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Σημείωμα του Επιμελητή Σύνταξης

Μουσική, Υγεία και Ευεξία: Η Ανάγκη για Πολυφωνικούς Διαλόγους

Γιώργος Τσίρης

Αντανακλώντας το διεπιστημονικό και διαπολιτισμικό όραμα του *Approaches*, οι σελίδες αυτού του νέου τεύχους περικλείουν άρθρα από διαφορετικούς επιστημονικούς, επαγγελματικούς και πολιτισμικούς χώρους. Ωστόσο, στην καρδιά αυτού του ποικιλόμορφου πλέγματος επαγγελματικών πρακτικών και επιστημονικών προοπτικών, έγκειται ένας κοινός παρονομαστής: η δύναμη της μουσικής να επιφέρει αλλαγή στην υγεία και την ευεξία του ανθρώπου (Bonde 2011· MacDonald, Kreutz, & Mitchell 2012). Η πολυπρισματική κατανόηση αυτού του κοινού παρανομαστή αποτελεί τη βάση για γόνιμο διάλογο και ανάπτυξη διάφορων πρακτικών και πεδίων, τα οποία δεν αποτελούν ανεξάρτητες οντότητες, αλλά αλληλοκαθοριζόμενα μέρη ενός διαρκώς εξελισσόμενου συστήματος. Συμβάλοντας στην κατανόηση αυτού του κοινού παρανομαστή, τα άρθρα αυτού του τεύχος καταγράφουν πολυδιάστατες όψεις της μουσικής και της επίπτωσής της στην υγεία και την ευεξία. Αυτή η καταγραφή γίνεται σε ερευνητικό, πρακτικό και θεωρητικό επίπεδο, και αφορά τις χρήσεις της μουσικής σε ποικίλα πλαίσια, συμπεριλαμβανομένων των θεραπευτικών, εκπαιδευτικών, καλλιτεχνικών πλαισίων, αλλά και αυτών της καθημερινής ζωής.

Ακολουθώντας το ύφος αυτού του τεύχους, η συνέντευξη της Alice-Ann Darrow αναδεικνύει την αναγκαιότητα για διεπιστημονικό διάλογο και συνεργασία. Αντλώντας από την εκτενή της εμπειρία στα πεδία της ειδικής μουσικής παιδαγωγικής και της μουσικοθεραπείας, τόσο στις ΗΠΑ όσο και σε διεθνές επίπεδο, η Darrow περιγράφει τις απτές δυνατότητες που μπορεί να προσφέρει η διεπιστημονικότητα στις ζωές των ανθρώπων με τους οποίους εργάζονται οι διάφοροι επαγγελματίες. Σε αυτό το πλαίσιο αναδύεται μια σειρά θεμάτων όπως η ένταξη και τα «μουσικά δικαιώματα».

Στη συνέχεια, τα δύο πρώτα άρθρα (της Carol Chambers και του David Akombo) παρουσιάζουν ερευνητικά ευρήματα από τους χώρους της μουσικοθεραπείας και της κοινοτικής μουσικής (community music) αντίστοιχα. Η Carol Chambers διερευνά τη χρήση ανθρωποποιημένων εικόνων στο τραγούδι στα πλαίσια της μουσικοθεραπείας. Βασισμένη στη διδακτορική της έρευνα, η συγγραφέας παρουσιάζει μία μελέτη περίπτωσης η οποία εξετάζει τις επιλογές τραγουδιών μίας γυναίκας κατά τη διάρκεια μουσικοθεραπευτικών συνεδριών σε μια σωφρονιστική μονάδα μέσης ασφάλειας στο Ηνωμένο Βασίλειο. Η Chambers δείχνει πώς οι ανθρωποποιημένες φιγούρες μπορούν, ως χαρακτήρες τρίτου προσώπου, να λειτουργήσουν ως μια μορφή αντιπροσώπευσης και πειραματισμού που διευκολύνει τη θεραπευτική διαδικασία. Από την άλλη πλευρά, ο David Akombo μελετά τις επιπτώσεις της συμμετοχής σε κύκλους Αφρικανικής τυμπανοκρουσίας (African drumming circles). Τα αποτελέσματα αυτής της έρευνας, η οποία πραγματοποιήθηκε με εφήβους στις ΗΠΑ, δείχνουν το πώς μια μορφή κοινοτικής μουσικής, όπως είναι οι κύκλοι τυμπανοκρουσίας, μπορεί να συνδράμει στη μείωση του άγχους και στη βελτίωση των ακαδημαϊκών επιδόσεων.

Τα επόμενα δύο άρθρα αναδεικνύουν προοπτικές που προκύπτουν από την πράξη, περιγράφοντας την εφαρμογή και την υλοποίηση διαφορετικών μουσικών προγραμμάτων. Πιο συγκεκριμένα, η Julie Wylie και η Susan Foster-Cohen γράφουν για το έργο τους με παιδιά με ειδικές ανάγκες και τις οικογένειές τους στο Champion Centre της Νέας Ζηλανδίας. Μέσα από τέσσερις μελέτες περίπτωσης οι συγγραφείς σκιαγραφούν τη σημασία του μουσικού παιχνιδιού στην πρώιμη παρέμβαση. Στη συνέχεια, ο Tom Northey περιγράφει το έργο του Jessie's Fund, ενός βρετανικού φιλανθρωπικού οργανισμού που υποστηρίζει παιδιά με σύνθετες ανάγκες μέσω της μουσικοθεραπείας και άλλων δημιουργικών μουσικών υπηρεσιών. Ο συγγραφέας εστιάζει σε

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ένα εξαμηνιαίο πρόγραμμα που πραγματοποίησε το Jessie's Fund σε συνεργασία με ένα ειδικό σχολείο στο Ηνωμένο Βασίλειο. Πέρα από την παρουσίαση του εν λόγω προγράμματος και των αποτελεσμάτων του, ο συγγραφέας σκιαγραφεί ένα σύνολο παραγόντων που μπορούν να συμβάλουν στην πραγματοποίηση παρόμοιων μελλοντικών προγραμμάτων.

Περνώντας από την έρευνα και την πράξη στη θεωρία, ο Dylan van der Schyff γράφει για τις θεραπευτικές πτυχές της μουσικής εμπειρίας στην καθημερινή ζωή. Μέσα από μια κριτική επισκόπηση της βιβλιογραφίας και συνθέντοντας ιδέες από χώρους όπως η μουσική ψυχολογία και η φιλοσοφία της μουσικής, ο συγγραφέας προτείνει μια ενσωματωμένη θεώρηση της συγκινησιακής ανταπόκρισης στη μουσική και του μουσικού νοήματος, καθώς και της σημασίας αυτής της θεώρησης τόσο σε κλινικά όσο και σε καθημερινά πλαίσια.

Επιπλέον, αυτό το τεύχος περιλαμβάνει την ανταπόκριση του Robert Fulford από το 40ο επετειακό συνέδριο της Society for Education, Music and Psychology Research (SEMPRE, 14-15 Σεπτεμβρίου 2012), καθώς και τρεις βιβλιοκριτικές από τους Stuart Wood, Βαρβάρα Πασιαλή και Mariko Hara αντίστοιχα. Τέλος, η Janet Graham, η Claire Molyneux και η Sarah Hoskyns γράφουν ένα σύντομο αφιέρωμα στον Robin Howat: έναν πρωτοπόρο μουσικοθεραπευτή συνάδελφο ο οποίος πέθανε τον Οκτώβριο του 2012.

Κλείνοντας αυτό το σημείωμα σύνταξης, καλωσορίζω θερμά τα νέα μέλη της συντακτικής επιτροπής του *Approaches*: Deborah Blair (ΗΠΑ), Kevin Kirkdale (Καναδάς), Kimberly McCord (ΗΠΑ), Daphne Rickson (Νέα Ζηλανδία) και James Robertson (Ηνωμένο Βασίλειο). Οι ποικίλοι τομείς εξειδίκευσης του καθενός συνεισφέρουν στην περαιτέρω ανάπτυξη του οράματος του περιοδικού για πολυφωνικούς διαλόγους στο ευρύτερο πεδίο της μουσικής, της υγείας και της ευεξίας.

Βιβλιογραφία

Bonde, L. O. (2011). Health musicing - Music therapy or music and health? A model, empirical examples and personal reflections. *Music and Arts in Action, 3*(2), 120-140. Ανακτήθηκε στις 9 Ιουνίου 2013, από το: http://www.musicandartsinaction.net/index.php/maia/article/view/healthmusicingmodel

MacDonald, R., Kreutz, G., & Mitchell, L. (Επιμ.). (2012). *Music, Health, and Wellbeing*. Oxford: Oxford University Press.

Προτεινόμενη παραπομπή:

Τσίρης, Γ. (2013). Μουσική, υγεία και ευεξία: Η ανάγκη για πολυφωνικούς διαλόγους. *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική*, 5(1), 3-4. Ανακτήθηκε από το http://approaches.primarymusic.gr

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Editorial

Music, Health and Wellbeing: The Need for Polyphonic Dialogues

Giorgos Tsiris

Reflecting *Approaches'* interdisciplinary and intercultural vision, the pages of this new journal issue contain articles from different disciplinary, professional and cultural spaces. At the heart of this diverse grid of professional practices and disciplinary perspectives however, lies a common denominator: music's power to bring change in the person's health and wellbeing (Bonde 2011; MacDonald, Kreutz, & Mitchell 2012). The polyprismatic understanding of this common denominator forms the basis for fruitful dialogue and development of different practices and fields which are not independent entities but mutually-defined parts of a constantly evolving system. Contributing toward understanding this common denominator, the articles of this issue document multidimensional facets of music and its impact on health and wellbeing. This documentation happens on a research, practice and theory level, while it concerns the uses of music within a range of contexts, including therapeutic, educational and artistic contexts, as well as in the context of everyday life.

Setting the tone for this issue, the interview with Alice-Ann Darrow highlights the need for interdisciplinary dialogue and cooperation. Drawing on her extensive experience in the fields of special music education and music therapy, both in the USA and internationally, Darrow describes the tangible possibilities that interdisciplinarity can offer to the lives of people with whom different professionals work. In this context a number of themes emerge such as inclusion and 'musical rights'.

Then, the first two articles (by Carol Chambers and David Akombo) present research findings from the field of music therapy and community music respectively. Carol Chambers explores the use of humanised images in song in the context of music therapy. Based on her doctoral research, the author presents a case study which examines the song choices of a woman during music therapy sessions in a medium-secure forensic unit in the United Kingdom. Chambers shows how humanised figures, as third person characters, may act as a form of representation and experimentation that facilitate the therapeutic process. On the other hand, David Akombo studies the effects of participation in African drumming circles. The results of this study, conducted with adolescents in the USA, show how a form of community music, such as drumming circles, can help to reduce anxiety and improve academic performance.

The next two articles offer perspectives from practice, describing the application and implementation of different music programmes. More specifically, Julie Wylie and Susan Foster-Cohen draw from their work with children with special needs and their families in the Champion Centre in New Zealand. The authors present four case studies through which they illustrate the importance of musical play in early intervention. Then, Tom Northey describes the work of Jessie's Fund, a British charity that supports children with complex needs through music therapy and other creative music services. The author focuses on a six-month project which was conducted by Jessie's Fund in collaboration with a special school in the United Kingdom. In addition to presenting this project and its outcomes, the author outlines a number of factors that can contribute to the realisation of similar future projects.

Moving from research and practice to theory, Dylan van der Schyff writes about the therapeutic aspects of musical experience in everyday life. Through a critical literature review and by synthesising ideas from fields such as music psychology and philosophy of music, the author proposes an embodied conceptualisation of the emotional response to music and musical meaning, and the importance of this conceptualisation in both clinical and everyday contexts.

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Moreover, this issue includes Robert Fulford's report from the 40th anniversary conference of the Society for Education, Music and Psychology Research (SEMPRE, 14-15 September 2012), as well as three book reviews by Stuart Wood, Varvara Pasiali and Mariko Hara respectively. Lastly, Janet Graham, Claire Molyneux and Sarah Hoskyns write a short tribute to Robin Howat: a pioneer music therapist colleague who died in October 2012.

Closing this editorial note, I warmly welcome the new editorial board members of *Approaches*: Deborah Blair (USA), Kevin Kirkdale (Canada), Kimberly McCord (USA), Daphne Rickson (New Zealand) and James Robertson (United Kingdom). The diverse areas of expertise of each contribute to the further development of the journal's vision for polyphonic dialogues within the wider field of music, health and wellbeing.

References

Bonde, L. O. (2011). Health musicing - Music therapy or music and health? A model, empirical examples and personal reflections. *Music and Arts in Action*, *3*(2), 120-140. Retrieved on 9 June 2013, from: http://www.musicandartsinaction.net/index.php/maia/article/view/healthmusicingmodel

MacDonald, R., Kreutz, G., & Mitchell, L. (Eds.). (2012). *Music, Health, and Wellbeing*. Oxford: Oxford University Press.

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Αφιέρωμα στον Robin Howat

1950 – 2012

Tribute to Robin Howat

1950 – 2012

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A Tribute to Robin Howat

Janet Graham

I first met Robin in 1989 when I went for my interview as a prospective student at the first Nordoff-Robbins Music Therapy Centre in London (United Kingdom), where he was Head of training at the time. My first impression was of a warm friendly man with a reassuring smile, who was able to put people at their ease straight away but who also possessed a depth of perception and intuition.

During my one year training (this was a few years before the two-year master's programme was established) these first impressions of Robin proved accurate and his many other qualities became evident as our work together progressed. The Centre was small and intimate and it was inevitable that, even though Robin allowed us students as much time and space as he could, as our principle tutor he spent a large amount of time with us either in the Centre or the students' department at Carker's Lane. While he kept a respectful and professional distance he always made time to listen to our problems, dealing with them pragmatically whenever possible. I remember he was very sympathetic when I complained mightily about the state (and at one point the non-existence) of the ladies' lavatories in the Carker's Lane building, which was in the process of refurbishment and was at times quite chaotic.

Years later, while talking to some of my fellow trainees, we agreed that without Robin's support and encouragement some of us would probably not have completed the course. Not only was he a sensitive listener, but he had the ability to see beyond the difficulties we found insurmountable and look towards what we could achieve. This ability to see people's potential was also evident in his work with clients, all children in those days. The highlights of our week included outings in the Centre minibus to schools, where we were able to observe Robin and other therapists working with groups of children and, though most of us had started with a very vague idea of how music therapy worked and what it could do, we soon began to learn from him that each child was unique and had his or her own needs.

Janet Graham is Head Music Therapist for Nordoff Robbins in the North East of England. She also works in a care home and neurological rehabilitation centre at Peterlee in County Durham. She retires from both posts in June 2013.

Email: janetgraham456@btinternet.com

This leads to the heart of Robin's work as a music therapist and teacher: his complete grounding in the Nordoff-Robbins approach and, though completely without any unrealistic claims or expectations, his faith in the power of music to help people. The sessions we observed, as well as his lectures and seminars, inspired us to explore the world of music in a new way and we discovered depths of meaning and significance which we could not have imagined.

Robin often started a morning or afternoon's work by getting us all to sing together. He seemed to have an inexhaustible supply of songs from various parts of the world which he would analyse with us, and several of the folk tunes he introduced found their way into my own work in the years which followed.

After training, I was privileged to work with Robin at the Centre until he left for Australia. We did several sessions a week together (in the days when co-therapy was more usual) and, for a time, I was taken along as an additional pianist when he and Pauline Etkin were demonstrating group-work at one of the schools. Although anxious about playing in front of the students in the presence of two such distinguished and experienced music therapists, I soon became drawn into the fun of the occasion and the afternoon often ended with a refreshment stop at a favourite ice-cream parlour on the way back to the Centre.

Robin's quiet presence was greatly missed by us all when he left for Australia: his sympathetic listening, his continuing exploration of music both for its own sake as well as for its potential in music therapy resources, his ready sense of humour, and even the sound of his feet as he ran up and down

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the stairs in the (new) Centre (in Kentish Town, North London). I saw him only twice after this, and on each occasion we were able to resume our friendly banter as though the intervening years had not happened.

Robin's family was central to his life and his religious faith, though private and not often discussed, was also important to him. The last time I saw him for any length of time was when we attended a church service together in New York in 2001 on the final day of the 2nd International Symposium for Nordoff-Robbins Music Therapy.

Robin's sudden and untimely death came as a shock and his loss will continue to be felt by many individuals as well as the music therapy profession as a whole. As well as the countless clients he helped in his work, he inspired many trainees and colleagues over the years and will be remembered with affection and gratitude.

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Graham, J. (2013). A tribute to Robin Howat. *Approaches: Music Therapy & Special Music Education*, *5*(1), 8-9. Retrieved from http://approaches.primarymusic.gr

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A Tribute to Robin Howat from the New Zealand Music Therapy Community

Claire Molyneux & Sarah Hoskyns

Reflecting on our experiences of working with Robin Howat in New Zealand and the United Kingdom, we write below about Robin's warm, generous personality and dedication to music therapy.

Claire Molyneux is the Head of Clinical Services at the Raukatauri Music Therapy Centre, Auckland, New Zealand.

Email: claire@rmtc.org.nz

Sarah Hoskyns is the Director of the Master of Music Therapy Programme at the Te Kōkī, New Zealand School of Music, Wellington, New Zealand.

Email: sarah.hoskyns@nzsm.ac.nz

Claire Molyneux:

Robin was a Trustee of the Raukatauri Music Therapy Centre (Auckland, New Zealand) and provided inspiration for the Centre when well-known singer-songwriter Hinewehi Mohi, her husband George, and daughter Hineraukatauri, who has severe cerebral palsy, visited the Golden Stave Centre. Robin's insight and guidance as a music therapist was invaluable in Raukatauri's early days and during one visit he was able to observe sessions delivered both at the Centre and in one of our outreach projects at a school for children with cerebral palsy. His feedback and observations were shared respectfully and greatly valued by the clinical team.

I had the privilege of staying with Robin and his family in 2009 as part of a visit to the Golden Stave Centre. Robin invited me to observe him at work in the therapy room and there was plenty of opportunity to discuss the various policies, procedures, research opportunities and multiple demands that come with operating a music therapy centre. Robin was generous with his time, energy and resources and I was struck by his immense dedication to music therapy. I always find it rejuvenating to spend time visiting other music therapists which enables me to take a fresh look at my own practice; my time with Robin was no exception to this. His relaxed warmth in the therapy room seemed to come from a strong sense of purpose as a therapist and a joy in connecting with people, which was inspirational. The memories of Robin's passion for and commitment to music therapy will continue to motivate and inspire the work of the many therapists who knew him.

Sarah Hoskyns:

Robin and I met periodically for meetings in London of both the Association of Professional Music Therapists (APMT) committee and the Courses Liaison Committee in the late 1980s-early 1990s, which brought together heads and staff of training programmes to agree a basic module of training. The latter meetings were interesting but often quite tense as the pioneer heads of courses had developed 'their ways' which were not always compatible. It was also a time of intense competition between the three original London training programmes and negotiation and collaborative stances were needed. Robin was always warm, open and helpful as a colleague and was used to 'translating' for Sybil Beresford-Pierse (the first Director of the Nordoff-Robbins Centre in London) who was impatient with having to fit with APMT requirements. We often used to wink at each other as he helped to 'broker a deal' with Sybil.

Through working with Robin in this way, I recognised his real kindness, diligence and complete commitment to working with young people through music. His eyes always lit up with stories of practice and enjoyment of teaching, and he went out of his way to assist and provide information. More recently Robin was very helpful to my New Zealand colleague, violist Professor

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Donald Maurice, who was researching a link with his research and one of Paul Nordoff and Clive Robbins' early cases. Robin was very prompt and generous with his time.

We are very sad in New Zealand to have lost such an experienced and committed friend and colleague from our Australasian team. Music Therapy New Zealand President Daphne Rickson noted Robin's generous support of New Zealand music therapy over the years in a November obituary for the New Zealand MUST Newsletter (Rickson 2012), and particularly his memorable visit as keynote speaker for the annual New Zealand Society for Music Therapy conference in 1998. He will be much missed as kindred spirit and generous friend.

Reference

Rickson, D. (2012). NZ Music therapy community notes passing of Robin Howat and Michael McGuire. *MusT Newsletter*, November 2012. Retrieved from: www.musictherapy.org.nz/wp-content/uploads/downloads/2012/11/MusT-November-2012.pdfcontent/uploads/downloads/2012/11/MusT-November-2012.pdf

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Music Therapy and Special Music Education: Interdisciplinary Dialogues

Alice-Ann Darrow

interviewed by Giorgos Tsiris

Abstract

Drawing from Professor Alice-Ann Darrow's life-long work in the fields of music therapy and special music education, this interview brings to the fore the importance of interdisciplinary dialogue. A range of themes (including the notion of 'musical rights' and inclusion) emerge and are discussed in relation to the development of interdisciplinary and collaborative work between different music practices. Darrow shares experiences from her personal and professional life that have shaped her work and way of thinking over the years. This interview can provide a framework within which readers can situate and further understand Darrow's rich contribution within the fields of music therapy and special music education both nationally and internationally.

Keywords: music therapy; special music education; collaboration; interdisciplinary; profession

Dr Alice-Ann Darrow is Irvin Cooper Professor of Music Therapy and Music Education at Florida State University. Her teaching and research interests are teaching music to special populations, the role of music in deaf culture, and nonverbal communication in the classroom. She is co-author of *Music in Special Education, and Music and Geriatric Populations: A Handbook for Music Therapists and Healthcare Professionals*; and editor of the text, *Introduction to Approaches in Music Therapy*. Darrow presently serves on the editorial boards of the *Bulletin for the Council on Research in Music Education, Music Therapy Perspectives, Update: Applications of Research in Music Education, Reviews of Research in Human Learning and Music*, and the *Florida Music Director*.

Email: alifsu@mac.com

Giorgos Tsiris is the editor-in-chief of the open access journal *Approaches: Music Therapy & Special Music Education*. He works as a research assistant at Nordoff Robbins and as a music therapist at St Christopher's Hospice (UK), while serving as the coordinator of the Research Network of the British Association for Music Therapy (BAMT). He is co-author of the book *Towards Ethical Research: A Guide for Music Therapy and Music & Health Practitioners, Researchers and Students*. Currently he conducts his doctoral research on music therapy and spirituality at Nordoff Robbins (City University, London).

Email: giorgos.tsiris@gmail.com

Note from the interviewer:

The idea for conducting this interview was born in July 2012, when Professor Alice-Ann Darrow and I met at the 30th ISME World Congress which took place in Thessaloniki, Greece. I hope this interview will serve as a vehicle through which Darrow's dedication, work and wisdom can be conveyed and inspire other practitioners and researchers in the field of special education and beyond. The interview took place via a series of emails, dated from September 2012 to April 2013, and was edited by Darrow and myself. An informal style has been maintained throughout this interview, reflecting the spirit of the dialogues that Darrow and I had face-to-face in Thessaloniki. Relevant references to other papers and sources are provided so the reader can find more detailed information about certain themes emerging throughout the interview.

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Background and early experiences

G: Alice-Ann, thank you very much for this opportunity to talk about your work and life.

AA: You are so welcome!

G: Could you please describe briefly your journey into music therapy and special music education?

AA: My entry into clinical work coincided with the passage of Public Law 94-142 in 1975, the *Education for All Handicapped Children Act*, a landmark in public education in the United States of America (USA). As a first-year music teacher and therapist in the public schools, I was excited and proud to be a part of these early historic efforts on behalf of children with disabilities. I was one of the first music therapists to work in the Dade County Schools in Miami, Florida, where I grew up. The purpose of PL 94-142 was to support states in protecting the rights of and meeting the educational needs of children and youth with disabilities. This historic law is now currently enacted as the *Individuals with Disabilities Education Act* (IDEA), as amended in 1997. Before PL 94-142, most children with disabilities were denied access to their neighbourhood schools and were educated in segregated institutions, if at all. I remember very few students with disabilities in the schools I attended when growing up. Many students with disabilities in public schools now receive music education and music therapy as a part of their educational experience. It has been exciting to observe such important changes in the field of special education over these past thirty-seven years. By chance, a number of family members had disabilities, both in my immediate family and extended family, so I was aware of disability issues early in life. As a musician, music therapist and music educator, I was also interested in the musical rights of all children. The public schools were the right place in which to bring these personal and professional interests together.

G: Can you think of any particular experiences that have played a key role in shaping your thinking and practice as a professional?

AA: I can think of three key experiences that shaped many of my beliefs about inclusion and music therapy practice. These experiences were 'eureka' days; those that you feel such euphoria in your chosen career.

The first was when five students of mine with profound intellectual disabilities performed on bells in a concert. The principal, parents and other students were shocked at what they could do and that it sounded so musical.

The second was when four students from the deaf education program were first introduced to the class that they would be mainstreamed into for music. It was a particularly precocious class and the students didn't understand how these four would function in their class. When they heard them play guitar, and play rhythms much more difficult than they could play, they responded, *"Yes, but they won't be able to sing with us!"* The four students proceeded to sign a song that was popular at the time; Mac Davis' *I Believe in Music*. The students in the class all tried to sign with them so I had the four students teach the signs, and we all signed and sang together. The students were well-received into the class after that and it was a wonderful experience for everyone.

The third experience was with a student who had severe behavioural problems in a very low-income school. I brought her and her classmates to the Olympia Theatre in Miami, Florida to see Walt Disney's Fantasia. She was entirely engrossed in the movie. She came back to school and wanted to hear the music from the movie (all classical of course) over and over. She remembered the visual for every piece played in the movie. I praised her and took her to the principal and played the music and let her explain the movie for each piece. She was so proud. She was a changed young lady after that experience and the praise she received from the principal. These experiences may not seem like much to someone who wasn't there, but I will never forget these students. There have been other experiences, but these three affirmed my chosen career early on.

Musical rights

G: Earlier on, you talked about 'musical rights'; a term I find very interesting and which makes me think of 'musical democracy'[1]. Drawing not only from your professional background, but also from your early experiences of the shifts in the USA political scene, could you please explain what 'musical rights' means to you?

AA: I see 'musical rights' as similar to cultural democracy. All students have a right to an aesthetic education. Students with disabilities were not routinely included in music education classes until the mid-to-late 1970s in the USA. Even today, some students with disabilities are not included in music classes in the public schools; others are given only music therapy services, which is beneficial to

[1] For details, see Insull (1992).

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their growth and development academically and/or personally, but music therapists do not attend to the musical growth of the child. If children are only given music therapy, they are being discriminated against in terms of their cultural and aesthetic education.

G: Could you please explain a bit further what you mean by saying that "music therapists do not attend to the musical growth of the child"? I am asking this question as some music therapists - especially those coming from a music-centred approach (Aigen 2005) – would perhaps consider one's musical growth as closely interlinked with their personal growth.

AA: I should correct that. The general purpose of music therapy, as opposed to music education, is to address non-musical goals (physical, social, emotional, cognitive, etc.)[2]. I am sure there are music therapists who are concerned that students with disabilities also learn musical skills. I am one of those music therapists, as I believe all children deserve the opportunity to develop as musicians and to develop skills in music that they will take with them into adulthood. I know a number of professional musicians with disabilities. I am glad there were music educators and/or music therapists who were as concerned with their artistic needs as well as their therapeutic needs.

Music therapy in context: Inter-disciplinary work and music beyond school life

G: What you say I believe can help us think about music therapy 'in context', not only in terms of other services (including music education) for students with special needs, but also in terms of students' lives and experiences beyond their educational setting. Would you like to comment on this interplay between music therapy and other services, and perhaps share your thoughts about how music therapy 'fits' with other services?

AA: I believe any therapist who thinks that he or she alone can address all the needs of a student with disabilities is decidedly misinformed, and perhaps a bit arrogant. I believe as music therapists we sometimes overreach, that is, we claim to address students' needs in the cognitive, physical, social-emotional, communicative and sensory areas. Indeed, we can, but rarely does a music therapist have expertise in all of these areas. If we do not seek the counsel of special educators, physical therapists, speech-language pathologists, audiologists, psychologists, behaviour specialists, and the like, we are probably not providing a student with the best possible services. Working as co-therapists, or consulting with a treatment team can give a music therapist's interventions breadth and depth that might not otherwise be possible. I have worked mostly with special educators and speech-language pathologists and have learned a great deal from them. I hope I have reciprocated with some valuable strategies for them as well.

G: Could you please give a couple of examples of what strategies you consider important for music therapists to share with (or pass on to) other professionals?

AA: I don't know if this qualifies as a strategy or a helpful reminder. Because I work primarily with people who have disabilities – individuals who are not ill, I think it is wise to be mindful never to pathologise their disabilities. That is, not to regard or treat them as psychologically atypical or unhealthy. Disability is a permanent condition, whether it is sensory, cognitive or physical. We can certainly help persons with disabilities to lead better lives and to rehabilitate or habilitate them to a certain extent, but they generally will live their lives as persons with disabilities. The more we regard them as 'one of us' and not 'one of them', the more easily they will integrate into society. We are a long way from eugenics, but we still have a long way to go to the day when persons with disabilities are fully integrated into society, particularly in the areas of community access, employment, education, and personal relationships. We will all experience disabilities of some sort, if through no other means than the natural process of aging.

G: So, are you suggesting that music therapists can play a key role in passing on strategies (or perhaps cultivating an attitude) in terms of promoting a resource-oriented and inclusive attitude towards people with disabilities?

AA: If by resource-oriented you mean resourcing other disciplines in our therapeutic work, then 'yes'. And yes, I think music therapists *must* have an inclusive attitude toward people with disabilities; otherwise, we are limiting the lives of these individuals. I rarely say anything that strongly (i.e., music therapists *must…*), but in this case the emphasis is intended. Persons with disabilities are a part of our communities; and consequently, deserve the same respect and opportunities that all other individuals receive and enjoy. When I am working

[2] According to the American Music Therapy Association (AMTA 2012), music therapy is "[…] is an established health profession in which music is used within a therapeutic relationship to address physical, emotional, cognitive, and social needs of individuals".

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with a person who has a disability, he or she is part of the treatment team, and also has the freedom to determine when it is appropriate to terminate music therapy services.

G: By resource-oriented I mean an attitude that focuses on, embraces and nurtures each person's and each community's resources[3], i.e. the things that one *can* do, instead of the things that one cannot do. Of course, this attitude calls for actions that 'empower' people and involve them in decision-making procedures – something that relates directly to what you have just said about including students with disabilities as part of the treatment team. But could you please expand briefly on students' participation in the treatment team and how this works?

AA: I believe in self-determination for all students, but especially for students with disabilities. They often have little opportunity to express themselves and what they want out of their lives and where they want to be and what they want to be doing as adults. The Individual Education Plan (IEP) used in the USA provides for students' input, which is good, but can be challenging if they wish to do something their parents see as unrealistic, or ill-advised, or if parents have goals in mind that are not in line with their child's interests or abilities. As a therapist on the treatment team, we try to build consensus, though our preference is to let the child direct his or her future.

G: In a way, this brings us back to the idea of music therapy *in context*. This time the context doesn't refer to other professions, but to the ecology of people's lives. I would like your views on what music therapy can offer people with special needs beyond the immediate educational setting. Here I am thinking not only of students' lives outside the classroom, but also (and perhaps more importantly) after graduation.

AA: Music therapists who work in schools must be concerned about their students' quality of life after graduation. Included in music therapists' responsibilities is the task of preparing students for their future and increasing the likelihood that music will be a part of that future. After the eventual termination of music therapy services, it should be every music therapist's wish that students continue to be consumers of music. Participation in music, either actively or passively, can make one's transition to community life less stressful, and more socially and cognitively engaged. Music therapists can also do much to encourage the continued musical and social growth of individuals with disabilities by presenting opportunities for music-making in the community, both before and after graduation. Community ensembles, church choirs, open mic night at various venues, civic concerts, and restaurants or bars that host local musicians are all opportunities for music-making and/or listening that are generally open to all individuals, regardless of musical skills or disabilities. Persons with disabilities may not be aware of all the community music activities available to them. Their enrolment or engagement in such activities may need to be facilitated by the music therapist. The necessary skill sets, such as concert etiquette or navigating transportation to various music venues, can be a part of their therapeutic goals before graduation. Participation in such organisations or performance events can make community life more rewarding and less threatening for people with disabilities.

G: One might say what you suggest here goes far beyond a traditional understanding of music therapy as something that takes place in specialised 'therapy rooms' and behind closed doors. I find your view exciting! Music therapy's potential in community engagement however, can be a complex task which requires wider social (and often political) change, including a change in community members' perceptions of people with disabilities. Have you ever encountered any problems or difficulties in engaging with community groups?

AA: Unfortunately, yes, or at least initially. I was working with a student who used a wheelchair and he wanted to sing in a community choir and a choir at his church. At first, the directors were reluctant because they were worried about getting him in the choir loft to sing on Sunday or on stage to sing at concerts. I suspect they were also concerned that the choir would be standing and he would be sitting, but once the logistics got worked out and they got to know him, they loved having him in their choirs.

I prepare future therapists and teachers for the classroom. I have heard concerns about individuals who are blind, use wheelchairs, or have Tourette syndrome. There were questions about how they would function in a classroom full of children. Part of my job is to convince principals or employers that they need not, and ought not to be concerned. Another aspect of my job is to make sure these individuals are prepared as therapists and educators such that the likely concerns of potential employers and colleagues are not warranted.

[3] See Rolvsjord's (2010) work on resource-oriented music therapy.

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Contribution to professional and disciplinary organisations

G: Alice-Ann, over the years you have served in a number of professional and disciplinary organisations, both nationally and internationally. Would you like to talk briefly about your work in these organisations?

AA: I have had several rewarding experiences with my primary professional organisations: National Association for Music Education (NAfME), American Music Therapy Association (AMTA), and International Society for Music Education (ISME). In NAfME I have served on the editorial boards of its two major research journals *(Update: Applications of Research in Music Education*, and *Journal of Research in Music Education*), and as chair of the Society of Research in Music Education (SRME). Through these research experiences, along with serving on the editorial boards of the two AMTA research journals (*Journal of Music Therapy* and *Music Therapy Perspectives*), I have been able to help shape the research agendas of our profession, and able to read some excellent research reports, which of course has informed my practice as well as that of my graduate students' practice.

G: In 2012 you also served as the chair of the ISME Commission on Music in Special Education, Music Therapy and Music Medicine, and you led the Commission's international conference which took place in Greece[4].

AA: For the Special Music Education Commission of ISME, I had not planned to be chair, but we needed a chair, and I said yes because I believe so strongly in the mission of the Commission. I am glad I did agree as I have met some wonderful practitioners and researchers from around the world through my work with ISME.

G: The next ISME World Congress takes place in Porto Alegre, Brazil (20-25 July 2014). What are the Commission's priorities and agenda for this conference, and who should attend?

AA: The Commission on Music in Special Education, Music Therapy and Music Medicine will again convene in Rio de Janeiro, Brazil between 17th and 18th July before the ISME World Conference begins on the 20th of July 2014. At the last commission meeting in 2012, I set up a working group in addition to the commissioners. We have so much talent in our commission that I wanted more people involved and working toward our 2014 conference. Lyn Schraer-Joiner is the new chair and she is doing an excellent job of getting the new commissioners and working group set up for the 2014 meeting. She and the chair-elect, Markku Kaikkonen have started a newsletter so that members are more informed about what is going on with the commission and are better able to connect and network with each other. International organisations are never easy to maintain. Distance is an obstacle, but this commission has grown and is on the right track. The agenda is for members to continue to present original research and share clinical perspectives with the intent of making us all more knowledgeable music educators and therapists, particularly regarding what is going on in other countries.

Aspirations for future developments

G: Reflecting on the future, how do you envisage the development of collaborative work between music therapy and special music education?

AA: I believe the lines between music education and music therapy will become a bit more blurred with the increasing inclusion of students with disabilities in classrooms and in society in general. I am pleased about that as I believe interdisciplinary practices in music education, music therapy, and other therapies as well will only strengthen the services students with disabilities will receive both in and outside of school. I suspect territorial issues will remain until we all find a place of comfortable co-existence, but I believe it will happen. We have a come a long way from the time when students with disabilities were segregated and placed into institutions and/or separate schools and classrooms. The full integration of persons with disabilities into society means that we as professionals must also learn to integrate our practices and feel comfortable with shared responsibilities. I see a bright future for music therapists, music educators, and the consumers of our services. I feel fortunate to have shared in so much of the educational history of students with disabilities.

