.

### *Video-elicited Interview*

An interview was conducted with Nicky referring to two video clips. Since she had selected the clips herself, Nicky was familiar with the material prior to the interview. The interview followed a semi-structured design, using a topic guide. The video excerpts were used as material for discussion. For each of the two excerpts, the interview was divided into two sections, as follows:

1. Questions about each whole video segment, prior to watching
  - What is important about this section?
  - How would you describe this section as a narrative? Or what happens during this section?
  - Who is your main focus during this section?
  - What is happening in the music throughout this section?

During the replaying of the video, Nicky was invited to stop the video as frequently as desired, and to comment on events just viewed. Prompt questions were used here to elicit further reflections.

2. Prompt questions during replay
  - What is happening here?
  - What is your emotional response to this?
  - Where is the focus at this point in time? (i.e. which person/people/interaction?)
  - What is important about this moment?

### *Transcription of interview*

The interview was transcribed in full. The transcription was then sent to Nicky to check for accuracy, prior to analysis of the data.

### *Interpretative phenomenological analysis*

Analysis took place in the following stages:

1. Initial notes
2. Identification of 'emergent themes'
3. Emergent themes grouped into 'superordinate themes'

The analysis software NVivo12 was used for the purposes of coding (see Table 1 for a summary of themes). This was an iterative process, whereby a large number of initial notes were produced, which were developed into a group of emergent themes. This process involved revisiting the original

transcription and, as the analysis developed, revising the emergent themes and considering each theme's relationship to the dataset as a whole. Notes were made throughout the process in order to maintain an overview of the data.

Superordinate themes	Emergent themes
Balancing diverse needs	<ul style="list-style-type: none"> <li>• Making sense of lived experience</li> <li>• Focus on an individual GM</li> <li>• Monitoring GMs' needs</li> <li>• GM struggling to take part</li> <li>• Considering the specific needs of all GMs</li> <li>• Diversity of needs</li> <li>• Accommodating different levels of social awareness</li> </ul>
Spontaneity	<ul style="list-style-type: none"> <li>• GMs' musical initiative</li> <li>• Trusting the GMs' process</li> <li>• GMs developing autonomy</li> <li>• Spontaneous connection viewed as positive</li> </ul>
Therapists' musical stance	<ul style="list-style-type: none"> <li>• Verbal communication</li> <li>• Encouraging musical connections</li> <li>• GMs' awareness of therapists</li> <li>• 'Dance' between therapists</li> <li>• Therapist's musical identity as part of the work</li> <li>• Guiding the music</li> <li>• Encouragement to participate musically</li> <li>• Therapist applying interventions</li> </ul>
Group dynamics	<ul style="list-style-type: none"> <li>• Making sense of lived experience</li> <li>• Flexible roles within the group</li> <li>• Positive interactions in the group</li> <li>• Understanding between GMs</li> <li>• In the groove</li> <li>• Group processes</li> </ul>

**Table 1:** Superordinate themes and emergent themes

## RESULTS

### Findings from the interview

I described 25 emergent themes through the IPA coding process. These were then grouped into four superordinate themes.

- Balancing diverse needs
- Spontaneity
- Therapists' musical stance
- Group dynamics

I will take each of the superordinate themes in turn and elucidate them with reference to the transcription. Emergent themes will be identified within the text using italics. Group members (GMs)

are anonymised using the codes P1-4 to identify different individuals.

### *Balancing diverse needs*

Nicky referred to the various needs of the young people in the group, and the need to find a balance between them, so that all GMs were able to have a positive experience in the group. This involved giving them opportunities for Making sense of lived experience. 'Inquisitiveness' was accepted and allowed by the therapists, enabling the GMs to ask questions about each other.

You've got [P3] commenting on [P2]. We've been singing to everybody and then she starts really looking at her and asking these questions about her. Why does she look like this? So, commenting on her differences.

This conversation between the GM and the therapists links to another emergent theme, that of Accommodating different levels of social awareness. There was acknowledgement that some of the inquisitiveness might be problematic in certain contexts, but that the group allowed space for curiosity to be expressed without embarrassment. Nicky stated that

...this is a really important social, emotional experience that's happening in this group, which is the opportunity to enquire in real detail about difference ... in society, commenting on someone who looks quite different, might not be socially acceptable, but in this setting it's another opportunity.

Inquisitiveness was framed positively here, and was identified as an important feature of the group. The use of the word 'opportunity' showed Nicky adopting a stance where things were allowed to happen where they were perceived by the therapists to be beneficial.

There was some discussion of how to meet the needs of individual GMs, for example when they required special attention for some reason. Where there was a client struggling to take part, it was necessary to find ways of allowing them to withdraw when needed, while at the same time encouraging them back into group activity once they felt able. This was thought about in the context of the group as a whole, where 'a bit of an imbalance in the mood in the group' could be created through one GM feeling overwhelmed and retreating from interaction. Sometimes, Considering the specific needs of all GMs required attention to mobility or health limitations. Nicky described the following example:

It's quite specific what instrument we give her, that she can actually access. She's also quite tactile-defensive so you have to be quite canny in your positioning of the wind chimes, so not too invasive.

This consideration of 'access' demonstrates the choosing of a specific instrument in order to facilitate the participation of a specific GM. A *diversity of needs* was described, where it became part of the therapists' roles to develop the capacity to multi-task, and to maintain awareness of the range of needs in the group. This was described as 'That ability to carry on playing in music, watching everybody else and noticing whether somebody's about to trip up.' This was about having to think about lots of different things at once, all the time, and make decisions moment-to-moment (which might sometimes be to do nothing).



Sometimes the moment-to-moment decision-making, including *monitoring GMs' needs*, was understood by Nicky to require clear intervention, for example by finding ways to encourage GMs to interact.

Do I need to sew these two together, or is there some interaction happening between two people that I need to comment on or is it working by itself?

The following statement provides a clear summary of her experience of maintaining an active role throughout, by considering a range of interventions.

Constantly as a therapist I'm thinking, what opportunities are needed? What can I amplify? Do they need an instrument at this point? Do we need to swap round? Do they need a microphone? Does someone need a bit more emotional support or encouragement? Do we need to quieten everybody else down to bring a solo spot up?