G: Closing this interview, what are your aspirations and hopes for the future contribution of music in the lives of people with disabilities?

AA: My hope for the future is that all individuals with disabilities will be welcomed in their communities, to be able to find employment when appropriate, and have a social life that they find

[4] See ISME (2012) and Kaikkonen (2012).

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fulfilling. Of course, I hope that they also have lives filled with music, but most of all, I want them to have dignity and respect. There are still many countries where individuals with disabilities are not accepted into the mainstream. I hope that music educators and music therapists will work together to propel the disability movement forward.

References

Aigen, K. (2005). *Music-Centered Music Therapy*. Gilsum, NH: Barcelona.

AMTA (2012). Definition and quotes about music therapy. Retrieved on 5 December 2012, from: www.musictherapy.org/about/quotes

Insull, B. (1992). Music and Improvisation for Self-Expression: The Work of David Darling and "Music for People". In D. Campbell (Ed.), *Music and Miracles* (pp. 163-175). Wheaton, IL: Quest Books.

ISME (2012). Conference abstracts: "ISME Commission on Music in Special Education, Music Therapy and Music Medicine" (12-14 July 2012, Greece). *Approaches: Music Therapy & Special Music Education, 4*(2), 143-153. Retrieved on 9 June 2013, from: http://approaches.primarymusic.gr/approaches/journal/Approaches_4(2)_2012/Approaches_4(2)2012_Conference%20Abstracts.pdf

Kaikkonen, M. (2012). Conference report: "30th ISME World Conference: Pre-conference Commission Seminar on Music in Special Education, Music Therapy and Music Medicine". *Approaches: Music Therapy & Special Music Education, 4*(2), 139-142. Retrieved on 9 June 2013 from: http://approaches.primarymusic.gr/approaches/journal/Approaches_4(2)_2012/Approaches_4(2)2012_Kaikkonen_Conference%20report.pdf

Rolvsjord, R. (2010). *Resource-Oriented Music Therapy in Mental Health Care*. Gilsum, NH: Barcelona.

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Music Therapy by Proxy: Using Humanised Images in Song

Carol Chambers

Abstract

Developing awareness, exploration and expression of emotionally sensitive issues can be difficult for some clients in music therapy. They may find it hard to express emotion through improvised music and may turn instead to the perceived security of the repetition of known songs.

This paper presents the results from a completed research PhD, a qualitative case study based on naturalistic clinical practice, which examined the song choices of one woman in a medium-secure forensic unit over the three-year course of her music therapy.

A descriptive narrative account was subjected to analysis according to a modified form of therapeutic narrative analysis (Aldridge and Aldridge 2002), resulting in the abstraction of a series of generative metaphoric images, framed within a chronological series of events. Crucially, these images were found to be humanised figures, yet they were also emotionally decentred or depersonalised. When approached from the philosophical and methodological perspective of behaviourism, which views these as conditioned responses associating music with life experiences as part of a process of developing self-identity, such images can be seen to provide an unspoken voice for the client's feelings to be expressed in a manner that is personally revealing, socially acceptable, culturally accessible and therapeutically constructive.

I assert that using these third-person characters as a form of proxy facilitates mutual reference and experimentation, and places music firmly at the heart of a socially constructed process of music therapy.

Keywords: imagery; metaphor; song lyrics; forensic music therapy

Carol Chambers, PhD, qualified as a music therapist in 1982 at Roehampton, UK. She has worked with many client groups in private practice and, formerly, as Co-ordinator and Head Therapist at Nottingham MusicSpace, and she gained her PhD in forensic psychiatric music therapy from the University of Nottingham. Carol is a member of the research group 'Theatre, Dance, Music and Consciousness' at the University of Lincoln and has presented work on both music therapy and consciousness on an international basis. She is also a qualified teacher and is currently the Education Manager at HMP Lincoln, UK.

Email: carolmch@tiscali.co.uk

Note: This paper was presented at the 8th European Music Therapy Congress in Cadiz, 5-9 May 2010. An earlier version of this paper was published in the conference proceedings (Chambers 2011).

Introduction

Developing awareness, exploration and expression of emotionally sensitive issues can be difficult for some people in music therapy. Some clients find it hard to express emotion or life experiences through improvised music and may turn instead to the perceived security of the repetition of known songs. This paper draws on aspects of completed doctoral research which examined the use of songs chosen by women in forensic psychiatric units. It suggests that metaphoric images found within these songs, in the form of humanised images or depersonalised third-person characters, can be used as a form of proxy which provide not only an unspoken voice for the expression and examination of clients' feelings, but also a means of mutual reference which facilitates musical and personal experimentation and contributes to a socially constructed process of music therapy. I will provide a brief introduction to the theoretical framework and methodology of the whole research project

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before concentrating on a more detailed presentation of some of the most relevant results in order to demonstrate the process by which my assertions were developed.

Research framework and design

My PhD, entitled *Song and Metaphoric Imagery in Forensic Music Therapy* (Chambers 2008), grew out of ongoing clinical practice in two medium-secure psychiatric units for women when I noticed that many of the women avoided musical improvisation and instead chose well-known songs and repeated them endlessly. I wanted to explore and understand the significance, or the meaning, of these songs for the women concerned and so I adopted a qualitative research paradigm (Creswell 1998) with a naturalistic approach (Lincoln & Guba 1985: 37) where the music therapy sessions could continue largely unaltered. Both Creswell (1998) and Lincoln and Guba (1985) talk of building or constructing a complex holistic picture of the reality of the experience for all those involved. They focus on processes of interaction, mutual influence and shaping, all of which were particularly pertinent to me in my then dual, or even triple, role of therapist, participant and researcher. And so I chose to follow an emergent or inductive model (Bruscia 1995: 390) where the experience is paramount, methods of data collection and analysis may change, and hypotheses or theories may emerge from the process rather than dictating its course.

This rests easily within my philosophical framework of behaviourism (Skinner 1974; Watson 1931), with an integrated holistic view of a human organism, recognising consciousness and human experience as internal states that function in such a way as to provide foundational physiological stimulation that provokes complex conditioned responses previously acquired and shaped through environmental interactions. In my search for meaning, or rather, a philosophical view of the way meaning is produced within a specific context, behaviourism also shapes my choice of methodology in that I search for empirical data based on observable behaviours and then study this data for significant patterns which might indicate their underlying organisational factors, thus, lead to interpretation or explanation of why the women chose to behave as they did. If musical responses, in this case song choices, are defined as musical behaviours functioning as associative responses to past experiences and emotions, then an examination of the circumstances during present-day music therapy sessions in which responses are invoked and choices made, may reveal something not only of the women's lives but also of the nature of music as an active agent for structuring and transforming.

My path of enquiry therefore follows the tradition of a case study (Creswell 1998), investigating 'a contemporary phenomenon within its real-life context' (Yin 2003: 13) with articulated design in the logical collection and analysis of empirical data. Although I worked originally with 10 women, my case study was narrowed to focus specifically on one woman, Angela[1]. She was in her thirties and had a dual diagnosis of mental illness and learning disability as well as several physical conditions. She also had a long history of violent behaviour, which now focussed around the tearing of her own clothes and the destruction of any object coloured red; she was obsessed with blue and would only dress in, and have possessions of, blue and white. She had been in psychiatric care since her teens and had recently moved out of a high-security hospital. She was now the only black woman in the unit.

Angela attended 121 out of a possible 136 group sessions over the course of three years. These were open groups, generally attended by two to five women, and lasting between 45 minutes and 1.5 hours. Sessions were based on an improvisational model, typically beginning with a greeting song and leading toward improvisation using percussion instruments, guitar and keyboard. However, content also frequently focussed on pre-composed songs, at the women's request. In my session notes I listed all occurrences of Angela's song 'choices', defined as those where she suggested a song or she chose to respond in a noticeable way to one played by me or another member of the group. This resulted in a total of 25 songs as shown in Figure 1.

Analysis

I analysed these song choices according to a modified version of Therapeutic Narrative Analysis (Aldridge & Aldridge 2002: 1-4). This is a flexible form of research design which is both heuristic and "hermeneutic […] concerned with the significance of human understandings and their interpretation" (Aldridge & Aldridge 2002: 4). In brief, data 'traces' (in this case the song lyrics and subsequently the metaphoric images bound within them) are described and interpreted at different levels of abstraction, and events or 'episodes' are linked together to form a narrative or story.

In the first stage of this cyclical process, the timeline of songs (as shown in Figure 1), was decontextualised or abstracted from a descriptive account of the therapy sessions and searched for

[1] For anonymity and confidentiality purposes, her real name has been disguised.

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patterns. It seemed immediately apparent to me that the pattern in Figure 1 bears a close resemblance to the classical Sonata Form, falling loosely into three sections, the first having only two songs, or themes, predominating; the second introducing, or perhaps developing a wealth of new material; and the final recapitulation section returning to a focus on two songs, with Song 22 perhaps reinstating the absent Song 1. Comparison with the dynamic thematic development which would be expected in an archetypal model of sonata form gave a structure that shaped my questioning, a process which is described in detail in my thesis (Chambers 2008: 201-204). Using this outline structure as a guide, the songs were recontextualised back into the chronological account of the therapy and into a biographical account of Angela's life experience. This allowed the formulation of subjective perceptions, sense-impressions of the focus of each song, which summarise in succinct form the quality or sensation, perhaps the 'feel' of the personal experience. These impressions were encapsulated into verbal or visible constructs in the form of metaphors or images, intended to be the least abstract form of representation which would provide objective data for further exploration. At this point it might be useful to clarify that these images are my subjective representations, that I was not aware of some of them during the therapy process itself and that they were rarely verbally interpreted directly back to Angela. Instead, I consider them to be an almost hidden presence, contained and developed within the music which carries the lyrics, but credible nonetheless, as trustworthy data for research, verified by the ongoing development of our mutual musical dialogue. Also, these sense-impressions were categorised into bi-polar constructs (such as 'good-bad'), opening up the data to further interpretation. This process of recontextualisation generated a synthesised research narrative and explicated a processional understanding of the music therapy. This linear, temporal treatment of the data is the modification which I made to Aldridge and Aldridge's (2002) design, which usually presents constructs according to spatial or hierarchical conceptual structures.

There follows a second stage of the cycle in which the metaphoric constructs themselves are decontextualised again and searched for further patterns at a deeper level of abstraction and are regrouped into themed categories, but these are not the focus of this paper. Here, I will return to the first cycle of research to begin to present some of my results.

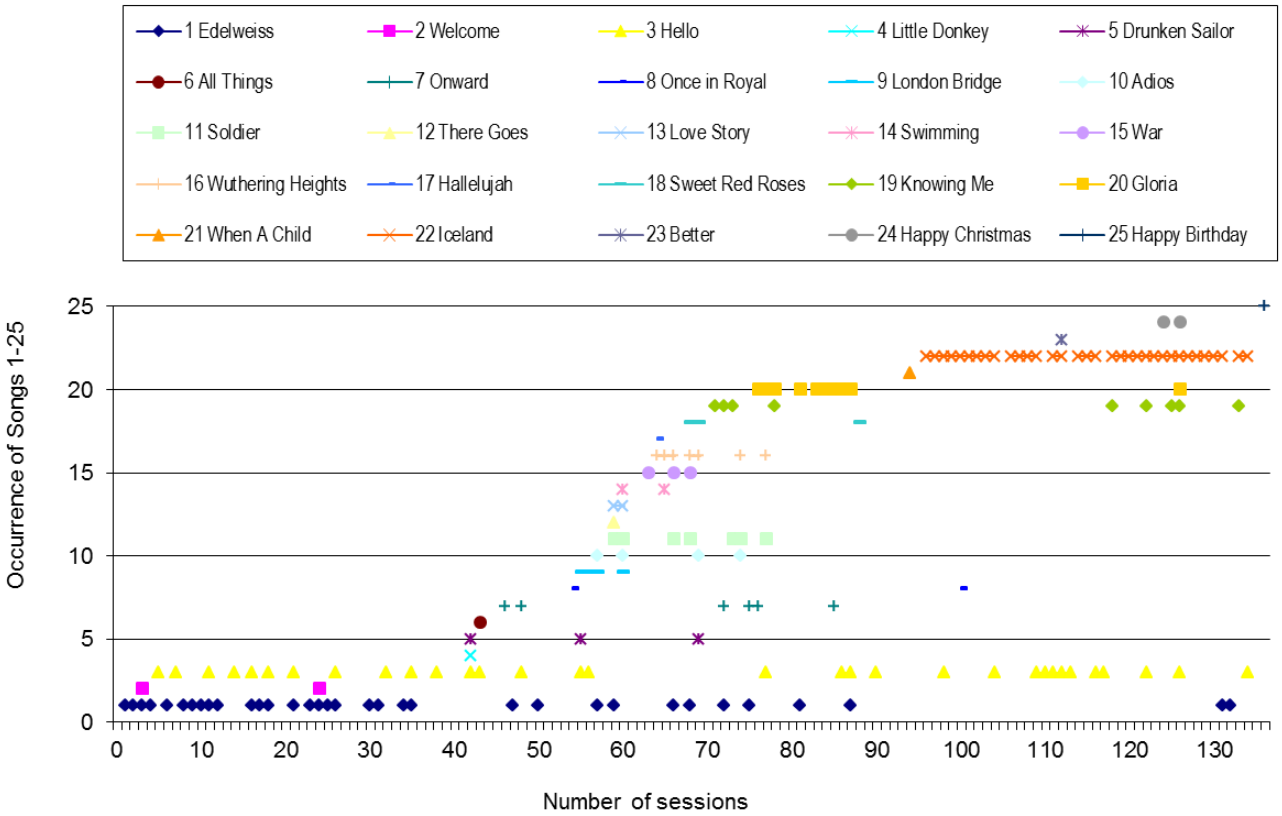

Figure 1: Timeline of songs

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Results

Song images

During the first cycle of recontextualisation I formed 12 sense-impressions in the form of metaphoric images, which summarise and make visible the themes from 12 of the 25 songs:

The Nun	*Mary on a donkey*	*The Drunken Sailor*
The Dentist	*A Fine Lady*	*A Soldier*
Swimming	*Red Roses*	*'Abba'*
'Gloria'	*Mother and Baby*	*Iceland*

Below I provide three short examples to show this process of image-creation:

Example 1: The Nun

This image was extricated from Song 1 *Edelweiss*[2]:

Edelweiss, Edelweiss, Ev'ry morning you greet me.
Small and white, clean and bright, you look happy to meet me
Blossom of snow, may you bloom and grow, bloom and grow forever.
Edelweiss, Edelweiss, bless my homeland forever.

On first impression the image could be the Edelweiss flower but Angela never used this word. She called the song "Nun music", presumably relating to the storyline of the musical and the nun, Maria, who became step-mother to a large family of children. This song was used initially to create an atmosphere of stillness and calm, being played repeatedly and precisely with no alterations. With its emphasis on 'greeting' and 'growing' it was imbued with Angela's aspirations towards acceptability, both socially in the group and personally, with a wish to be recognised, like a nun, as a 'good' person, experiences which were otherwise unattainable in her everyday life in the secure unit. Later on, we were able to relax our perfect re-creation of the song and make changes to it, adding our own improvisations, and it was used on a deeper level to express and to explore some of the bad experiences in her life, including her dilemmas with self-identity and racial abuse. It also led to the revelation that Angela, as a very young child, had been abandoned by her own mother and subsequently fostered: another link with Maria the nun, who can now be seen to represent the bi-polar construct of the Good-Bad mother figure.

Example 2: A Fine Lady

This image was extricated from Song 9 *London Bridge*[3], which had appeared in session 55:

London Bridge is falling down, falling down, falling down,
London Bridge is falling down, my fair lady.
Build it up with iron and steel, iron and steel, iron and steel,
Build it up with iron and steel, my fair lady.

Angela requested this song several weeks after being diagnosed with multiple sclerosis, several episodes of actually physically falling down during the music therapy sessions, the gradual loss of her ability to walk, and finally her need to use a wheelchair. This song seemed to not only express the physical difficulties that she had faced, but also it gave her a chance to 'build up' her emotional support and recovery in recognising and accepting the practical assistance of the 'iron and steel' of the wheelchair, in ways that she was unable to express verbally. She called the song "My Fine Lady" and so the image depicted is the lady, not the bridge of the song title.

Example 3: The Soldier

Unlike the previous two examples, the figure of the Soldier, taken from Song 11 *Oh Soldier*[4] (from session 59), features in the song title and is one of the two main characters in the song.

"Oh soldier, soldier, won't you marry me, with your musket, fife and drum?"
"Oh no sweet maid, I cannot marry thee, for I have no coat to put on."
Then up she went to her grandfather's chest and got him a coat of the very, very best,
She got him a coat of the very, very best, and the soldier put it on.

There was nothing in Angela's life history that I could link to soldiers or marriage, yet she was very agitated by this song and would shout excitedly, "Soldier! Soldier!" hence the choice of this image. The underlying issue, however, turned out to be the clothes, or rather the soldier's lack of them. Angela had destroyed most of her own clothes and once, in session 41, had to borrow some in order to attend

[2] Rodgers & Hammerstein (1959). *The Sound of Music*, published by Williamson Music.

[3] Traditional. Anonymous (1956). *The Puffin Song Book* Harmondsworth: Puffin Books.

[4] Traditional. Anonymous (1985). *Strawberry Fair: 51 traditional songs.* London: A&C Black.

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the music therapy session. But now, over the course of three or four months, she painstakingly dressed the soldier in new and different clothes: trousers, a hat, a coat, and finally in "a smile". She grew in confidence as she manipulated the lyrics of the song, taking charge of the soldier's situation and, in the process, dealing with her own issues with clothes, colour, racial identity and aggressive behaviour. Angela's personal expression developed and we were able to improvise around a theme of marching. This influx of issues, and the growth from expression of aspirations to exploration of life struggles, reached a peak in session 60 when both *London Bridge* and *Soldier* were repeated several times, and Angela, in a moment of insight and clarity, was finally able to verbalise, "I can't walk, Carol".

Human figures as Proxies

During the second cycle these images were decontextualised from the songs and grouped together visually for the first time in order that patterns or episodes within them could be seen more clearly. (The twelve images can be seen here in Figure 2). In this simplistic presentation, one theme is immediately made clear – the images are overwhelmingly of human figures. Perhaps this should not be surprising as song lyrics are written by people, for people, and often portray human emotions and experiences. But in many of the songs the human figure is not the main character in the narrative and alternative symbols could have been chosen. However, the essential relevance of the chosen images is validated by the client's own words and by interpretative analysis of her experiences in and around the music therapy sessions.

What is common to these three songs (and the images constructed from them; see examples above), and many of the others, is that they are not necessarily great musical works but simple, perhaps almost inane, well-known traditional folk or children's songs. Their importance lies in this common cultural accessibility and social acceptability: every member of the music therapy group knew them and could participate in them to a greater or lesser extent. And the main characters are easily understood for they are archetypal figures to which we all can relate for we already know how a nun, a fine lady or a soldier is expected to feel and behave.

This was crucial for Angela in the process of presenting and manipulating her experiences, issues and emotions during the music therapy. She lacked sophisticated language use due to her pathology, learning disability, increasing physical difficulties with speech and, above all, due to her difficulties with social integration into the group. Many of the other women would not listen to Angela's attempts at verbal communication and they treated her with differing degrees of contempt. But mutual participation in song was acceptable at times, and this gave Angela the opportunity not only to be heard and listened to by the group, but to express her own emotions through the re-creation and re-performance of the songs. By relating to human figures, or through association with human emotions and experiences contained within the lyrics, Angela was able to explore and adapt her feelings and behaviours through the manipulation of the characters in the music. In effect, she used the metaphoric images as a form of Proxy, a substitute or agency acting on her behalf. These Proxies are humanised yet essentially depersonalised figures which display easily understood human emotions and behaviours but which negate any need for direct personal self-disclosure. Through their mutual creation and re-creation, Angela was able to test new ways of behaving, experience the formation of new successful social relationships and absorb new ideas and grow in her own confidence, self-identity and self-expression.

Reverse chronology

Such usage of Proxy in songs was not restricted to isolated incidents but was shown to be part of an ongoing creative process throughout the entire course of music therapy. During the second cycle of recontextualisation in the narrative analysis, plotting the occurrences of these images back into a chronological account of the therapy sessions and against a biographical account of Angela's life experiences resulted in Figure 2, which effectively portrays a soundtrack of Angela's life. Rolla (1993: 83) describes a 'soundtrack process' where clients choose personal memories of music and experiences and integrate them together on a recording to reveal and explore a synopsis of life. Ruud (1998: 82) refers to a soundtrack as "a map that helps to organise a sense of identity" and is therefore a musical structuring that functions in constructing personal meaning, locating incidents in time and space.

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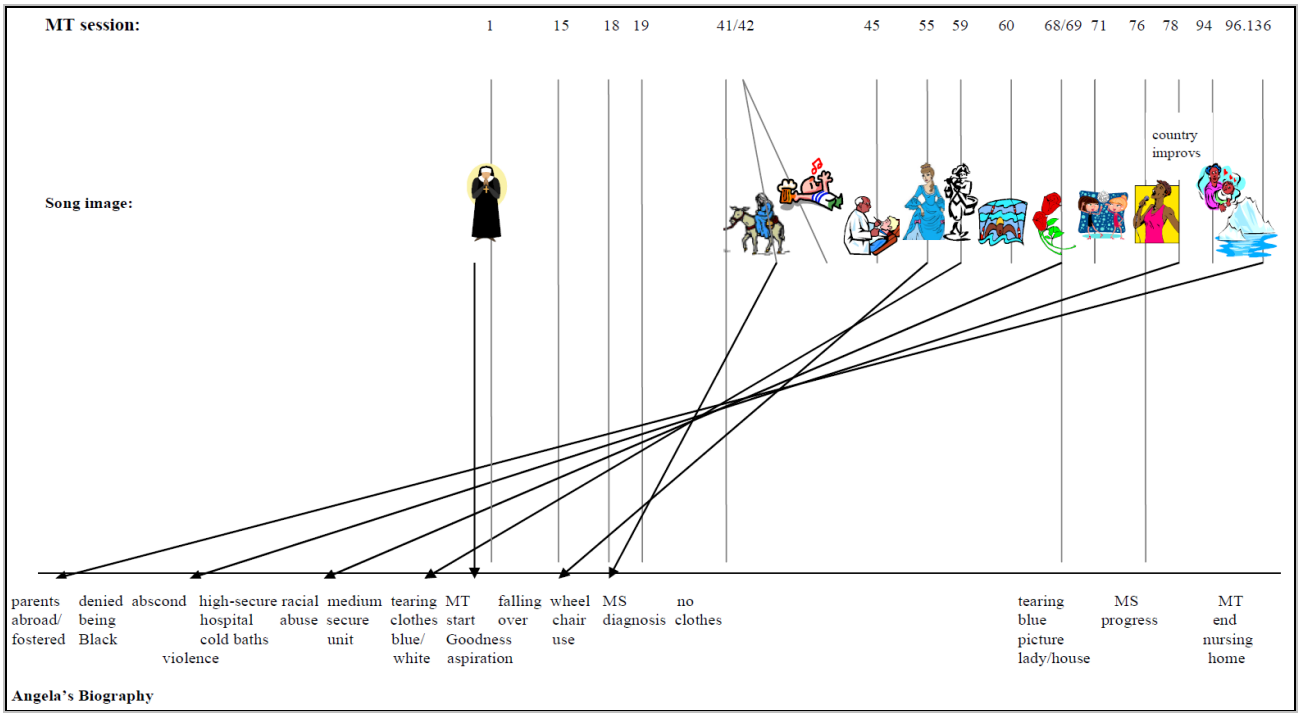

Figure 2: The life soundtrack / reverse chronology

Time was shown to be particularly important in my research. Figure 2 is a two-dimensional depiction of a three-dimensional temporal process in which, as the music therapy progresses chronologically forwards, the images relate to life experiences that are biographically increasingly further back in time, yet all relate to the present day and current activities in and around the therapy sessions. For example, the Proxy figure of the Nun relates to the present time at the start of therapy, with Angela's current aspirations towards goodness and acceptance. The *Fine Lady* from session 55 goes slightly back in time to relate to Angela's falling down and subsequent use of a wheelchair. And *The Soldier* presents issues which began before the start of music therapy, relating to her obsessions with colour and the tearing of her clothes. As this model takes account of the onward passage of time and the links between the events of the past and the current 'here-and-now' it results in an ongoing spiral or looped effect. I have described this crossover of temporal processes by the term 'Reverse Chronology'.

I am not suggesting that Angela is aware of these images, nor that she is deliberately using them. Indeed, as her therapist, I was not clearly aware of many of them until later in the research process. What I do assert, from the base of my theoretical framework of behaviourism, is that events in the present-day give rise to songs, and their respective metaphoric images, which have a direct association with previous life experiences. This process is one of conditioned responses whereby significant life events or strong feelings have become associated with the music of the time and either musical or emotional memories may then be resurrected at a later date as a direct response to a current stimulus of the same or similar music or emotions. This also contributes to an explanation for the preponderance of songs from childhood or from an earlier era. And what makes them most powerful and accessible are the culturally identifiable human figures contained within them; the Proxies that act as substitute speakers. As Angela journeyed back through the events of her early life, with one stimulus prompting another along the soundtrack trail, such figures had a structurally adaptive function, enabling her to relive, recreate and finally to transform her current understanding, patterns of behaviour and social relationships.

Conclusion

In conclusion, the use of metaphoric Proxy images in song which are both humanised and depersonalised provides a cultural framework in which social, musical and therapeutic relationships based on equality of power and choice of decision-making can be successfully negotiated. This research has focussed on song lyrics, the images contained within them and the experiences which they express but, in constructing a personal narrative, in creating, recreating and expressing an individual's changing identity and insight, I assert that using songs is a constructive relational process. It is this use of 'Song', as a deeper transformative process rather than the actual product of the songs

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produced, which is important. And so, in this case, Song has become not only the means of therapy but also the structural foundation on which the methodology of analysis in the process of research is based.

References

Aldridge, D. & Aldridge, G. (2002). Therapeutic Narrative Analysis: A methodological proposal for the interpretation of music therapy traces. *Music Therapy Today, December issue*. Retrieved from: www.musictherapyworld.de

Bruscia, K.E. (1995). The Process of Doing Qualitative Research: Part 1: Introduction. In B.L. Wheeler (Ed.), *Music Therapy Research: Quantitative and Qualitative Perspectives* (pp. 389-399). Phoenixville, PA: Barcelona.

Chambers, C. (2008). Song and metaphoric imagery in forensic music therapy. *PhD thesis* Retrieved from: http://etheses.nottingham.ac.uk

Chambers, C. (2011). Music Therapy by Proxy: Using Humanized Images in Song. In P.L. Sabbatella (Ed.), *Evidence for Music Therapy Practice, Research and Education: Selected Readings* and *Proceedings of the VIII European Music Therapy Congress, May 5-9, 2010*, Cádiz, Spain (pp. 135-142). Granada: Grupo Editorial Universitario.

Creswell, J.W. (1998). *Qualitative Inquiry and Research Design: Choosing Among Five Traditions*. Thousand Oaks: Sage.

Lincoln, Y.S. & Guba, E.G. (1985). *Naturalistic Inquiry*. Newbury Park, CA: Sage.

Rolla, G.M. (1993). *Your Inner Music: Creative Analysis and Musical Memory*. Wilmette, IL: Chiron.

Ruud, E. (1998). *Music Therapy: Improvisation, Communication and Culture*. Phoenixville, PA: Barcelona.

Skinner, B.F. (1974). *About Behaviourism*. London: Jonathan Cape.

Watson, J.B. (1931). *Behaviourism (2nd Edition)*. London: Kegan Paul.

Yin, R.K. (2003). *Case Study Research: Design and Methods (3rd Edition)*. Thousand Oaks: Sage.

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Effects of Community African Drumming on Generalised Anxiety in Adolescents

David Akombo

Abstract

The purpose of this study was to test the effects of community music projects (CMPs), such as after-school African drumming circles, on academic performance and generalised anxiety in adolescents. Adolescents from a Junior High (7th, 8th, and 9th graders, age range from 12-14) in the *State of Utah (USA) participated in the study. A one-sample t-test found a significant difference in reading scores (df(4) p=.004). A paired samples t-test found a significant relationship between the maths trait anxiety score pre-intervention and the total state anxiety score pre-test (df(4) p=.033). A paired samples t-test found a significant relationship between the reading trait anxiety score post-intervention and the total state anxiety score post-test (df(4) p=.030). This research demonstrates the effectiveness of community music such as drumming for reducing anxiety and also for improving academic performance in adolescents. CMPs are recommended as a non-invasive intervention modality for adolescents.*

Keywords: African drumming; anxiety; academic performance; community music projects (CMPs)

Dr David O. Akombo is currently Director of Music Education, Assistant Professor of Music and Associate Graduate Faculty at Jackson State University in Mississippi (Mississippi, USA) where he teaches undergraduate and coordinates Graduate Studies program in Music Education. Dr Akombo's extensive training includes a Bachelor of Education (B.ED.) degree from Kenyatta University in Kenya. He obtained a Master of Arts (M.A.) degree from Point Loma N. University in California, USA, a Master of Music in Ethnomusicology (M.Mus.) from Bowling Green State University in Ohio, USA, and a Doctor of Philosophy (Ph.D.) degree in Music Education from The University of Florida in Gainesville, Florida, USA. He has authored several articles, two books: *Music and Healing across Cultures* (2006), and *Music and Medicine: Connections Found* (2009), and presented at regional, national, and international conferences. Dr Akombo is a Co-Founder of the Interdisciplinary Society for Quantitative Research in Music and Medicine (ISQRMM) and Editor of its peer-reviewed Proceedings publications.

Email: dakombo@hotmail.com

Introduction

The purpose of this pilot study was to test both the academic and health benefits of community music projects (CMPs). The study examined whether CMPs, such as after-school drumming circles, can lead to altered levels of both state and trait anxieties and whether these alterations can ultimately improve the academic achievement in maths and reading in adolescents. This pilot study is the first of its kind to investigate specifically the direct effects of African drumming as a CMP variable that could impact both state and trait anxieties in adolescents, and ultimately their academic achievement. Three hypotheses guided this study: (1) CMPs have no effect on pre and post trait anxiety in adolescents; (2) CMPs decrease state anxiety in adolescents; (3) CMPs can increase maths and reading scores in standardised tests of adolescents. The testing of the hypotheses was conducted at 0.05 level of significance ($p<0.05$) for rejection or retention. Consistent with studies on the general effects of music on adolescents, previous investigations have demonstrated the effects of self-selected music such as hip-hop on teenage anxiety levels in predicting altered state and trait anxieties (Arganbright & Lee 2007). No study, however, has addressed community musical experience, specifically African drum circles, a

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musical genre that has continued to spur interest among adolescents in the State of Utah (USA) today.

Community music and academic achievement

Research shows that CMPs can have a positive effect on mathematic and writing achievement in adolescents (Southgate & Roscigno 2009). Additionally, socioeconomic status and ethnicity affect community music participation and overall academic success (Catterall, Chapleau, & Iwanaga 1999; Coleman 1968).

Community music is positively associated with academic achievement especially during the middle and high school years (Deane & Mullen 2013). A CMP is defined as a participation that consists of music lessons taken in or out of school with a heterogeneous group. In reference to the structural organisation of the CMPs, Rimmer observes:

> "[the groups] typically meet for sessions of somewhere between one and three hours, once or twice a week, during which time community musicians work, through the use of a variety of teaching-learning strategies, to facilitate 'hands-on' musical activity" (Rimmer 2009: 72).

Many of these CMPs aim to reach the 'at-risk' youth that easily fall through the cracks. The communities may benefit from these programs by preventing these youths from being out on the streets living lives of crime.

Community music and overall wellness

Many school administrators in the past decade have continued to use community music in addition to the students' overall educational experiences. This decision has been supported by Beczkala (1997) who observed that students' educational experiences can be achieved by employing music educators who use music to bring about these desired changes.

Rimmer (2009) observes that there is a need to develop more effective programs that really demonstrate significant results in mitigating the 'at-risk' youth. Communities need to be exposed to music sessions so they can be as involved as possible.

Children from higher socioeconomic levels participate more in music than children with lower socioeconomic status. In addition to social class as a predictor of community music participation, ethnicity is also a factor (National Endowments for the Arts 2013).

The effects of anxiety on children have become a national concern (Brophy 1986; Neil & Christensen 2009). Anxiety in children can be physically and emotionally debilitating. In today's society, we see strife and anxiety everywhere (Giles 1990). American schools, faced with violence and crime, are looking for ways to mitigate this situation. A wide range of emotional, stress-related problems, such as teenage suicide, teenage pregnancy, delinquency, violence in schools, the physical and sexual abuse of children, and drug use among youth are all of national concern. These social ills are mainly a result of generalised anxiety disorder such as worry and tension (Akombo 2009). Crimes committed by children, even murder in schools, are increasing in the USA due to lack of primary, secondary and tertiary prevention modalities. Primary prevention involves measures focused on improving the general wellbeing of individuals, secondary prevention focuses on intervening with children and youth who are at risk for becoming offenders or victims, and tertiary prevention involves measures directed toward those who have already been involved with crime or victimisation (Van Dijk & de Waard 1991).

When students miss the opportunity to process their negative emotions and experiences from both home and school, these can impact their ability to complete homework and other academic tasks. Lack of completion of these tasks can have an impact on their academic achievement. Students may become ill, drop out of school, and in extreme cases may even commit suicide (Giles 1990; Goodland 1984). It is hypothesised that CMPs can be an effective intervention for these children. Research has shown that drumming along with our own heartbeats alters brainwave patterns (increasing alpha waves) and dramatically reduces anxiety (Akombo 2001, 2006; Hammer 1996; Rimmer 2009; Spintge 2001). For many years, research has shown the beneficial nature of music on physical and emotional states (Rotberg, Schoen, & Zalsman 2008). Recognising these effects can assist school programs to incorporate music in their modalities.

Cultural significance

Many studies have been carried out to test the effect of music in general on the anxieties of school aged children. Music involving drumming has particularly been examined on a cultural level. Using culturally-specific music as an intervention modality can help to alleviate symptoms of anxiety and depression (Wheeler 1985). In another study of a drumming intervention, Doak (2006) found no significant decrease in the anxiety levels. Conversely, Harner (1994) reported a decrease in

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anxiety levels in a study on meditation and drumming. Numerous other studies have found correlations between culturally-specific music and anxiety (Chang, Chen, & Huang 2008; Harner 1994; Thompson & Grocke 2008; Yu, Liu, Li, & Ma 2009).

The education of the community in the benefits of creative arts programs in schools has the potential to increase connectedness within the entire community. After-school programs have the potential to affect the school, the family and the community (Kanter 2001). The CMPs can provide safe havens and avenues for children who might not have otherwise had a chance to succeed. It is hoped that the children who participate in the CMPs will be better members of society, because increased academic achievement is associated with participation in after-school programs. The CMPs also show improved behaviour and a better outlook on the future for those involved in the projects (Kanter 2001; Lister, Tanguay, Snow, & D'Amico 2009). This has been clearly demonstrated by Dillon, in stating "[the participants] receive acknowledgement, affirmation and a sense of belonging from the community" (Dillon 2006: 272). This increased sense of community can also affect interpersonal relationships and group dynamics, which all contribute to a well-rounded education.

Interpersonal relationships might include family and peer relationships. Involvement in music has the potential to improve these relationships (Jones 2007) which can increase the potential of the children to develop and maintain connections within a whole community. A study by Kaplan (1999) found that group cohesiveness was increased with a drumming group. These benefits are attributed to the group playing music together, with a fixed drum beat creating a sense of belonging, emotional and physical connectedness.

Methodology

Anxiety has been defined as a stimulus, as a trait, as a motive, and as a drive (Endler 1983). Spielberger (1966) suggested that much of the conceptual ambiguity in defining the construct of anxiety was due to the lack of a distinction between trait anxiety (A-trait) and state anxiety (A-state). A-trait refers to a more stable predisposition or proneness to state anxiety while A-state is conceptualised as a momentary or situational emotional reaction accompanied by physiological arousal.

This pilot study was carried out at a Utah Public School District on Ogden Utah (USA). The public school in central Utah serves a diverse population which includes African Americans, Latinos, and Asians, who are all defined as low-income and some of whom have limited-English language ability.

Two research questions guided this study:

- What effect does a community music project (CMP) involving African drumming have on generalised anxiety in adolescents?
- What effect does CMP involving African drumming have on academic performance?

The researcher used a within-subjects design in which each participant served as his or her own baseline scores hence providing two sets of score. This design was approved by the Institutional Review Boards of the researcher's institutions. After being approved by the Institutional Review Board of Weber State University, an explanation of the study was presented to all students whose consent forms had been signed by their parents and teachers. If the students agreed to participate in the study, a signed consent form was obtained from the parents since all the students in the study were younger than 18 years. Before the study began, the researcher read the standard consent letter describing the study, potential risks and benefits, protection of confidentiality and the recompense (a CD of the African Drum Music and a raffle for 160 GB Apple iPod) with the students who expressed interest. Each student who expressed a willingness to participate in the study was asked to sign and provide salient demographic information for the data analysis. If the selected child refused to participate in the study at the initial contact or the parent did not grant the consent, the researcher would thank the student and move on to the next student on the list.

The study proceeded only after a consent form had been signed. Seventeen participants were African Americans, eight were Caucasian, and twelve were Hispanic. Nineteen participants were female and eighteen were male. All students had cognitive ability to complete the study. English was the first language for all participants. The data collected included the socio-demographic information such as age, gender, and race. The researcher then coded the information based on the standardised data coding form. Using a semi-structured interview, the researcher used questions that sought to find out whether students enjoyed listening to music, singing, or dancing. The questions also sought to find out whether the students attended other CMPs, or whether or not these ever took place in their home environments and who organised them. Another aspect that was discussed during the semi-structured interview was the students' level of musical knowledge, including formal and non-formal music education. Upon completion of the study, the participants were

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debriefed on their experience of data collection and specifically on difficulties encountered in the process.

On the first day, the students spent half an hour on maths and half an hour on reading tests of the Utah Basic Skills Competency Test (UBSCT). The UBSCT aims to ensure that all students leaving middle school possess a set of basic skills in writing, reading and maths. This test is part of the Utah Performance Assessment System for Students and is one of a series of state and national tests which aims to hold schools accountable for student achievement. Each test required about half hour to complete.

The drumming activity began on the next day. In the first five minutes, the researcher gave an introduction to different countries on the continent of Africa, such as Ghana, Kenya and Mali. Different drum music from a different African country was featured each week. The perspectives of geography, history, music, and dance were presented to the participants to familiarise them with the different drum patterns found in the music of Africa and to make the drumming session educational. Opening with a drum call, the participants were asked to be quiet, listen to the instructions and get ready to start to learn drum patterns in a call and response style. Their participation was required. The researcher then spent the next thirty minutes drumming together with the students. They then took a ten-minute break for water and snacks and returned to the classroom to complete a survey answering the questions on the State Trait Anxiety Inventory (STAI) questionnaire (see Table 1 on steps of the research design in chronological sequence).

The State Trait Anxiety Inventory (STAI) was designed to be self-administered with no time limits, and may be given to either individuals or groups of respondents. The scale consists of twenty statements that evaluate feelings of apprehension, tension, nervousness, and worry. The instructions for the state anxiety items require respondents to report the intensity of their feelings of anxiety, 'right now' or at this moment, by rating themselves on a four-point Likert scale: (1) "Not at all"; (2) "Somewhat"; (3) "Moderately So"; or (4) "Very Much So". In responding to the trait anxiety scale, subjects are instructed to indicate how they generally feel by reporting how often they experience the anxiety-related feelings and conditions described by each item on a 4-point frequency scale: (1) "Almost Never"; (2) "Sometimes"; (3) "Often"; or (4) "Almost Never". The STAI scale is one of the most popular tools used in clinical settings and is available in seven languages (Stouthard, Hoogstraten, & Mellenbergh 1995). Scores increase in response to physical danger and psychological stress. The STAI takes approximately five to ten minutes to complete. An overall score is derived by coding positive statements (e.g., "I feel secure") and then adding all items. Possible scores for each scale are between 20 and 80. A higher score indicates greater anxiety. The STAI has been used extensively and has reported reliability (Cronbach's alpha) ranging from .83 to .92 (Barnes, Harp, & Jung 2002). Cronbach's alpha is an index of reliability associated with the variation accounted for by the true score of the underlying construct (Cronbach 1951). A high value of alpha is often used as evidence that the items measure an underlying construct.

Weeks	Days	Research activity	Duration (minutes)
1	1	Demographic questionnaire	5 mins
		STAI-C (state and trait subscales)	10 mins
		UBSCT Reading test	30 mins
		STAI-C (state and trait subscales)	10 mins
		Break	10 mins
	2	STAI-C (state and trait subscales)	10 mins
		UBSCT Maths test	30 mins
		STAI-C (state and trait subscales)	10 mins
		Break	10 mins
	3	STAI-C (state subscale only)	5 mins
		CMP session	30 mins
		STAI-C (state subscale only)	5 mins
		Break	10 mins
2 (same for weeks 3-7)	4 (same for days 5-9)	STAI-C (state subscale only)	5 mins
		CMP session	30 mins
		Break time	5 mins
		STAI-C (state subscale only)	5 mins
		Break	10 mins
8	10	STAI-C (state and trait subscales)	10 mins
		UBSCT Reading test	30 mins
		STAI-C (state and trait subscales)	10 mins
		Break	10 mins
	11	STAI-C (state and trait subscales)	10 mins
		UBSCT Maths test	30 mins
		STAI-C (state and trait subscales)	10 mins
		Break	10 mins
		Semi-Structured Interviews	60 mins

Table 1: Steps of the research design in chronological order

In evaluating the maths and writing grades, the researcher examined the measures of central tendency in the two tests. The UBSCT grades of the participants from the pre-test session were

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designated as baseline or Entry Point (EP) and the second scores the participants achieved at the end of the eight-week intervention was the post-test or Exit Point (XP). This pilot research study used a repeated-measures design. The research objective was to compare the data for the pre- post-measurement of the maths and reading tests and then compare them with the repeated measures of the state and trait anxiety within subjects. In a within-subjects design, each participant provides more than one response. Since the analysis method in this research required comparison of means, the t-test[1] was most suited since it is the most commonly used method to evaluate the differences in means between groups (Glass & Hopkins 1996).

Results

The statistical analysis used in analysing data was performed in SPSS 16.0. The analyses used were a number of t-tests, correlations, and ANOVA. In the analysis, $p < .05$ was a determinant of statistical significance. A t-test found significant difference in maths scores ($df(4)$ $p=.041$) from before the drumming intervention and after. The mean maths score prior to the drumming intervention was 34.60 ($SD=10.06$). The mean maths score post-intervention was 37.60 ($SD=16.36$). The mean reading score prior to the drumming intervention was 33.60 ($SD=22.15$). The mean reading score post-intervention was 44.60 ($SD=16.86$). A one-sample t-test found a significant difference in reading scores ($df(4)$ $p=.004$). A paired samples t-test found a significant relationship between the maths trait anxiety score pre-intervention and the total state anxiety score pre-test ($df(4)$ $p=.033$). A paired samples t-test found a significant relationship between the reading trait anxiety score post-intervention and the total state anxiety score post-test ($df(4)$ $p=.030$). A t-test found statistical significance when comparing the pre-post state anxiety scores of the baseline and those recorded following the CMP session. A t-test found significance in pre-intervention and post-intervention trait anxiety scores ($df(4)$ $p=.037$). With paired samples correlations significant relationships were found between state anxiety pre-test and post-test in week 3 ($p=.006$), week 5 ($p=.034$), and week 7 ($p=.044$).

[1] The t-test is a comparison between two sets of measures' means which takes into account the differences in group variation and size of the two groups. The assumptions of the t-test must be met in order to provide the most powerful test of the hypothesis.

Discussion

The purpose of the present study was to explore the effects of community music projects (CMPs) involving African drumming on generalised anxiety and academic performance of adolescents. The study supported the hypothesis that there would be no difference between the pre and post trait anxiety, but did not support the hypothesis that state anxiety would decrease. Maths and reading scores did not significantly increase after the music intervention, thus the hypotheses of increased academic performance from music intervention was refuted.

The hypothesis that reading scores would increase after the drumming intervention, was supported. A significant increase in reading scores was found, which would suggest that CMP might have contributed to this increase. These results are similar to other studies which have suggested that music interventions in school have increased reading scores (Kinney 2008; Southgate & Roscigno 2009). Kiger (1989) found significantly higher reading test scores when students listened to music compared to completion in silence. In Kiger's (1989) study the music was played during the reading comprehension test. In the current study, participants were in a drumming group over the course of six weeks and reading scores were measured before and after the music intervention.

The results of the current study are not consistent with Etaugh and Michals (1975) who found no significant increase in reading comprehension after a music intervention. Personality may be a contributing factor when studying the effects of music on reading comprehension (Daoussis & McKelvie 1986; Furham & Strbac 2002). Personality traits were not measured in the current study, and could have been a contributing factor to the results. Other explanations for the increase in reading scores in the current study might include differences in the level of reading abilities in participants and an increased reading ability due to the school curriculum. Overall, contradictions in results from various studies would merit the need for further research in the effects of music on reading comprehension. Specifically the effects from a community music group on reading performance.

The hypothesis that maths scores would improve with a CMP intervention was not supported. Although there were no significant results, some participants' maths scores increased after music intervention whilst for others, scores decreased. The results of this research are consistent with Southgate and Roscigno (2009), who found that maths scores did not improve with music participation in adolescents and a study by Furnham and Strbac (2002) who also found no

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significant difference in mental arithmetic tasks with adolescents when music was present.

However, this study also found improvement in maths scores with children. Schellenberg (2004) found that music lessons increased intelligence quotient (IQ) levels in children. The similarities in these findings with the differences in effects of music on children and adolescents, requires future researchers to look at this issue in more depth. A possible explanation might be that adolescents have a greater variety of external and environmental conditions affecting their academic performance. These influences might include puberty, social pressures, and self-esteem.

The results of the current research are not consistent with Kinney's (2008) finding that maths scores were significantly higher with 8th graders involved in CMPs after a couple of years. Explanations for conflicts in the results might include differences in socioeconomic class and length of music participation. If the music involvement in the current study had been a greater length of time, significant results might have been found. Southgate and Roscigno (2009) found that class and race/ethnic background may have a significant impact on academic achievement. These characteristics were not assessed in the current research. Future research would benefit from looking into these categories to recognise possible relationships between them and academic achievement.

The hypothesis that CMPs would have no effect on trait anxiety scores was supported in the present study. The trait anxiety scores were not significantly different from pre-test of music intervention to post-test of music intervention. This finding would suggest that trait anxiety was not affected by the music intervention. These findings are similar to the findings of Nilsson, Kokinsky, Nilsson, Sidenvall and Enskar (2009) who found that school aged children in postoperative care had no significant changes in their anxiety levels from music intervention. Doak (2006) found no significant decrease in anxiety levels after a drumming intervention. Possible explanations for the lack of change in trait anxiety levels could be that because the trait anxiety tests measure how an individual usually feels, these levels are not expected to change after short periods of music intervention. These trait anxiety levels might only be influenced by longer lengths of time.

The results of this study were consistent with Harner (1994) who reported a decrease in anxiety levels after a meditation and drumming intervention. This study differed from the current study in that Harner (1994) used the trait anxiety test as the baseline and then compared this with the state anxiety test administered during the intervention. The results therefore measured decrease of state anxiety compared to the baseline trait anxiety. The current study compared the trait scores from pre-intervention to post-intervention. The differences in method have probably contributed to the differences in findings between studies. Other studies that found decreases in anxiety after music interventions (Thompson & Grocke 2008; Yu, Liu, Li, & Ma 2009) used different anxiety measurements compared to the current study. Differences in measurements and methods of administering tests possibly contributed to the difference in findings.

The current research supported the hypothesis that music intervention would decrease state anxiety scores. Significant decreases in state anxiety scores over time were found with the CMP. This research was also consistent with other research which found music interventions decreased levels of anxiety (Chang, Chen, & Huang 2008; Harner 1994; Thompson & Grocke 2008; Yu, Liu, Li, & Ma 2008). Although different methods and measurements were used in these studies, these results still indicate that music has the potential to decrease anxiety in individuals. Future research may help to establish more consistent results in the effects of CMPs on state anxiety levels.

Conclusion

The results of this study have implications for music research as well as overall education. CMP demonstrated a significant reduction in state anxiety intensity. The baseline and post-test sessions of both state and trait intensity scores were significantly different. Results were supportive of the use of CMP as an intervention modality, but could not be generalised because the study used only one measuring instrument, one form of standardised test and one genre of music.

A need therefore exists for continued research to determine whether or not CMP is effective as an academic achievement intervention as well as a means of improving overall general health of young people especially if and when their generalised anxieties are reduced by the CMP. Since the researcher did not study the specific effects of other after-school CMPs, perhaps these activities influenced the academic performance and trait anxiety. Future studies related to the use of CMP as an intervention modality should try to control for these extracurricular activities since after school programs can alter anxiety levels in young people and could also have an effect on their academic achievement.

This research, along with previous research, suggests that CMP can be used effectively as a modality for intervention due to its potential to

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improve quality of life and academic achievement in adolescents. This intervention is generally low in cost and is readily available to schools. Any qualified musician and music educator with some form of training in multicultural music education could offer these services to public schools. However, the formal training itself is not prerequisite to providing CMP successfully. Many music educators and musicians already do an effective job in providing these services. There are benefits of having a trained community music practitioner. The training makes it easy to utilise standard pedagogy and teaching techniques that would be easily measured using conventional scientific methods. In any case, with or without specialty training in community music, students should be encouraged to participate in CMPs in a place where other mitigating methods for anxiety and academic performance are unlikely.

References

Akombo, D.O. (2009). *Music and Medicine: Connections Found*. Long Island City, NY: Seaburn Publishing.

Akombo, D.O. (2001). Reporting on music therapy in Kenya. *Voices: A World Forum for Music Therapy, 1*(1). Retrieved from: https://voices.no/index.php/voices/article/viewArticle/45/29

Akombo, D.O. (2006). *Music and Healing Across Cultures*. Ames, IA: Culicidae Press.

Arganbright, M. & Lee, M. (2007). Effects of Hip-Hop Music Video Exposure on the Sexual Attitudes of Young Adults. *Paper presented at the annual meeting of the International Communication Association, TBA, San Francisco, CA*, May 23, 2007 Retrieved from: www.allacademic.com/meta/p172467_index.html

Barnes, L.L.B., Harp, D., & Jung, W.S. (2002). Reliability generalization of scores on the Spielberger State–Trait Anxiety Inventory. *Educational and Psychological Measurement, 62*, 603–618.

Becker, L. (1999). Repeated-measures designs: Within-subjects factor. Retrieved from: http://web.uccs.edu/lbecker/SPSS/glm_1withn.htm#top

Beczkala, M.J. (1997). The perceptions of secondary administrators regarding the role of the fine arts curriculum in the total education experience. (Doctoral dissertation, Saint Louis University). *Dissertation Abstracts International, 58*(8), 2889A.

Brophy, B. (1986, October 27). Children under Stress. *U.S. News and World Report*, 58-63.

Catterall, J.S., Chapleau, R., & Iwanaga, J. (1999). Involvement in the Arts and Human Development: General Involvement and Intensive Involvement in Music and the Theater Arts. In E. Fiske (Ed.), *Champions of Change: The Impact of the Arts on Learning* (pp. 1-18). Washington, DC: Arts Education Partnership and the President's Committee on the Arts & Humanities.

Chang, M. Y., Chen, C. H., & Huang, K.F. (2008). Effects of music therapy on psychological health of women during pregnancy. *Journal of Clinical Nursing, 17*(19), 2580-2587.

Coleman, J.S. (1968). *The Evaluation of Equality of Educational Opportunity (Report No. 5)*. Washington, DC: Office of Education (DHEW).

Cronbach, L.J. (1951). Coefficient alpha and the internal structure of tests. *Psychometrika, 16*, 297-334.

Daoussis, L. & McKelvie, S.J. (1986.) Musical preference and effects of music on a reading comprehension test for extraverts and introverts. *Perceptual and Motor Skills, 62*(1986), 283-289.

Daok, B. (2006). The effects of shamanic drumming on anxiety, mood, states of consciousness, imagery, and brain patterns in adult subjects. Unpublished doctoral dissertation, Temple University.

Deane, K. & Mullen, P. (2013). Community Music in the United Kingdom. In K. Veblen, S. Messenger, M. Silverman, & D. Elliott (Eds.), *Community Music Today* (pp. 25-40). New York, NY: Roman & Littlefield Education.

Dillon, S. (2006). Assessing the positive influence of music activities in community development programs. *Music Education Research, 8*(2), 267-280

Endler, N. S. (1983). Interactionism: A personality model, but not yet a theory. In M. M. Page (Ed.), *Nebraska Symposium on Motivation 1982: Personality – Current theory and research*, (pp. 155–200). Lincoln, NE: University of Nebraska Press.

Etaugh, C. & Michaels, D. (1975). Effects on reading comprehension of preferred music and frequency of studying to music. *Perceptual and Motor Skills, 41*, 553-554.

Furnham, A. & Strbac L. (2002). Music is as distracting as noise: The differential distraction of background music and noise on the cognitive

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test performance of introverts and extraverts. *Ergonomics, 45*(3), 203-217.

Giles, M. (1990). Music and stress reduction in school children at risk for conduct disorders. *Update: Applications of research in Music Education*, Spring-Summer, 11-13.

Giles, M. (1996). The healing powers of music. Retrieved from: www.music.vt.edu/outreach/vmea/1990years/1994/no2/healing.html

Glass, G.V. & Hopkins, K.D. (1996). *Statistical Methods in Education and Psychology (3rd Edition)*. Boston, MA: Allyn & Bacon.

Goodland, J. (1984). *A Place Called School*. New York, NY: McGraw-Hill.

Hammer, S.E. (1996). The effects of guided imagery through music on state and trait anxiety. *Journal of Music Therapy, 33*, 47-70.

Harner, M. (1990). *The Way of the Shaman*. San Francisco, CA: Harper Press.

Harner, S. (1994). Immune and affect response to shamanic drumming. Unpublished doctoral dissertation, Fordham University.

Jones, L. (2007). Review of 'Community Music Therapy'. *Music Therapy perspectives, 25*(1), 62-64.

Kanter, A. (2001). After-school programs for adolescents. *NASSP Bulletin, 85*, 12-21. Retrieved from: http://bul.sagepub.com/cgi/reprint/85/626/12.pdf

Kaplan, A. (1999). The short term effects of small group hand drumming on mood, group cohesiveness and rhythm perception. Unpublished doctoral dissertation, University of Connecticut.

Kiger, M. (1989). Effects of music information load on a reading comprehension task. *Perceptual and Motor Skills, 69*, 531-534

Kinney, D. (2008). Selected demographic variables, school music participation, and achievement test scores of urban middle school students. *Journal of research in Music Education, 56*(2), 145-161.

Lister, S., Tanguy, D., Snow, S., & D'Amico, M. (2000). Development of a creative arts therapies center for people with developmental disabilities. *Art Therapy: Journal of the American Art Therapy Association, 26*(1), 34-37.

National Endowments for the Arts (2013). *Effects of arts education on participation in the arts: Report 36: Executive summary*. Washington DC: NEA. Retrieved from: http://www.nea.gov/research/Researcharts/Summary36.html#Notes

Neil, A. & Christensen, H. (2009). Efficacy and effectiveness of school-based prevention and early intervention programs for anxiety. *Clinical Psychology Review, 29*(3), 208-15

Nilsson, S., Kolinsky, E., Nilsson, U., Sidenvall, B., & Enskar, K. (2009). School-aged children's experiences of postoperative music medicine on pain, distress, and anxiety. *Pediatric Anesthesia, 19*, 1184-1190.

Rotberg B., Schoen, G., & Zalsman, G. (2008). Anxiety disorders in children and adolescents. *Harefuah, 147*(7), 628-633.

Southgate, D.E. & Roscigno, V.J. (2009). The Impact of music on childhood and adolescent achievement. *Social Science Quarterly, 90*(1), 4-21.

Spintge, R.K.W. (1989). The Emotional Situation of the Patient. In M. Lee (Ed.), *Rehabilitation, Music and Human Well-Being* (pp. 1-263). St. Louis, MO: MMB Music Inc.

Rimmer, M. (2009). 'Instrumental' playing? Cultural policy and young people's community music participation. *International Journal of Cultural Policy, 15*(1), 71-90.

Schellenberg, E.G. (2008). Music lessons enhance IQ. *Mensa Research Journal, 39(3)*, 35-39. [Reprinted from Schellenberg, E.G. (2004). Music lessons enhance IQ. *Psychological Science, 15*, 511-514.]

Spielberger, C. D. (1966). The effects of anxiety on complex learning and academic achievement. In C. D. Spielberger (Ed.), *Anxiety and behavior* (pp. 361–398). New York, NY: Academic Press.

Stouthard M.E., Hoogstraten, J., & Mellenbergh, G.J. (1995). A study on the convergent and discriminant validity of the Dental Anxiety Inventory. *Behaviour Research and Therapy 33*, 589-595.

Thompson, A.H. & Grocke, D. (2008). The effects of music therapy on anxiety in patients who are terminally ill. *Journal of Palliative Medicine, 11*, 582-588.

Van Dijk, J. J. M. & de Waard, J. (1991). A two-dimensional typology of crime prevention projects; with a bibliography. *Criminal Justice Abstracts, 23*, 483-503.

Wheeler, B. L. (1985). Relationship of personal characteristics to mood and enjoyment after hearing live and recorded music and to musical taste. *Psychology of Music, 13*, 81-92.

ISSN: 1791-9622

Yu, H., Liu, Y., Li, S., & Ma, X. (2009). Effects of music on anxiety and pain in children with cerebral palsy receiving acupuncture: A randomized controlled trial. *International Journal of Nursing Studies*, *46*(11), 1423-1430.

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Musical Play as Therapy in an Early Intervention Programme

Julie Wylie & Susan Foster-Cohen

Abstract

Effective therapeutic use of music for very young children with multi-system developmental disabilities involves engaging them and their parents/caregivers in musical play activities that can regulate the children's (and parents') physiological systems, strengthen parent-child relationships, and open children's minds to physical, social emotional and intellectual learning and development; both in the context of music therapy and in response to goals set by a multi-disciplinary team. This article, based on a presentation given at the ISME conference in Greece in 2012, describes the therapy programmes at the Champion Centre in Christchurch, New Zealand and presents four case studies designed to illustrate the type and range of activities that have been shown to be effective over twenty years of experience. They show how when music practitioners follow the child's lead, and draw the parents into the interaction as full partners, the well-being of children is enhanced and their parents are encouraged to engage in similar activities at home, thereby extending music's therapeutic reach and effectiveness.

Keywords: physiological regulation; wellbeing; prematurity; Down syndrome; autistic spectrum disorders (ASD); sensory; multi-disciplinary team

Julie Wylie founded the New Zealand Musical Parenting Association Inc. twenty two years ago. She is the senior music specialist at the Champion Centre, at Burwood Hospital, Christchurch, New Zealand. Julie has been invited to many countries to present music workshops and papers including Korea, Japan, Singapore, Australia, UK, Lithuania, Finland and Estonia. She has received awards for her music leadership and her music resources have won international awards. Julie also has her own music school for mothers and babies, and children 0-8 years.

Email: jwylie@xtra.co.nz

Susan Foster-Cohen has a PhD in Linguistics and Psychology from Lancaster University (UK) with a specialism in children's early language development. She has taught in universities in the UK, USA, France and New Zealand and has been the director of The Champion Centre since 2004. Susan's research work focuses on the developmental trajectories of children with complex disabilities and on the longer term consequences of premature birth.

Email: susan@championcentre.org.nz

Introduction

It has long been recognised that human development is dependent on the relationships infants and young children have with those closest to them (Bronfenbrenner 1979). Moreover, since "relating through music and language is something we do naturally" as we move "in meaningful expressive ways" (Trevarthen & Malloch 2002: 10), and parents are natural musical tutors for infants and children through the musicality of their voices (Trehub 2002), harnessing the power of music to support the development of children with disabilities through engaging both parent and child in musical activities with each other is an obvious basis for music therapy with infants and young children.

Although defining music therapy is controversial, the activities described in this article fall within Bruscia's definition of a process which "promote(s) health, using music experiences and the relationships that develop through them as

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dynamic forces of change" (Bruscia 1998: 47). Moreover, the specific activities described here reflect a change in more recent years towards music therapy with young children involving family members (Oldfield 2006); teaching them to be 'in synch' and 'in tune' with their children to support their well-being and development at home, beyond the specific therapy session. However, our experience is that music therapists in training receive little help in how to engage both parent and child in ways that can build capacity in families to use music on a daily basis as part of their child's therapy. This article is intended to provide some of that help.

The goal of this article is to describe the relationship-based, family-centred music programme that has been running at the Champion Centre[1] in Christchurch New Zealand for more than twenty years; to articulate some of the key precepts and goals of the programme and to illustrate its outcomes through the presentation of four short case studies of individual music sessions and a description of a group music session.

It is intended that readers will see that through quite simple activities aimed at allowing children to develop their own musicality in the context of families who understand how to be in a musical relationship with their children, powerful contributions can be made to physical, emotional, social, and cognitive development.

Before turning to the case studies, we present a brief description of the music programme in its multi-disciplinary therapeutic context at the Champion Centre.

Music at the Champion Centre

The multi-disciplinary infant and young child therapy service that became the Champion Centre started as a small research programme in 1977 and has been an incorporated society since 1989. Music began to be incorporated into this programme in 1993. All children attending multi-disciplinary programmes attend with their parent or caregiver one morning each week or each fortnight for up to three hours in small groups that are equivalent in size to the number of team members assigned to each group (typically six). This allows every child and parent/caregiver pair to have input from each therapy area on every visit.

Every infant and child has a session with a physiotherapist or occupational therapist, a speech and language therapist, and an early intervention teacher; and children over the age of two years also have computer supported learning sessions, facilitated play, and individual music sessions in the music programme run by the first author. In addition to their focussed therapy sessions families have a joint social time over morning tea and a combined music activity involving all the children and parents/caregivers in the group. The team of therapists and specialists stays the same across the school year, giving everyone time to get to know the child and their developmental context and to allow the child's programme to be individually adjusted and developed on a week to week basis.

The children have a range of developmental challenges including Down syndrome, autistic spectrum disorder (ASD), global developmental delay, dyspraxia, and cerebral palsy. To be eligible to attend the Champion Centre, children must be referred by a paediatrician and have at least two areas of significant delay. Most have developmental challenges in all areas of development (physical, communicative, intellectual, social/emotional, etc.).

Photograph 1: An individual music session

The Champion Centre early intervention programmes are based on the core values of being family-centred, relationship-based, ecological,

[1] The Champion Centre (www.championcentre.org.nz) is the trading name of the Christchurch Early Intervention Trust, a registered charity receiving a combination of government funds and private donations. The Champion Centre music programme is entirely funded by private donation.

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reflective, and strengths based. These values are reflected in all aspects of the music programme, as one of its major aims is to teach both child and parent how to engage in structured, predictable nurturing musical activities that provide a basis for development and learning. In these activities, each child and their parent feels valued and free to move, sing and play together within engaged and sustained relationship-based musical play, thereby enhancing the wellbeing of both parent and child and supporting the parent-child relationships essential to all development (Trevarthen & Aitken 2001). Through harnessing the power of the elements of music (beat, rhythm, pitch, etc.), children and parents are brought together in calm, physiologically paced (Berger 2002) synchrony, where they can notice and build on each other's musical ideas and develop musical connections with each other that they can sustain at home as a platform for other developments.

While group music sessions encourage peer to peer engagement and cooperation, the individual music sessions (photograph 1) encourage children to be musical leaders and to set the agenda for what happens. At the same time, specific boundaries are set for each session (Wigram 1991) with both 'hello' and 'goodbye' songs providing a framed time-span within which the child can develop his or her own musical ideas. Those ideas are encouraged to be interactive with child and parent engaging in musical conversations. Robbins and Robbins (1991) recognised the importance of children answering musical questions as a way of communicating the self. Perhaps less well recognised is the capacity of children to invent their own musical questions independently of any musical context (e.g. a song) chosen by someone else. By doing so they can take the lead in the interaction in ways often not thought possible for young children; particularly young children with significant disabilities. However, to do that, they must have an understanding of, and trust in, their 'conversational' partner, much like jazz musicians (Custodero 2003). Just as in jazz there are no wrong notes (only better choices!). There is no right or wrong way to play musically and so the musical exploration in the sessions provides enriching emotional, social and cognitive experiences that empower the child and the parent and support the child's developing sense of self.

Other, more defined, activities are explicitly aimed at supporting known daily interactions and routines. For example, a child might learn the order in which to put on clothes, or successfully brush teeth through a song that can become part of their daily home routines. Sometimes a child needs practice getting from a sitting to a standing position and a story song that incorporates that activity into its accompanying actions can be an often repeated activity at home. Whether the goals are communicative, cognitive, gross or fine-motor physical, social-emotional, or sensory, they can be incorporated into musical play in which both child and adult can participate as equal partners.

Equipment and materials

Although musical activities can be carried out with only the voice, most also involve the use of a keyboard or piano (photograph 1). Several of the case studies below involve equipment, some of which has been specifically designed by the first author. For example, in addition to commercially available colour-coded chime bars used extensively in the programme, a special combination of three sets of colour-coded hanging tubular bells on a triangular frame was commissioned. It allows up to three participants in musical 'conversations' to face each other and watch each other's reactions to their contributions. The bells are tuned to a C major pentatonic scale. One side has the notes middle C, D. E. G, A. Another side contains G, A below middle C, C, D, E. The third side has the notes D, E, G, A and high C. The colours follow the colour spectrum C red, D orange, E yellow, G blue, A indigo.

For children with significant motor disorders such as cerebral palsy, a frame with hanging wooden rectangular notes has been created. It can be placed so that the child's head, arms or legs can create sounds with very little effort. There is also a version with contrasting metal chimes suspended in a similar wooden frame, which can be placed so that the child can create sounds as they move their head, arm, or leg against the chimes.

Another (commercially available) piece of equipment is the sound cradle (photograph 2). It is constructed in such a way that it can be used as a rocking cradle, a tunnel for a child to lie under, or on top, or be upright with a chair positioned in it so that a parent can sit inside with their infant on their knee. It has eighteen harp strings on either side. On one side the notes are tuned to A and on the other side, to the dominant E. The notes go from low bass strings to high on either side providing a calming sonorous sound spectrum, rich in overtones. The sound cradle offers a calming and encompassing aural and vestibular experience as the child lies on top of or under it, either alone or with a parent/caregiver. It also lends itself to interaction and improvisation in combination with singing in major, minor and modes. A child might strum with toes, with one finger, the whole hand, singing, playing and developing a greater repertoire of musical expression.

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Photograph 2: The sound cradle

Other important equipment includes a large, low (in size and pitch) gathering drum, the size of a small circular dining table around which several people can sit at the same time; xylophones of various sizes and in various materials, ribbon sticks, and beaters with heads of various textures.

Four case studies

The following four case studies[2] are drawn from twenty years of experience developing programmes for children at the Champion Centre. They have been selected to show the range and purpose of the session activities, highlighting the power of music to help children regulate themselves, help parents and children to come into synchrony with each other, and to develop embodied understanding of physical and cognitive concepts such as 'up-down', 'fast-slow', 'stop', and so on. They show the child with significant disabilities as leader, soloist, conductor and composer despite the challenges of living with autistic spectrum disorder (ASD), Down syndrome or the consequences of extreme prematurity.

Individual music sessions

Jonathan: Regulation and prematurity

Jonathan has pronounced sensory motor and regulation challenges, having been born prematurely at twenty five weeks gestation. Children like Jonathan often become "dysregulated', i.e., have arousal levels that are too high, and physiological systems (heart rate, breathing, digestion, etc.) that are too asynchronous with each other for the child to be able to focus and learn (Poehlmann et al. 2011).

When he first entered the programme at the age of four years, he was easily distracted and found it hard to transition from one activity to another. He ran at top speed and was constantly falling over. He had no sense of danger and had difficulty modulating his movements and his voice.

At his first session, Jonathan burst into the music room followed by his exhausted looking mother and proceeded to leap around before hurling himself onto a large physiotherapy ball (photograph 3). He fell sideways to the ground unhurt. Julie (first author) began singing a slow narrative triple meter ball-rolling song which ended with the instruction *"now get ready to stop"*! She waited as Jonathan backed into the corner of the room and sat leaning against the wall watching and listening. Julie invited his mother to join her at the ball, and they rolled it slowly backwards and forwards to each other, overtly displaying pleasure in the game. Jonathan's mother also joined Julie in a simple song that provided a repeated predictable structure of beginning, middle and end, mirrored by the movement of the ball which was halted each time the final line of the song arrived: *"now get ready to stop"*. After several repetitions, Jonathan came and sat on his mother's knee and together all three rolled the ball backwards and forwards to the slow, supportive meter of the song. Jonathan gradually relaxed back into his mother, who supported and cradled him; and Julie remained still, just watching them and singing softly, so that they could both store the memory of that quiet, regulated moment.

Photograph 3: A Swiss-ball for regulation

A slow predictable activity such as this naturally regulates a child's stressed system (Stalker & Reebye 2007). Music that has a regular pulse close to, or only a little above, a resting heart-rate will encourage the lower parts of the brain and thus the body to fall into synchrony, producing a feeling of

[2] All but one of the children's names has been changed. However, one parent was keen to have her child's real name used. All photographs have been approved for use in this article and are photographs relevant to the text but are not of the children described.

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calm for both child and parent (Levitin 2006). The slow rhythmic ball activity described above helped both Jonathan and his mother to become regulated, counteracting the uncomfortable state of over-arousal that characterised both their systems when they entered the room.

Adults are often able to use their more developed neo-cortex to calm their lower brain systems by telling themselves not to be scared or overwhelmed; but young children simply cannot do this (Rothbart, Sheese, Rueda, & Posner 2011). Parents also find it hard to keep themselves calm when their child is physiologically dysregulated. As parent and child become regulated, they reinforce each other's regulated state.

Once able to be calm and slow, other tempos became possible. Jonathan loved puppets, especially a turtle and a little ladybird. Julie used these to help him experience contrasting slow (turtle) and fast (ladybird) movements. A rocking chair, the large physiotherapy ball and a hoop were used each session and became symbols of stability and calm. Jonathan increasingly put himself on the ball for his mother to roll him in time to the ball-rolling song at the beginning of each music session. He curled into a ball inside the hoop as his mother and Julie sat facing each other with him in the middle, rocking it in time to a slow, triple meter song. He came to associate the hoop with the protective turtle shell, often asking for "the turtle song" which Julie sang as his mother gave him slow, deep pressure massage on his back.

Over a period of weeks, Jonathan's disorganised movements increasingly became paced and pulsed. On a drum, he and his mother could now play in synchrony and their drumming became increasingly rhythmic and organised. While Jonathan was still learning how to calm himself, if Julie played an eight beat introduction on the piano that matched his energy level, he would listen and then play himself, becoming increasingly calm and attentive. At home, his mother used the simple songs and rhythms Julie taught her to achieve the same calm attentiveness for whatever task was at hand.

Riley: Freeing movement in Down syndrome

Riley is a four-year old boy, and like many children with Down syndrome, he has low energy levels and floppy muscle-tone, experiences difficulty with upper-body coordination, and can take a long time to become alert and engaged. When Julie first met him, he struggled with activities such as getting up from a squatting position and moving back down to the floor, marching, and jumping; and with fine motor activities such as picking up small objects, using scissors and so on. In order to help him move freely, getting up and down from the floor, it was important to use songs that supported him moment by moment. Julie wrote a step-by-step instructional song *Little Clown Dance* about a little clown *"way down low in the bottom of the box"* who comes out of his box to brush his hair, put on his hat and jump up and say proudly *"Here I am"*! Riley and his mother learned the song and the actions through much use of repetition and Riley was soon able to go from a crouching position on the floor to jumping up with his arms extended on musical cue to proclaim *"Am"*, then to go *"down, down, down, down, down in his box"* Now he can sing many words of this song with greater word clarity and expression. Julie recorded this song so that Riley and his mother (and other families of children with similar challenges) could play it at home and enjoy acting out the little story it contained.