The variety here is striking, with a multi-layered, musical/extramusical, and emotionally-oriented range of considerations to be borne in mind consistently.

### *Spontaneity*

The importance of encouraging and allowing spontaneity came through as a core principle in Nicky's therapeutic stance. This appeared to be a strongly held value in relation to the work with this group, where the individuality and capacity for personal expression was warmly supported for all of the GMs.

Examples were given of GMs' musical initiative being manifested, either as individuals or as part of a group process. This might have involved, for example, a group member coming forward to take a more active role, as described here:

So [P1]'s getting a little bit fed up with this maybe quieter pulse and feeling. So, then you see him come forward and then he starts playing. So, he's been slightly zoned out, as you might term it, but he then comes back to drumming at that point.

Equally, there were instances described of sensitive musical intimacy, expressed within the group and between members of the group simultaneously.

And then you've got this line underneath that again this really sensitive, I think of this work as [a] very sensitive and intimate little circle that's going on. But very sensitive 'Ah, ah, aah' underneath, coming from [P4]

The description of a 'line' referred to a melodic line played by one of the GMs, experienced by Nicky as having a supportive intention towards other GMs.

Spontaneity appeared to include a level of trust, where Nicky would be *trusting the GMs' process*, allowing events to unfold, rather than being in direct control. This was in part a trust of specifically musical processes, where 'it's music that's holding it,' 'it' being the various social and musical interactions between the group members, the 'group feeling,' perhaps. Part of this was also about the

*GMs developing autonomy*, and various instances are described where a GM takes the musical or social initiative. On one occasion, she described how one GM was better able than her to improvise some lines of a song.

Perfect! Perfect scanning. It shows her level of attunement. She's listening to what I'm saying, and then she takes it into- I'm not saying she understands the word 'scan' but she can hear clearly that I wasn't able to. So, she then takes on the melody herself. She's confident, she's emphatic about what she does.

As well as clearly describing her experience of the GM's actions, Nicky also displayed admiration for her skill here, perhaps showing a degree of surprise at how well this GM was able to achieve what she herself had struggled to do in that moment.

### *Therapists' musical stance*

The attention to musical detail was apparent in numerous statements made in the interview. Musical interactions are explored as a dynamic process, where ideas developed between group members were facilitated in various ways by both therapists. Nicky experienced this as a dance between therapists, which could be interpreted as a partially metaphorical statement. It was also framed as essential, since she stated that the 'dance...has to happen between you as therapists, as co-therapists.' This included some flexibility of musical roles. She described the following:

I might say to Anthony, 'Can you take this over?' if I get a bit stuck, so we can use each other as refreshers.

The therapists were experienced as *guiding the music* at times. This could include active involvement, or making decisions to hold back.

So we're getting into a different groove now when Anthony's filling more, would you call it? You'll notice in this whole section, I've stood back, so I'm not playing the keyboard, so there'll be different orchestrations at different points in the session, which keeps it fresh and has therapeutic intent.

The reference to 'orchestrations' perhaps demonstrated a compositional perspective, where decisions about instrumentation affected the music as a whole. It seemed to imply an aesthetic element, where keeping the music 'fresh' had a positive effect on Nicky's musical motivation, and perhaps that of the whole group.

The therapists were described as providing both *encouragement to participate musically* and as *encouraging musical connections*, both between GMs, and between GMs and therapists. Here the former is framed as taking a gesture 'into' music:

So [P3] waves. [P3]'s waving at her then Anthony's leaning towards her. So then I pick up that vocally and I go (sings) 'Hello [P2],' just taking anything possible into music.

With regard to musical connection, a reference to 'sewing together' the music of different GMs showed an intention to facilitate connections. Likewise:

So I take it into a melodic line and there's real attention. [P2] is looking at me.  
[P3]'s looking over at me. [P4]'s got his head down a little bit.

This description implied an experience of cause-and-effect, where the melody brought the GMs' attention onto Nicky, enabling her to bring the group together. GMs' awareness of therapists was broadly described as a positive sign.

[P3] smiles as Nicky says that he's not feeling well, so her understanding and appreciation of him...as a person.

The language used here seemed to indicate something positive about this GM's personal awareness of Nicky, demonstrating the importance of relationship in these musical interactions. (Here Nicky 'says' that he is not feeling well in the context of an improvised song.)

### *Group dynamics*

Throughout the interview there were many references to musical, social and interpersonal group processes. Rhythm was emphasised as a modality for musical connection, described on some occasions as the therapists and GMs being *in the groove*.

It's got quite a strong melodic line but it's also got that lovely lilt that you have with a waltz and they're obviously all really in this groove.

The waltz that features for a large segment of Excerpt 2 is referred to here as something that the GMs are all 'in' together, and there are several other references to individuals being connected to the group by rhythmic musical processes. This could be expressed through sound or movement, such as where Nicky described the following moment:

[P1] is enjoying this being appreciated, people singing to him, and he's got a bit of a groove in his body going on.

Here the movement might be seen to affirm the enjoyment of connection, so that the rhythmic feeling is also expressive of a feeling of being noticed by other GMs. *Group processes* were generally discussed in the context of making group connections in some way, for example where 'acknowledging everybody in the group' was described as an important part of the therapists' intention. Nicky also described 'little cells of focus in group work,' where subgroups were formed temporarily within the whole group and focused interactions took place.

Nicky described *flexible roles within the group*, exemplified vividly in this segment:

Anthony and [P4] have now taken over the lead momentum. [P3]'s stepping back a bit. This is what I love. I love the different coming-to-the-fore of the solo spot, or the main ones that are being heard. So, both of them have raised their volume

and they're using their voice. [P3]'s just sitting back for a moment and then you've got P2 coming in instrumentally.

The exuberance of the language here displays Nicky's emotional response to the interplay between the different personalities in the group, and how their roles shift in relation to one another over time, so that sometimes one person was taking the attention, and sometimes another. This fluidity would appear to have been an important part of Nicky's experience of the group, suggesting that it may have had therapeutic significance.

*Positive interactions in the group* were described throughout the narrative. These took the form of moments where GMs showed their enjoyment of a situation, sometimes involuntarily. For example, she described a moment when '[P4] can't help but laugh at [P3]'s suggestion even though [P4]'s not feeling that great and doesn't really want to laugh at [P3] I think.' Importance was also attached to *understanding between GMs*, moments of their being aware of one another in some way.