Building on the directional language ('up', 'down') in the song, Riley, Julie and Riley's mother also used long ribbon sticks to draw circles, lines, patterns in the air in front of the mirror. Riley was encouraged to be the leader and the adults followed him with ribbon sticks as he sang to them *"up, up, up, up, up.... and down, down, down, down, down"*. He delighted in keeping the adults with their hands up in the air with the fifth note. At other times he would watch himself in the mirror while Julie sang about what he was doing moment by moment. Riley, his mother and Julie explored space, weight, time and energy (Laban 1975) with ribbon sticks and long streamers (photograph 4). They also explored rhythmic patterns: stamping, clapping and imitating the words and sound patterns that Riley gave them. With repetition, his co-ordination and sense of timing and modulation in all his movements improved, and he loved being the leader and soloist on a range of musical instruments as his mother and Julie accompanied his playing.

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Photograph 4: Exploring space with ribbon sticks

Alexander: A musician with ASD

Long before he entered the music room, Alexander could be heard screaming loudly and his cries were marked by a sustained high note and descending minor thirds. This was the first day in his programme at the Champion Centre for this three-and-a half-year old boy on the autistic spectrum. His mother carried her struggling, fearful child into the music room. Using the same pitch as his high note, Julie sang slowly down the eight notes of the major scale emphasising the resolving tonic note. He stopped screaming and listened. She sang the numbers for the descending degrees of the scale *"8, 7, 6, 5, 4, 3, 2, 1"* and then waited and watched him. He turned his back on both adults and between gasping sobs, he sang tunefully what Julie had just sung. Slowly Julie repeated the scale several times. Gradually he became calm and sat on his mother's knee in the rocking chair. Julie affirmed his feelings by echoing his sighs, pitch, and pauses, in her singing. His mother held him in her arms and rocked him in time as they sat in the rocking chair.

The following week Julie set out colour-coded chime bars and slowly played the ascending and descending eight note scale as she sang the corresponding notes. Alexander spent the whole session entranced as he set out the notes of his chime bars in order, playing up and down the scale. He began changing the order of notes smiling as he created contrasting pitch patterns. He watched and waited for Julie to copy and smiled when she sang his little tunes. The pitch game became his means for self-calming and regulation in the music room; and over time it became the basis for his extended musical creations.

Alexander was afraid to go up and down stairs, and would scream when the physiotherapist tried to help him to go up five stairs on the play equipment. Julie's observation was that because he had no sense of timing, he could not anticipate how or when to move in relation to the physiotherapist's prompts. So, knowing how he responded in the music sessions, she sang very slowly using the ascending five note major scale C to G "we are going up the stairs" at a pace that matched the pacing of his more controlled and effortful movements that she had noted in her individual sessions with him. The last three words were repeated on the fifth note of the scale. As an introduction to the proposed activity it caught his attention and he began to calm. With the physiotherapist's encouragement, Alexander tentatively took Julie's hand as she sang very slowly: "Hold on to the rail... Up, up, up, up, up, now we're at the top". The singing was sustained on the dominant as she helped him turn around, still holding his hand, and then she sang his way back *"down, down, down, down, down"*.

In this example, music literally held Alexander through each step of the process by supporting him melodically and rhythmically. As he practiced this over the ensuing weeks, sometimes he needed a slower tempo; sometimes a faster one. Sometimes he needed to wait on one step with the adult (Julie or his mother) singing the instruction over and over on the scale degree that corresponded to whatever step he was on for as long as it took for him to move to the next level. This pitch game is now used by all the physiotherapists to cue children, helping them move confidently up and down stairs, to go up the stairs and slide down a slide.

Alexander's mother has found musical play is a means for her and her son to become attuned to each other (Siegel 2008). Through watching and participating in the activities in the music session, she became empowered to play musically with her child, rocking him in her arms as she sang calming songs. Over the years they have created songs together that they sing when he becomes upset. He started to write his own notation using the colours of the chime bars for the notes and she helped him develop his system so he could create his own compositions. They played (and still play) regulating clapping games facing each other and they listen to the calming sounds of nature together. His own songs and those used by the whole family

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for all his daily routines are helping to make his life so much easier and introduce many humorous, playful and tender moments. As his mother said:

> "Musical play has become an integral part of our family culture. Singing and musical play energizes and transforms our daily routines. We have a song that can be changed to suit whatever our child is doing. It takes the stress out of routines such as meal time and bath time. We now have much more fun and have noticed that our family stress levels are lowered and Alexander's timing is more precise when we sing him through each step of a process. He is making up his own music using his own chime bars. His speech is becoming clearer especially within a chant or song when the tempo is slowed down. Music structures our lives and has enhanced our family life" (Alexander's mother).

Not all children are as musically responsive as Alexander or integrate music so intensely into their lives, but many can and do become very proud performers of their own musical ideas (photograph 5). With that pride come a sense of self, control, and joy that add immensely to a child's sense of wellbeing.

Photograph 5: A sense of self

Adam: A family affair

Adam's parents tend to be quite boisterous in their parenting style. When the family came into the music room with Adam, who has Down syndrome, he went straight under the sound cradle (photograph 2). He then indicated that he wanted his father to play the very large resonant gathering drum. His mother chose an alto xylophone. Adam lay face down under the cradle and began tapping his foot slowly on the floor. Julie matched Adam's foot tapping, strumming the A and E chords and cued his father into slow steady beating on the drum. His mother listened and then began to play a supportive A and E ostinato she had previously learned from Julie to match the sound cradle. Adam's foot kept time and he then gave a descending "ooh, ooh". He smiled when Julie began singing his offering using the Aeolian mode. Adam's father visibly relaxed and leaned against the wall as he played a steady beat on the drum which complemented the wonderful overtones of the sound cradle. During the course of their playing, Adam's mother began exploring and creating a beautiful evolving melody using the Aeolian scale on the xylophone.

The family's musical play became a constant ebb and flow of sound as each person listened, moved, changed and adapted their play, creating changing patterns. Adam watched his father intently and began to strum a small range of strings through the sound hole from inside the cradle. His mother and father were now playing in time with each other and when Adam joined them, Julie stopped and listened to the synchrony, harmony and attunement they were creating for each other. Their play included shifts of tempo, times of silence, a strong sense of musical form, and much use of expression and musical interplay. Their music became slower, softer and came to a natural conclusion with Adam's final strum.

When Adam came out of the cradle and went to his mother for a cuddle, she commented that she had felt such a sense of musical accomplishment. Both parents commented that they had experienced a wonderful sense of creativity and timelessness. As they really listened and tuned into each other, they heard what Adam was playing and how Julie was matching his tempo and copying his patterns. They also became aware of each other's individual melodic and rhythmic patterns and began to participate in musical questions and answers with each other. Through the musical support, they became part of a single coordinated activity in which each person was in synchrony with the others.

Throughout, Julie's aim was to facilitate calming relationship based musical play. As the family became attuned to each other during the music session, her role changed from facilitator, to narrator then listener and observer. Together the family were able to reflect on the positive aspects

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of their musical play and to think about similar calming musical strategies that they could use with Adam at home.

Group music sessions

When children come together for group music sessions, the individual characteristics of each child can be taken into account to ensure that all the children can participate to the best of their abilities. For example, pitches or timbres that may be dysregulating for a particular child can be avoided when planning for the group.

As in the individual music sessions, parents are key players and group music making provides a calm regulated music environment with opportunities for each child and parent to tune into each other and for children and parents to experience a joint activity with other families. A 'Hello' song is sung to each child with opportunity for each child to respond with vocalisation or musical play on an instrument. The large gathering drum is used in some groups and is valuable for developing sensory awareness, listening, call and response, turn-taking and sequencing skills.

The use of props such as a stretchy "rainbow ring" help to provide a sense of unity for each parent and child in the group as they sit in a circle holding onto the ring. This helps to reinforce all the elements of music such as a steady beat, rhythmic patterning, dynamics or pitch as the rainbow ring is jointly raised "*Up, up, up, up, up"* and *"Down, down, down, down, down*", or moving it together in time to the actions of songs such as the "Wheels of the Bus" or a predictable rhythmic story such as "going on a bear hunt". Whatever a child offers can be woven into a song or musical play. As children participate, they develop their awareness of each other and of their roles in the group, whether as soloist or chorus. They often practice culturally relevant songs and action rhymes that they are expected to know in their early childhood centres and when they transition to school; and sometimes even (at the request of the speech and language therapist) practice the movements needed to respond to sounds in an audiologist's hearing test: putting an object in a pot when they hear a tone.

Musical play within group music requires sensitive role-modelling for parents who do not always see its value. However, many parents say that they value the repertoire of songs, transition activities, instructional songs and use of narrative songs sung about their own child, describing what they are doing moment by moment within the group. Most parents join in the singing, reporting that they sing the songs in daily music routines at home.

Within a group music session there are initial calming activities, followed by ones designed to arouse, and then, at the end, ones that will bring the children back to a state of calm. During this last phase the lights are turned off, curtains drawn, the introduction cues the children to cuddle into their parent or lie face down on the floor and parents give their child a deep pressure back massage to a special massage song which relaxes parents and children alike. A 'Goodbye' song provides closure for the session.

Discussion

Music engages all levels of the brain and body, and can support developing functions such as balance and breathing (lower brain); relationship and connection with others (midbrain); and higher cortical functions of language, thinking and decision-making. As Levitin (2006: 257) says:

> "[r]hythm stirs our bodies. Tonality and melody stir our brains. The coming together of rhythm and melody bridges our cerebellum (the motor control, primitive little brain) and our cerebral cortex (the most evolved, most human part of our brain)."

At the basis of all healthy functioning is the ability to be in a state of calm alertness, namely to be physiologically regulated. This ability is largely controlled by the lower brain and brainstem, particularly in young children and those with intellectual disabilities who are not able to use their higher cortical functions to 'tell themselves' to be calm. Berger (2002) and others have described the importance of physiologic pacing as "a predecessor to comfortable physiologic function" and of music therapy's capacity to help children's systems achieve "rhythmically organised responses" (Berger 2002: 155).

The limbic system of the brain is intimately involved in emotional responses to both the physical and social world. Even the pitch of a single note can convey emotion. As Levitin says, "[a] single high note can convey excitement, a single low note sadness" (Levitin 2006: 25) so, as the case studies have illustrated, both pitch and pulse can be used to match and then change the child's emotional state, making the world more comprehensible.

Once the body is rhythmically organised and emotionally connected to others, it becomes possible to play consciously with embodied concepts such as 'fast', 'slow', 'up' and 'down', as the case studies have illustrated. It is also possible to develop gross motor skills through whole body dance movement, with or without equipment such

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as ribbon sticks, and through various percussion activities; as well as fine motor skills through strumming or keyboard exploration. Importantly, these activities can

> "provide children with a variety of entry points (hearing, seeing, feeling) into aesthetic, sensory and cognitive challenges. This variety allows activities to be adapted to meet individual needs – either by the child herself, or by a parent, therapist, or educator" (Custodero 2003: 6-7).

Finally, we have tried to show that musical play of the kind we have discussed is therapy in which the child with disabilities can take the lead, be the competent partner with the ideas, and lead others into their creative world. As musical leaders and creators, even children with significant disabilities, become 'proud performers' and thereby establish their identity in the web of relationships that form their world (Trevarthen 2002). At the same time they reveal an inner world that is often startlingly richer than even the parents of these children realise (Custodero 2003), and it is the power of music that has made that world visible.

References

Berger, D. (2002). *Music Therapy, Sensory Integration and the Autistic Child*. London: Jessica Kingsley.

Bronfenbrenner, U. (1979). *The Ecology of Human Development: Experiments by Nature and Design*. Cambridge, MA: Harvard University Press.

Bruscia, K. E. (1998). *Defining Music Therapy*. Phoenixville, PA: Barcelona.

Custodero, L. (2003). The musical lives of young children: Inviting, seeking and initiating. *Zero to Three*, *23*(1), 4-9.

Laban, R. v. (1975). *Laban's Principles of Dance and Movement Notation (2nd Edition)*. Boston: Plays, Inc.

Levitin, D. (2006). *This is Your Brain on Music: The Science of a Human Obsession*. New York, NY: Dutton.

Oldfield, A. (2006). *Interactive Music Therapy - A Positive Approach: Music Therapy at a Child Development Centre*. London: Jessica Kingsley.

Poehlmann, J., Schwichtenberg, A. M., Bolt, D. M., Hane, A., Burnson, C., & Winters, J. (2011). Infant physiological regulation and maternal risks as predictors of dyadic interaction trajectories in families with a preterm infant. *Developmental psychology*, *47*(1), 91.

Robbins, C. & Robbins, C. (1991). Self-Communications in Creative Music Therapy. In K. Bruscia (Ed.), *Case Studies in Music Therapy* (pp. 56-72). Phoenixville, PA: Barcelona.

Rothbart, M. K., Sheese, B. E., Rueda, M. R., & Posner, M. I. (2011). Developing mechanisms of self-regulation in early life. *Emotion Review*, *3*(2), 207-213.

Siegel, D. J. (2007). *The Mindful Brain: Reflection and Attunement in the Cultivation of Well-Being*. New York: WW Norton and Co.

Stalker, A. & Reebye, P. (2007). *Understanding Regulation Disorders of Sensory Processing In Children: Management Strategies for Parents and Professionals*. London: Jessica Kingsley.

Trehub, S. (2002). Mothers are musical mentors. *Zero to Three, 23*(1), 19-22.

Trevarthen, C. & Aitken, K.J. (2001). Infant intersubjectivity: Research, theory, and clinical applications. *Journal of Child Psychology, Psychiatry, and Allied Disciplines, 42*(1), 3-48.

Trevarthen, C. (2002). Origins of Musical Identity: Evidence from Infancy for Musical Social Awareness. In R. MacDonald, D. J. Hargreaves & D. Miell (Eds.), *Musical Identities* (pp. 21-38). Oxford: Oxford University Press.

Trevarthen, C., & Malloch, S. (2002). Musicality and music before three: Human vitality and invention shared with pride. *Zero to Three, 23*(1), 10-18.

Wigram, T. (1991). Music Therapy for a Girl with Rett's Syndrome: Balancing Structure and Freedom. In K. Bruscia (Ed.), *Case Studies in Music Therapy* (pp. 39-53). Phoenixville, PA: Barcelona.

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What Happens When the Musicians Leave?

Case Study of a Jessie's Fund Project to Develop Teachers' Skills and Confidence

Tom Northey

Abstract

This article describes a project delivered by Jessie's Fund, a UK charity which supports children through music therapy and creative music work. The project took place between January and July 2012 and involved staff and pupils from a special school in the north of England. The article describes briefly how music is delivered in special schools across the UK and explains some of the challenges Jessie's Fund has faced in having a lasting impact on how schools cover the music curriculum for children with complex needs. In 2012 Jessie's Fund partnered with a special school in the north of England to design a new approach which focused intensively on the development needs of staff. Jessie's Fund musicians visited pairs of staff over a period of six months to build their skills and confidence in leading music sessions with their pupils. The project was considerably more effective than some previous 'musician-led' activities and had a significant, whole-school impact. This article describes the work that took place, the responses from the staff involved and how Jessie's Fund intends to use this learning for future projects.

Keywords: music; children; special needs; complex needs; special school; consultation; staff training

Tom Northey is the Soundtracks Project Manager at Jessie's Fund, a UK registered charity helping children with additional and complex needs through the use of music. Jessie's Fund works with children in hospices, special schools and in other settings nationwide, giving them access to music-making and to music therapy.

Email: tom@jessiesfund.org.uk

Background to the project

Jessie's Fund[1] is a UK registered charity which helps seriously ill and disabled children by giving them the opportunity to communicate, express themselves and develop through creative music-making and music therapy.

Established as a charity in 1995, Jessie's Fund initially (though not exclusively) concentrated on helping children in children's hospices, providing musical instruments, devising appropriate training courses and workshops for staff, and establishing posts for music therapists. As a result, creative music is now an integral part of life for most of the children's hospices, where prior to our input there had been none.

In recent years, Jessie's Fund has also developed a programme of support for children and staff in special schools across the UK. Our 'Soundtracks' programme involves creative music-making and staff training, with the goal of increasing the range and quality of musical opportunities for children with disabilities.

Jessie's Fund was established in memory of Jessica George, a bright and musical nine-year-old, who in December 1993 suddenly became ill and was diagnosed with a rare and inoperable brain tumour. Her prognosis was very poor, but there was some hope offered by complementary treatment available in New York. Jessie's Fund was established to meet the cost of this treatment and

[1] See www.jessiesfund.org.uk

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was named by Jessie herself, but she died in May 1994, before the treatment could be undertaken.

Jessie came from a family of musicians and when she died they decided that Jessie's Fund should become a pro-active charity dedicated to helping sick children through the creative and therapeutic use of music.

Photograph 1: A Jessie's Fund music session

Music in special schools in the United Kingdom

Since 2008, Jessie's Fund has worked intensively in over 60 special schools across the UK. The charity has also supported teachers from many more schools through training courses and conferences. While Jessie's Fund has never attempted to carry out any formal survey of music provision, the work in schools has provided the charity with a useful overview and significant anecdotal feedback. In brief, the picture that emerges of music provision in UK special schools is extremely varied.

Some schools for children with special needs have a rich offer, including classroom based music-making, music therapy, music as a 'cue' to the timetable, visiting musicians, extra-curricular music clubs/choirs, and even individual instrumental lessons for pupils. Other schools have some of these activities; unfortunately, many schools have a very limited offer.

Jessie's Fund works with schools to try to enhance their provision. Teachers who engage with the charity necessarily have a strong belief in the importance of music in their pupils' development. However, in many cases they feel they lack the skills, ideas, confidence or resources to make the most of music in their schools. Support from senior management is also a key factor.

It is worth noting that most special schools in England follow the National Curriculum[2] in delivering music. Teachers face a number of challenges in interpreting this for a special school setting and in assessing progress, particularly for pupils with profound and multiple learning difficulties. These challenges formed part of the initial impetus for the 'Sounds of Intent' research project, established jointly by the Institute of Education, Roehampton University and the Royal National Institute for the Blind in 2002. With its launch as an online resource in 2012, 'Sounds of Intent' now offers schools a comprehensive framework to plan and assess musical development for children with learning difficulties[3].

Jessie's Fund 'Soundtracks' programme

Since 2008, Jessie's Fund's core offer to special schools has been in the form of 'Soundtracks': a mini-residency, led by professional musicians with extensive experience of working with children with disabilities. The musicians work in a school for a period of five days, often split over a couple of weeks so as to maintain momentum without being overly disruptive to the school timetable. These mini-residencies have the overall goal of showcasing a number of musical ideas and approaches which the school can then take on and develop after the initial input. Every Soundtracks project also includes two twilight training sessions for staff, with the aim of sharing with staff a few simple techniques for leading music.

This model has proved highly popular with special schools for the quality of the musical experiences it offers to the children involved.

> "The Soundtracks project gave the opportunity for some of our most vulnerable pupils to participate in a musical journey that no pupil in the school had previously experienced. Pupils with little speech or verbal communication, behaviour problems, and physical disabilities were given the opportunity to explore music through many different media, including instruments, music technology, and body exploration and vocalisations" (Teacher, Queens Park School, Lincoln).

Teachers also appreciate the projects as a source of inspiration and ideas. For many music teachers or music coordinators, getting the support of the rest of the staff can be a challenge: everyone is dealing with multiple priorities and curriculum pressures.

[2] See www.education.gov.uk/schools

[3] For further information, see Welch, Ockelford, Carter, Zimmermann and Himonides (2009), and www.soi.org.uk.

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External musicians, delivering an inspirational project, can help to raise the profile of music and remind everyone of its potential to impact across a range of developmental areas for disabled children. Jessie's Fund has frequently observed how important this musical 'boost' can be when it comes at the right time, leading to a new and sustained focus on music in a school.

Nevertheless, Jessie's Fund has become increasingly aware of the limitations of the five-day Soundtracks model. There will always be a limit to what staff can learn in such a short space of time, and in making the most of the visiting musicians' specialist skills, teachers can sometimes feel even more apprehensive about leading activities themselves. Thus the learning does not become embedded and both the school and charity are left asking themselves *'What happens when the musicians leave?'*

The case study: A new approach to working with staff in a special school

In autumn 2011, Jessie's Fund began a dialogue with the Head Teacher of a special school in the north of England. Previously, Jessie's Fund had delivered a 5-day Soundtracks project at the school and knew how committed the music teacher had been at the time. Now that the music teacher had become Head Teacher, there seemed a very real opportunity to develop the relationship.

The school is an all age special school for children and young people between 3 and 19 years old, all of whom have severe or profound learning difficulties. Currently there are 72 pupils on roll.

Music and the arts at the school are central to the curriculum and to the wider school environment. The school has twice achieved 'Artsmark' gold award and its arts provision has been recognised as 'Outstanding' by Ofsted. As both music teacher and school leader, the Head Teacher was committed to providing rich musical experiences across the school. All pupils accessed weekly class music lessons led by a subject specialist music teacher. A music therapist visited twice a week, and some pupils also attended lessons with a peripatetic string tutor. In addition, there were regular visits by external musicians who led creative projects with the children.

Nevertheless, the Head Teacher was clear about the on-going challenges. The demands on staff time meant that it was difficult for every class and group to have input from the music teacher. There was also significant potential for other class teachers to lead music sessions themselves, to enrich their pupils' experience of music. A number of staff did in fact play instruments, but did not feel confident enough, or equipped with the right techniques to deliver music activities.

The Head Teacher was also aware of the wide range of needs amongst the pupils, and the challenges this presented for delivering inclusive music lessons. For some of the children with more profound needs, small-group or even one-to-one activities were more appropriate. However, there was no-one within the school with the skills or confidence to instigate this kind of work.

From the outset, the Head Teacher was clear that any collaboration with Jessie's Fund would need to address staff development first and foremost, to leave a legacy of increased capacity within the school. This meant planning a programme of musical input which focussed on teachers' skills and confidence, with the goal of embedding new approaches. Jessie's Fund worked closely with the Head Teacher to design a training-based programme to achieve these goals.

The project structure

After careful consideration Jessie's Fund identified two experienced musicians (Hannah McCabe and Eve Harrison) to lead the project. Following an introductory session in January 2012 to meet the staff, the musicians visited the school for two-day blocks throughout the spring term. After an extended break, they returned for three further one-day visits in the summer. In total the project involved 9 days of work in the school.

Jessie's Fund had agreed to work intensively with four staff pairs, to help spread the learning across the school. In most cases these pairs included a teacher and teaching assistant, although in some cases two teaching assistants worked together. Getting the right mix of staff was important in ensuring the training benefited those people who actually had the capacity to implement the new approaches and ideas as part of their role. The Head Teacher selected the staff pairs, based on her own knowledge of their skills and, most importantly, their attitude towards music.

The project was designed so that each of the staff pairs could follow their own developmental journey based on their needs and interests, with the support of Jessie's Fund musicians. Each visit included some modelling of ideas by the musicians, discussion and planning with the staff, and finally the opportunity for staff to lead activities with their pupils. Constructive feedback was provided by Jessie's Fund musicians, along with clear worksheets as a reminder of the techniques which had been covered. These built up to become a 'toolkit' which was presented to staff at the end of the project.

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In between visits, staff were encouraged to use the techniques they had learnt, developing new musical activities which they could show to the musicians on their next visit. The ambition was to have a final 'showcase' day in summer 2012 which would be entirely led by school staff.

The Jessie's Fund musicians

Jessie's Fund engaged musicians Hannah McCabe and Eve Harrison to jointly lead the project. Both Hannah and Eve regularly deliver projects for Jessie's Fund

Hannah McCabe is a freelance clarinettist and an award-winning solo and chamber performer. She works extensively with children throughout the UK leading outreach projects for music organisations such as Manchester Camerata, Opera North and Jessie's Fund.

Eve Harrison is a composer whose music has won various awards and scholarships and has been performed by ensembles such as the BBC Singers, Contemporary Music for Amateurs (COMA), University of York Opera Society, Edinburgh Schools Concert Band and the Royal Northern College of Music (RNCM) Symphony Orchestra. She delivers music and composition workshops for a number of music organisations and is Tutor in Composition at Yorkshire Young Musicians, as well as a guest composition tutor for the Junior School at the RNCM.

Photograph 2: Teacher leading a music session, with support from Jessie's Fund

The outcomes of the project

The project culminated in a day of open workshops and informal performances at the school, led entirely by school staff and observed by the Head, Jessie's Fund musicians and project manager, and other school classes. The high quality of the musical performances by the children, and the confidence of the staff leading them, was recognised by everyone involved.

Staff were asked to keep reflective journals during the project, and to complete written feedback at the end.

> "The sharing on the last day was just stunning. What particularly impressed me was how delighted the staff were with what each other had achieved, as individuals, and with their children. One staff member who does not see himself as a guitarist, let alone a singer, did both in front of his peers. One of our very reflective teachers commented to others how empowering the session was for one of our girls with profound difficulties, who actually led the musical response of all others in the room" (Head Teacher).

The most remarkable element had been the journey of the staff involved. At the beginning of the project all four staff pairs were apprehensive about delivering music effectively with their groups. Some staff felt unable to lead any music, whereas others were unsure about where to take their lessons next. There was also some anxiety about what the Jessie's Fund project would involve.

> "I was a little nervous to start off with as I was not sure what Soundtracks was or how it was going to help me develop my skills.... I was very nervous and worried about having to talk/sing in front of a group and new people" (Teaching Assistant).

> "I was used to a more structured and boring form of delivery and was excited by the way the [Jessie's Fund] staff delivered to our pupils" (Teacher).

During the project the staff pairs learnt a range of new music techniques. Perhaps most importantly they gained from the Jessie's Fund musicians the confidence to build simplicity, repetition and flexibility into all of their music activities, moving towards a more pupil-centred approach.

> "I learnt that it was not just 'OK', but beneficial to repeat music and take longer over an activity, allowing time to take the lead from the pupils. I

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was also shown ways to improvise/adapt, and make up pieces of music to make them more age appropriate for our group. This also meant we were able to theme our music around a topic – in this case, numeracy" (Teacher).

"It was nice to have the freedom to 'roll with it' and take the project down different avenues directed by the pupils or the way they did or didn't respond" (Teacher).

"After a few sessions we learnt that H. liked listening to singing, and for us to keep the lesson running smoothly. B. liked a strong rhythm being played and R. was happy to keep a beat on a drum or tambourine with assistance from staff. Soundtracks has helped us develop in trying new musical techniques with pupils and getting them to express an interest in certain aspects" (Teaching Assistant).

"It was too easy in the earlier sessions to think that working on one rhythm or sound would seem, shall we say, a little boring and too repetitive. I learnt, as time went on that this was ok. It wasn't for me to change the dynamics, just because I felt uncomfortable. Letting our pupil take the lead gave her a voice and a way to communicate. This in turn gave all of us a sense of freedom, with no boundaries" (Teaching Assistant).

In feedback following the project, all the staff involved were clear about the impact of the training on their own skills and confidence, and had plans to build some of the approaches into their future planning.

"It has been a real privilege to take part in this project. I hope to continue with these activities and use these approaches with other children in my class in the future. It will be interesting to develop these ideas and build on them. Here's to some great results!" (Teaching Assistant).

"As a music leader I feel that I have gained in confidence to lead a small group, using the techniques we used during the project. I also feel confident to talk to other staff about what we achieved during the project, on an individual basis, or as a whole school team. Not everything we tried during the project was successful, even with the professional input of Eve and Hannah [the musicians], so this has given me the confidence to try new ideas and not be too disappointed if they don't come to fruition" (Teacher).

"We thoroughly enjoyed the project and felt that it has given us confidence to deliver music to our pupils and present it in a more free form. We are already building the techniques into our teaching. We have found a number of songs suitable for us and have worked on the music to accompany this. We are looking to use these across the curriculum for these pupils. We have taken ideas from the group sharing event we had at the end of the project" (Teacher).

Impact on the pupils

While the focus of this project was on staff, children also benefitted from the activities. Staff were encouraged from the outset to reflect both on their own learning and the impact of the work on individual children and groups. This heightened awareness of how children were interacting through music was one of the most useful skills to learn. In their written feedback, staff recorded several instances in which the pupils demonstrated a level of engagement well beyond expectations.

"Pupil A (with an Autistic Spectrum Disorder) using the microphone to sing a song he knew, speaking clearly for the first time to us...then singing the whole of the *'ha ku ta me'* song after only hearing it once!" (Teacher)

"Pupil B (with Profound and Multiple Learning Difficulties) learning to control herself to conduct the other pupils musically, showing awareness of volume and tone" (Teacher)

"I was surprised how interested and gentle the child I worked with was with the guitar. I was very aware of her good sense of rhythm for drumming but had not thought of offering the guitar to play. She strummed and plucked the strings gently whilst I changed the chord patterns and sang. She also showed a definite preference for a nylon string guitar to a steel string one" (Teacher)

"The 'Intensive Interaction' activities using the drum were particularly pleasing. Being familiar with the concept helped, but I had never thought of doing it through the medium of music. This was particularly good when working with a child who makes very few sounds with her voice. It also was very positive when a child with Profound and Multiple Learning Difficulties 'led' a group of adults in a percussion session by controlling the pace and intensity of the music" (Teaching Assistant)

It was clear from staff feedback following the project that these news skills and approaches had been fully taken up by the staff involved, and that they now felt confident to lead both one-to-one and group music sessions themselves, without the support of Jessie's Fund musicians. The teachers were beginning to use music more widely across the curriculum, and as a tool to support the pupils' broader development.

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Longer-term impact

Jessie's Fund was keen to hear the Head Teacher's perceptions of the impact of the training project across the school, and whether the new skills and ideas were still evident six months after the project.

> "In the immediate weeks after the project, all pairs continued doing small group/larger group work […] Six months after the project, two of the pairs have continued and extended their work, so music-making is available to their class whenever they want to do some. One pair split up, as one of them moved class. However, [that teacher] has picked up the work within his new class. The other pair do a certain amount, although achieving one-to-one staffing for truly student-directed work is hard.
>
> It's also released a more general feeling, that it's OK to have a stab at music, use singing to cue your class, make up songs, just get some instruments out and have a go [...] The staff have also asked if we can have regular singing in assembly – something I have wanted to do for ages, but it was so good the drive came from them!
>
> Overall, it was an excellent project. The staff's own evaluations show how much they got from it. At our recent end of term talent competition, there was so much music making and singing (all rehearsed by class staff), it was wonderful" (Head Teacher).

Conclusions

This project was one of Jessie's Fund's most successful in terms of equipping special school staff with the confidence to lead music activities themselves, thus having a sustained benefit for pupils long after the professional musicians had left. Through an internal project evaluation, Jessie's Fund identified a number of key factors which contributed to the project's success.

1) The school leadership. The Head Teacher was not only highly supportive, but helped to define the project goals from the outset. Her experience as a music teacher was invaluable. However, also significant was her commitment to spreading music leading skills more broadly across the staff team, in order to meet the needs of the pupils.

2) The staff involved in the training. Identifying those staff with the enthusiasm and willingness to learn was key to the project's success. Prior musical knowledge was not essential, and indeed for some the challenge was to put aside their preconceptions of what music-making should look and sound like. This project was 'opt-in', and the strong commitment from the four staff pairs was no doubt due to a wider school culture in which all staff feel valued, challenged positively, and supported to develop. It was also important to have both teachers and teaching assistants involved. They brought a wider range of perspectives and their distinct roles meant that the learning became embedded in a number of different contexts throughout the school.

3) Clarity around the project aims. From the outset both partners described the collaboration as a 'training project', rather than a 'music project'. This ensured that staff were clear that their own development was the focus, and there was no sense of teachers observing passively while the musicians led the work.

4) The structure of the project. Each visit to the school included discussion time with staff and musicians, away from the pupils. This was challenging to timetable, but vital for effective planning and reflection. Each visit also included the chance for the musicians to model an activity and then to observe the staff leading it, followed by a feedback session. The space between the visits gave staff an opportunity to try out activities on their own, sometimes discussing/sharing them with colleagues, and then reporting back. The project took place over seven months – a realistic time in which to build the relationship between staff and musicians and for embedding new ideas.

5) The musicians. It was vital to identify a pair of musicians with the skills to work effectively with a diverse team of school staff. The project required excellent communication skills, flexibility and a willingness to develop a deep understanding of the school environment. A broad set of musical and workshop-leading skills was essential, as it became clear that the staff pairs would need to follow four quite distinct journeys. The feedback from the musicians was that this project required significantly more 'thinking time' than projects which were more focused on achieving a musical outcome with the children.

There were aspects of the project which could have been improved. Communication of the project aims could have been better, with more time for the staff involved to have input to the planning process. The process of staff reflection could also have been improved. Reflective journals were discussed but never formally included in the project. These could have helped with both embedding learning and evaluation of the project outcomes.

Jessie's Fund hopes to build much of this learning into future projects. There will always be a place for time-limited, inspirational projects, which give large numbers of children new opportunities to experience and take part in music. The Soundtracks programme will continue to prioritise children's

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music-making, providing life-enhancing experiences for pupils with disabilities and boosting schools' musical aspirations. However, Jessie's Fund will also offer a complementary strand of training as a 'next step' for schools. Using the experiences described above, the charity will help teachers to develop the skills and confidence to place music at the heart of school life, as part of a rich and varied curriculum which helps children achieve their potential.

References

Welch, G., Ockelford, A., Carter, F.C., Zimmermann, S.A., & Himonides, E. (2009). 'Sounds of intent': Mapping musical behaviour and development in children and young people with complex needs. *Psychology of Music, 37*(3), 348-370.

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Emotion, Embodied Mind and the Therapeutic Aspects of Musical Experience in Everyday Life

Dylan van der Schyff

Abstract

The capacity for music to function as a force for bio-cognitive organisation is considered in clinical and everyday contexts. Given the deeply embodied nature of such therapeutic responses to music, it is argued that cognitivist approaches may be insufficient to fully explain music's affective power. Following this, an embodied approach is considered, where the emotional-affective response to music is discussed in terms of primary bodily systems and the innate cross-modal perceptive capacities of the embodied human mind. It is suggested that such an approach may extend the largely cognitivist view taken by much of contemporary music psychology and philosophy of music by pointing the way towards a conception of musical meaning that begins with our most primordial interactions with the world.

Keywords: music therapy; music and meaning; embodied cognition; music and emotions; embodied aesthetics; music in everyday life

Dylan van der Schyff received his MA in Liberal Studies from Simon Fraser University (Vancouver, Canada) and is currently engaged in graduate studies in music psychology at the University of Sheffield (UK). His research focuses on the nature of musical meaning at the intersection of biology, culture and lived experience. As a performer (drums/percussion) and producer, van der Schyff has appeared on close to 100 recordings spanning the genres of jazz, electro-acoustic, improvised, experimental and new music. Van der Schyff teaches music at Capilano University and gives courses in contemporary culture at Vancouver Community College.

Email: dbvanderschyff1@sheffield.ac.uk

Introduction

The effects of music on the human body and mind have been recognised for thousands of years and because music is understood to be associated with emotion, it is often thought that the emotional responses to music may hold the key to better understanding important aspects of its therapeutic power. Indeed, the relationship between music and emotion has been a principal area of investigation in music psychology and the philosophy of music for decades (Juslin & Sloboda 2010). Despite this fact, the nature of affective response to music remains ambiguous (Krumhansl 1997). Part of the reason for this may result from the tendency in psychological and philosophical musicology to begin with so-called 'higher' mental processes, such as structural appraisals (Lerdahl & Jackendoff 1996; Sloboda 1985), the satisfaction and thwarting of learned expectations (Huron 2006; Meyer 1956), or the relationship between the 'intrinsic' formal elements of the music and extrinsic' socio-cultural memories and sentiments (Sloboda & Juslin 2001). While these aspects are indeed important in understanding how we respond to music, the direct, embodied nature of musical experience cannot be ignored, especially when considering music's therapeutic effects.