[P2]'s smiling and [P3]'s I think noticing it. There's [inquisitiveness] happening from [P3] here, so [P3] doesn't need to comment on it. [P3]'s appreciating it.

The experience of this moment as an appreciation of one GM by another shows Nicky's position that the group is working therapeutically through an interplay of relationships between GMs. There was also reference to wider connections, where events in the outside world played into group processes. One key example was in P4's comparison of himself to Theresa May. Nicky experienced this reference as opaque, but also an important catalyst for P4 to shift his role.

We have the suggestion of 'Theresa May,' which shows for me, this is a recent thing as I said, they're obviously all now able to watch the news and I think it would be being reinforced in class as well, some understanding of the outside world, so we get these outside world interjections that come in, now and again. What is the meaning of Theresa May coming in at this point? I don't know.

And [P4]'s obviously much happier. [P4]'s head's up now. [P4]'s smiling. The fact that [P4]'s stepping up into the Prime Minister role.

## DISCUSSION

The findings from the interview present an overview of Nicky's experiences of the group in these two video clips. Her reflections were informed by her experiences of the group in the past, for which the video excerpts served as audio-visual reminders. She responded not only to the video, but also to the way in which watching the video triggered her memories of the events as they unfolded in real time, and how this related to her knowledge of the real people involved. The annotations can be referred to (see Appendix A) in order to illustrate the complexity of interactions taking place during these short video segments. The processes she described can be linked to theory and practice in both group music therapy and group psychotherapy.

## Finding a groove / interruptions

Pavlicevic (2003) has explored some of the theories which have usefully informed music therapy practice with groups, including that of Tuckman, whose phases of group development include the transitional phase of 'storming', or 'Intra-group conflict' (Tuckman, 1965, p. 388), where disruptive processes are understood as an inevitable aspect of a group's evolving character. The instances of potentially uncomfortable inquisitiveness from one GM, or where another GM retreats from the group and finds it hard to engage for a while perhaps supply good examples of the process in action. Pavlicevic usefully frames Tuckman's 'storming' phase as a way of contextualising the 'complexities that make group work so uncertain' (Pavlicevic, 2003, p. 216).

The importance of music in Nicky's metaphor of 'sewing' the GMs together was perceived by her as a positive force in this group. Conversely, isolating tendencies were described, where certain GMs found it hard to participate for a while. This ebb and flow between a group's "common groove" and forces which work against this is similarly described by Pavlicevic (2003, p. 118), who explores the tendency for groups to break apart musically, just as easily as they can come together in a shared musical experience. The optimism of Nicky's descriptions is striking in this interview. GMs who are struggling are experienced as returning to the shared musical space, helped by key musical interventions by both therapists, as well as by the encouragement of their fellow GMs.

## The group as a microcosm of society

Behr and Hearst (2008) make the following statement in describing group analytic psychotherapy: "When a therapeutic group meets, its members collectively represent the society in which the group is held and proceed to re-create it in microcosmic form through the formation of the group" (p. 10). Pavlicevic (2003) describes groups similarly, stating that "every group musical event is a microcosm of society: people coming together for a specific purpose" (p. 137). There are some key instances of social processes as described by Nicky and as observed in the video clips, which seem to support this idea, in this context. Nicky identified the group as providing an opportunity for GMs to enquire about difference 'in society' (see above, Findings: Balancing Diverse Needs). This was exemplified when one GM was saying what might be interpreted as 'inappropriate' things about another, but where, in the safety of the therapeutic group, it could be framed by Nicky as an opportunity for learning. An important premise, apparent in the interview findings, seems to be in the respect for individuality within a collective, where there are occasions where the specific needs of one person are given priority for a while, and other members of the group are encouraged to provide support in this process. GMs were able to learn things in the group which they might not be able to learn elsewhere, where, in other circumstances, 'politeness' might be insisted upon. The capacity for music therapy groups to provide a space for GMs to consider difference, for example in relation to disability, is echoed by Elefant (2010), who presents group work where children from a mainstream setting and children from a special school were combined, and where the consideration of similarity and difference between the two cohorts became a valuable part of the therapeutic process.

The encroachment of wider events was also witnessed in Excerpt 2, which recorded events that took place at the same time as the resignation of the then UK Prime Minister Theresa May. Here the political event was consciously alluded to by the group members. The GM who had been struggling

for a while to take part was encouraged by the comparison, fantasising, with the support of the therapists and their peers, that they would be the new Prime Minister. Here 'society' was finding its way into the group space in an overt, conscious and even comical way, with political events incorporated playfully into the group's narrative.

### The therapists' roles in the group

The complexity of events and interactions might bring to mind Foulkes' (1983) concept of the 'group matrix,' where a therapy group is visualised as a network of connections which can be likened to a neural network. In Foulkes' group analytic model, the therapist is described as a 'conductor,' where the role of the conductor is to facilitate and encourage, rather than overtly lead the group members. Interactions between members of the group are regarded as having as much therapeutic importance as those between group members and therapist. Strange (2012) adopts a similar stance towards group music therapy with young people with profound learning disabilities, where sessions are "created in partnership with the group rather than imposed" (p. 186), and where his therapeutic stance involves striving "to increase the frequency of inter-student interactions, including that of music-maker and listener, through my musical support" (p. 193). Importantly, Foulkes' (1983) concept of the group conductor emphasises a light touch, where it is not the conductor's role to lead the group in an authoritarian or even didactic sense, but instead to facilitate group interactions, by stepping back when necessary and allowing processes to unfold. There appears to be a clear parallel in the approach described by Nicky, for example where she described 'standing back and...watching' when group interactions are happening spontaneously, without the need for any intervention from her or Anthony.

Nicky's reflections on key moments during group interactions echoed the findings of Flower (2014), where music therapy was perceived by therapist and parent as "a fluid, dynamic web of musical and interpersonal relationships, rather than a fixed entity" (Flower, 2014, p. 843). The language of movement in this somewhat poetic statement is echoed by Nicky's description of the way the two therapists worked together as a 'dance.' My perception, from the perspective of PI, is of a therapeutic partnership responding in a flexible and agile way to a variety of shifting needs in the group.