Bodily responses to music do not go completely unrecognised by music psychology and philosophy. However because these disciplines generally understand musical affect first in terms of higher cognition, dualistic notions of body and mind are often reinforced, and the bodily meaning of musical affect is not always given the attention it deserves. Recent years have seen a surge in neurological research and philosophical theory that asserts the primary role of the body in meaning making and aesthetic response (e.g., Damasio 1994, 1999, 2003; Johnson 2007; Leman 2008; Ramachandran

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2011; Varela, Thompson, & Rosch 1992).With this in mind, I argue here for the inclusion of an embodied approach to musical affect and meaning. I begin by outlining music's capacity to function as a force for bio-cognitive organisation in therapeutic contexts. I then discuss the largely ambiguous results of contemporary research in the affective psycho-physiological responses to music. To conclude I draw on recent work in neuroscience, as well as the philosophical work of Johnson (2007) and others in order to consider how emotional-affective responses to music emerge within a complex network of primary bodily systems and embodied perceptions (the origins of meaning making) and thus afford a therapeutic harmonisation of intra-organism and organism-environment interactions. I suggest that such an approach may extend the largely cognitivist view taken by much of contemporary music philosophy and psychology (e.g., Clarke 2005; Deutsch 1999; Kivy 1990) by pointing the way towards a conception of musical meaning that begins with our most primordial interactions with the world; and that it may provide a useful theoretical grounding for recent attempts (e.g., Dibben 2004; Krumhansl 1997; Pansepp 1995) to include analyses of physiological responses in the psychological literature.

Music and bio-cognitive organisation

Music therapy as a contemporary healthcare profession began after the Second World War (Bunt 1994) and has since developed a wide array of approaches to utilise music in the treatment of, among other conditions, emotional-behavioural or mood disorders (Layman, Hussey, & Laing 2002; Magee & Davidson 2002), brain damage (e.g., stroke recovery; Nayak, Wheeler, Shiflett, & Agostinelli 2000), physical and cognitive disabilities, as well as in developing self-esteem and sociability (Henderson 1983). Considering the positive effects of music therapy on stroke patients and in the recovery of verbal fluency in aphasia, Patel (2010) discusses how treatment may result in long lasting changes to brain structures and functions (largely, he suggests, through neuroendocrine effects and mechanisms of brain-plasticity). Indeed, we might note the remarkable effects of clinical music therapy in the case of American congresswoman Gabby Giffords as she struggles to regain the faculties of speech after being shot in the head by a deranged gunman (Michaels 2012). Consider also the case of Gary, a young man unable to see or speak but who, through music therapy, is able to engage in "co-ordinated activity with another person […] develop his sense of self, his presence to self and other(s)" and enjoy "an aesthetic environment and forms of aesthetic interaction capable of producing pleasure [and] security […]" (DeNora 2000: 14-16). According to DeNora, music therapy has afforded Gary tools for "stabilising" his environment and himself, whereas before he could only resort to shrieking, biting and scratching to express distress – activities that would only further alienate him from his own social and physical existence.

Outside of the context of music therapy as a systematically administered treatment, DeNora also considers the case of Lucy, who in the course of everyday life "self-administers" music (in the form of Schubert *Impromptus*) in order to move from a state of stress to one of calm (2000: 16). Similarly, Standley (1995) has shown how music may be successfully introduced into medical and dental environments in order to reduce anxiety and pain in patients (for a brief overview see Bunt 1997).

Patel (2010: 91-144) argues that music is a biologically powerful "transformative technology of the mind" that physically shapes the brain in ways that afford all manner of physical, cognitive and social benefits to those who participate in it (both in clinical contexts and in everyday life). In all of the above cases where music is introduced to a stressed, anxious, injured or otherwise disorganised body and/or body-environment relationship, we find a therapeutic organisation of the elements of being – one that integrates body, environment and mind beginning at the most primordial level. Along these lines, DeNora (2000) has reviewed the beneficial effects of music on neonates who are in a profoundly disorganised state of being. The introduction of music into the neonate's world masks other potentially stressful noises and aids in creating a regulated calming environment within which the infant may become entrained, thereby regaining some of the auditory stability reminiscent of the intrauterine environment (maternal movements, breathing, heartbeat, etc.) (Collins & Kuck 1990; Leonard 1992; Parncutt 2003). There is growing evidence to suggest that rhythmic entrainment activities (drumming, chanting, dancing) synchronise the body and brain and thus provide "extended control of the limbic system, offering one the chance to reduce emotional noise and settle the mind" (Jovanov & Maxfield 2011: 45). Benzon discusses the biological necessity for humans to share in each other's bodily rhythms through activities like music and dance: "human beings create a uniquely human social space when their nervous systems are coupled through interactional synchrony [via music and dance]" (Benzon 2001: 28; see also Becker 2011; Cross 2012; Mithen 2006).

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Considering the therapeutic effects of music, it is very difficult to ignore the fact that much of what makes musical experience meaningful emerges from an active bodily interaction with a musical environment, where sensory perception and bodily activity alter physical-mental processes in ways that may have beneficial consequences. Indeed, the examples above demonstrate how music affords organism-environment organisation (DeNora 2000; see also Clarke 2005; Gibson 1966) in ways that span the entire range of our being-in-the-world. In short, musical experience is a bio-cognitive phenomenon that affords ordering and communication between the diverse and changing aspects of our embodied existence – as DeNora (2000, 2011) claims it is "a device for ordering the self"; a resource for meaning and world making. Most of us have felt, as DeNora calls it, the 'organizing force' of music and regularly use music in this way in our daily lives (DeNora 2000, 2011; Sloboda, O'Neill & Ivaldi 2001). Indeed, music's capacity to function as an entraining device is evident in everyday experience. For example, to mask unnecessary distractions from the task at hand (e.g., homework); to organise the body and our awareness of it in order to more effectively engage in various types of action (e.g., see the discussion of the uses of music in aerobics classes in DeNora 2000); to afford a sense of belonging in the social environment; or simply to make work and life more pleasurable. That music affords such benefits hardly requires further discussion. However, the question of how and why music is able to do what it does remains highly vexing.

Given what has been discussed here, it is difficult to deny the embodied nature of musical affect, and this poses a challenge to theories that rely heavily on representational, grammatical, or structural approaches to musical affect and meaning (e.g., the music as language approach; see Johnson 2007). Recently, a number of researchers (Dibben 2004; Krumhansl 1997; Pansepp 1995; Sloboda 1991; Sloboda & Juslin 2001) have attempted to examine the bodily responses to emotionally charged music with the hope that data might correlate conclusively with that related to non-musical experiences of common emotions like sadness, fear and happiness and thus help us better understand how music affects the body and mind. Unfortunately the results are frustratingly ambiguous and the precise nature of musical emotion-specific psychophysiology remains elusive (Gabrielsson 2001-2002; Krumhansl 1997; Scherer & Zentner 2001; Sloboda 2000). What is needed, it seems, is an expanded and more nuanced conception of meaning and emotion that allows us to discuss how affective response to music affords such meaningful and therapeutic interactions between embodied mind and the enacted musical environment.

The ambiguity of musical emotions

Understanding the relationship between emotion and musical meaning has been a central area of investigation for music psychology since its beginnings. Some have considered how structural variations may set-up and violate musical expectations in the listener and thereby allow emotions to be perceived in the music (Huron 2006; Meyer 1956). This view, as well as other formal and 'rule based' approaches, often focus on the structural aspects of music in terms of grammar or syntax – i.e., hierarchies of pitch, intervals, phrases and rhythm, which are compared and analysed in terms of their psychological effects on listeners (Lerdahl & Jackendoff 1996; Sloboda 1985).

Along similar lines, Cooke (1960) and his followers have adopted an 'expressionist' approach that attempts to put forward, in quasi-linguistic terms, an objective view of how musical structures may produce predictable emotive states in the listener through reference to extra-musical concepts and phenomena (e.g., Harris & Sandresky 1985). Sloboda and Juslin (2001) offer two categories by which musical emotions and affective states might be sourced: the *intrinsic* (the structural characteristics of the music itself) and the *extrinsic* (the relationship between musical structure and some extra-musical meaning. While there is now a large amount of evidence to show that specific emotions may be consistently attributed to given musical passages, it has proven much more difficult to demonstrate convincingly that music actually *produces* such emotions in listeners (Gabrielsson 2001-2002; Scherer & Zentner 2001). It has also been suggested that the labelling of affective states may be influenced by provided categories or cultural aesthetics – "[...] when a listener reports that he felt this or that emotion, he is describing the emotion which he believes the passage is supposed to indicate, not anything which he himself has experienced" (Meyer 1956: 8). This has led to a philosophical divide between those who claim that music elicits real emotions in listeners and those, like Kivy (1990: 151), who assert that music "possesses" basic emotions that may be recognised but not actually felt by listeners because "there are no behavioral symptoms of listeners actually experiencing [emotions] when attending to music [...]".

The statements by Kivy (1990) and Meyer (1956) may need to be re-thought given growing research that attempts to correlate emotional and

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physiological responses to music (Dibben 2004; Krumhansl 1997; Pansepp 1995). For example, a study by Sloboda (1991) showed that listeners did demonstrate physiological changes where musical expectations were thwarted—a finding that both supports Meyer's thesis that perception of musical emotions involves violation of musical expectations and weakens his claim that physiological changes do not correspond with musical patterns. But while it is clear that music produces psycho-physiological responses that are similar to those produced by emotions – and that often appear to correlate with certain structural aspects of music (rapid changes in dynamics, unexpected cadences, changes in tempo and so on) – there remains a lingering suspicion that musical emotions may be different from other types of emotions. Krumhansl observes that 'emotional' physiological changes associated with music do not "clearly map onto those found in studies of non-musical emotions" (Krumhansl 1997: 351). Sloboda discusses the ambiguity of musical emotions in the following terms:

> "Very often we feel that there is an emotion present […] but we cannot quite tie it down. In such a state of ambiguity […] we may well expect the profound and semi-mystical experiences that music seems to engender. Our own subconscious desires, memories, and preoccupations rise to the flesh of the emotional contours that the music suggests. The so-called 'power' of music may very well be in its emotional cue-impoverishment. It is a kind of emotional Rorschach blot" (Sloboda 2000: 226; also quoted in Pellitteri 2009).

This ambiguity is a problem for music psychology, especially when it attempts to examine the affective responses to music in comparison with simpler, more clear-cut cases where there is a definite correlation between stimulus and an identifiable emotion – e.g., I see a tarantula crawling up my leg and I feel fear. However, this ambiguity becomes less of an issue, or at least more understandable, if we are willing to adopt an approach that examines musical experience in terms of deeper, more primordial embodied interactions with the aesthetic environment. This approach may allow us to see the affective response to music from a perspective that is somewhat different from the largely cognitive point of view discussed so far in this section – where emotional (or emotion-like) responses to music are rationalised in categorical terms through correspondence to structural aspects of musical objects, associations with extra-musical meanings, quasi cognitive appraisals, learned expectations, the "music as language metaphor" (Johnson 2007) and so on.

It should be noted here that some have suggested that emotional response to music involves an active seeking out of environmental 'cues' (Sloboda & Juslin 2001) in order to discern what one "should feel or hear in response to a particular musical experience" (Dibben 2004: 113) – an approach that points in an ecological direction (Clarke 1995 2005; Gibson 1966). It is clear that under certain conditions we do engage in cognitive appraisals of the musical environment – or at least, as Dibben (2004) suggests, a kind of "visceral self perception" of bodily/emotive states. It is also clear that music is sometimes associated with certain memories or shared socio-cultural sentiments (Hevner 1936) that may trigger (or at least refer to) emotional responses as *extrinsic* sources (see above). The case of Lucy discussed earlier may partially fit this category as the Schubert *Impromptus* remind her of her father and happy times.

These 'higher level' perceptual and appraisal processes are important and, of course, should continue to be studied. But what about the more direct bodily relationship listeners and musicians experience with music? It seems very unlikely that Gary or the neonates' experience (above) would be mediated by extrinsic factors and appraisals such as those discussed above. Their beings would be more focused on the direct embodied experience itself, with what they are feeling and on the beneficial *affordances* (Gibson 1966) of the lived environment in which they strive for a state of wellbeing. While one could argue that the neonates should have some 'memory' of the prenatal environment, any 'associations' with the 'musical' environment introduced in the maternity ward would most likely be of a direct embodied nature – a state of being that 'resonates' (Clarke 1995; Gibson 1966) with how fundamental biological needs for entrainment and homeostasis (Damasio 1994) were met in the womb – rather than the product (output) of some purely mental or hierarchical (i.e., cognitivist) process of representation and re-cognition. However, although neither Gary nor the neonates would appear to possess the cognitive means to analyse and appraise their 'musical' environments (at least in terms of making the kinds of critical distinctions discussed above), their experiences cannot be understood as meaningless in terms of their direct bodily relationship with the world (i.e., their history of 'structural coupling' with the lived environment; see Varela, Thompson, & Rosch 1992). And this is indicative of how musical meaning emerges from our most primordial and embodied states of being-in-the-world – pre-reflectively; at the origin of sensation and feeling where, in direct active

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experience distinctions between *intrinsic* and *extrinsic* (mind, body, world) may not be so clearly recognised.

While music psychology acknowledges that basic primordial bodily systems, brain functions and perceptions must play a role in the emotional response to music, there has been very little research and theory to explain how and why this is so. Speculating about the affective response to music in terms of "semi-mystical experiences" or controversial psycho-dynamic tests designed to reveal psychopathologies (Rorschach blots), or assuming that music is "cue-impoverished" (see above; Sloboda 2006: 226) because our language fails to describe how it effects us will not get us very far. All of this speaks to how difficult it is for an empirical science to objectively study such a subjective and multi-faceted aspect of human experience. This said, however, Sloboda's general turn to subconscious forces and the embodied, emotional "contours" of musical experience might point us in the right direction.

Towards an embodied conception of musical affect

I think it safe to say that, by and large, everyday musical experiences rarely involve any kind of sustained conscious structural analysis on the part of those experiencing it (see Clarke 2005). Although some highly trained musicians and music academics may have difficulty experiencing music without engaging in some form of analysis, for most of us music is first and foremost something felt. Indeed, we are drawn to music because "it appeals to our felt sense of life" (Johnson 2007: 236) as creatures who move, feel and grow in time and space and who strive for some kind of flourishing existence. As Sessions writes,

> "[It] is easy to trace our primary musical responses to the most primitive movements of our being – to those movements which are at the very basis of animate existence. The feeling for tempo […] [has a] primitive basis in the involuntary movements of the nervous system and the body in the beating of the heart and… in breathing, later in walking. [...] [If] an increase in intensity [(pitch, loudness)] of sound intensifies our dynamic response to music… it is because we have already in our vocal experiences – the earliest and most primitive as well as later and more complicated ones – lived through exactly the same effects" (Sessions 1941: 105-109; see also Juslin & Laukka 2003; Mithen 2006)

Music orders our lived experience by bridging dualistic conceptions, such as inner and outer – mind, body and world; the *intrinsic* and the *extrinsic* – in ways that begin with our most primal states of being-in-the-world. What we objectively name as pitch, rhythm, tempo, melody and so on are meaningful phenomena because they are "congruous with the dynamic forms of our direct sensuous, mental and emotional life" (Langer 1947: 25).

From the womb, we feel the relationship between sound, movement and emotive-bodily states. Consider, for example, the parallel development and anatomical unity of the cochlea (hearing) and vestibule (balance, orientation) and the prenatal "physiological-emotional communication" that appears to occur between mother and fetus – this is a clear starting point if we wish to account for the universal relationship between music, dance and affective-emotional response (see Parncutt 2006). This kind of approach (one that begins with organism-environment interactions and embodied origins), allows us the ontological continuity necessary to construct an embodied approach to the meaning of musical affect – where so called higher cognitive processes emerge from bodily interactions with the environment with no dualistic 'gaps' between them (see Leman 2008; Varela, Thompson, & Rosch 1992); or, as Dewey puts it, where "rational operations grow out of organic activities, without being identical with that from which they emerge" (Dewey 1991: 26; see also Reybrouk 2005).

Ramachandran (2011), via his research into mirror neurons and the cross-activation of brain maps associated with synesthesia, has suggested that language emerged from the ritualisation of bodily gestures involved with the practical aspects of our ancestors' daily lives as well as through an innate cross mapping of neural areas for sights and sounds. Around a century earlier, William James famously argued that even the most abstract concepts afforded to us by language begin with bodily perceptions and feelings that result from pragmatic interactions with the world – "'More' and 'less' mean certain sensations[…]" (James 1979: 38). Taking this further, Stern (1985) claims that as infants our earliest attempts to construct a secure, coherent and meaningful world are entirely non-linguistic and depend upon the innate ability to perceive and remember what he calls "vitality-affect contours" as we move through space and time. Stern (1985: 54) employs embodied kinetic terms (such as 'surging', 'fading away', 'fleeting', 'crescendo', 'diminuendo' and 'drawn out') and this enables him to consider more nuanced, active states of being than words such as *anger*, *fear*, and *joy* are capable of expressing on their own. Indeed, this approach does justice to the feeling of flow in

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our experience (James' stream of consciousness); and to how "differences of pattern in this flow are the basis for different felt qualities of situations" (Johnson 2007: 43) and are, as such, the origins of meaning.

Furthermore, Ramachandran (2011) suggests that since prehistoric times, artists have, in their works, manipulated and exaggerated the basic ways we perceive and move in the world (as well as our most primordial needs, fears and desires) and that this gives rise to aesthetic forms of emotional response, which have correlations with similar, but much simpler, responses in some animals (see Ramachandran 2011; Sessions 1941, quoted above).

As Johnson (2007) points out, we do not 'shed' these bodily, primal, pre-linguistic and often pre-conscious ways of meaning-making as we grow-up and engage in more explicitly cognitive or propositional ways of thinking. Rather they continue to shape the contours of our experience and form the basis of how we meaningfully orient ourselves in the world. We also employ them for pleasure and entertainment, for stabilising our relationship with our environment, and to better feel our most primordial embodied humanity through music, dance and art. One of the ways we do this is through metaphor, which, as both Johnson (2007) and Ramachandran (2011) have demonstrated, is not simply a linguistic device. Rather it is a deeply rooted function of the human mind that often operates pre-reflectively and in non-linguistic contexts; and that enables us to create meaningful aesthetic experiences through cross modal relations. It reveals, as Ramachandran (2011: 108) suggests, the 'closet' synesthete in all of us.

Johnson (2007) discusses musical meaning in terms of the creation and bodily grounding of conscious and pre-conscious metaphors that provide the relevant logics of time and space (Lakoff & Johnson 1999, 2003). This may go some way in explaining the experience of motion (see Clarke 2001; Todd 1999), texture, tension, color and contour, location, landscape, as well as a host of other qualities (or the vitality-affect contours; Stern 1985) we feel in musical experience, and which play such an important role in our 'emotional' responses to music. On an even more fundamental level, because this process involves the cross activation of brain areas it may shed light on how music aids in reorganising damaged brains. For example, Tomaino (2011: 216) writes, "singing may serve as a priming element for speech […] stimulating either peripheral language areas or compensatory areas in the right temporal lobe" (see also Patel 2010; and the case of Giffords above). It follows that the metaphorical approach may offer a useful integration between the neurobiological point of view and the subjective experience of the patient.

This neural cross activation may also partially explain how music interacts with the largely pre-conscious bodily systems that have evolved in humans (and other animals) in order to maintain a state of wellbeing – i.e., *metabolism*, *basic reflexes*, *the immune system*, *pain and pleasure responses*, *basic drives*, *emotions*, and *feelings* (Damasio 2003). As Damasio points out, more complex systems, such as emotion or feeling, depend on basic biological processes, such as metabolism. These systems are deeply interconnected, and form the basis of our bio-cognitive interactions with the world (Damasio 1994, 1999, 2003). That musical experience comprehensively affects these primordial systems is clear, especially when we consider its therapeutic effects in clinical settings and in everyday life. It should therefore be no surprise that musical affect cannot always be reduced to specific emotions. Rather, music is first felt as moving patterns of experience grounded in basic bodily systems and embodied perceptions of space-time (vitality-affect contours) that afford organisation of the various elements of our most primordial existence – a harmonious state of being-in-the-world.

Conclusion

The prevalence of the 'information processing' approach (e.g., Deutsch 1999) in much of the music psychology literature has tended to create a disembodied view of musical cognition. This view often treats musical cognition as if it were an abstract "reasoning or problem solving process" (Clarke 2005: 15) that proceeds in a hierarchical way – the 'outputs' of lower levels feed 'inputs' to higher levels, with increasingly complex representations of the "world out there" processed at each stage. The final 'goal' of this otherwise disinterested process of perception is conscious experience, which may in turn influence the processing of representations at lower levels (see Clarke 2005; also Varela, Thompson, & Rosch 1992). Little attention is given to how perception functions in terms of a given organism's need to orient itself within (to explore or enact) an environment in ways that accord with its wellbeing. However, given what I have discussed here this approach appears overly reductive if not completely wrongheaded. While we are clearly capable of thinking representationally, the practice of music therapy and the therapeutic experience of music in everyday life highlight the deeply embodied aspects

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of perception and cognition. As discussed above, the idea that cognition consists of more than the mental manipulation of symbols according to abstract rules of logic and syntax is increasingly supported by an array of philosophical and neurological studies that demonstrate the central role of the body – and its direct active engagement with the world – in how we construct meaning out of the social and physical environments we inhabit.

These insights have led to the development of ecological (e.g., Clarke 2007; Gibson 1966; Krueger 2011a, 2011b) and enactive (Reybrouk 2005; Varela, Thompson, & Rosch 1992) approaches to perception and cognition that point the way towards deeper and more nuanced conceptions of musical communication and meaning. This research has important implications not only for music psychology and music therapy, but also in the areas of music education and performance. Most importantly it offers a means by which we may begin to think and talk about musical cognition in terms of perceptually guided action, the history of structural coupling between organism and environment, and principles of *specification* and *affordance* (as opposed to codification and representation). For educators and performers this may allow new possibilities (a vocabulary even) for considering how embodied action literally brings the music to life – not only in terms of the bodily movements of the performer but also with regard to the kinds of movement experiences and other embodied relationships (physical, emotional, and psychological; i.e., vitality-affect contours) that may be afforded to listeners or that occur between performers (Reybrouk 2005). This perspective may also help to open up a greater awareness of the enacted aesthetic environment, where music functions as a "resource for meaning making" (DeNora 2011: xiv) in contexts where other modes of communication and understanding (e.g., language) are unsuitable or impossible. This will be of interest to creative artists (composers, improvisers) and therapists alike as both are concerned with the creation of meaningful musical environments and the types communication they afford (between musicians, artist and audience, patient and therapist). The growing interest in the embodied aspects of musical experience holds great promise as a shared area of research for music therapy and music psychology, potentially allowing a greater exchange of ideas and collaboration between the two disciplines.

References

Becker, J. (2011). Rhythmic Entrainment and Evolution. In J. Berger & G. Turow (Eds.), *Music, Science and the Rhythmic Brain: Cultural and Clinical Implications* (pp. 49-72). London: Routledge.

Benzon, W.L. (2001). *Beethoven's Anvil: Music in Mind and Culture.* New York: Basic Books.

Bunt, L. (1994). *Music Therapy: An Art Beyond Words.* London: Routledge.

Bunt, L. (1997). Clinical and Therapeutic Uses of Music. In D.J. Hargreaves & A.C. North (Eds.), *The Social Psychology of Music* (pp. 249-267). London: Routledge.

Clarke, E. F. (1995). Expression in Performance: Generativity, Perception and Semiosis. In J. Rink (Ed.), *The Practice of Performance: Studies in Musical Interpretation* (pp. 21-54). Cambridge: Cambridge University Press.

Clarke, E.F. (2001). Meaning and the specification of motion in music. *Musicae Scientiae, 5*(2), 213-234.

Clarke, E.F. (2005). *Ways of Listening: An Ecological Approach to the Perception of Musical Meaning.* New York: Oxford University Press.

Collins, S., & Kuck, K. (1990). Music therapy in the neonatal intensive care unit. *Neonatal Network, 9*(6), 23-26.

Cooke, D. (1960). *The Language of Music.* New York: Oxford University Press.

Cross, I. (2012). Music and Biocultural Evolution. In M. Clayton, T. Herbert, & R. Middleton (Eds.), *The Cultural Study of Music: A Critical Introduction* (pp. 17-27). London: Routledge.

Damasio, A. (1994). *Descartes' Error: Emotion, Reason and the Human Brain.* New York: G.P. Putnam's Sons.

Damasio, A. (1999). *The Feeling of What Happens: Body and Emotion in the Making of Consciousness.* New York: Harcourt Brace.

Damasio, A. (2003). *Looking for Spinoza: Joy, Sorrow and the Feeling Brain.* Orlando, FL: Harcourt.

DeNora, T. (2000). *Music in Everyday Life*. New York: Cambridge University Press.

DeNora, T. (2011). *Music in Action: Selected Essays in Sonic Ecology.* Burlington, VT: Ashgate Publishing Company.

ISSN: 1791-9622

Dewey, J. (1938/1991). Logic: The Theory of Inquiry. In J. A. Boydston (Ed.), *John Dewey: The Later Works, 1925-1953, Vol. 12* (pp. 1-527). Carbondale, IL: SIU Press.

Deutsch, D. (1999). The Processing of Pitch Combinations. In D. Deutsch (Ed.), *The Psychology of Music* (pp. 349-411). New York: Academic Press.

Dibben, N. (2004). The role of peripheral feedback in emotional experience with music. *Music Perception, 22*(1), 79-116.

Gabrielsson, A. (2001-2002) Perceived emotion and felt emotion: Same or different? *Musicae Scientiae*, Special Issue: Current Trends in the Study of Music and Emotion, 123-148.

Gibson, J.J. (1966). *The Senses Considered as Perceptual Systems.* Boston: Houghton Mifflin.

Harris, C., & Sandresky, C. (1985). Love and death in classical music: Methodological problems in analyzing human meanings in music. *Symbolic Interaction, 8*(2), 291-310.

Hevner, K. (1936). Experimental studies of the elements of expression in music. *Journal of Psychology, 48*, 246-268.

Henderson, S.M. (1983). Effects of a music therapy program upon awareness of mood in music, group cohesion, and self-esteem among hospitalized adolescent patients. *Journal of Music Therapy, 20*(1), 14-20.

Huron, D. (2006). *Sweet Anticipation: Music and the Psychology of Expectation.* Cambridge, MA: MIT Press.

James, W. (1911/1979). Percept and Concept. In W. James, *Some Problems of Philosophy* (pp. 21-60). Cambridge, MA: Harvard University Press.

Johnson, M. (2007). *The Meaning of the Body: Aesthetics of Human Understanding.* Chicago: University of Chicago Press.

Jovanov, E., & Maxfield, M.C. (2011). Entraining the Brain and Body. In J. Berger & G. Turow (Eds.), *Music, Science and the Rhythmic Brain: Cultural and Clinical Implications* (pp. 31-48). London: Routledge.

Juslin, P., & Laukka, P. (2003). Communication of emotions in vocal expression and music performance: Different channels, same code? *Psychological Bulletin, 129*(5), 770–814.

Juslin, P., & Sloboda, J. (Eds.) (2010). *Handbook of Music and Emotion: Theory, Research Applications.* Oxford: Oxford University Press.

Krueger, J. (2011a). Doing things with music. *Phenomenology and the Cognitive Sciences, 10* (1), 1-22.

Krueger, J. (2011b). Enacting Musical Content. In R. Manzotti (Ed.), *Situated Aesthetics: Art beyond the Skin*. Exeter: Imprint Academic.

Krumhansl, C.L. (1997). An exploratory study of musical emotions and psychophysiology. *Canadian Journal of Experimental Psychology, 51*(4), 336-352.

Kivy, P. (1990). *Music Alone: Philosophical Reflections on the Purely Musical Experience.* Ithaca: Cornell University Press.

Leman, M. (2008). *Embodied Music Cognition and Mediation Technology.* Cambridge, Mass. MIT Press.

Lakoff, G., & Johnson, M. (1999). *Philosophy in the Flesh: The Embodied Mind and its Challenge to Western Thought*. New York: Basic Books.

Lakoff, G., & Johnson, M. (2003). *Metaphors We Live By.* Chicago: University of Chicago Press.

Langer, S. (1947). *Problems of Art.* New York: Charles Scribner's Sons.

Layman, D.L., Hussey, D.L., & Laing, S.J. (2002). Music therapy assessment for severely emotionally disturbed children: A pilot study. *Journal of Music Therapy, 39*(3), 164-187.

Leonard, J. (1992). Music therapy: Fertile ground for application of research in practice. *Neonatal Network, 12*(2), 47-48.

Lerdahl, F., & Jackendoff, R.A. (1996). *A Generative Theory of Tonal Music.* Cambridge, MA: MIT Press.

Magee, W.L., & Davidson, J.W. (2002). The effect of music therapy on mood states in neurological patients: A pilot study. *Journal of Music Therapy, 39*(1), 20-29.

Meyer, L.B. (1956). *Emotion and Meaning in Music.* Chicago: University of Chicago Press.

Michaels, S. (2012, February 27). *The Healing Power of Music* [Television broadcast, PBS News Hour]. Washington, DC: PBS.

Mithen, S. (2006). *The Singing Neanderthals: The Origins of Music, Language and Body.* Cambridge, MA: Harvard University Press.

Nayak, S., Wheeler, B., Shiflett, S., & Agostinelli, S. (2000). Effect of music therapy on mood and social interaction among individuals with acute traumatic brain injury and stroke. *Rehabilitation*

ISSN: 1791-9622

Psychology, *45*(3), 274-283.

Pansepp, J. (1995). The emotional source of "chills" induced by music. *Music Perception*, *13*(2), 171-207.

Parncutt, R. (2006). Prenatal Development. In G.E. McPherson (Ed.), *The Child as Musician: A Handbook of Musical Development* (pp. 1-31). Oxford: Oxford University Press.

Patel, A.D. (2010). Music, Biological Evolution, and the Brain. In M. Bailar (Ed.), *Emerging Disciplines* (pp. 91-144). Houston, TX: Rice University Press.

Pellitteri, J. (2009). *Emotional Processes in Music Therapy*. Gilsum, New Hampshire: Barcelona.

Ramachandran, V.S. (2011). *The Tell Tale Brain: A Neuroscientist's Quest for What Makes Us Human.* New York: Norton.

Reybrouck, M. (2005). Body, mind and music: Musical semantics between experiential cognition and cognitive economy. *Transcultural Music Review*, *9*. Retrieved from: www.sibetrans.com/trans/a180/body-mind-and-music-musical-semantics-between-experiential-cognition-and-cognitive-economy

Scherer, K.R., & Zentner, M.R. (2001). Emotional Effects of Music: Production Rules. In P.N. Juslin & J.A. Sloboda (Eds.), *Music and Emotion: Theory and Research* (pp. 361-392). Oxford: Oxford University Press.

Sessions, R. (1941). The Composer and His Message. In A. Centeno (Ed.), *The Intent of the Artist* (pp. 101-134). Princeton, NJ: Princeton University Press.

Sloboda, J.A. (1985). *The Musical Mind: The Cognitive Psychology of Music.* Oxford: Clarendon Press.

Sloboda, J.A. (1991). Music structure and emotional response: Some empirical findings. *Psychology of Music*, *19*(2), 110-20.

Sloboda, J.A. (2000). Musical Performance and Emotion: Issues and Developments. In S.W. Yi (Ed.), *Music, Mind and Science*, (pp. 220-38). Seoul, Korea: Western Music Research Institute.

Sloboda, J. A., & Juslin, P. N. (2001). Psychological Perspectives on Music and Emotion. In P.N. Juslin & J.A. Sloboda (Eds.), *Music and Emotion: Theory and Research* (pp. 71-104). Oxford: Oxford University Press.

Sloboda, J. A., O'Neill, S. A., & Ivaldi, A. (2001). Functions of music in everyday life: An exploratory study using the Experience Sampling Method. *Musicae Scientiae*, *5*(1), 9-32.

Standley, J. (1995). Music as a Therapeutic Intervention in Medical and Dental Treatment: Research and Applications. In T. Wigram, B. Saperston & R. West (Eds.), *The Art and Science of Music Therapy: A Handbook* (pp. 3-22). Amsterdam: Harwood Academic Publishers.

Stern, D. (1985). *The Interpersonal World of the Infant: A View From Psychoanalysis and Developmental Psychology.* Amsterdam: Vrije Universiteit te Amsterdam.

Todd, N.P. (1999). Motion in music: A neurobiological perspective. *Music Perception*, *17*(1), 115-26.

Tomaino, C.M. (2009). Clinical Applications of Music Therapy in Neurological Rehabilitation. In R. Haas & V. Brandes (Eds.), *Music that works: Contributions of Biology, Neurophysiology, Psychology, Sociology, Medicine and Musicology* (pp. 211-220). Vienna: Springer.

Varela, F., Thompson, E., & Rosch, E. (1992). *The Embodied Mind: Cognitive Science and Human Experience.* Cambridge, MA: MIT Press.

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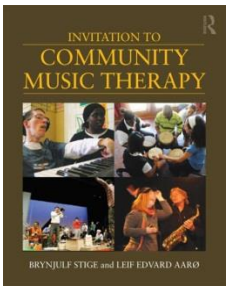
Book review

Invitation to Community Music Therapy
Brynjulf Stige & Leif Edvard Aarø

Reviewed by Stuart Wood



Invitation to Community Music Therapy

Brynjulf Stige & Leif Edvard Aarø

New York: Routledge (2012)
330 pp., ISBN: 978-0-415-80554-4

Stuart Wood is Head Music Therapist in the Barchester Nordoff Robbins Initiative in the UK. He is also a PhD student at Nordoff Robbins / City University in London. His research is in evaluation of Community Music Therapy.

Email: stuart.wood@nordoff-robbins.org.uk

The world is in chaos. Science authors such as Steven Johnson and James Gleick describe how slime mould, ant colonies and – the most famous – butterflies flapping their tiny wings, have become examples in the science community of how unpredictable the world really is. Swarm behaviour, emergence and the butterfly effect are ideas that explore the sensitive interaction between smaller parts and greater wholes. They generate systemic notions of self-organisation, collective phenomena, de-centralisation and multiplicity, and they continue to challenge the *status quo* of science.

In their book, *Invitation to Community Music Therapy* (Routlege, 2012), Stige and Aarø outline a movement in music therapy that illustrates the same kinds of ideas. They present a text that acts as an invitation to explore what they call a "sub-discipline" (p. 27) of music therapy built upon self organisation, collective phenomena, de-centralisation and multiplicity. It is a descriptive text, with the aim of being a pedagogic resource. Their stated intention is to create an accessible book, featuring research, theory, practice and profession. The outcome is a robust collaboration between two fields, reflecting the nature of the subject matter in the writing team itself. The combined perspectives of the Professor of Music Therapy in the University of Bergen (Stige) and the Chief Scientist at the Division of Mental Health in Norway's Institute of Public Health and Adjunct Professor of Social Psychology in the University of Bergen (Aarø) give the book a platform to ask big questions. My big question then, is, if they are inviting me as a reader to explore something, does this book tell me where to look for it, and does it make me want to go?

The authors are clear from the start. If you are looking for Community Music Therapy, they cannot tell you where or what it is, but they can help you recognise it when you see it: "Community Music Therapy is being developed in various ways in relation to a range of local contexts, cultures, and social situations. There are therefore limits to how clarifying general definitions can be" (p. 16). Their strategies for helping us recognise Community Music Therapy, or its characteristics, are thorough and practical. These strategies include a useful acronym of qualities, impressive use of

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photographs and practical vignettes, and a comprehensive theoretical framework, which I explain below.

One of the book's most helpful pedagogic inventions is the acronym, PREPARE. This acronym lists what the authors call the "qualities" (p. 18) of Community Music Therapy, bringing together features of Community Music Therapy theory and practice. It stands for:

P – Participatory
R – Resource-oriented
E – Ecological
P – Performative
A – Activist
R – Reflective
E – Ethics-driven

This acronym runs through the whole text, providing a clear method of understanding the many vignettes and practical examples in the book.

There are seventy figures in the book, providing varied and contrasting images of practice. The vignette text boxes run to fifty. These visual elements are an integral feature of how the authors present Community Music Therapy. Not functioning only as illustration or distraction, images and vignettes demonstrate that the authors need more than words to really portray their subject. The book needs images, diagrams and vignettes to act as constituent parts of the text, not just added extras. The list of features needed to represent Community Music Therapy is extraordinary.

In terms of theory and meta-theory, the book surveys a history of Community Music Therapy, basic concepts of health, society and community, key practical issues, and the role of research and professionalisation. It goes some way to reinforcing the growing narrative of Community Music Therapy, but provides some interesting historical and theoretical gems along the way. Packed as it is with perspectives, these gems will be different for every reader.

For example, I found the argument about Community Music Therapy as a "rights-based practice" (p. 179) very interesting:

> "The efforts of lawyers and politicians working for human rights are highly valuable but limited. Many of the social and cultural rights, for instance, cannot be achieved by laws and regulations only. They must be actively provided for" (p. 179).

This radical idea about the power of musical work in social activism seems to conflict in some ways with the progress of professionalisation in this field. I wondered, do people who need their human rights to be defended actually have access to musical provision? Or is it inhibited by our increasingly professionalised status? Is our power to help neutered by our being approved to help? Going further, does a focus on rights and freedom distract from the physical/functional component of musical work? Does this orientation simply swap one limitation for another? So many questions; yet one way to recognise Community Music Therapy, perhaps, is the kinds of questions it makes us ask. This in fact, is built into the text, with discussion topics included at the end of each chapter.

Another question that the book triggered for me was about concepts of music. The authors propose a way of thinking about "music as milieu" (p. 119), following on from their understanding of Aigen's "music as medium" (p. 118) and Gaston's "music as means" (p. 118). They suggest that this ecological metaphor allows us to think of music as a scene in which we perform relationships. In other words, the authors base Community Music Therapy on a de-centred concept of music. This describes an important puzzle for me, which is that this music-centred approach to music therapy actually has a de-centred concept of music. So it puts de-centring, as it were, at the centre.

Putting a de-centred music at the centre is a typical paradox of Community Music Therapy. It preserves the sense of wonder, and enquiry, that I recognise as an important feature of its creativity. The style of presentation here – ecological, empirical, abductive – leaves room for growth, new learning, development, and discovery. The style is also generous, being less hierarchical and hagiographic perhaps than previous movements in the history of music therapy, and I enjoy this intellectual attitude. It is summarised for me in Stige and Aarø's quotation of Ansdell:

> "[…] instead of saying 'the central defining element of CoMT is either x, y or z' we instead look at how the pattern of its elements is rearranged in *new relationships* within any given context. So CoMT is not defined by anything new, or anything 'particular' – but by a new arrangement of known elements: in short, a new pattern […]" (Ansdell 2005, cited in p. 17).

So in this new de-centred pattern, what is in the foreground? This text brings the focus on ecological knowledge systems, empiricism, and abductive thinking. This raises the question: in Community Music Therapy, what does context really mean, and where does it end? As we know already, the butterfly that flaps its wings can change everything. The authors suggest that, "[…] beliefs, attitudes, and values, are all parts of a functionally

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integrated cognitive system, so that change in any part of the system will affect other parts […]" (p. 177). The authors do not offer studies of how those changes work, or what practitioners do with those changes in detail, but this was not their intention. It could be a helpful addition for future editions.

So the reader is presented with an exciting landscape, not mapped from above but instead described using the walks, experiences and 'geological samples' that people have taken through and from it. We are invited to explore it too, with a guide for recognising important features of the terrain, and ways of understanding the ecology of the whole. But keep your eyes open for slime mould, ant-colonies and those dangerous butterflies…

References

Ansdell, G. (2005). Community Music Therapy: A plea for "fuzzy recognition" instead of "final definition" [Contribution to moderated discussions]. *Voices: A World Forum for Music Therapy*. Retrieved on 17 January 2006, from www.voices.no/discussions/discm4_07.html

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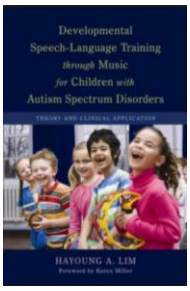
Βιβλιοκριτική

Developmental Speech-Language Training through Music for Children with Autism Spectrum Disorders

Hayoung Lim

Από τη Βαρβάρα Πασιαλή



Developmental Speech-Language Training through Music for Children with Autism Spectrum Disorders

Hayoung Lim

Philadelphia, PA: Jessica Kingsley (2012)
197 pp., ISBN: 978-1-84905-849-0

Η **Βαρβάρα Πασιαλή**, Ph.D., MT-BC, Neurologic Music Therapy Fellow, είναι επίκουρη καθηγήτρια μουσικοθεραπείας στο Queens University του Charlotte. Είναι κάτοχος μεταπτυχιακού τίτλου στη μουσικοθεραπεία από το University of Kansas και διδακτορικού (Ph.D.) από το Michigan State University. Τα ερευνητικά της ενδιαφέροντα περιλαμβάνουν την πρώιμη παρέμβαση, την πρόληψη, την ψυχική ανθεκτικότητα, το συναισθηματικό τραύμα και την αμοιβαιότητα γονέα-παιδιού. Έχει δημοσιεύσει άρθρα σε επιστημονικά περιοδικά και είναι μέλος της συντακτικής επιτροπής του *Journal of Music Therapy* και του *Approaches: Music Therapy & Special Music Education.*

Email: pasialiv@queens.edu

Το βιβλίο *Developmental Speech-Language Training through Music for Children with Autism Spectrum Disorders* της Δρ. Hayoung Lim βασίζεται σε επιστημονικά ευρήματα που αφορούν παιδιά με αναπτυξιακές δυσκολίες στην εξέλιξη της ομιλίας και της γλώσσας. Οι κλινικές έννοιες/αρχές που περιγράφονται στο βιβλίο διαμορφώθηκαν μέσα από την κλινική εκπαίδευση και τον θεωρητικό προσανατολισμό της συγγραφέα.

Η Lim αποκόμισε την πλούσια κλινική εμπειρία της έχοντας εργαστεί με άτομα με προβλήματα υγείας, ψυχικά προβλήματα, αναπτυξιακές διαταραχές, άνοια και νευρολογικά προβλήματα. Πραγματοποίησε την κλινική της πρακτική στο Lutheran General Hospital στο Park Ridge του Illinois και εργάστηκε ως μουσικοθεραπεύτρια στο Cleveland Music School Settlement στο Cleveland του Ohio. Επίσης, διετέλεσε διευθύντρια στο Children's Health and Education Management στο Miami της Florida και διαθέτει πιστοποιητικό μουσικοθεραπείας (Music Therapist Board Certified: MT-BC), ενώ είναι μέλος της Νευρολογικής Μουσικοθεραπείας (Neurologic Fellow of Music Therapy) και του American Music Therapy Association (AMTA) (SHSU 2013).

Επιπλέον, η Lim κατέχει πτυχίο μουσικής στο βιολοντσέλο από το Catholic University of Korea, μεταπτυχιακό τίτλο στη μουσικοθεραπεία και στη μουσική εκτέλεση (βιολοντσέλο) από το Illinois State University και διδακτορικό στη μουσικοθεραπεία από το University of Miami. Είναι επίκουρη καθηγήτρια και συντονίστρια του μεταπτυχιακού προγράμματος μουσικοθεραπείας στο Sam Huston State University, και η κλινική της

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έρευνα επικεντρώνεται στην απόκτηση δεξιοτήτων ομιλίας και γλώσσας από παιδιά με αναπτυξιακά προβλήματα (Gautt 2012).

Η Lim περιγράφει τον θεωρητικό της προσανατολισμό ως ένα συνδυασμό γνωστικής – συμπεριφορικής ψυχολογίας και νευρολογικής μουσικοθεραπείας (NMT). Για το βιβλίο της έχει χρησιμοποιήσει τις αρχές της ψυχολογίας Gestalt, έτσι ώστε να εξετάσει και να ερμηνεύσει τη δομή διαφόρων μουσικών στοιχείων και την οργάνωση των μουσικών ήχων (Lim 2013: ηλεκτρονική αλληλογραφία). Η Lim, όπως όλοι οι θεραπευτές νευρολογικής μουσικοθεραπείας, είναι εκπαιδευμένη στο επιστημονικό μοντέλο NMT και στις συγκεκριμένες του σταθμισμένες προσεγγίσεις στο Center for Biomedical Research in Music (CBRM), και είναι μέλος του Robert F. Unkefer Academy of Neurologic Music Therapy (Thaut 2013).

Η εκπαίδευση της συγγραφέα είναι παρόμοια με τη δική μου επαγγελματική εμπειρία. Κι εγώ εργάστηκα στο Cleveland Music School Settlement (που εμμένει στην προσέγγιση της γνωστικής – συμπεριφορικής θεραπείας) και έχω συμπληρώσει την εκπαίδευσή μου στη νευρολογική μουσικοθεραπεία. Κατά κύριο λόγο η δουλειά μου επικεντρώνεται στη μουσικοθεραπεία με οικογένειες. Ωστόσο, έχω διεξαγάγει έρευνα και έχω εργαστεί με άτομα με αυτισμό. Το μεταπτυχιακό μου το απέκτησα στο University of Kansas, όπου η εκπαίδευση στηριζόταν αποκλειστικά στη γνωστική-συμπεριφορική προσέγγιση. Παρ' όλα αυτά, κατά τη διάρκεια της κλινικής μου καριέρας και της διδακτορικής μου εκπαίδευσης στο Michigan State University ασχολήθηκα με υπαρξιακές, ανθρωπιστικές και ψυχοδυναμικές προσεγγίσεις της μουσικοθεραπείας (συμπεριλαμβανομένου και του κλινικού αυτοσχεδιασμού). Το παρόν βιβλίο το διάβασα από τη σκοπιά της θεραπεύτριας που είναι καλά πληροφορημένη για τις συμπεριφορικές στρατηγικές και που επιλέγει να χρησιμοποιεί μια πιο εκλεκτική, πελατοκεντρική προσέγγιση στην πρακτική της.

Η αναγνώριση της μουσικοθεραπείας ως βιώσιμης παρέμβασης για παιδιά με διαταραχές αυτισμού είναι σημαντική. Στον πρόλογο του βιβλίου της η Lim αναφέρει ότι με το βιβλίο της στοχεύει: α) να συμβάλει θεωρητικά στην εξερεύνηση των νευρολογικών ομοιοτήτων μεταξύ της ενεργοποίησης του λόγου και της μουσικής και β) να συμβάλει κλινικά στην εξερεύνηση του τρόπου με τον οποίο τα μουσικά όργανα/οι μουσικές εμπειρίες σε συνδυασμό με εναλλακτικές μεθόδους επικοινωνίας μπορούν να ενισχύσουν το λόγο και τις δεξιότητες επικοινωνίας των παιδιών με διαταραχές στο φάσμα του αυτισμού. Μιας και ο τίτλος του βιβλίου δεν παραπέμπει άμεσα στη μουσικοθεραπεία, μπορεί να είναι παραπλανητικός για τους μουσικοθεραπευτές που δεν είναι σχετικοί με τη νευρολογική μουσικοθεραπεία. Στη νευρολογική μουσικοθεραπεία η Αναπτυξιακή Εκμάθηση Λόγου μέσω Μουσικής (Developmental Speech-Language Training through Music, DSLM]) θεωρείται μια τυποποιημένη προσέγγιση που περιλαμβάνει θεραπευτικές εφαρμογές με στόχο την ανάπτυξη της γλώσσας.

Το βιβλίο χωρίζεται σε δύο μέρη. Στο πρώτο μέρος (από την εισαγωγή μέχρι το πέμπτο κεφάλαιο) η συγγραφέας επικεντρώνεται στην επισκόπηση της σχετικής βιβλιογραφίας. Το δεύτερο μέρος περιλαμβάνει περιγραφές κλινικών παρεμβάσεων με στόχο την ομιλία και τις γλωσσικές δεξιότητες των παιδιών με διάχυτες αναπτυξιακές διαταραχές (ΔΑΔ).

Όσον αφορά το πρώτο μέρος, στην εισαγωγή η συγγραφέας περιγράφει εν συντομία τις διαταραχές που εμπίπτουν στο φάσμα των ΔΑΔ. Η κατηγοριοποίηση των διαφόρων τύπων μη μουσικών εμπειριών που μπορούν να βοηθήσουν στην εκμάθηση γλωσσικών ικανοτήτων (σ. 22) είναι ιδιαίτερα χρήσιμη. Στη συνέχεια, η συγγραφέας προχωρεί στην οικοδόμηση μιας συνοπτικής αιτιολογίας υποστηρίζοντας τη χρήση της μουσικής στη θεραπεία παιδιών με ΔΑΔ. Συγκεκριμένα, η συγγραφέας ασχολείται με ερευνητικά στοιχεία που αναφέρονται στη μουσική ευαισθησία, τις αντιληπτικές προτιμήσεις και την παραγωγή μελωδίας και ρυθμού των παιδιών με ΔΑΔ. Η συγγραφέας συνεχίζει με μια επισκόπηση της ερευνητικής βιβλιογραφίας σχετικά με τις γενικές επιπτώσεις της μουσικής και, στη συνέχεια, επικεντρώνεται στα αποτελέσματα της μουσικής στη γλώσσα και στην κατάκτηση επικοινωνιακών δεξιοτήτων.

Το πρώτο κεφάλαιο ξεκινά με μια επισκόπηση της συμπτωματολογίας και της τοπογραφίας των συμπεριφορών, που είναι χαρακτηριστικά των ατόμων με ΔΑΔ. Στη συνέχεια, παρουσιάζει μια επισκόπηση των ερευνών που αφορούν στις διαταραχές λόγου και γλώσσας και στις διαδικασίες με τις οποίες ο εγκέφαλος επεξεργάζεται τη γλώσσα και την επικοινωνία. Το δεύτερο κεφάλαιο είναι η συνέχεια της βιβλιογραφικής ανασκόπησης. Οι δηλώσεις και οι ισχυρισμοί που διατυπώνονται στο προηγούμενο κεφάλαιο επαναλαμβάνονται και επεκτείνονται.

Αυτό που πιστεύω ότι μπορεί να καταστεί χρησιμότερο για τους μουσικοθεραπευτές είναι η περίληψη της βιβλιογραφίας που καθιερώνει την ηχολαλία ως ένα μηχανισμό που οδηγεί στην ανάπτυξη της γλώσσας. Με άλλα λόγια, η ηχολαλία εξετάζεται ως ένα απαραίτητο στάδιο που οδηγεί στην απόκτηση γλώσσας.

Το τρίτο κεφάλαιο είναι αφιερωμένο στην εξερεύνηση των νόμων που διέπουν τη μουσική

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αντίληψη και τη γλώσσα, καταλήγοντας στο συμπέρασμα ότι η μουσική αντίληψη και η γλώσσα παρουσιάζουν παρόμοια πρότυπα ενεργοποίησης του εγκεφάλου.

Το τέταρτο κεφάλαιο επικεντρώνεται στο πώς τα παιδιά με ΔΑΔ μπορούν να αντιληφθούν διαφορετικά μουσικά στοιχεία, όπως ρυθμικά σχήματα, νότες, μελωδία, δυναμική, και μορφή. Αυτό που βρίσκω χρήσιμο σε αυτό το κεφάλαιο είναι η απλή περιγραφή και οι ορισμοί των ψυχολογικών ιδιοτήτων τού κάθε μουσικού στοιχείου. Θέλω, όμως, να επιστήσω την προσοχή του αναγνώστη στους ισχυρισμούς που διατυπώνονται στο κεφάλαιο αυτό.

Η βιβλιογραφία του βιβλίου δεν περιέχει αρκετά στοιχεία που να τεκμηριώνουν όλα τα συμπεράσματα που περιγράφονται στο κεφάλαιο. Για παράδειγμα, υπάρχει μόνο μία μελέτη που διεξήχθη από τον Thaut (1987), η οποία συγκρίνει τις αντιδράσεις των παιδιών με ΔΑΔ σε οπτικές και ακουστικές διεγέρσεις. Ομοίως, υπάρχει μόνο μία μελέτη για τα παιδιά με ΔΑΔ και την ικανότητά τους να έχουν συναισθηματική κατανόηση των μουσικών νοημάτων (Heaton, Hermelin, & Pring 1999). Επιπλέον, από τη βιβλιογραφία απουσιάζει και μια πρόσφατη μελέτη (βλ. Katagiri 2009) σχετικά με τις επιπτώσεις της μουσικής υπόκρουσης και των στίχων στη συναισθηματική κατανόηση των παιδιών με αυτισμό δεν περιλαμβάνεται στη βιβλιογραφία. Θα ήθελα να προσθέσω εδώ ότι στο τέταρτο κεφάλαιο όλα τα σχόλια σχετικά με την αντίληψη ρυθμικών μοτίβων, μελωδικού περιγράμματος, προσωδίας, δυναμικής και δομής της μουσικής προέρχονται από κλινικές παρατηρήσεις. Αυτές οι παρατηρήσεις μπορεί να φανούν χρήσιμες για τους θεραπευτές που θέλουν να κατανοήσουν τη θεραπευτική λειτουργία κάθε μουσικού στοιχείου και το ρόλο που μπορεί να διαδραματίσουν αυτά τα στοιχεία στο πώς ο πελάτης ανταποκρίνεται κατά τη διάρκεια των μουσικοθεραπευτικών συνεδριών.

Σε συνδυασμό με τα παραπάνω, στο εν λόγω κεφάλαιο θα ήταν κατατοπιστικό αν η συγγραφέας συνέκρινε τις κλινικές της παρατηρήσεις με εκείνες άλλων θεραπευτών. Λεπτομερείς και εις βάθος περιγραφές των ανταποκρίσεων των ατόμων με αυτισμό σε μουσικοθεραπευτικές παρεμβάσεις περιλαμβάνονται σε μελέτες περίπτωσης και σε συστηματικές ποιοτικές έρευνες. Για παράδειγμα, η Holck (2004) περιέγραψε πώς μουσικές αλληλεπιδράσεις που συμβαίνουν στο πλαίσιο του κλινικού αυτοσχεδιασμού και της βιωματικής μουσικής εμπειρίας μπορούν να λειτουργήσουν ως τρόπος δημιουργίας ουσιαστικών διαύλων επικοινωνίας με τα παιδιά που έχουν αυτισμό χαμηλής λειτουργικότητας. Επίσης, στο τέταρτο κεφάλαιο, η συγγραφέας ασχολείται με τη μουσική συμπεριφορά των παιδιών με αυτισμό. Εδώ θα ήταν σκόπιμο να συμπεριληφθεί μια αναφορά στη Μουσικοθεραπευτική Διαγνωστική Εκτίμηση για τα παιδιά με αυτισμό (Music Therapy Diagnostic Assessment, MTDA – Oldfield 2006). Συνολικά, ενώ συνοψίζει σημαντικές πληροφορίες, το κεφάλαιο αυτό τονίζει την ανάγκη για περαιτέρω έρευνα σχετικά με το πώς τα παιδιά με ΔΑΔ αντιλαμβάνονται τη μουσική. Το πέμπτο κεφάλαιο αποτελεί μια ενδελεχή και αντικειμενική αξιολόγηση των ερευνητικών μελετών στη βιβλιογραφία της μουσικοθεραπείας που στοχεύουν ειδικά στην καλλιέργεια γλωσσικών και επικοινωνιακών δεξιοτήτων.

Οι φιλοσοφικές βάσεις του NMT βασίζονται στο μοντέλο της ορθολογικής-επιστημονικής διαμεσολάβησης (Rational-Scientific Mediating Model – R-SMM) της μουσικοθεραπείας. Σύμφωνα με τον Thaut (2000) οι ερευνητές θα πρέπει να αναπτύσσουν τις κλινικές τους θεωρίες βάσει μιας προσεκτικής εξέτασης των αντιδράσεων που συνδέονται με τη φυσιολογία και την ψυχολογία του ανθρώπου. Οι ερευνητές πρέπει να αναλύουν το πώς οι άνθρωποι ανταποκρίνονται σε μουσικά και μη-μουσικά ερεθίσματα/περιβάλλοντα, για να μπορούν να συγκρίνουν και να αναπτύσσουν θεωρίες και ερευνητικές υποθέσεις. Με βάση την R-SMM, οι θεραπευτές θα πρέπει να ακολουθούν μια επαγωγική λογική για την ανάπτυξη κλινικών παρεμβάσεων που στοχεύουν σε λειτουργικούς θεραπευτικούς στόχους. Στο πρώτος μέρος του βιβλίου, η Lim ακολουθεί τη λογική του R-SMM προσπαθώντας να δείξει τη θεραπευτική επίδραση της μουσικής στην εκμάθηση της γλώσσας στο πλαίσιο της ψυχολογίας Gestalt.

Όσον αφορά το πρώτο μέρος του βιβλίου, ως αναγνώστρια θα προτιμούσα ένα στυλ γραφής λιγότερο επίσημο και πιο περιεκτικό. Γενικά, το στυλ γραφής δείχνει πόσο δύσκολη μπορεί να είναι η μετατροπή μιας διδακτορικής διατριβής σε βιβλίο. Τα κεφάλαια περιέχουν επαναλήψεις των ιδεών και πληροφοριών, που εμποδίζουν τη ροή και την αναγνωσιμότητα του κειμένου. Ο επιστημονικός τρόπος προσέγγισης κάνει την ανάγνωση του βιβλίου δύσκολη. Θα προτιμούσα μια περαιτέρω επεξεργασία των κεφαλαίων που να αναδεικνύει τις βασικές ιδέες της συγγραφέα, να τεκμηριώνει κάθε ισχυρισμό με σχετική βιβλιογραφία και να συμπυκνώνει τις πληροφορίες για να αποφευχθεί η επανάληψη. Επίσης, θα πρότεινα την περαιτέρω επεξεργασία των κεφαλαίων ώστε να αποφευχθεί η χρήση του ρήματος «αποδεικνύω» (prove) όταν γίνεται αναφορά στα ερευνητικά αποτελέσματα ώστε να επικεντρώνεται ο λόγος στο άτομο και όχι στην ιδιότητα (π.χ. «παιδιά με αυτισμό», «όχι αυτιστικά παιδιά»).

Το δεύτερο μέρος του βιβλίου απαρτίζεται από τα κεφάλαια έξι έως οχτώ. Το έκτο κεφάλαιο

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περιλαμβάνει συγκεκριμένες συστάσεις σχετικά με τη λειτουργία διαφόρων μουσικών στοιχείων (νότες, μελωδικό περίγραμμα, ρυθμός, κλπ) στη δημιουργία τραγουδιών που περιλαμβάνουν συγκεκριμένες λέξεις ή φράσεις με σκοπό την εκμάθηση της γλώσσας. Η συγγραφέας τονίζει τη σημασία της σύζευξης οπτικών στοιχείων (σχέδια/εικόνες) που αντιστοιχούν στη συγκεκριμένη λέξη ή φράση. Επίσης συνιστά τη ζωντανή παρουσίαση των τραγουδιών για να επιτρέψει στο θεραπευτή την ευελιξία της προσαρμογής σύμφωνα με το πώς ανταποκρίνεται το κάθε παιδί στα μουσικά στοιχεία. Οι συστάσεις αυτές συνοψίζονται με αποτελεσματικό τρόπο.

Αξίζει να σημειωθεί ότι στο κεφάλαιο αυτό η συγγραφέας υποστηρίζει ότι τα παιδιά με ΔΑΔ δεν θα μπορούσαν να δώσουν μεγάλη προσοχή σε ένα τραγούδι το οποίο είναι γραμμένο σε ελάσσονα κλίμακα και έχει αργό ρυθμό. Η δήλωση αυτή, όμως, δεν τεκμηριώνεται από ερευνητικά ευρήματα. Ενώ συμφωνώ με τις περισσότερες συστάσεις που αφορούν τα τραγούδια, όπως για παράδειγμα ότι «πρέπει να περιλαμβάνουν μελωδίες μέσα σε ένα περιορισμένο εύρος νοτών με μικρά διαστήματα και επαναλαμβανόμενο μελωδικό περίγραμμα» (σ. 82), λόγω έλλειψης σχετικής έρευνας διαφωνώ με το ότι ένας θεραπευτής θα πρέπει να περιοριστεί σε τραγούδια που είναι γραμμένα σε μείζονες κλίμακες και διπλό μέτρο. Δεν θεωρώ ότι ένας θεραπευτής θα πρέπει να αποφεύγει τη χρήση μη-συμμετρικών μέτρων. Ένας θεραπευτής μπορεί να είναι σε θέση να χρησιμοποιήσει ένα «πλούσιο μουσικό λεξιλόγιο» τροπικών μελωδιών, με διάφορους ρυθμούς, ασυνήθιστα μέτρα και ρυθμικά σχήματα επιτυγχάνοντας καταλυτικά την αποτελεσματική έμφαση λέξεων ή φράσεων στο τραγούδι.

Το έβδομο κεφάλαιο περιλαμβάνει δώδεκα παραδείγματα θεραπευτικών εφαρμογών κατάλληλων για την ομιλία και τη γλωσσική κατάρτιση. Φοιτητές και πρόσφατα καταρτισμένοι μουσικοθεραπευτές θα βρουν αυτό το κεφάλαιο κατατοπιστικό. Στην αρχή του κεφαλαίου, η συγγραφέας συμπεριλαμβάνει έναν κατάλογο ορισμών των πιθανών θεραπευτικών στόχων. Για κάθε παρέμβαση που αναφέρεται σε αυτό το κεφάλαιο, η συγγραφέας εντοπίζει πιθανούς στόχους. Έχοντας περιγράψει τη μουσική εμπειρία (παρέχοντας το τραγούδι και τις προτάσεις εφαρμογής), η συγγραφέας προσφέρει συγκεκριμένες στρατηγικές τις οποίες ένας θεραπευτής μπορεί να χρησιμοποιήσει για να τονίσει συμπεριφορές λόγου και ομιλίας. Σε γενικές γραμμές, όταν συνδυάζονται μαζί, τα δώδεκα παραδείγματα μπορούν να βοηθήσουν έναν φοιτητή ή μουσικοθεραπευτή στην ανάπτυξη ενός σχεδίου κατάλληλου για μια συνεδρία με μικρά παιδιά.

Το τελευταίο κεφάλαιο επικεντρώνεται στην εφαρμοσμένη ανάλυση συμπεριφοράς (applied behavioural analysis). Η συγγραφέας ξεκινά το όγδοο κεφάλαιο με την παρουσίαση ενός πίνακα ο οποίος περιέχει όλα τα δώδεκα μουσικά παραδείγματα που συζητήθηκαν στο προηγούμενο κεφάλαιο. Για κάθε παράδειγμα, παρουσιάζει τα όσα συμβάλλουν στις συγκεκριμένες λεκτικές και μη λεκτικές συμπεριφορές στις οποίες αποσκοπεί η κάθε προτεινόμενη εμπειρία. Το όγδοο κεφάλαιο θα μπορούσε να φανεί χρήσιμο σε θεραπευτές που δεν είναι εξοικειωμένοι με την εφαρμοσμένη ανάλυση συμπεριφοράς. Η συγγραφέας εξηγεί συνοπτικά έννοιες όπως: κύκλος συστηματικής διδασκαλίας (discrete trial learning), λεκτική συμπεριφορική προσέγγιση (verbal behavioural approach), λειτουργική ανάλυση (functional analysis) και ανάλυση έργου (task analysis). Επιπλέον υποστηρίζει ότι τα παιδιά με αυτισμό ανταποκρίνονται στη μουσική. Ως εκ τούτου, η συμμετοχή σε «μουσικές εμπειρίες λειτουργεί ως μια θετική ενίσχυση για κατάλληλες επικοινωνιακές συμπεριφορές» (σ. 141). Ιδιαίτερο ενδιαφέρον παρουσιάζει ο ορισμός των διαφόρων λεκτικών λειτουργιών που αναπτύσσουν τη γλώσσα. Χρησιμοποιώντας τους ορισμούς της λεκτικής συμπεριφορικής προσέγγισης η Lim περιγράφει πώς ένας θεραπευτής μπορεί – μέσω της μουσικής – να κατανοήσει διάφορα λεκτικά ελλείμματα, προκειμένου να δημιουργήσει ένα θεραπευτικό σχέδιο προσαρμοσμένο στις ανάγκες του κάθε ατόμου.

Το βιβλίο έχει τρία παραρτήματα. Το πρώτο περιέχει επιπλέον παραδείγματα των τραγουδιών που συμβάλλουν στην ομιλία και τη γλωσσική ανάπτυξη. Το δεύτερο περιέχει προτεινόμενες οπτικές απεικονίσεις για κάθε τραγούδι. Τέλος, το τρίτο παράρτημα περιλαμβάνει τα αποτελέσματα της συλλογής δεδομένων από μια μελέτη που διεξήχθη από τη συγγραφέα. Τα ευρήματα έδειξαν ότι τόσο μουσικά όσο και λεκτικά ερεθίσματα μπορούν να αυξήσουν τις ικανότητες επικοινωνίας παιδιών με ΔΑΔ. Ωστόσο, τα παιδιά που είναι χαμηλότερης λειτουργικότητας μπορούν να παρουσιάσουν μεγαλύτερη βελτίωση όταν συμμετέχουν σε γλωσσική εκπαίδευση κατά την οποία χρησιμοποιούνται μουσικά ερεθίσματα. Το τρίτο παράρτημα είναι μια περίληψη της διδακτορικής ερευνητικής μελέτης που διεξήχθη από την Lim στο Πανεπιστήμιο του Miami (βλ. Lim 2007). Πιστεύω ότι το κυρίως κείμενο του βιβλίου προήλθε μέσα από την ανασκόπηση της βιβλιογραφίας που διεξήγαγε η συγγραφέας στα πλαίσια της διδακτορικής της διατριβή.

Οι θεωρητικές έννοιες που περιγράφονται σε αυτό το βιβλίο μπορεί να φανούν χρήσιμες σε μουσικοθεραπευτές διαφόρων θεωρητικών προσανατολισμών. Οι θεραπευτές μπορούν να

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χρησιμοποιήσουν θεωρητικές έννοιες που παρουσιάζονται στο βιβλίο για να εξηγήσουν και να συζητήσουν τη βιωσιμότητα της χρήσης μουσικών θεραπευτικών παρεμβάσεων με στόχο την εκμάθηση της γλώσσας.

Συνολικά, το πρώτο μέρος του βιβλίου αποτελεί τη μοναδική προσπάθεια στη βιβλιογραφία της μουσικοθεραπείας να ενσωματώσει σημαντικές θεωρητικές και ερευνητικές έννοιες σχετικά με την ομιλία και τη γλωσσική εκπαίδευση για παιδιά με ΔΑΔ, και κατά συνέπεια αποτελεί μια σημαντική θεωρητική συμβολή στο επάγγελμα. Το δεύτερο μέρος του βιβλίου μπορεί να βοηθήσει θεραπευτές και φοιτητές οι οποίοι ακολουθούν μια συμπεριφορικά προσανατολισμένη προσέγγιση για το σχεδιασμό και την εφαρμογή της θεραπείας. Οι θεραπευτές που έχουν εκπαιδευτεί σε διαφορετικές προσεγγίσεις μπορούν να επιλέξουν να ενσωματώσουν μερικά από τα μουσικά παραδείγματα που αναφέρονται στο βιβλίο στην κλινική πρακτική τους. Επίσης, η ανάγνωση του βιβλίου μπορεί να τους βοηθήσει να κατανοήσουν την επαγγελματική γλώσσα και ορολογία που σχετίζονται με τη χρήση συμπεριφορικών τεχνικών σε μια μουσικοθεραπευτική συνεδρία.

Βιβλιογραφία

Gautt, J. (2012). *Music therapist works to give children with autism a voice.* Huntsville, TX: SHSU Communications Office. Ανακτήθηκε στις 3 Φεβρουαρίου 2013, από το www.shsu.edu/~pin_www/T@S/sliders/2012/lim.html. .

Heaton, P., Hermelin, B., & Pring, L. (1999). Can children with autistic spectrum disorder perceive affect in music? An experimental investigation. *Psychological Medicine, 29*, 1405-1410.

Holck, U. (2004). Interaction themes in music therapy: Definition and delimitation. *Nordic Journal of Music Therapy, 13*(1), 3-19.

Katagiri, J. (2009). The effect of background music and song texts on the emotional understanding of children with autism. *Journal of Music Therapy, 46*, 15-31.

Lim, H. A. (2007). *The effect of "Developmental Speech-Language Training through Music" on speech production in children with autism spectrum disorders*. Doctoral Dissertation, University of Miami, Florida. Ανακτήθηκε στις 3 Φεβρουαρίου 2013, από το http://scholarlyrepository.miami.edu/oa_dissertations/63/

Oldfield, A. (2006). *Interactive Music Therapy in Child and Family Psychiatry: Clinical Practice, Research and Teaching.* London: Jessica Kingsley.

SHSU (2013). Faculty bio. Ανακτήθηκε στις 3 Φεβρουαρίου 2013, από το http://shsu.edu/~music/faculty/bio/lim.html

Thaut, M. H. (1987). Visual vs. auditory (musical) stimulus preferences in autistic children. *Journal of Autism and Developmental Disorders, 17*, 425-432.

Thaut, M. H. (2000). *A Scientific Model of Music in Therapy and Medicine.* San Antonio, TX: IMR Press.

Thaut, M. H. (2013). Robert F. Unkefer Academy of Neurologic Music Therapy. Fort Collins, CO: Colorado State University. Ανακτήθηκε στις 8 February 2013, από το www.colostate.edu/dept/cbrm/academymissionstatement.html

---

Προτεινόμενη παραπομπή:

Πασιαλή, Β. (2013). Βιβλιοκριτική: "Developmental Speech-Language Training through Music for Children with Autism Spectrum Disorders" (Hayoung Lim). *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 5*(1), 62-66. Ανακτήθηκε από το http://approaches.primarymusic.gr

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Book review

Developmental Speech-Language Training through Music for Children with Autism Spectrum Disorders

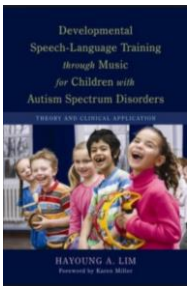
Hayoung Lim

Reviewed by Varvara Pasiali

Developmental Speech-Language Training through Music for Children with Autism Spectrum Disorders

Hayoung Lim

Philadelphia, PA: Jessica Kingsley (2012)
197 pp., ISBN: 978-1-84905-849-0



Varvara Pasiali, Ph.D., MT-BC, Neurologic Music Therapy Fellow, is an assistant professor of music therapy at Queens University of Charlotte. She completed her Master's in music therapy at the University of Kansas and her doctorate at Michigan State. Her research interests include early intervention, prevention, resilience, and parent-child attachment/reciprocity. Dr Pasiali is a regular presenter at conferences and has published in various journals. She also serves on the editorial board of the *Journal of Music Therapy*, and *Approaches: Music Therapy & Special Music Education*.

Email: pasialiv@queens.edu

Dr Hayoung Lim developed the book *Developmental Speech-Language Training through Music for Children with Autism Spectrum Disorders* based on her research findings and clinical experience regarding speech and language acquisition of children with developmental delays. Learning about the author's background, clinical training and theoretical orientation will give insight into how Lim may have formulated the clinical concepts outlined in her book. Lim has a diverse clinical background working with individuals who have medical problems, mental illness, developmental disorders, dementia and neurologic impairments. She completed her clinical internship at Lutheran General Hospital, in Park Ridge, IL. She worked as a music therapist at the Cleveland Music School Settlement in Cleveland, OH and was a director of music therapy at Children's Health and Education Management in Miami, FL. A current member of the American Music Therapy Association, Lim is also a board-certified clinician and a Neurologic Music Therapy Fellow (NMT Fellow) (SHSU 2013).

Currently, Lim is an assistant professor and coordinator of Sam Huston State University's graduate program in music therapy and has an undergraduate degree in cello performance from the Catholic University of Korea. She completed a Master's degree in both music therapy and cello performance at Illinois State University, and her Ph.D. in music therapy at the University of Miami. Her clinical focus is speech and language acquisition skill of children with developmental delays (Gautt 2012).

Lim describes her theoretical orientation as a combination of Cognitive Behavioural Psychology

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and NMT. For her book, she used Gestalt psychology principles to help her investigate and interpret the structure of various musical components and organisation of musical sounds (Lim 2013; e-mail communication). Neurologic music therapists are trained in the scientific model of NMT and its specific standardised approaches at the Centre for Biomedical Research in Music (CBRM) and become members of the Robert F. Unkefer Academy of Neurologic Music Therapy (Thaut 2013).