## CONCLUSIONS

The respecting of individual needs and allowing of musical and relational processes to evolve organically and through spontaneous interactions came through strongly in the interview. These processes can also be seen in action in the video clips and through the annotations. It is hoped that examining perceptions of group processes in this level of detail will inform ongoing practice, helping to identify therapeutic priorities and to determine clear strategies for developing practice. An intention of the study has been to elucidate group music therapy in action so that processes in this context can be better understood by stakeholders.

### Limitations of the study

The scope of the study, which included time limitations, precluded interviewing both music therapist facilitators. The perspective of Anthony, the other music therapist facilitating the group, would likely

have provided another rich source of data, as well as a helpful comparison with that produced from the single interview conducted.

The annotations, while fairly detailed, only begin to scratch the surface of the interactions in the video excerpts. The time limitations of the study did not allow for a more detailed microanalysis of the video excerpts, which would have produced yet more rich information about the musical interactive processes playing out in the group.

The budget and commissioning of the study did not provide for the engagement of an independent researcher. The process of commissioning and the close professional relationship between the PI and the participant arguably presents challenges to researcher independence.

## Implications for practice

The value of the Jammin' Group as providing a space for meaningful interaction, both through music and other modalities, has been illustrated by close examination of detailed processes. This study furthers our understanding of the potential benefits of this approach. There is scope for other music therapy groups, adopting a similar approach to practice, to be explored further in local settings. It is also hoped that group music therapy in action, as explored here, might provide inspiration and ideas for music therapists in other locations, as well as for music therapy educators both in the UK and elsewhere.

## Implications for further research

While the idiographic focus of this study need not be viewed as a limitation within the remit of IPA, further studies exploring perceptions and experiences of music therapy group members themselves, as well as intervention studies, would be welcomed and would add to our understanding of both process and efficacy in this context. As stated in the limitations above, a more detailed microanalysis would yield further useful data on process. Additionally, the wider social context of the group was not explored in this instance, due to the decision to focus on moment-to-moment processes. The social function of the group in the school context, for example, where performances have been included as part of the group experience, invites further study, perhaps through an ethnographic lens.

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## APPENDICES

## Appendix A: Annotated tables for video excerpts

Time	P1	P2	P3	P4	T1 (Nicky)	T2 (Anthony)	Quotes from Nicky's Interview
0.00					Piano accompaniment (1a)*	Rocking s2s. Making eye contact with P4. Scanning the room. Singing quietly, occasional phrases.	
0.05			Sings 'Hello [P2] (BBCA). She's a beautiful girl' (in time with piano/guitar groove) (1b)	Continues	Continues		
0.06							"Everyone's leaning in toward the main focus, which is [P2]"
0.13							"Coming out of speech into melody"
0.10	Tilts back lifting arms above head, holding drumsticks, right leg swinging a little			Continues	'She's a beautiful girl' (1c)		
0.20	Fiddling with drumstick in same position	Clasping hands more tightly	'At home' [points away from her]	Continues			"we're just doing a bit of verbal acknowledgment of what she's [P3] saying"
0.22							
0.24			'Is she wearing a cardigan?'	Sings D-C-D			
0.28	Tips forward and looks around, keeping arms above head				'She is. A lovely pink Cardigan'		
0.32			Reaches towards P2, looking at her. Points to eyes. Waves. 'Say hi' Looks at A1 for back-up	'Ah-ah-aaah'			"I think of this work as [a] very sensitive and intimate little circle"
0.36				D-C-D 'Ah'	'P2'		
0.37							"I pick up that vocally and I go (sings) 'Hello P2', just taking anything"

(Table 2 continued)

					possible into music."
0.42		Wiggles fingers	'Why's she doing this with her hands?' [looking at P2 upward gesture with elbows]	'Ah, P2, Ah'	
0.47	Brings arms down and hits drum lightly, looks to right		[A2 responds to the question]		
0.48	Plays edge of djembe with sticks				
0.49					"he's [P1] been slightly zoned out, as you might term it, but he then comes back to drumming"
0.50	Continues playing, increased intensity, in a pulse which is a bit faster than T1/T2 groove	Places hand back down onto knees	[Leans across to A2, gesturing and pointing at P2 – <i>curious</i> ]	'Hello P2'	
0.55		Sits back		(Not singing)	Increases volume – adds quavers to rhythmic figure (1d)
0.57					"a nice recognition from [T2] that [P1]'s participating"
0.59		A1 touches her arm	[Taps knee]		Decreases volume
1.00	Pauses, resumes in half-time feel	Lifts arms up slowly, while lifting head and watching hands	[Looking at P2, shifting in seat]	'Ah--'	Sings 'Hello P2' (DDEE)
1.05	Hits skin of drum, sounding less connected to T pulse		[A2 lifts mic to P1's mouth]		
1.08					"She's [P3] speaking but we're trying to get her back into song."
1.10			'Have ??' [into mic – hand behind head]	'Hello P2'	
1.13	Continuing to hit edge of djembe – a bit more energy	Moves hands slowly out in front	Arm gesture		
1.14	Hits skin of drums several times – fast and fairly loud		A2 makes 'listen' signal to P3		

(Table 2 continued)

1.17	Moving body with drum pulse – seeming more involved	Lifts hands a little higher	Touches pursed lips with finger, looking at A2	(Not singing)			
1.20	Puts arms down to his sides	Looks down with eyes				'She's a beautiful girl' – DDDDA 888842	
1.21				'Ah-ah-aah'		'She's a beautiful girl' (1e)	
1.21	FADE OUT	FADE OUT	FADE OUT	FADE OUT	FADE OUT	FADE OUT	
1.22	FADE IN	FADE IN	FADE IN	FADE IN	FADE IN	FADE IN	
1.23	Leaning forward resting hand on djembe	Looking down towards lap, hands clasped in front of knees		'Ah—' Loud and confident	Puts Wind chimes in front of P2	D-C (a bar each) Strumming crotchets more forcefully	"a bit more intent coming from [T2] in response to [P1]'s raised volume.
1.25		Looks up, reaches forward		Ah ah P2'		Looking to right (at P4) nodding and rocking side to side in time to music	
1.26							"she's woken up a bit has [P2]. So it's how now to encourage her maybe to be an active participant, hence bringing in wind chimes"
1.27		Brushing right hand against wind chimes, back and forth, looking at the wind chimes.	Taps knee with hand. Looking around to left. Slight rocking.				"[T2] and [P4] have now taken over the lead momentum. [P3]'s stepping back a bit"
1.29							
1.30	Swings R leg back and forth in time with music (crotchets)	Continues	Tapping in quavers on knee.	Continues singing (1f)		Singing with P4 (1f)	
1.33							"once he [P1] gets stuck in a state then it's quite difficult to help move him out of it, so that's what's just beginning to happen with him"
1.36		Continues				P2' (high register) D-D-A (1f)	
1.37	Stops	Continues					"You can tell that [T2]'s a songwriter...coming in with his own melodic line above everybody, but then that enables [P4]'s musicality to come out"