The author's training is similar to my own professional experience. I also worked at the Cleveland Music School Settlement (an agency that adheres to a cognitive-behavioural treatment approach) and have completed the NMT training. My primary clinical focus is family-based music therapy; however, I have conducted research and worked with individuals with Autism Spectrum Disorders (ASD). I completed my Master's degree at the University of Kansas, receiving training solidly based on cognitive-behavioural approaches. However, during my clinical career and my doctoral training at Michigan State University I was exposed to existential, humanistic and psychodynamic approaches to music therapy (including clinical improvisation). I reviewed this book from the lens of a clinician who is well-informed about behavioural strategies and chooses to use a more eclectic, client-centred approach in her own practice.

Establishing music therapy as a viable intervention for children with ASD is important. In the introduction chapter of her book, Lim states that by writing the book she aimed to: (a) make a theoretical contribution by exploring the neurological commonalities between activating speech/language and music, and (b) make a clinical contribution by exploring how musical materials combined with related props can enhance language and communication skills of children with ASD. Because the title of the book is not referring directly to music therapy, it might be misleading to therapists unfamiliar with NMT terminology. In NMT, Developmental Speech-Language Training through Music (DSLM) is considered a standardised approach that encompasses therapeutic applications targeting language development.

Her book is divided in two sections. In the first section (introduction to chapter 5) the author focuses on reviewing pertinent literature. The second section includes descriptions of clinical interventions targeting speech and language skills for children with ASD. In the introduction, the author briefly describes what disorders fall under the ASD umbrella. Very helpful is the categorisation of the different types of interventions needed (p.22). Then, the author proceeds by building a concise rationale, supporting the use of music with children who have ASD. Specifically, the author discusses research evidence regarding the musical sensitivity, perceptual preferences, and the production of musical patterns of children with ASD. The author continues with an overview of research literature about the general effects of music and then, more specifically the effects of music on language/communication skills.

The first chapter begins with an overview of the symptomatology and topography of behaviours characteristic of individuals with ASD. Then, it presents a review of the non-music therapy literature about speech and language impairments and abnormal cortical processing. The second chapter is a continuation of the literature review. Statements and claims made in the previous chapter are repeated and expanded. What I believe will be most helpful to music therapists is the author's summary of research literature that establishes echolalia as a coping mechanism leading to the development of language. In other words, echolalia is explored as a necessary stage leading to language acquisition.

The third chapter is dedicated to exploring the laws governing music and language perception, concluding that both show similar patterns of cortical activation. Subsequently, the focus of the fourth chapter centres on how children with ASD may perceive different musical elements such as rhythmic patterns, pitch, melody, dynamics and form. What I find useful in this chapter is the simple description and definition of the psychological properties of each musical element. However, I want to caution the reader about the claims made in the fourth chapter. The current literature does not contain enough substantiating evidence to draw the type of conclusions outlined in the chapter. For example, there is only one study conducted by Thaut (1987) that compared the responses of children with ASD to visual and auditory stimuli. Similarly, there is only one study about children with ASD's ability to perceive affect in music (Heaton, Hermelin, & Pring 1999). A recent study (see Katagiri 2009) about the effects of background music and lyrics on the emotional understanding of children with autism is not included in the review. Moreover, in chapter 4, all comments about perception of rhythm patterns, pitch, melodic contour, prosody, dynamics and structure are derived from clinical observations. The observations will be useful for clinicians who would like to understand the therapeutic function that each musical element may play in shaping client responses during sessions.

Regarding chapter 4, it would perhaps be informative if the author compared her clinical observations to those of other clinicians for

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corroboration. Detailed and in-depth descriptions of client responses to music therapy interventions are included in case studies and systematic qualitative research. For example, Holck (2004) described how musical interactions that occur within the context of clinical improvisation may function as ways of establishing meaningful communication channels with children who have lower functioning autism. Also in chapter 4, the author discusses the musical behaviour of children with autism. Including a discussion of the Music Therapy Diagnostic Assessment for children who have autism (MTDA – Oldfield 2006) may also have been helpful. Overall, while summarising important information, this chapter also highlights the need for additional research on how children with ASD perceive music. The fifth chapter is a thorough and objective review of quantitative research studies in the music therapy literature specifically targeting language/communication skills.

The philosophical underpinnings of NMT are founded on the Rational-Scientific Mediating Model (R-SMM) of music therapy. According to Thaut (2000) researchers should develop their clinical theories based on a close examination of physiological and psychological human responses. Researchers must analyse those responses in both musical and non-musical contexts to draw parallels, develop theories and derive research hypotheses. Based on R-SMM, clinicians should follow a deductive logic pathway to develop clinical interventions targeting functional responses. Part I of Lim's book follows the logic of the R-SMM model by attempting to establish the therapeutic effect of music on language acquisition by comparing both musical and non-musical response exemplars within the framework of Gestalt psychology principles.

Regarding Part I of the book, as a reader, I would prefer if the writing style was less formal and more concise. Overall, the writing style reflects how tricky the process of translating one's dissertation into a book can be. Chapters contain repetition of ideas and previously presented information that hinders flow and readability. Such repetition may perhaps dampen a clinician's interest in reading the material. I would like to see the chapters edited to highlight the main claims, substantiating each claim with relevant literature and condensing information to avoid repetition. Also, I would like to suggest editing the chapters to avoid using the word 'prove' when referring to research findings and for applying person-first language (e.g., 'child with autism' instead of 'autistic child').

The second part of the book includes chapters 6 to 8. Chapter 6 includes specific recommendations regarding the function of the different music elements (pitch, melodic contour, rhythm, etc.) when creating songs that include target words or phrases for language acquisition. The author emphasises the importance of pairing visual cues corresponding to the target word and phrases. She also recommends live presentation of the songs to allow the therapist the flexibility of adapting the songs in accordance with how the client is responding to the musical elements. Those recommendations are well summarised. In chapter 6, the author suggests that children with ASD might not pay full attention to a song composed in a minor key and at a slow tempo. The statement, however, is not substantiated by research findings. While I agree with the recommendations in this chapter that songs "must include melodies within a limited pitch range, adjacent intervals and repetitive melodic contour" (p. 82), given the lack of research, I disagree that a therapist should limit himself/herself to only major and upbeat tempo songs. Nor do I agree that a therapist should avoid using non-symmetrical metres. A music therapist may be able to use a 'rich musical vocabulary' of modal melodies, various tempi, unusual metres and rhythmic patterns as a catalyst of effectively highlighting the target words or phrases emphasised in the song.

Chapter 7 includes twelve examples of therapeutic applications suitable for speech and language training. Students and entry level clinicians will find this chapter informative. At the beginning of the chapter, the author operationally defines a list of possible behavioural goal areas. For each intervention listed in this chapter, the author includes possible goal areas. After describing the musical experience (providing the song notation and implementation suggestions), the author offers specific strategies a therapist may use in order to emphasise speech and language behaviours. Overall, when combined together, those twelve examples may aid a student or a clinician in developing a session plan suitable for young children.

In the final chapter the author discusses applied behavioural analysis strategies. The author begins chapter 8 by presenting a table that lists all twelve of the musical examples discussed in the previous chapter. For each example, the author presents the antecedent variables that contribute to the specific verbal and nonverbal behaviours targeted through each suggested experience. Chapter 8 will be helpful for a clinician or a student unfamiliar with applied behavioural analysis. The author explains in concise language, concepts such as discrete trial learning, verbal behavioural approach, functional analysis, and task analysis. The author proposes that children with autism may find music a highly motivating medium, thus, engagement in "musical

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experiences functions as a positive reinforcement for appropriate communicative behaviors" (p. 141). Particularly interesting is the definition of verbal operants that trigger language responses. Based on the explanation of what those verbal operants entail, Lim describes how a music therapist can assess verbal deficits in order to create a treatment plan tailored to individual needs.

The book has three appendixes. The first contains additional examples of songs conducive to speech and language training. The second contains suggested visual illustrations for each song. Lastly, the third appendix includes data collection results of a study conducted by the author. The findings indicated that both music and speech stimuli can increase verbal production of target words of children with ASD. However, children who are lower-functioning may show greater improvement when engaged in language training using music stimuli. Regarding the relationship of appendix C to the book, I believe the main text of the book was derived through the literature review that the author conducted for partial fulfilment of graduate doctoral work in combination with Lim's clinical experiences and observations. The third appendix is a summary of the actual doctoral research study she conducted at the University of Miami (c.f. Lim 2007).

The theoretical concepts outlined in this book can be relevant for music therapists across the field of various theoretical orientations. Clinicians may use theoretical concepts in this book to explain and discuss the viability of using music therapy intervention to target language acquisition. Overall, Part I of the text represents the only attempt in the music therapy literature to integrate important theoretical and research concepts regarding speech and language training for children with ASD, thus making a significant theoretical contribution to the profession. Part II will aid clinicians and students who follow a behavioural-based approach, in treatment planning and implementation. Clinicians trained in different approaches may choose to incorporate some the music examples referenced in the book in their clinical practice. Also, reading the book may help them understand the professional language and terminology relevant to using behavioural techniques in a session.

References

Gautt, J. (2012). *Music therapist works to give children with autism a voice.* Huntsville, TX: SHSU Communications Office. Retrieved on 3 February 2013, from: www.shsu.edu/~pin_www/T@S/sliders/2012/lim.html

Heaton, P., Hermelin, B., & Pring, L. (1999). Can children with autistic spectrum disorder perceive affect in music? An experimental investigation. *Psychological Medicine, 29,* 1405-1410.

Holck, U. (2004). Interaction themes in music therapy: Definition and delimitation. *Nordic Journal of Music Therapy, 13*(1), 3-19.

Katagiri, J. (2009). The effect of background music and song texts on the emotional understanding of children with autism. *Journal of Music Therapy, 46,* 15-31.

Lim, H. A. (2007). *The effect of "Developmental Speech-Language Training through Music" on speech production in children with autism spectrum disorders*. Doctoral Dissertation, University of Miami, Florida. Retrieved on 3 February 2013, from: http://scholarlyrepository.miami.edu/oa_dissertations/63/

Oldfield, A. (2006). *Interactive Music Therapy in Child and Family Psychiatry: Clinical Practice, Research and Teaching.* London: Jessica Kingsley.

SHSU (2013). Faculty bio. Retrieved on 3 February 2013, from: http://shsu.edu/~music/faculty/bio/lim.html

Thaut, M. H. (1987). Visual vs. auditory (musical) stimulus preferences in autistic children. *Journal of Autism and Developmental Disorders, 17,* 425-432.

Thaut, M. H. (2000). *A Scientific Model of Music in Therapy and Medicine.* San Antonio, TX: IMR Press.

Thaut, M. H. (2013). Robert F. Unkefer Academy of Neurologic Music Therapy. Fort Collins, CO: Colorado State University. Retrieved on 8 February 2013, from: www.colostate.edu/dept/cbrm/academymissionstatement.html

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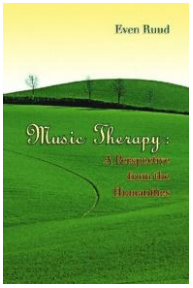
Book review

Music Therapy: A Perspective from the Humanities

Even Ruud

Reviewed by Mariko Hara



Music Therapy: A Perspective from the Humanities

Even Ruud

Gilsum, NH: Barcelona Publishers (2010)
209 pp., ISBN: 1-891278-54-1

Mariko Hara, Ph.D., is a music sociologist specialising in the field of music and health and a member of the Sociology of the Arts research group at the University of Exeter. Her main research interest is the use of music as a means for sustainable care in ageing societies (Japan, United Kingdom and Norway) and how music use can be integrated into everyday life as health resource to adapt to changes in people's socio-health lives.

Email: mariko@marikohara.net

This book, as its title implies, is aimed at the music therapy field, one particular discipline in music and health. However, as a music sociologist working broadly in the field of music and health in Japan, United Kingdom and Norway, I found the theoretical perspectives discussed in this book beneficial and comprehensive.

In fact, in a later publication (Ruud 2012, p. 95), the author pointed out that the field of music and health is increasingly becoming a mixture of different disciplines; music therapists, community musicians and music educators; collectively referred to as *"health musicians"*. In this publication, Ruud (2012) suggests that in order to carry out the health-musicking projects practitioners need musical and performative skills, methodological equipment, and theoretical familiarity as well as personal, ethical, and political values. In this age of information and technology the forms and ways of musical engagement are becoming more multifaceted every day; from participating in music therapy sessions in various formats, listening to MP3 players, attending concerts, participating in choirs and bands, "attending concerts" online, sharing music with others online, and so on. Along with these general changes, the ways and means of carrying out such health-musicking projects are also becoming more diversified. This can, for instance, range from individual music therapy (e.g., Ridder & Aldridge 2005), guided imagery and music (GIM) therapy sessions (Bonny 2002), community music (therapy) projects that involve people with different disabilities and/or in different situations, with varying skills (e.g., Pavlicevic & Ansdell 2004; Stige et al. 2010), action research to help support the use of music as self-care (Batt-Rawden 2007) to facilitating the creation of musical narratives (Skånland 2012; Pavlicevic & Ansdell 2004).

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The roles of so-called *health musicians* are not fixed and have to be adjusted according to how the different health-musicking projects are run. The roles for one project are not necessarily fixed either and have to be responsive to the conditions and situations of the 'here and now'. Under such challenging circumstances the various perspectives discussed in this book, I believe, can provide some core foundations for various health-musicking projects. They can be as important as the acquisition of musical techniques, skills and research methods that are necessary to undertake the practices and studies of such projects. Below, I discuss several perspectives introduced in this book in line with my own speciality; the use of music in dementia care.

When the health benefits of music in dementia care are discussed in media, for instance, music is often discussed as if it is a magic pill to be prescribed to people with dementia (BBC TWO 2009; Pritchard 2012). The problem with such a simplistic view is the absence of the embedded social and cultural dimensions of musicking. In such a view, furthermore, people are objectified as passive and/or captive clients who are the target of musical interventions and display 'effects' that can be measured, based on a pre-given hypothesis.

The perspectives discussed in this book help us to approach these issues. For instance in chapter 1 and 2, the author warns us about a drifting away from the very communicative strengths of music and emphasises how musical events are relational experiences by examining the example of singing lullabies. These perspectives are important for us to be able to explore the meaning of *experience* of any musical events (not necessarily ones aimed at people with dementia). This is difficult to evaluate using the simplistic causal/linear model, as the author points out.

Another issue of concern in music and health is discussed by Sakashita (2007, 2008) with regards to the use of music in dementia care and group-oriented music therapy sessions in nursing homes. Sakashita points out that there is a distinct possibility that residents (or day-care users) are forced to sing or listen to songs against their will for caring 'efficiency' purposes. Hence, the dignity of the participants is not prioritised. This is where Ruud's emphasis in this book (in chapter 1) on respecting individuals as a socially and morally motivated being when involving them in music therapy sessions becomes very important. More specifically, the author stresses that the musical identities of individuals should be respected as a sign of their dignity and he discusses in some detail the role of music in the formation of a sense of self in chapter 3. From his point of view, the musical engagement allows clients to transform their identities; this transformation can permeate into their life outside of the musical engagement and (hopefully) have a positive influence on them. This is particularly important for those who have a negative self-image due to their illness (e.g., dementia). As the author points out, the type of music people prefer and/or enjoy may change over time. Musical tastes can also change due to physical and cognitive deteriorations (Hara 2013). Therefore, as Ruud emphasises, sensitivity on behalf of the health musician is necessary to facilitate the transformation of identities through music.

In the following chapters (4 and 5), the perspectives on musical meanings and different dimensions of aesthetic in music therapy are discussed. The author, once again, warns us not to objectify people's musical experiences; by prescribing a certain musical culture without careful consideration, otherwise it becomes a colonisation of the individuals' musical life world. Instead, as Ruud discusses, the experience of music is affected by many factors and the music to use should not be decided upon based on any disembodied analysis. The value of music in health musicking projects has been further investigated by DeNora (2010); how 'goodness' in music is not self-evident, rather it is produced and nurtured among the participants in relation to a range of contextual factors. The collaboratively elaborated meaning of music is therefore not bound to a single event, instead it is carried into different times and spaces (Willis 1989). These perspectives further remind us how important it is to consider various contextual factors when collaboratively crafting musical events so as to help nurture the positive musical experiences.

Chapter 6 discusses the empowerment approach where empathy becomes indispensable when trying to learn about the resources of individuals and how such resources can be mobilised. With this approach the author argues that individuals who are marginalised can obtain equal formal rights. However, I would suggest that the acquisition of social capital through collective musicking can involve a struggle, and is not necessarily a given outcome of merely participating in a musical event as Daykin (2012) has discussed: thus musical events require careful consideration and crafting in order to reduce social inequalities. Only with the necessary crafting and through the micro negotiations among the facilitators and participants during the collective musicking, participants can increase possibilities of actions through cultivating reciprocity and trust in and out of these collective aesthetic realization processes as Procter (2007) discussed in relation to his community therapy practices with mental health patients ,

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In chapter 7, Ruud introduces his perspectives on health; how this has to do with a sense of balance and harmony in life. This perspective is important because by using music we can craft a social-spatial environment where participants regain a sense of coherence (Antonovsky 1987) and at the same time transcend the bodily experience of illness (e.g., dementia) as discussed by Freund (2001). In a similar vein, the author also discusses how illness can be redefined as a condition caused not only by biological factors but also by societal factors (in chapter 8). Therefore, as Ruud suggests, it is possible to change the material and structural conditions of being ill. Music does allow people to perform a number of roles, some that may be able to dominate, usually temporarily, their experience of being sick. This obviously resonates with the discussion in chapter 3 where the author discusses roles of music in the formation of a sense of self.

In the tenth and concluding chapter, the author highlights how music can be an everyday technology of health, by suggesting that music activities can manage and/or prevent discomforts, such as asthma, depression and sadness, and to some extent provide comfort. The author also argues that music may function as a 'self object' that maintains, supports, and confirms the individual. These perspectives are useful when we explore the various roles that music has in everyday life as we shift the focus from music as a 'cure' or a 'treatment' of a disease to a more social and discursive role in health promotion in everyday life. Finally, the author regretfully points out that music became an art form after the eighteen century, a change that disentangled it from everyday life. Because music can afford people to embark on new actions it is an important factor in social change. The author therefore emphasises the necessity to reclaim the original functions of music in our culture and this is where the *health musicians'* roles can be found.

The perspectives discussed in the book are important both for practitioners and scholars working in the field of music and health especially under current challenging circumstances where the role of health musicians are increasingly becoming complex as discussed earlier. In fact, Ruud's perspectives (e.g., 1998; 2008) have been closely connected with the emergence of community music therapy practices (Pavlicevic & Ansdell 2004; Stige et al. 2010), therefore, the discussion developed in this book should also bring further positive impacts on the emergence and development of a wide range of health musicking projects.

The use of these perspectives is not bound to a specific culture, instead it can support various forms of health-musicking projects and the use of music in many different cultural settings.

References

Antonovsky, A. (1987). *Unraveling the Mystery of Health: How People Manage Stress and Stay Well*. San Francisco: Jossey-Bass.

Batt-Rawden, K. B. (2007). *Music and health promotion: the role and significance of music and musicking in everyday life for the long term ill*. Doctoral thesis, University of Exeter.

BBC TWO. (2009). The Alzheimer's choir: Wonderland. *BBC Two*. Retrieved on 9 June 2013, from: www.bbc.co.uk/programmes/b00pdv0w

Bonny, H. L. (2002). *Music & Consciousness: The Evolution of Guided Imagery and Music* (L. Summer, Ed.). Gilsum, NH: Barcelona.

Daykin, N. (2012). Developing Social Models for Research and Practice in Music, Arts, and Health: A Case Study of Research in a Mental Health Setting. In R. MacDonald, G. Kreutz, & L. Mitchell (Eds.), *Music, Health, and Wellbeing* (pp. 65-75). Oxford: Oxford University Press.

DeNora, T. (2010). Good music: Aesthetics, sociology, and the concept of community musicking. Paper presented at the *8th International Symposium on the Philosophy of Music Education*, 9-13 June 2010, Helsinki, Finland.

Freund, P. (2001). Bodies, disability and spaces: The social model and disabling spatial organisations. *Disability & Society*, *16*(5), 689-706.

Hara, M. (2013). We'll meet again: Music in dementia care. Doctoral thesis, University of Exeter.

Pavlicevic, M., & Ansdell, G. (Eds.), (2004). *Community Music Therapy*. London: Jessica Kingsley.

Pritchard, S. (2012). For dementia sufferers, music unlocks door for real personality to shine. *The Guardian*. Retrieved on 9 June 2013, from:www.guardian.co.uk/society/2012/apr/15/power-song-helping-people-dementia

Procter, S. (2007). What are we Playing at? Social Capital and Music Therapy. In R. Edwards & J. F., & J. Holland (Eds.), *Assessing Social Capital: Concept, Policy and Practice* (pp. 146-162). Newcastle: Cambridge Scholars Publishing.

Ridder, H. M., & Aldridge, D. (2005). Individual music therapy with persons with frontotemporal

ISSN: 1791-9622

dementia. *Nordic Journal of Music Therapy*, *14*(2), 91-106.

Ruud, E. (1998). *Music Therapy: Improvisation, Communication, and Culture*. Gilsum NH: Barcelona.

Ruud, E. (2008). Music in therapy: Increased possibilities for action. *Music and Arts in Action*, *1*(1), 46-60. Retrieved on 9 June 2013, from:www.musicandartsinaction.net/index.php/maia/article/view/musicintherapy

Ruud, E. (2012). The New Health Musicians. In R. MacDonald, G. Kreutz, & L. Mitchell (Eds.), *Music, Health, and Wellbeing* (pp. 87-96). Oxford Univ Press.

Sakashita, M. (2007). Discourses around professionalization and institutionalization of music therapy: What had been discussed the music therapy world. *Core Ethics*, *3*, 165-181.

Sakashita, M. (2008). Positive effect of 'familiar music' on demented elderly: Intervention taking account of narrative. *Ritsumeikan Human Science Research*, *16*, 69-79.

Skånland, M. M. (2012). A technology of well-being: a qualitative study on the use of mp3 player as a medium for musical self-care. Doctoral thesis, Norwegian Academy of Music, Oslo.

Stige, B., Ansdell, G., Elefant, C., & Pavlicevic, M. (2010). *Where Music Helps*. London: Ashgate.

Willis, P. (1989). Art of Culture? An Inquiry. In R. Simon & H. A. Giroux (Eds.), *Popular Culture: Schooling and Everyday Life* (pp. 131-146). Westport: Bergin & Garvey Paperback.

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Conference Report

Society for Education, Music and Psychology Research (SEMPRE) 40th Anniversary Conference

Robert Fulford

Society for Education, Music and Psychology Research (SEMPRE) 40th Anniversary Conference

14-15 September 2012

Society for Education, Music and Psychology Research (SEMPRE), Institute of Education, London, United Kingdom

Robert Fulford is a PhD student in Music Psychology at the Royal Northern College of Music, Manchester, UK. He previously studied Music with Education and Educational Psychology at the University of Cambridge. His current research focuses on interactive performance for musicians with a hearing impairment and is part of an AHRC-funded collaboration with the Acoustics Research Unit, University of Liverpool. He researches topics relating to music and deafness including cross-modal perception and communication in music and music perception using hearing aid technology. He is co-leader of the North-West Deaf Youth Orchestra run by the charity Music and the Deaf and is a British Sign Language user.

Email: Robert.Fulford@student.rncm.ac.uk

Introduction

This report provides a summary of the 40th Anniversary Conference of the Society for Education, Music and Psychology Research (SEMPRE)[1]. The event was hosted by the Institute of Education in London on 14-15 September 2012 as a celebration of the society's achievements over the last 40 years. Distinguished members of the society were invited to share their experiences of establishing and running the society and its two journals, Psychology of Music (POM) and Research Studies in Music Education (RSME). Alongside the usual papers and posters, discussions reflected on how social and political changes have impacted on research, education and the academic environment in which SEMPRE has operated over the years.

Conference programme

The conference was opened by Professor Graham Welch who introduced a special presentation entitled 'A History of the Society' with Doctors Charles Plummeridge, Gordon Cox, Desmond Sergeant (First Chair; Founding Editor POM 1973-78) and Lean Crickmore. Arnold Bentley, who set up twice-yearly conferences at the University of Reading, was acknowledged as a father figure of

[1] For the conference abstracts, see King and Himonides (2012). For the podcast of the 40th Anniversary Conference, see: www.sempre.org.uk/conferences/past-sempre-conferences/23-sempre-40th-anniversary

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music education research. Dr Sergeant spoke about his proposal, in 1971-2, to establish a journal for research in music education and a society to support it. He confessed that Bentley had, initially, not liked the first name of the society which was 'Society for Research in Psychology of Music and Music Education' (SRPMME) but that it had gained over 500 subscribers by 1978. Leon Crickmore, who described the developments in the 1980s and 1990s, began with a song. It was a verse from the Harrow School Song, written in 1864, but relevant at this conference:

Forty years on, when afar and asunder
Parted are those who are singing today,
When you look back, and forgetfully wonder
What you were like in your work and your play?

Crickmore explained that the early desire to measure musical abilities coincided with new methods of statistical analysis and that Aubrey Hickman had provided access to a computer at the University of Manchester for this purpose. He highlighted tensions between psychological and educational approaches existing from the outset. Developments in the late 1990s included the formation of a contractual agreement with Sage publications for POM with Graham Welch as Chair and Susan Hallam as Editor. The society was renamed SEMPRE in 2002 and remained unique in encompassing the three disciplines of music, education and psychology. Music psychology grew beyond its initial focus on the measurement of musical ability and, with the incorporation of qualitative methods and social psychological perspectives, the gap between psychological research and educational practice narrowed. Crickmore stated that Bentley had never believed that research would transform practice, but instead, inform it. A detailed written account of SEMPRE's history can be found in POM (Cox, Crickmore, Plummeridge, & Sergeant, 2012).

The following keynote address by Professor Johan Sundberg summarised 40 years of research on the human voice in relation to the physiology of singing and vocal acoustics. Sundberg reminded us of Gunnar Fant's work describing the voice as both a source and a filter and discussed the myoelastic aerodynamic theory of voice production. Sundberg provided evidence that notes at peak phrase-points are often sung almost a semitone sharp, and concluded by posing the question, what does 'in-tune' actually mean when it comes to singing?

Past and present Editors of POM and RSME then gathered to discuss aspects of the journal article submission and publication process. The division between educational and (especially cognitive) psychological approaches was alleviated to some extent by the launch of RSME in 1993. Professor Margaret Barrett explained that options for publication in music education had, until this time, been limited to the British Journal of Music Education or USA journals. Thus, RSME began as an Australian/Asia/Pacific journal and subsequently expanded with the important mandate to provide a means to disseminate 'quality, quali'[-tative] research. Today, POM provides many modes of publication including reviews, short statements, theoretical articles and the 'online first' system, in addition to the traditional empirical papers (Lamont 2012). An increase from four to six issues per year in 2012 reflects the current volume of quality submissions. The way in which authors communicate with reviewers in the review process was considered. In sensitive situations involving criticism or perhaps even rejection, imagining that one is talking with one's reviewer, in person, perhaps over coffee can help to avoid disputes and difficulties! The advice was to remain positive, and ask oneself, 'why has the reviewer made this comment?' and 'what have I not explained clearly enough?'

In the parallel sessions that followed (and which were attended by the author), Professor Aaron Williamon presented a summary of research profiling musicians' physical and mental health. The issue of Noise-Induced Hearing Loss was raised in mention of the Hearing Awareness Scheme between the Royal College of Music (RCM) and the Ear Institute at University College London, as was recent research by the RCM and Royal Northern College of Music that gathered self-report data about the health of music students in UK conservatoires. It was argued that research into musicians' health and fitness levels must inform educational practice. Finally, Williamon demonstrated a new performance simulator being trialled at the RCM, complete with a virtual green room, stage and audience, enabling students to simulate performance scenarios and potentially reduce performance anxiety and enhance practice methods.

Afternoon presenters included Sagar Jilka (how do earworms start?), Larissa Morand (the effects of background music and noise on attention tasks in adults with William's Syndrome), Steve Brown (an exploration of antecedents to engagement in music piracy), Olin Parker (fusing psychology and music therapy with music education) and many others. Before the conference dinner, some reflections on music psychology research were given by Professor Alf Gabrielsson (SEMPRE Lifetime Achiever). Gabrielsson reiterated that music psychology remains on the periphery of general psychology, a field in which the arts barely exist. He suggested that researchers should make more use of phenomenological musical experiences as a way to

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examine human musical behaviours. As an example, he shared his recent experiences of changes to his absolute pitch ability, such that he now consistently identifies notes one semitone higher than they are. One of my own participants related a similar story to me in an interview study about making music with a hearing impairment (Fulford, Ginsborg & Goldbart, 2011). It was interesting for me to discover a physiological explanation: hair cells in the cochlear naturally vibrate more slowly with age and resonate with sound waves that are lower in pitch while established neural links to labelling templates in the brain remain. I could not, however, find any studies examining subjective data of this phenomenon, so in that respect, it was a point well made.

Special issues of POM and RSME were presented by Louise Skelding of Sage publications at The Russell Hotel before dinner. The 40th Anniversary Commemorative Collection is a facsimile edition of POM containing papers individually selected by each previous Editor of the journal. The conference dinner was beautifully accompanied by Derek Paravicini alongside Adam Ockelford.

Photograph 1: Derek Paravicini playing the piano alongside Adam Ockelford at the conference dinner (photograph taken by Alex Lamont)

The next day began with a keynote by Professor Liora Bresler in which she drew on her international work in arts education. She proposed that the scholarship of education is not something that can be learned by reading a textbook. Researchers should 'connect' with their research, notice the detail and see relationships between the parts while also seizing the whole. She suggested researchers should move beyond subjective judgements, liking or not liking, and recognise that all (qualitative) research is, to some extent, 'me-search'.

Parallel sessions followed, including presentations by Victoria Rowe and Susan Young (pianists composing with interactive software), Simon Rose (utility of free improvisation within music education) and Susan Hallam (what predicts motivation for music-making in the long term?). John Sloboda and Alinka Greasley presented findings from an evaluation project about the motivations of 16-24-year-olds to attend classical concerts. With the average age of concert audiences well into the 50s, they proposed that a lack of knowledge and unwelcoming audience cultures are barriers for young people in the acquisition of the concert-going habit. Further presentations were given by Daniel Müllensiefen, who introduced The Goldsmiths Musical Sophistication Index, and Sarah Knight, who presented a case for the use and effects of entrainment processes in persuasive oratory. Renee Timmers (Hickman winner 2002) presented experimental data on the influence of emotions on our perception of music and fielded questions about the extent to which these effects are implicit or explicit: do people see a picture which induces a mood that, in turn, influences their choice? Or do people infer a mood from the music and consciously consider which choice is most appropriate?

There was a poster session in the afternoon before a film report by Professor John Baily (SEMPRE Ambassador for Afghanistan) and a special address by Isabel Cecilia Martinez and Favio Shifres, representing the Argentine Society for the Cognitive Science of Music. Jane Oakland also gave a report on SEMPRE's research into funding for small research grants in the UK.

To the future

The final plenary was entitled 'Current and Future Challenges in Research in Music Psychology and Music Education' and was led by Professors John Sloboda, Graham Welch, Eric Clarke and John Baily. Welch began by placing the research fields within a wider context of global illiteracy: according to UNESCO there are 758 million illiterate adults in the world today. He proposed that music technology has the potential to address exclusion in society and I was reminded of the fact that 82% of deaf and hearing impaired children are now routinely educated in mainstream schools (CRIDE 2012) where access to music can remain problematic for them. Sloboda then acknowledged that although research findings take time to impact society at large, this may be letting music psychology off 'a bit lightly'. It was agreed that musical listening behaviours are ubiquitous: psychologists can show that most of the equipment that humans need to perceive, and benefit from, music is innate. Educators implicitly capitalise on

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this. Sloboda questioned the degree to which music psychology has positively affected understanding of music in society at large: the public may be aware of the 'Mozart Effect' but if music psychology did not exist, would they enjoy listening to music any less? Would composers compose less well? Would performers cease to perform? Professor Eric Clarke stated that there may be a danger in moving too quickly from a pre-paradigmatic, to a post-paradigmatic stage. He suggested that music psychology has generated relatively few paradigms, citing probe tones, priming, and the mapping of tempo and dynamics from performance. Perhaps we have turned away from them too soon, favouring new methods and abandoning the old? Perhaps we should, instead, hang on to them, critically evaluate and build upon them? There were many questions to ponder.

Methodologies and paradigms aside, it is generally agreed that the social impact of our research is important. But there is a tension between the idea that music is for everyone and the value placed on musical training. Perhaps researchers may not always sufficiently interrogate their motivations for researching human musical processes as these topics are naturally compelling to trained musicians. But, as Clarke stated, there is merit in pure academic enquiry and if research funding is to decline, then researchers must strongly identify how their proposed research contributes to nascent channels of impact in order to justify it in today's uncertain climate. Perhaps reverence for musical talent and training has resulted in a potential to extend existing knowledge from our umbrella disciplines (be they psychology, education, philosophy, sociology or history) into musical domains, rather than creating entirely new epistemologies of musical behaviour.

References

Cox, G., Crickmore, L., Plummeridge, C., & Sergeant, D. (2012). SEMPRE: Forty years on. *Psychology of Music*, *40*(5), 523-538.

CRIDE (2012). CRIDE report on 2012 survey on educational provision for deaf children in England. *Consortium for Research into Deaf Education*. Retrieved on 23 March 2013, from www.ndcs.org.uk/professional_support/national_data/uk_education_.html

Fulford, R., Ginsborg, J., & Goldbart, J. (2011). Learning not to listen: The experiences of musicians with hearing impairments. *Music Education Research, 13*(4), 447-464.

King, E. & Himonides, E. (Eds.). (2012). *Abstracts: SEMPRE 40th Anniversary Conference*. London: iMerc.

Lamont, A. (2012). Editorial. *Psychology of Music*, *41*(1), 3-4.

Suggested citation:

Fulford, R. (2013). Conference report: "Society for Education, Music and Psychology Research (SEMPRE) 40th Anniversary Conference". *Approaches: Music Therapy & Special Music Education*, *5*(1), 75-78. Retrieved from http://approaches.primarymusic.gr

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Νέες Δημοσιεύσεις στην Ελλάδα (2012-2013)

New Publications in Greece (2012-2013)

Συλλέχθηκαν από τον Γιώργο Τσίρη

Compiled by Giorgos Tsiris

Η ενότητα *Νέες Δημοσιεύσεις στην Ελλάδα* στοχεύει στην ενημέρωση του αναγνωστικού κοινού για την τρέχουσα ελληνική βιβλιογραφία σχετικά με τα πεδία της μουσικοθεραπείας και της ειδικής μουσικής παιδαγωγικής.

Η ενότητα αυτή περιλαμβάνει δημοσιεύσεις βιβλίων, πρακτικών από συνέδρια, κεφαλαίων και άρθρων που έχουν δημοσιευτεί στην Ελλάδα κατά το τρέχον και το προηγούμενο χρονολογικό έτος. Περιλαμβάνονται κείμενα γραμμένα στην ελληνική γλώσσα, καθώς επίσης και αγγλικά κείμενα τα οποία έχουν δημοσιευτεί σε ελληνικές πηγές (όπως ελληνικά βιβλία, πρακτικά και περιοδικά).

Η ενότητα αυτή δημοσιεύεται στον πρώτο αριθμό κάθε τεύχους του περιοδικού. Συγγραφείς, ερευνητές και άλλοι ενδιαφερόμενοι είναι ευπρόσδεκτοι να στείλουν στον Επιμελητή Σύνταξης (approaches.editor@gmail.com) σχετικές παραπομπές δημοσιεύσεων ώστε να συμπεριληφθούν στο επόμενο εαρινό τεύχος του περιοδικού.

The section *New Publications in Greece* aims to raise the readership's awareness of the current Greek literature regarding the fields of music therapy and special music education.

This section includes publications of books, conference proceedings, chapters and articles that have been published in Greece during the current and previous calendar year. It includes texts written in Greek language, as well as English texts which have been published in Greek sources (e.g., Greek books, proceedings and journals).