(Table 2 continued)

1.39						"[P2] is now a participant, and an active participant"
1.40	Looks to left with RH againsts side of face	Continues	Looks at P4	Eh—' more melodically exploratory. Singing in a lower register.	Sings F#-E-D-D Looking at P2 Rocking bac and forth 'Listen to P2 play'	
1.42	L leg swinging	Continues				
1.44		Continues	Lifts mic to face			
1.46		Stops	Hits thigh with more force x3 Gentle rocking in time with pulse			
1.48	Pulls djembe towards himself			[P2]... [P2]' etc.		
1.52	R leg swinging	Tongue out		Continues	Slowing tempo on guitar - more deliberate strokes downward on strings	"I'm standing back and I'm watching. It gives me a great opportunity also to watch what is needed, who needs facilitating here"
1.54			Looks at P4	Continues		
1.56	A2 comes over an adjusts djembe, moves his hands onto drum		Looks at P1 rocking (slightly out of time)	Continues		
2.00		Head more upright, making 'raspberry' sound with tongue		Continues	(Not singing) New strumming rhythm (introducing quavers in the pattern)	
		Continues		Continues		
		Continues		Continues		
2.04		Continues	Rocking more pronounced	Continues		she's now grooving with her body, [P3], so she's feeling the groove of the music
2.07	Plays djembe (in time) with LH	Brushes RH against wind chimes		Continues		
				Continues		
2.12	Leans head against A2	Pushing tongue out more – seeming more focused	Stamps right foot on floor, bigger body movement. Looks at P4.	Continues		

(Table 2 continued)

2.14							"[P3]'s turning at looking at [P4]! So he's now raising his volume and leading the section more."
2.15	A2 plays drum (modelling for P1)	Tips head forwards, looks at wind chimes, moving hand faster and disturbing the wc more – louder.	Sings into mic. Lifts mic up	Continues			Singing 'P2' loudly moving arms and torso in time with the pulse
2.20	Looking to L towards P2. A2 moving his hands against the drum		Sings 'P2, P2' etc. C-A, C-A-ish Rocking more energetic (1g)	Continues			"you've nearly got the circle joined up, with all of them participating apart from [P1], although he's watching"
2.22		Tips head to right, smiling?		Continues			
2.24		Lifts RH above head slowly		Continues			
2.28		Brushing wind chimes with RH		Continues			
2.32-3.11	Segment not part of analysis	Segment not part of analysis	Segment not part of analysis	Segment not part of analysis	Segment not part of analysis	Segment not part of analysis	Segment not part of analysis
3.12	Stands up, handed mic by A2 and T1	Hunched shoulders, hands clasped in front of body, slowly brings head up, looking in front of her at wind chimes.	Four short notes on melodica in time with pulse, moving body back and forth with pulse.	Singing '[P1]...[P1]' in time with pulse. Moving body. Strumming guitar.			
3.15	Heh, heh, heh, heh' in time with pulse (c. 70 bpm)		Takes melodica out of mouth and looks at it				
3.16							"I go, 'Come on, stand up! Have a microphone!' and bring [P1] to centre stage, with the others beginning to sing about him."
3.17			Slaps thigh with RH, blows melodica in time				
3.20	Moving arms up and down quickly		Brings feet together to make a sound, continues rocking body				

(Table 2 continued)

3.24	A2 and T1 move away. P1 looks to R. Stops vocalising. Moving arms in time with pulse.	Moving feet together, blowing melodica, rocking body, not quite co-ordinated	
3.25		Tips back, pointing melodica towards ceiling, rocking body and blowing melodica, slightly out of time with pulse, but moving strongly back and forth, looking straight ahead.	
3.26			"[P1] is enjoying this being appreciated, people singing to him, and he's got a bit of a groove in his body going on
3.27	Looks to L at A2		
3.29	Eh' short note (D)		
3.30	Nodding head to music, smiling	Tips head back slightly, closes eyes	
3.32	Yeah, yeah' in time with pulse		"he's [P1] smiling, big smile for the first time in the session"
3.35		Takes melodica out of mouth and looks at it, continuing to rock body, slaps thigh twice	
3.39	Stops vocalising, shakes mic		
3.40		Go P1, go P1' (spoken) in time with pulse, tapping RH on side of chair. (1h)	
3.42	Moves backwards and sits down, keeping mic held up to mouth	Moving clasped hands a little, lifts them up slightly towards body	

(Table 2 continued)

3.45					"[P1] will very easily sit back down again and maybe withdraw again from an activity, so you'll see I come and encourage him to stand back up again."
3.47			Brings feet together, repeating this while rocking, stops playing melodica. Stops vocalising.		
3.48	Stands up quickly, walks forwards, places hand on drum. T1 moves alongside and supports by gently holding arm.			Supports P1, tapping side of arm.	
3.50		Lowers hands slightly			
3.55	T1 Sings 'La', encouraging P1 to sing. P1 picks up reed horn from drum with RH			Singing, lalalaaa' (EDCD—) x3 alongside P1	
3.59	Begins to blow reed horn - loud, not in time with pulse		Go P1' (x1) Looks down to melodica	Walks away from P1 (out of shot)	
4.04	Stops blowing, brings reed horn down to side, mic to mouth	Lowers hands towards lap, arms stretched out	Two blows of melodica [in reply to P1 reed horn?] Then more short notes in time with pulse.		
4.06	Switches back, putting reed horn to mouth				
4.08	Blows reed horn, several times, not in time with pulse		Moving less, hunched forward, still with melodica in mouth		"You see the LSA now who had been comforting. You see her really enjoying and appreciating him [P1] again. She's grooving as well and smiling as he's participating"
4.12	Blowing reed horn with longer gaps in between notes	Tips head forwards, looking up with eyes now open.	Takes melodica out of mouth and sits up.	Walks around	