This section is published in the first issue of each volume of the journal. Authors, researchers and any interested parties are welcome to send relevant references to publications to the Editor-in-Chief (approaches.editor@gmail.com) so that they can be included in the next journal's Spring issue.

Βιβλία

Books

Ανδρούτσος, Π. (2012). *Μουσική Παιδαγωγική: Μέθοδοι Διδασκαλίας της Μουσικής. Παρουσίαση και Κριτική Θεώρηση των Μεθόδων Orff και Dalcroze (Γ΄Αναθεωρημένη Έκδοση)*. Αθήνα: Νικολαΐδης.

Δογάνη, Κ. (2012). *Μουσική στην Προσχολική Αγωγή: Αλληλεπίδραση Παιδιού – Παιδαγωγού*. Αθήνα: Gutenberg - Γιώργος & Κώστας Δαρδανός.

Gould, G. (2012). *Σκέψεις για τη Μουσική* (Μτφ. Στέφανος Θεοδωρίδης). Αθήνα: Νεφέλη.

Grosleziat, C. (2012). *Τα Βρέφη και η Μουσική: Πρώτες Αισθήσεις και Ηχητικές Δημιουργίες* (Μτφ. Άννα Αδάμ, Φλώρα Μιχαλοπούλου). Θεσσαλονίκη: University Studio Press.

Κομποτής, Κ. (2012). *Μουσικό Λεξικό*. Αθήνα: Fagotto.

Σακελλαρίδης, Γ. (2012). *Η Μουσική Κοντά στον Άνθρωπο: Στο Σχολείο, στην Οικογένεια, στην Κοινωνία*. Αθήνα: Γρηγόρη.

Στάμου, Λ. (2012). *Μια Ανθρωπιστική Προσέγγιση στη Διδασκαλία της Μουσικής: Η Φιλοσοφία και η Πράξη της Μεθόδου Suzuki (Ένα Εγχειρίδιο για Σπουδαστές, Παιδαγωγούς και Γονείς)*. Θεσσαλονίκη: Εκδόσεις Πανεπιστημίου Μακεδονίας.

Τσέτσος, Μ. (2012). *Στοιχεία και Περιβάλλοντα της Μουσικής: Μια Φιλοσοφική Εισαγωγή στη Μουσικολογία*. Αθήνα: Fagotto.

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Τσέτσος, Μ. (2012). *Η Μουσική στη Νεότερη Φιλοσοφία: Από τον Καντ στον Αντόρνο*. Αθήνα: Αλεξάνδρεια.

Άρθρα
Articles

Αδαμοπούλου, Χ. (2012). Βιβλιοκριτική: "Music Therapy in Schools: Working with Children of All Ages in Mainstream and Special Education" (Oldfield, Tomlinson & Derrington, Επιμελήτριες). *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 4*(2), 128-130.

Γεωργιάδη, Ε. (2012). Βιβλιοκριτική: "Music Therapy and Parent-Infant Bonding" (Jane Edwards, Επιμελήτρια). *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 4*(2), 131-134.

Κάργιου, Κ. (2012). Η μουσική ως μέσο αντιμετώπισης της αυτοτραυματικής συμπεριφοράς ατόμων με αυτισμό: Μια πιλοτική έρευνα για τις απόψεις των μουσικοθεραπευτών. *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 4*(1), 34-44.

Παπανικολάου, Ε. (2012). Ανταπόκριση από συνέδριο: 21ο διεθνές συνέδριο του Association for Music and Imagery – "Ποτίζοντας τον σπόρο: Φροντίζοντας το δώρο". *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 4*(1), 67-69.

Τσίρης, Γ. (2012). Σε περιόδους κρίσης: Μουσική, αγάπη και ανθρώπινη ζωή. *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 4*(2), 79-81.

Τσίρης, Γ. (2012). Τι απαντήσεις αναζητάμε; *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 4*(1), 3-4.

Φιλιάνου, Μ. (2012). Βιβλιοκριτική: «100 Learning Games for Special Needs with Music, Movement, Sounds and… Silence» (Johanne Hanko). *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 4*(1), 64-66.

Φρουδάκη, Μ. (2012). Βιβλιοκριτική: "Every Note Counts: The Story of Nordoff-Robbins Music Therapy" (Fraser Simpson). *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική, 4*(1), 45-48.

Αγγλικά άρθρα σε ελληνικά περιοδικά
English articles in Greek journals

Georgiadi, E. (2012). Book review: "Music Therapy and Parent-Infant Bonding" (Jane Edwards, Editor). *Approaches: Music Therapy & Special Music Education, 4*(2), 135-138.

Howat, R. (2012). Clive Robbins – An appreciation. *Approaches: Music Therapy & Special Music Education, 4*(1), 19-20.

Iliya, Y. (2012). Book review: "Voicework in Music Therapy: Research and Practice" (Felicity Baker & Sylka Uhlig, Editors). *Approaches: Music Therapy & Special Music Education, 4*(2), 121-123.

Kaikkonen, M. (2012). Conference report: "30th ISME World Conference: Pre-conference Commission Seminar on Music in Special Education, Music Therapy and Music Medicine". *Approaches: Music Therapy & Special Music Education, 4*(2), 139-142.

Lawes, M. (2012). Reporting on outcomes: An adaptation of the 'AQR-instrument' used to evaluate music therapy in autism. *Approaches: Music Therapy & Special Music Education, 4*(2), 110-120.

Linklater, H., & Forbes, L. (2012). Cross-cultural collaboration as community growth and integration: Children's music projects in Bosnia-Herzegovina and Scotland. *Approaches: Music Therapy & Special Music Education, 4*(2), 101-109.

McCord, K. (2012). Book review: "Music and Movement with Hard-of-Hearing and Deaf Children (Shirley Salmon, Editor). *Approaches: Music Therapy & Special Music Education, 4*(2), 124-125.

Merkt, I. (2012). *Voices*: An inclusive choir in Dortmund, Germany. *Approaches: Music Therapy & Special Music Education, 4*(2), 93-100.

Okazaki-Sakaue, K. (2012). Tribute to Clive Robbins. *Approaches: Music Therapy & Special Music Education, 4*(1), 13-15.

Papadopoulou, M.-C. (2012). Boundaries and music therapy practices in Greece: A small qualitative study. *Approaches: Music Therapy & Special Music Education, 4*(1), 23-33.

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Robarts, J. (2012). Clive and the creative now. *Approaches: Music Therapy & Special Music Education, 4*(1), 9-10.

Robertson, J. (2012). Five decades... and five minutes - personal reflections on Clive Robbins. *Approaches: Music Therapy & Special Music Education, 4*(1), 21-22.

Sampathianaki, E. (2012). Book review: "Music Therapy with Adults with Learning Disabilities" (Tessa Watson, Editor). *Approaches: Music Therapy & Special Music Education, 4*(1), 56-59.

Stachyra, K. (2012). Clive Robbins' influence on Polish music therapy. *Approaches: Music Therapy & Special Music Education, 4*(1), 16-18.

Tsiris, G. (2012). In times of crisis: Music, love and human life. *Approaches: Music Therapy & Special Music Education, 4*(2), 82-84.

Tsiris, G. (2012). What answers do we seek? *Approaches: Music Therapy & Special Music Education, 4*(1), 5-6.

Turry, A. (2012). The creative spirit of Clive Robbins. *Approaches: Music Therapy & Special Music Education, 4*(1), 11-12.

Warner, C. (2012). Book review: "Towards Ethical Research: A Guide for Music Therapy and Music and Health Practitioners, Researchers and Students" (Camilla Farrant, Mercédès Pavlicevic & Giorgos Tsiris). *Approaches: Music Therapy & Special Music Education, 4*(1), 53-55.

Warnock, T. (2012). Vocal connections: How voicework in music therapy helped a young girl with severe learning disabilities and autism to engage in her learning. *Approaches: Music Therapy & Special Music Education, 4*(2), 85-92.

Weston, S. (2012). Book review: "Adolescents, Music and Music Therapy: Methods and Techniques for Clinicians, Educators and Students" (Katrina McFerran). *Approaches: Music Therapy & Special Music Education, 4*(2), 126-127.

Wetherick, D. (2012). Book reviews: "Music for Special Kids: Musical Activities, Songs, Instruments and Resources" (Pamela Ott) and "Group Music Activities for Adults with Intellectual and Developmental Disabilities" (Maria Ramey). *Approaches: Music Therapy & Special Music Education, 4*(1), 60-63.

Πρακτικά συνεδρίων με αγγλικές ενότητες

Conference proceedings with English sections

Cambouropoulos, E., Tsougras, C., Mavromatis, P., & Pastiadis, C. (Eds.), (2012). *Proceedings of the ICMPC-ESCOM 2012 Joint Conference: the 12th Biennial International Conference for Music Perception and Cognition, and the 8th Triennial Conference of the European Society for the Cognitive Sciences of Music* (Thessaloniki, Greece, 23-28 July 2012**)**. Thessaloniki: School of Music Studies, Aristotle University of Thessaloniki. Retrieved from: http://icmpc-escom2012.web.auth.gr/?q=node/67

Sims, W. (Ed.), (2012). *Proceedings of the International society for Music Education 30th World Conference on Music Education* (Thessaloniki, Greece, 15-20 July 2012). Nedlands: International society for Music Education.

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Προσεχή Δρώμενα

Upcoming Events

Συλλέχθηκαν από τους Γιώργο Τσίρη & Δώρα Παυλίδου

Compiled by Giorgos Tsiris & Dora Pavlidou

Η ενότητα *Προσεχή Δρώμενα* αποσκοπεί στην ενημέρωση του αναγνωστικού κοινού για προσεχή συνέδρια και σεμινάρια σχετικά με τα πεδία της μουσικοθεραπείας και της ειδικής μουσικής παιδαγωγικής. Περιλαμβάνονται ανακοινώσεις για σημαντικά συνέδρια και συμπόσια που διεξάγονται σε διεθνές επίπεδο, ενώ ιδιαίτερη έμφαση δίνεται στο ελληνικό προσκήνιο.

Η ενότητα αυτή λειτουργεί συμπληρωματικά με την αντίστοιχη ιστοσελίδα του *Approaches* όπου προσφέρεται μία πιο πλήρης λίστα δρώμενων: http://approaches.primarymusic.gr. Σχετικές πληρο-φορίες προς δημοσίευση στο *Approaches* μπορούν να στέλνονται στο: approaches.adm2@gmail.com.

The section *Upcoming Events* aims to raise the awareness of readership for forthcoming conferences and seminars related to the fields of music therapy and special music education. It includes announcements of major conferences and symposiums that take place internationally, while particular emphasis is given to events that take place in Greece.

This section complements the relevant webpage of *Approaches* where a more comprehensive list of upcoming events is provided at: http://approaches.primarymusic.gr. Relevant information for publication on *Approaches* can be sent to: approaches.adm2@gmail.com.

International Conference on Music and Well-being

Date: 6-10 August 2013
Place: Potchefstroom, South Africa
Organisers: Musical Arts in South Africa: Resources & Applications (MASARA), Faculty of Arts, North-West University
Information: www.musicwellbeing.co.za/about.aspx

The Intersection of Arts Education and Special Education: Exemplary Programs and Approaches

Date: 7-8 August 2013
Place: Washington DC, USA
Organisers: The John F. Kennedy Center for the Performing Arts, Office of VSA and Accessibility
Information: www.kennedy-center.org/education/conference/index/SPECEDUART#conference

9th European Music Therapy Congress

Title: Setting the Tone: Cultures of Relating and Reflecting in Music Therapy
Date: 7-10 August 2013
Place: Oslo, Norway
Organisers: Norwegian Music Therapy Association & European Music Therapy Confederation
Information: www.emtc2013.no

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39th Annual Australian Music Therapy Association Conference

Date: 14-15 September 2013
Place: Melbourne, Australia
Organisers: Australian Music Therapy Association
Information: www.austmta.org.au

The Inaugural Nordoff Robbins Plus Research Conference

Title: The Music and Communication Conference: Music Therapy and Music Psychology
Date: 20 September 2013
Place: London, United Kingdom
Organisers: Nordoff-Robbins, Center for Music and Science, Faculty of Music, University of Cambridge
Information: www.nordoff-robbins.org.uk/content/what-we-do/research-and-resources/nordoff-robbins-plus-conference-series

1st Iberoamerican Congress on Research in Music Therapy: Developments and Updates on Music

Date: 10-12 October 2013
Place: Lousada, Portugal
Organisers: Grupo Iberoamericano de Investigación en Musicoterapia (GIIMT)
Information: www.giimt.org

Rethinking Interdisciplinary Collaboration: Towards New Ethical Paradigms in Music and Health Research

Date: 19 October 2013
Place: London, United Kingdom
Organisers: Music, Mind and Brain Centre, Goldsmiths College, University of London Psychology Department, British Forum for Ethnomusicology (BFE), Society for Education and Music Psychology Research (SEMPRE)
Information: www.sempre.org.uk/conferences/forthcoming-associated

14th World Congress of Music Therapy

Title: Cultural Diversity in Music Therapy Practice, Research and Education
Date: 5-12 July 2014
Place: Vienna, Austria
Organisers: World Federation of Music Therapy (WFMT)
Information: http://musictherapyworld.net/WFMT/2014_World_Congresses.html

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Μεταφρασμένες Περιλήψεις Άρθρων

Translated Abstracts of Articles

Μουσικοθεραπεία και Ειδική Μουσική Παιδαγωγική: Διεπιστημονικοί Διάλογοι

Alice-Ann Darrow

Μία συνέντευξη από τον Γιώργο Τσίρη

Περίληψη: Αντλώντας από το διά βίου έργο της Καθηγήτριας Alice-Ann Darrow στα πεδία της μουσικοθεραπείας και της ειδικής μουσικής παιδαγωγικής, αυτή η συνέντευξη φέρνει στο προσκήνιο τη σημασία του διεπιστημονικού διαλόγου. Αναδύεται και συζητείται μια σειρά από θέματα (συμπεριλαμβανομένης της έννοιας των 'μουσικών δικαιωμάτων' και της ένταξης) που σχετίζονται με την ανάπτυξη της διεπιστημονικότητας και της συνεργασίας μεταξύ διαφορετικών μουσικών πρακτικών. Η Darrow μοιράζεται εμπειρίες από την προσωπική και επαγγελματική της ζωή, οι οποίες με την πάροδο των χρόνων έχουν διαμορφώσει το έργο και τον τρόπο σκέψης της. Αυτή η συνέντευξη επιδιώκει να προσφέρει ένα πλαίσιο εντός του οποίου οι αναγνώστες μπορούν να τοποθετήσουν και να κατανοήσουν περαιτέρω την πλούσια συνεισφορά της Darrow στα πεδία της μουσικοθεραπείας και της ειδικής μουσικής παιδαγωγικής τόσο σε εθνικό όσο και σε διεθνές επίπεδο.

Λέξεις κλειδιά: μουσικοθεραπεία, ειδική μουσική παιδαγωγική, συνεργασία, διεπιστημονικότητα, επάγγελμα

Η **Dr Alice-Ann Darrow** είναι Καθηγήτρια Μουσικοθεραπείας και Μουσικής Παιδαγωγικής φέροντας τον τίτλο Irvin Cooper στο Florida State University. Τα διδακτικά και ερευνητικά της ενδιαφέροντα αφορούν τη διδασκαλία μουσικής σε ειδικές ομάδες πληθυσμού, το ρόλο της μουσικής στην κουλτούρα των κωφών και τη μη λεκτική επικοινωνία στην αίθουσα διδασκαλίας. Είναι συν-συγγραφέας του *Music in Special Education, and Music and Geriatric Populations: A Handbook for Music Therapists and Healthcare Professionals* και συντάκτρια του *Introduction to Approaches in Music Therapy*. Η Darrow υπηρετεί σήμερα στις συντακτικές επιτροπές των *Bulletin for the Council on Research in Music Education, Music Therapy Perspectives, Update: Applications of Research in Music Education, Reviews of Research in Human Learning and Music,* και *Florida Music Director*.

Email: alifsu@mac.com

Ο **Γιώργος Τσίρης** είναι ο αρχισυντάκτης του περιοδικού ανοικτής πρόσβασης *Approaches: Μουσικοθεραπεία & Ειδική Μουσική Παιδαγωγική*. Εργάζεται ως βοηθός έρευνας στο Nordoff Robbins και ως μουσικοθεραπευτής στο St Christopher's Hospice (Ηνωμένο Βασίλειο), ενώ υπηρετεί ως συντονιστής του Δικτύου Έρευνας του Βρετανικού Συλλόγου Μουσικοθεραπείας (BAMT). Είναι ο συν-συγγραφέας του βιβλίου *Towards Ethical Research: A Guide for Music Therapy and Music & Health Practitioners, Researchers and Students*. Διεξάγει τη διδακτορική του έρευνα στη μουσικοθεραπεία και την πνευματικότητα στο Nordoff Robbins (City University, Λονδίνο).

Email: giorgos.tsiris@gmail.com

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Μουσικοθεραπεία δι' Αντιπροσώπου: Χρησιμοποιώντας Ανθρωποποιημένες Εικόνες στο Τραγούδι

Carol Chambers

Περίληψη: Για μερικούς πελάτες στη μουσικοθεραπεία η ανάπτυξη της επίγνωσης, της εξερεύνησης και της έκφρασης συναισθηματικά ευαίσθητων θεμάτων μπορεί να θεωρηθεί δύσκολο επίτευγμα. Αν δυσκολεύονται να εκφράσουν τα συναισθήματά τους μέσω της αυτοσχεδιαζόμενης μουσικής, οι πελάτες μπορεί να προτιμούν να καταφύγουν στην ασφάλεια που προσφέρει η επανάληψη οικείων τραγουδιών.

Σε αυτό το άρθρο παρουσιάζονται τα αποτελέσματα μιας ολοκληρωμένης διδακτορικής έρευνας: μια ποιοτική μελέτη περίπτωσης βασισμένη σε μια νατουραλιστική κλινική πρακτική, η οποία εξέτασε τις επιλογές τραγουδιών μίας γυναίκας κατά τη διάρκεια μιας τριετούς μουσικοθεραπευτικής διαδικασίας σε μια εγκληματολογική μονάδα μεσαίας-ασφάλειας. Με εργαλείο μια τροποποιημένη μορφή της θεραπευτικής αφηγηματικής ανάλυσης (Aldridge & Aldridge 2002) έγινε η ανάλυση μίας περιγραφικής αφήγησης. Η ανάλυση είχε ως αποτέλεσμα την εξαγωγή μιας σειράς παραγωγικών μεταφορικών εικόνων που εντάσσονται σε μια χρονολογική σειρά γεγονότων. Οι εικόνες αυτές αποτυπώνουν ανθρωποποιημένες φιγούρες που είναι όμως συναισθηματικά αποκεντρωμένες ή αποπροσωποποιημένες. Από τη φιλοσοφική και μεθοδολογική σκοπιά του συμπεριφορισμού – που βλέπει αυτές τις φιγούρες ως εξαρτημένες αντιδράσεις που συνδέουν τη μουσική με τις εμπειρίες ζωής στα πλαίσια μιας διαδικασίας ανάπτυξης της ταυτότητας του εαυτού – τέτοιες εικόνες φαίνεται να παρέχουν στον πελάτη μια σιωπηλή φωνή, για να μπορέσει να εκφράσει συναισθήματα με τρόπο που είναι προσωπικά αποκαλυπτικός, κοινωνικά αποδεκτός, πολιτιστικά προσβάσιμος και θεραπευτικά εποικοδομητικός.

Θεωρώ ότι η χρήση χαρακτήρων τρίτου προσώπου ως μια μορφή αντιπροσώπευσης διευκολύνει την αμοιβαία αναφορά και τον πειραματισμό, και τοποθετεί με σταθερότητα τη μουσική στο επίκεντρο μιας κοινωνικά κατασκευασμένης μουσικοθεραπευτικής διαδικασίας.

Λέξεις κλειδιά: εικόνες, μεταφορά, στίχοι τραγουδιών, εκληματολογική μουσικοθεραπεία

Η **Δρ. Carol Chambers** καταρτίστηκε ως μουσικοθεραπεύτρια το 1982 στο Roehampton στο Ηνωμένο Βασίλειο. Έχει εργαστεί με πολλές πληθυσμιακές ομάδες ως ιδιωτική επαγγελματίας. Στο παρελθόν διετέλεσε Συντονίστρια και Υπεύθυνη Μουσικοθεραπεύτρια στο Nottingham MusicSpace και απέκτησε το διδακτορικό της στην εγκληματολογική μουσικοθεραπεία από το University of Nottingham. Η Carol είναι μέλος της ερευνητικής ομάδας 'Θέατρο, Χορός, Μουσική και Συνείδηση' στο University of Lincoln και έχει παρουσιάσει σε διεθνές επίπεδο τη δουλειά της, η οποία καταπιάνεται τόσο με τη μουσικοθεραπεία όσο και με τη συνείδηση. Είναι καταρτισμένη εκπαιδευτικός και σήμερα κατέχει τη θέση της Υπεύθυνης Εκπαίδευσης στο HMP Lincoln στο Ηνωμένο Βασίλειο.

Email: carolmch@tiscali.co.uk

Οι Επιπτώσεις της Κοινοτικής Αφρικανικής Τυμπανοκρουσίας στο Γενικευμένο Άγχος των Εφήβων

David Akombo

Περίληψη:
Ο σκοπός της παρούσας μελέτης ήταν να εξετάσει τα αποτελέσματα των προγραμμάτων κοινοτικής μουσικής (community music projects), όπως είναι οι εξωσχολικοί κύκλοι Αφρικανικής τυμπανοκρουσίας (African drumming), στην ακαδημαϊκή επίδοση και στο γενικευμένο άγχος των εφήβων. Στη μελέτη συμμετείχαν έφηβοι από ένα γυμνάσιο της πολιτείας Utah των ΗΠΑ (μαθητές της 7ης, 8ης και 9ης τάξης, ηλικιακή ομάδα 12-14). Το t-test ενός δείγματος (one-sample t-test) εντόπισε σημαντική διαφορά στα αποτελέσματα που αφορούσαν την ανάγνωση (df(4) p=.004). Όσον αφορά τα μαθηματικά, το t-test δειγμάτων σε ζεύγη (paired samples) έδειξε ότι το άγχος προδιάθεσης (trait anxiety) πριν την παρέμβαση

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(pre-intervention) και η συνολική βαθμολογία του άγχους κατάστασης (state anxiety) πριν τη δοκιμή (pre-test) σχετίζονται σημαντικά (df(4), p=.033). Αντίστοιχα, όσον αφορά την ανάγνωση, το t-test δειγμάτων σε ζεύγη διαπίστωσε σημαντική σχέση ανάμεσα στο άγχος προδιάθεσης μετά την παρέμβαση (post-intervention) και στη συνολική βαθμολογία του άγχους κατάστασης μετά τη δοκιμή (post-test) (df(4), p=.030). Η παρούσα έρευνα παρουσιάζει το πώς μια μορφή κοινοτικής μουσικής, όπως είναι η τυμπανοκρουσία, μπορεί να συνδράμει τόσο στη μείωση του άγχους όσο και στη βελτίωση των ακαδημαϊκών επιδόσεων των εφήβων. Τα προγραμμάτα κοινοτικής μουσικής συνίστανται ως ένας μη παρεμβατικός τρόπος διαμεσολάβησης για εφήβους.

Λέξεις κλειδιά: Αφρικανική τυμπανοκρουσία, άγχος, ακαδημαϊκή επίδοση, κοινοτικά προγράμματα μουσικής

Ο Δρ. **David O. Akombo** είναι διευθυντής Μουσικής Εκπαίδευσης, Επίκουρος Καθηγητής Μουσικής και Associate Graduate Faculty στο Jackson State University στο Mississippi (ΗΠΑ), όπου διδάσκει στο προπτυχιακό πρόγραμμα και συντονίζει το μεταπτυχιακό πρόγραμμα σπουδών στη Μουσική Εκπαίδευση. Η εκτενής εκπαίδευση του Δρ. Akombo περιλαμβάνει ένα Bachelor of Education από το Kenyatta University στην Κένυα, ένα Master of Arts από το Point Loma N. University στην California, ένα Master of Music στην Εθνομουσικολογία από το Bowling Green State University του Ohio και ένα Διδακτορικό στη Μουσική Εκπαίδευση από το University of Florida στην Gainesville, Florida των ΗΠΑ. Έχει συγγράψει πολλά άρθρα και δύο βιβλία, και έχει παρουσιάσει σε περιφερειακά, εθνικά και διεθνή συνέδρια. Ο Δρ. Akombo είναι συνιδρυτής και ο αρχισυντάκτης των επιστημονικών πρακτικών της Διεπιστημονικής Ένωσης για την Ποσοτική Έρευνα στη Μουσική και την Ιατρική (ISQRMM).

Email: dakombo@hotmail.com

Το Μουσικό Παιχνίδι ως Θεραπεία σε Ένα Πρόγραμμα Πρώιμης Παρέμβασης

Julie Wylie & Susan Foster-Cohen

Περίληψη: Η αποτελεσματική θεραπευτική χρήση της μουσικής στα μικρά παιδιά με πολλαπλές αναπτυξιακές αναπηρίες περιλαμβάνει τη συμμετοχή των ίδιων και των γονέων / κηδεμόνων τους σε μουσικές δραστηριότητες παιχνιδιού οι οποίες είναι ικανές να ρυθμίσουν τα φυσιολογικά συστήματα των παιδιών (και των γονέων τους), να ενισχύσουν τις σχέσεις γονέα-παιδιού και να προσφέρουν στα παιδιά ευκαιρίες για σωματική, κοινωνικο-συναισθηματική και πνευματική μάθηση και ανάπτυξη. Αυτό μπορεί να επιτευχθεί στη μουσικοθεραπεία, αλλά και σε ανταπόκριση των στόχων που θέτει η διεπιστημονική ομάδα. Το άρθρο αυτό πηγάζει από σχετική παρουσίαση που έγινε στο συνέδριο της ISME στην Ελλάδα το 2012. Περιγράφει τα προγράμματα θεραπείας που ακολουθούνται στο Champion Centre στο Christchurch της Νέας Ζηλανδίας και παρουσιάζει τέσσερις μελέτες περίπτωσης που έχουν σχεδιαστεί για να τονίσουν το είδος και το εύρος των δραστηριοτήτων που, μέσα από μια εικοσαετή εμπειρία, φαίνεται να λειτουργούν αποτελεσματικά. Οι μελέτες αυτές δείχνουν πως όταν οι επαγγελματίες μουσικοί αφήνουν το παιδί να τους καθοδογεί και υποδέχονται τους γονείς ως ισότιμους επικοινωνιακούς εταίρους, μπορούν να ενισχύσουν την ευεξία των παιδιών και να ενθαρρύνουν τους γονείς να συμμετέχουν σε παρόμοιες δραστηριότητες στο σπίτι επεκτείνοντας, έτσι, τη θεραπευτική εμβέλεια και την αποτελεσματικότητα της μουσικής.

Λέξεις κλειδιά: φυσιολογική ρύθμιση, ευεξία, προωρότητα, σύνδρομο Down, διαταραχές στο φάσμα του αυτισμού, αισθητήριο, διεπιστημονική ομάδα

Η **Julie Wylie** ίδρυσε το New Zealand Musical Parenting Association Inc. πριν από είκοσι δύο χρόνια. Είναι η ανώτερη ειδικός της μουσικής στο Champion Centre, στο νοσοκομείο Burwood, Christchurch, στη Νέα Ζηλανδία. Έχει προσκληθεί σε πολλές χώρες, μεταξύ των οποίων η Κορέα, η Ιαπωνία, η Σιγκαπούρη, η Αυστραλία, το Ηνωμένο Βασίλειο, η Λιθουανία, η Φινλανδία και η Εσθονία, για να κάνει εργαστήρια και

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παρουσιάσεις μουσικής. Έχει διακριθεί για τη μουσική της καθοδήγηση και το μουσικό της υλικό έχει βραβευθεί διεθνώς. Η Julie έχει επίσης το δικό της μουσικό σχολείο για μητέρες και για παιδιά από 0 έως 8 χρονών.

Email: jwylie@xtra.co.nz

Η **Susan Foster-Cohen** έχει διδακτορικό στη γλωσσολογία και στην ψυχολογία από το Lancaster University (Ηνωμένο Βασίλειο) με ειδικότητα στην πρώρη γλωσσική ανάπτυξη των παιδιών. Έχει διδάξει σε πανεπιστήμια στο Ηνωμένο Βασίλειο, τις ΗΠΑ, τη Γαλλία και στη Νέα Ζηλανδία και από το 2004 είναι η διευθύντρια του Champion Centre. Το ερευνητικό έργο της Susan επικεντρώνεται στην αναπτυξιακή πορεία παιδιών με πολλαπλές αναπηρίες και στις μακροπρόθεσμες συνέπειες του πρόωρου τοκετού.

Email: susan@championcentre.org.nz

Τι Συμβαίνει Όταν Φεύγουν οι Μουσικοί; Μελέτη Περίπτωσης ενός Προγράμματος του Jessie's Fund για την Ανάπτυξη των Δεξιοτήτων και της Αυτοπεποίθησης των Εκπαιδευτικών

Tom Northey

Περίληψη: Αυτό το άρθρο περιγράφει ένα πρόγραμμα που υποστήριξε το *Jessie's Fund*, μια βρετανική φιλανθρωπική οργάνωση που υποστηρίζει παιδιά μέσω της μουσικοθεραπείας και της δημιουργικής μουσικής εργασίας. Το πρόγραμμα πραγματοποιήθηκε στο χρονικό διάστημα μεταξύ Ιανουαρίου και Ιουλίου του 2012 με συμμετέχοντες το προσωπικό και τους μαθητές ενός ειδικού σχολείου στη βόρεια Αγγλία. Το άρθρο περιγράφει συνοπτικά το πώς προσφέρεται η μουσική σε ειδικά σχολεία στη Βρετανία, και παραθέτει μερικές από τις προκλήσεις που έχει αντιμετωπίσει το *Jessie's Fund* στην προσπάθειά του να επηρεάσει τον τρόπο με τον οποίο τα σχολεία εφαρμόζουν το αναλυτικό πρόγραμμα της μουσικής για παιδιά με σύνθετες ανάγκες. Το 2012 το *Jessie's Fund* συνεργάστηκε με ένα ειδικό σχολείο στη βόρεια Αγγλία για το σχεδιασμό μιας νέας προσέγγισης η οποία επικεντρώθηκε στις ανάγκες ανάπτυξης του προσωπικού. Κατά τη διάρκεια έξι μηνών, οι μουσικοί του *Jessie's Fund* επισκέφθηκαν μέλη του προσωπικού ανά ζεύγη, με σκοπό να βελτιώσουν τις δεξιότητες και την αυτοπεποίθηση των μελών για τις μουσικές συνεδρίες που πραγματοποιούν με τους μαθητές τους. Το πρόγραμμα ήταν πολύ πιο αποτελεσματικό από προηγούμενες δραστηριότητες που έδιναν ρόλο «ηγέτη» στο μουσικό, και είχε σημαντικό αντίκτυπο σε ολόκληρο το σχολείο. Αυτό το άρθρο περιγράφει το πρόγραμμα και την ανταπόκριση του προσωπικού που συμμετείχε σε αυτό, και αναφέρεται στο πώς το *Jessie's Fund* προτίθεται να χρησιμοποιήσει αυτή τη μαθησιακή εμπειρία στη διεξαγωγή μελλοντικών προγραμμάτων.

Λέξεις κλειδιά: μουσική, παιδιά, ειδικές ανάγκες, σύνθετες ανάγκες, ειδικό σχολείο, συμβουλευτική, εκπαίδευση προσωπικού

Ο **Tom Northey** είναι ο Υπεύθυνος του Προγράμματος Soundtracks του *Jessie's Fund*, ενός εγγεγραμμένου φιλανθρωπικού οργανισμού στο Ηνωμένο Βασίλειο που μέσω της μουσικής βοηθά παιδιά με πρόσθετες και σύνθετες ανάγκες. Το *Jessie's Fund* δουλεύει με παιδιά σε κέντρα περίθαλψης ασθενών τελικού σταδίου, σε ειδικά σχολεία και σε άλλα πλαίσια σε εθνικό επίπεδο, προσφέροντάς τους μουσικοθεραπεία και ευκαιρίες για τη δημιουργία μουσικής.

Email: tom@jessiesfund.org.uk

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Συγκίνηση, Ενσωματωμένος Νους και οι Θεραπευτικές Πτυχές της Μουσικής Εμπειρίας στην Καθημερινή Ζωή

Dylan van der Schyff

Περίληψη: Η ικανότητα της μουσικής να λειτουργεί ως μια δύναμη για βιο-γνωστική οργάνωση εξετάζεται τόσο σε κλινικά όσο και σε καθημερινά πλαίσια. Δεδομένης της βαθιά ενσωματωμένης φύσης των θεραπευτικών ανταποκρίσεων στη μουσική, οι γνωστικές προσεγγίσεις φαντάζουν ανεπαρκείς για την πλήρη επεξήγηση της συγκινησιακής δύναμης που έχει η μουσική. Ως εκ τούτου, εξετάζεται μια ενσωματωμένη προσέγγιση, όπου η συναισθηματική-συγκινησιακή ανταπόκριση στη μουσική συζητείται στη βάση των πρωταρχικών σωματικών συστημάτων και των έμφυτων περίπλοκων ικανοτήτων αντίληψης του ενσωματωμένου ανθρώπινου νου. Προτείνεται ότι μια τέτοια προσέγγιση μπορεί να επεκτείνει τη γνωστική σκοπιά – η οποία υποστηρίζεται από μεγάλο μέρος της σύγχρονης μουσικής ψυχολογίας και της φιλοσοφίας της μουσικής – κατευθύνοντάς μας σε μια σύλληψη του μουσικού νοήματος που έχει τις απαρχές της στις αρχέγονες αλληλεπιδράσεις μας με τον κόσμο.

Λέξεις κλειδιά: μουσικοθεραπεία, μουσική και νόημα, ενσωματωμένη νόηση, μουσική και συναισθήματα, ενσωματωμένη αισθητική, μουσική στην καθημερινή ζωή

Ο Dylan van der Schyff απέκτησε μεταπτυχιακό τίτλο Ελευθέρων Σπουδών από το Simon Fraser University (Vancouver, Καναδάς) και σήμερα σπουδάζει μουσική ψυχολογία στο University of Sheffield (Ηνωμένο Βασίλειο). Η έρευνά του εστιάζει στη φύση του μουσικού νοήματος σε συνδυασμό με τη βιολογία, τον πολιτισμό και την ανθρώπινη εμπειρία. Ως εκτελεστής (drums/κρουστά) και παραγωγός, ο van der Schyff έχει εμφανιστεί σε περίπου εκατό ηχογραφήσεις που καλύπτουν τα είδη της τζαζ, της ηλεκτροακουστικής, της αυτοσχέδιας, της πειραματικής και της νέας μουσικής. Ο van der Schyff διδάσκει μουσική στο Capilano University και παραδίδει μαθήματα που αφορούν το σύγχρονο πολιτισμό στο Vancouver Community College.

Email: dbvanderschyff1@sheffield.ac.uk

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Πληροφορίες και προδιαγραφές

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Για περισσότερες πληροφορίες σχετικά με τις προδιαγραφές υποβολής άρθρων, την κατοχύρωση πνευματικών δικαιωμάτων, καθώς και τη φιλοσοφία του περιοδικού, επισκεφτείτε τον ιστοχώρο του *Approaches*: http://approaches.primarymusic.gr

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Information and guidelines

Approaches is the first Greek online journal which is dedicated to the fields of Music Therapy and Special Music Education.

Approaches is a biannual electronic publication and it is accessible to anyone free of charge. It is a pioneer action in Greece which is actively supported by the Greek Association of Primary Music Education Teachers (GAPMET).

The vision of *Approaches* is the systematic development and advance of scientific dialogue, the fertile connection of theory and practice, as well as the information of the broader audience through the publication of articles and research relevant to Music Therapy and / or to Special Music Education. Through the journal's website everyone can also be informed about upcoming events (e.g. conferences and seminars), search a range of relevant links, as well as register to the mailing list and receive the Newsletter of *Approaches*.

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