(Table 2 continued)

4.13				Assists P3 by showing her how to put the melodica the correct way round.	"an interesting little vocal line coming in from [P4] there"
4.16					"I've noticed [P3]'s got the melodica the wrong way around, so I've just gone over to show her the right way around to play it so that she can get more sound out of it"
4.17	Blows reed horn on first beat of bar - 1 long note. Says something to T2	Releases and separates hands, looks down and to the right	Exploring the keys on the melodica		
4.22					"And finally everybody is playing"

Table 2: Excerpt 1

[\*Refers to musical fragments sheet, see Appendix B]



Time	P1	P2	P3	P4	T1 (Nicky)	T2 (Anthony)	NON Interview Notes Quotes
0.00	Holding tambourine, watching the group	Playing wind chimes	Sings 'May, may, may...etc.'	Sitting with RH over the top of guitar fretboard and guitar rest against body, head tilted forward, eyes closed. Guitar held in left-handed position (but tuned for right-handed).	Playing a 3/4 pattern on keyboard Mostly tonic-dominant or tonic-supertonic (IIm), G major	Guitar pattern - playing beneath piano dynamic.	
0.02		Plays a roll on djembe, looking at P3					
0.05		Stops playing, looks at T1					
0.06		Looks to L at P3					
0.08		Makes downwards gesture with open LH			Singing "How does P4 feel?"		"I'm singing, 'How does [P4] feel?' trying to get us to focus on him a bit because he's a bit of an imbalance in the mood in the group now"
0.11		Looks at P3, smiles	Looks to R		Says "He's just not feeling very well"		
0.14			Looks to L, stops singing				
0.16				Says 'no' quietly			
0.18	Shakes tambourine gently (with A1 supporting)	Taps djembe with finger, out of time (slow)		Slowly tilts head up and back	Sings "P4 and Anthony have got - [talking] I can't scan it" (2a)* + keyboard accompaniment (2b)		
0.19			Smiles, looks towards T1				
0.22	Turns head away to L	Looks up, stops playing	Nodding head and waving mic	tips heads forward			"this social appreciation of everybody in the group...then you'll hear [P3] come in very emphatically with beautiful scanning"

(Table 3 continued)

0.23		Taos drum with fingers			Laughs
0.25		Stops playing, points at T1	Slaps thigh with RH	Moves RH under the neck of the guitar into a more conventional position for playing	Says "Colds! You've got colds. [in time with pulse] Oh dear"
0.26	Lifts RH up to face, taps tambourine twice	Moves djembe to R			
0.28			Rocks from side to side	Brushing top string of guitar gently with LH, RH fretting bottom string	
0.30		Gets off chair, walks around behind group anti-clockwise	Sings while waving R arm up and down	'P4's not feeling well' (2c)	
0.32	Tilts head to L, lifts LH up to mouth		Almost falls off chair - corrects herself	Sings "[P4]'s not feeling well (2d) [talking] - coming to the piano? Mind the wires"	"she [P3] then takes on the melody herself. She's confident, she's emphatic about what she does"
0.35	Tips head back, brings both hands up to side s of head		Singing, rocking from side to side	'P4's not feeling well'	
0.36					"you hear [P3] come in ... with [sings] '...well', again showing her involvement, her listening"
0.37	Brings LH down to side, looks to L (at T1), RH touching chin.				
0.39					"constantly as a therapist I'm thinking practically and safety-wise... That ability to carry on playing in music, watching everybody else and noticing

(Table 3 continued)

					whether somebody's about to trip up"
0.40	Obscured		Stops singing	Looks to L stops playing	Sings "Not feeling well" with T1
0.42				Says "Sit down"	Guitar response to vocal melody (2e)
0.44					"You notice [P3] and [P4] looking over at her while she settles down."
0.45	Looking front with RH in front of face	Sits down at keyboard, on R of T1 (upper register area)	Sings more quietly		
0.47				Looks down at guitar strings, strums top string	
0.48			Stops singing, looks to R at T2, smiling	Sings "Anthony's not feeling"	
0.50	Looks at T2	Plays single notes quietly with both hands		Moves RH along fretboard	Says "Not feeling well" shakes head
0.52				Sings "Anthony's not feeling"	
0.53			Points at T2	Moves LH under guitar body to shift position of instrument	
0.55	A1 helps her to shake tambourine		Says 'Get medicine from the pharmacy', looking at T1		"they're making suggestions wider, as in, 'You could go to the pharmacy', and I think showing their cognitive social development. We're seeing a bit more of that happening, which is very exciting."
0.58				Lifts head up, slightly 'pained' expression	

(Table 3 continued)

1.00	Obscured	Looks to L, lifts up LH to side of head, brushes hair back	Nods at T1	Smiles and shakes head gently	Says "Get something from the pharmacy"	"[P4] can't help but laugh at [P3]'s suggestion
1.01			Looks to R at A3, says '?...pharmacy things'			
1.03		Begins playing keyboard again, gentle, both hands, tinkling out of time on white notes. Looks to L (at T1?)				
1.04			Looking at T1, not singing	Gently strums top string with LH		
1.06	Shakes tambourine, looks forward to L (at P3)		Leans to R and looks at A2, taps chair seat, says 'sit here'.	Looks at T1	Singing "Lalalala" (to same melody)	
1.12	Obscured		Waves to someone in front of her and says 'hi'	Syopts playing, looks at A2, mouth open		
1.14		Continuing to 'tinkle' on white notes with both hands. Singing quietly under T1 melody.	Come and play the drum' (?) Looking at A2	Looks to L, mouth closed, tips head forward, pokes tongue out, smiles		
1.16						"You can play the drum. That's what we do in here, we make music together"
1.18	Shakes tambourine		Slaps thigh, says 'I'm playing the drum'		Singing new melodic line "Lalala" etc.	
1.20				Gently strums top string with LH, 'smiles' broadly.		
1.22					Sings "...lovely song"	
1.23		Stops playing, looks quickly to L at T1	Takes A2's LH and hits it on the drum in time with the pulse	Looks down, continues strumming		

(Table 3 continued)

1.25						"I'm giving it a verbal description and then [T2] amplifies that with his melodic line."
1.26					Sings "What a lovely song"	
1.27	Shaking tambourine faster (double time)	Looks forward, hands to sides	Speeds up, lets go of hand. A2 smiles			
1.29	Stops playing	Lifts RH to keyboard, doesn't play, removes hand.		Tremolos on top string of guitar! Looks towards T2	"Lalalala" etc.	
1.30						"[P4]'s just started tremolo-ing on his guitar"
1.31						Tremolo guitar melody
1.33	Obscured	Plays clusters with both hands, then plays tremolos, becoming more energetic	Looking at A2, brings both hands up above her shoulders	Continues		Leans back, continues tremolo, playing higher on fretboard (D)
1.35			Pulls A2 towards her by the neck, kisses her head	Continues		
1.38		Looks to R and waves with RH	Talking to A2	Continues	Speeding up "Lalalalalala..." V-I resolution (perfect cadence) - echoing P4 tremolo?	
1.41		Looks at T1 to L	Taps RH on chest, turns to look forward	Continues		
1.42			Rocks back and forth	Tremolo becomes more audible		"[P2] is just waving at the social worker who is observing her"
1.44		Begins tinkling both hands, looking L to T1	Holds arms out in front of her (mic on lap)			
1.46						Drops pitch of tremolo
1.48		Stops playing	Lifts mic to mouth. Rocking, ready to sing, pauses.		"P4..."	"I do a 'Wow!' I think trying to make him [P4] feel good"

(Table 3 continued)

1.50				Looks briefly at T1/P2 - continues tremolo	
1.51	Looks at T2		Sings 'Wooh!' high pitched		
1.53					"[P3] comes up with this lovely melodic leap going into quite exuberant feeling, so we're just entering a slightly different section"
1.54	Taps tambourine with LH quite fast (not in time with pulse)	Claps rapidly out of time	Rocking back and forth, tapping feet together		
1.58		Rapid tremolos both hands on keyboard		Singing "Oo" under T1 melody	"she's [P2] cheering him as well, so there's a celebration of what [P4]'s doing"
2.03	Stops tapping tambourine	Lifts up face - cries out??? (drowned out by P4) Continues tinkling both hands	Looks to L, continues tremolo, head also starts to shake a little	Sings loudly "...singing a song"	
2.04	Obscured		Shout/sings '[P4]—!'		Moment of intensity
2.05					"Then it turns into a bit of a pub brawl"
2.08		Keyboard playing more energetic - faster and louder		Singing "Dadada, dadada, dadada"	
2.10	Sitting looking at P3 and P4, LH in mouth	Claps hands together once and brings them quickly back down to her sides, then tips forward and back	Rocks side to side. Singing high, above the group.		Stops tremolo "a bit more of an upbeat momentum swing."
2.14		Begins tinkling on keyboard			Plays strong crotchet melodic line
2.15		Lifts hands back behind head	Stops singing looks to R at A2	Sideways smile (concentration face?), shifts RH on fretboard	

(Table 3 continued)

2.17	Fade to next segment	Fade to next segment	Fade to next segment	Fade to next segment	Fade to next segment	Fade to next segment	Fade to next segment
2.18	Head tilted back RH lifted up to face		Looking at ceiling, talking	Stumming top string in time with pulse	Singing "When she feels better" Tempo slows.		
2.23				Tremolo on top string			"there's real attention. [P2] is looking at me. [P3]'s looking over at me"
2.25	Looking to R at A1	Tilts head to R	Shouts/sings long not to 'ah', lodly, looking at T1			Singing "Aaaah" looking at P3	
2.27	Looks L at T2	Tinkling on keyboard, quietly	Sings 'Make you feel betteeeeeer!'	Stops tremolo, strumming top string, looks up at T1/P2			
2.29							"he's [P4] a bit overwhelmed, I think, which is unusual for him... I need to do something. I need to intervene, which I do in a minute"
2.32		Tips head back, looking to ceiling	Continuing to shout/sing into the mic			Singing "Aaaah" louder than words (unclear)	
2.34			Brief pause	Stops playing. Points RH forefinger downwards - speaks/sings (unclear), shakes head, tips head forwards.			
2.35		Claps rapidly out of time	Betteeeeeer! (in tune with key)				
2.36							"He [P4] can't help himself from laughing, but he's beginning to protest."
2.38	Shaking tambourine with A1's support	Laughs, claps once	Make you feel better' in hight (comic?) voice				"as therapist I need to just bring them down whilst not stopping their engagement and their enjoyment"

(Table 3 continued)

2.40		Laughs, puts hand over mouth		Tempo slows further	
2.42			Betteeeeeer! Still higher and louder, singing with greater intensity	"No, no, no, no"	Sings "Makes you feel better!"
2.45		Twists body L and R, moving hands back and forth above the keys	Stops singing and puts mic down		"He says no, no, no, it's too loud"
2.47					Stops playing guitar "He [P4] needs help in being heard"
2.49				"Yeah, down" Looks at T1	
2.50	Stops playing	Tips head back, looking to ceiling, then tilts back whole body, then tips forward again			
2.52			Sings 'No no no' in time and in tune	"Let's go quietly" Slows tempo	
2.54					"I say, 'Is it too loud?' and he [P4] goes, 'Yes', I think. So I direct them to come down quieter"
2.55		Plays keys very quietly, looking down at hands	Stops singing, smiles	Tips head back, smiling, sighs deeply (vocalising), says "I wish Theresa May was here". Tips head further back, eyes closed.	
2.58	Taps tambourine faster with LH (not in time with pulse)	Looks at P4, looks to R	Makes to sing, stops, looks at P4		
2.59					"we get these outside world interjections that come in, now and again"
3.00				"Who?"	
3.01					"Theresa May was here?"

(Table 3 continued)



3.02		cries out, puts hands to mouth while laughing, then leans forwards and laughs louder	Puts mic on L shoulder, looks at P4	"Yeah" looks to L	"Theresa May?"	Stops playing guitar	"It has the desired effect, as in he [P4] gets the floor back again."
3.05			Looking at T1, hand to face holding mic	"I know she stepped down, but..."			
3.06					"Today"		
3.07			Looks to R	"...I'm stepping up" Smiles, shakes head			
3.10					"Ah you're stepping up!"	Says "Ohhh"	
3.12	Taps tambourine fast with LH	Waves at P4, points upwards to R, says "[P4]! Get out!" loudly (unclear?)	Puts back of hand gently on A2's face	Shaking head, talking (unclear)	"P4's the Prime Minister!"		Moment of intensity
3.13				"No, no, no"	Changing the meter - (transition)		"[P4]'s obviously much happier. His head's up now. He's smiling"
3.15		Looks to L at T1, tinkles keys quietly			"P4's the Prime Minister!"		
						"Prime Minister P4!"	
3.17				"Now, now" Lifts up guitar with LH, leans body forward			
3.19		Tilts face up to ceiling, cries 'Ha!'					
3.20	Looks around room, taps tambourine	Tinkles keys, looks to L at T1	Says 'kiss', turns face forward and leans cheek towards A2, who purses lips as if to kiss her, but doesn't.	Looks down, smiles [genuine humour - finding this funny]	Sings 'Bye bye Theresa May'		
3.25	End	End	End	End	End	End	"we're able to keep him [P4] engaged, but this difficulty of, if someone's a bit off-colour, how to keep them joined the participation, is a feat sometimes"

Table 3: Excerpt 2

## Appendix B - Musical fragments

See the table in Appendix A for references to the musical fragments below.

### Video excerpt 1

1a) Vamp at 0.00 (Nicky – keyboard) 116 BPM

1b) 0.06 P3

1c) 0.10 Nicky

1d) 0.55 Nicky

1e) 1.21 Anthony

1f) Anthony (top line) and P4 (bottom line) vocal lines from 1.30

1g) 2.20 P3

1h) 3.40 P3

Video excerpt 2

2a) 0.16 Nicky

**♩ = 150**



[P4] and An-thon-y have got I can't scan it!

2b) 0.00 and 0.16 Nicky

**♩ = 150**



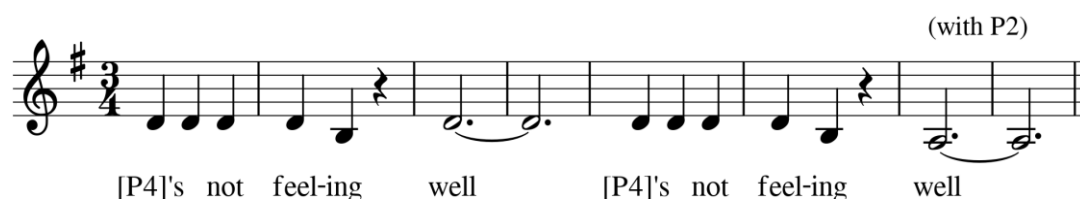
2c) 0.30 P3



[P4]'s not feel-ing well

2d) 0.32 Nicky

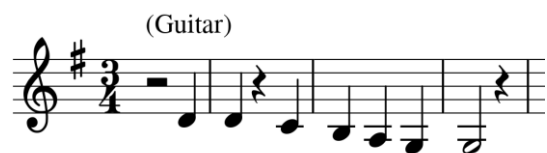
(with P2)



[P4]'s not feel-ing well [P4]'s not feel-ing well

2e) Anthony 0.42

(Guitar)



Ελληνική περίληψη | Greek abstract

## **‘Ράβοντας μαζί’: Μία ιδιογραφική μελέτη των εμπειριών ενός μουσικοθεραπευτή με μία ομάδα σε ένα ειδικό σχολείο για παιδιά και νέους με σοβαρές και σύνθετες ειδικές εκπαιδευτικές ανάγκες**

Luke Annesley | Nicolette O'Neill

### **ΠΕΡΙΛΗΨΗ**

Η παρούσα μελέτη ανατέθηκε από ένα σχολείο στο Λονδίνο για παιδιά και νέους από 2 έως 16 ετών με ένα εύρος μαθησιακών δυσκολιών. Αυτή η μελέτη βασίζεται σε ένα συμμετέχοντα και χρησιμοποιεί δεδομένα που προκύπτουν από ανάλυση βιντεοσκοπημένου υλικού, από συνέντευξη που προκύπτει από την παρακολούθηση βίντεο (video elicitation interview) και από ερμηνευτική φαινομενολογική ανάλυση (interpretative phenomenological analysis, IPA) για τη διερεύνηση της κατανόησης των αντιλήψεων σχετικά με τις διαδικασίες μέσα σε μια ομάδα μουσικοθεραπείας, από τη σκοπιά του μουσικοθεραπευτή. Δύο πίνακες παρουσιάζουν μια περιγραφή των συμβάντων σε κάθε βίντεο απόσπασμα σε χρονολογική σειρά. Από την ερμηνευτική φαινομενολογική ανάλυση της συνέντευξης προέκυψαν 25 θεματικές κατηγορίες, οι οποίες οργανώθηκαν σε τέσσερις ευρύτερες θεματικές ενότητες («Εξισορρόπηση ποικιλόμορφων αναγκών», «Αυθορμητισμός», «Η μουσική στάση των θεραπευτών», και «Δυναμικές ομάδας»). Σκιαγραφούνται παραλληλισμοί με άλλες ομάδες μουσικοθεραπείας που περιγράφονται στη βιβλιογραφία, καθώς και με την αναλυτική ομαδική ψυχοθεραπεία του Foulkes. Η μελέτη αποσαφηνίζει μία προσέγγιση στην ομαδική μουσικοθεραπεία που παρέχει χώρο για αυθόρμητη και ουσιαστική αλληλεπίδραση τόσο μέσω της μουσικής όσο και μέσω άλλων τρόπων.

### **ΛΕΞΕΙΣ ΚΛΕΙΔΙΑ**

ομαδική μουσικοθεραπεία, ερμηνευτική φαινομενολογική ανάλυση, μαθησιακή αναπηρία