

music therapy in progress



12TH EUROPEAN MUSIC THERAPY CONFERENCE, EDINBURGH 2022

book of abstracts

edited by

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BAMT BRITISH ASSOCIATION
FOR MUSIC THERAPY



**Queen Margaret
University**
EDINBURGH

#emtc2022

The 12th European Music Therapy Conference

#emtc2022

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How to read the Book of Abstracts

Grouped per presentation type, the abstracts are organised alphabetically according to their title. You can use the headings and the search function to navigate the Book of Abstracts online. In line with the emtc2022 sustainability commitment, no print copies of this book will be offered. If you need any help with accessing the abstracts, please let us know: emtc2022@bamt.org

Taking place between 8th and 12th June 2022 at Queen Margaret University Edinburgh, the emtc2022 conference marks the 30th anniversary of European music therapy conferences offering a wonderful opportunity to reflect on the past, the present, and the future of the profession.

Conference ethos

In Scots, to 'shoogle' means to shake... and this resonates with the ethos of the emtc2022 conference. Our intention is to create a playful, yet rigorous, space where we can shoogles and be shoogled! We hope the conference's exciting programme brings diverse and radical perspectives which may disrupt existing notions, practices and methodologies. The conference's call to 'disturb' underpins our commitment to diversity, accessibility, and sustainability.



Diversity

We stand behind the #BlackLivesMatter movement and are consciously making strides towards our Equality, Diversity, Inclusion and Belonging goals around disability and ableism, LGBTQIA+ and all other forms of oppression.

The emtc2022 organising and scientific committees are committed to embedding diversity through all aspects of the conference. We have worked openly to recognise our own privilege and power and have attempted to actively create space for the voices and persons who have lived experience of marginalisation and discrimination within music therapy.

The conference theme invites us to question assumptions and traditional ways of being music therapists and providing music therapy. The content supports critical reflection in all aspects of diversity and challenges normative frameworks in every facet of music therapy practice, research and pedagogy.

During the conference we will:

- offer a safe space for everyone to reflect on their allyship
- challenge dominant narratives
- highlight individual responsibility
- work together to empower others through our language and create a diverse programme of events and presentations to reflect a broad range of lived experience
- acknowledge our own responsibility

We pledge to:

- actively listen
- take on board all types of feedback and respond appropriately
- try to be the change
- apologise when we make mistakes and do the work to understand why those mistakes happened in the first place

We will get things wrong. We have in the past. It is everyone's responsibility to work together to ensure every voice is heard so we ask you for your help to get this as 'right' as we possibly can.

Accessibility

We pledge to make the conference as accessible as possible. The hybrid nature of the conference, with the opportunity to attend either online or in-person, means that delegates can access the conference from anywhere in the world.

British Sign Language (BSL) translation and live captioning will be available for those who need it. Online content and presentation slides will be suitable for screen readers, and presenters will be encouraged to use minimum font size and spacing so that visual materials are as dyslexia friendly as possible.

For delegates attending in person, the conference and social activities will take place in fully accessible buildings with clear signage and there will be colleagues available on hand if anything further is required. Delegates will have access to a variety of other spaces too, such as quiet spaces and creative spaces.

We appreciate that the full programme with many coinciding presentations and workshops can create a sense of overload. Please take the conference at your own pace. Transcripts and recordings will be available for as many of the presentations as possible, so that you can digest the material afterwards in your own time.

We are open to dialogue and are keen to learn from your experiences. Please do get in touch at any stage regarding the accessibility of the conference and we will endeavour to make any adjustments needed as soon as possible.

Sustainability

We pledge to embed sustainability into every aspect of the conference. We endeavour to do this by reducing waste, recycling, promoting active travel and encouraging green transport. We minimise the use of paper by valuing digital communication and encouraging the use of reusable bottles/cups. We seek green catering options and ethical supply chains. As a hybrid conference, we reduce unnecessary travel whilst maximising attendance and accessibility. Through our actions and our thinking, we strive to raise awareness of themes of sustainability in the arts therapies across Europe.

Editorial by the emtc2022 chairs



"When I was young, people used to say to me: Wait until you're 50, you'll see.
Well, I'm 50. I haven't seen anything!"

Eric Satie

Editorials can be an opportunity to express an idea, to bring a theme into focus, to pose a question. For conference organisers, it might be a chance to convey a 'vision' for the conference, to use a particular position to, hopefully, inspire. Perhaps you might like some insights, something to whet your appetite, get you thinking, wondering. But the process of considering what the emtc2022 conference should be 'about' led us to questions about who it is that determines these things, how they are decided, and why?

As a profession and discipline, music therapy is made up of structures, hierarchies, identities: learners and educators, therapists and clients, experienced and newly qualified therapists, published authors and new researchers. We are in a time where these structures are being critically questioned and explored, perhaps more than ever. Issues of disability, race, culture, gender, sexuality, accessibility, and inclusion cannot be addressed by paying mere lip-service. These issues, alongside the dramatic social, political, health and humanitarian changes that Brexit, Black Lives Matter, COVID-19 and, more recently, the war in Ukraine have brought to communities and society more generally, have coloured the spirit of the conference since the early days of its planning. The organising committee endeavoured to develop this conference as a step towards challenging assumptions and exploring alternatives, in these areas and beyond. Hence the call to 'please disturb', and our use of the Scottish word, 'shoogle', meaning *to shake*.

Indeed, this call also underpinned the fundamental work of the scientific committee which involved reviewing 441 abstracts and curating the conference programme. All abstracts were peer-reviewed anonymously and their resonance with the conference ethos and its intention to 'disturb' existing notions, practices and methodologies was a key review criterion. The review process led to a rich and varied conference programme with numerous roundtables, workshops, posters and spoken papers as well as an 'other' presentation category which was defined by the respective presenters.

Given the turbulent times we are living in, it seems fitting that emtc2022 invites us all to shake things up. To ask questions, including questioning what questions we need to be asking. We hope it moves us all, openly and creatively, to take steps forward as a profession. As we mark 30 years since the first European Music Therapy Conference in the UK, we invite you to join us as we look back, but crucially, as we move forward as a profession. Welcome to this 30th anniversary conference and happy shoogling!

Philippa Derrington

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Claire Flower

Scientific Committee Chair
Chelsea and Westminster Hospital NHS Foundation
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Foreword from the EMTC core board



“music therapy in progress: please disturb”. What a wonderful title for an international conference for music therapy!

This title encourages us to look “on the other side of the fence,” to leave our “comfort zones” of approaches, theories and assumptions. It invites us to learn from each other, to develop further. It dares each of us to question constructively what we always thought was set as given and to open up for new ideas, for international and personal collaboration, communication and cooperation.

The title of this conference and what it suggests resonates with what the European Music Therapy Confederation (EMTC) has formulated as its mission statement. The EMTC offers an opportunity for international discussion and further development of music therapy in Europe. The member associations of 32 countries are active in promoting the development of professional practice, exchange, and collaboration. The EMTC aims to nurture respect, understanding and communication between and among European music therapists.

The EMTC was originally established as the European Music Therapy Association in 1991 and has been pursuing its aims for 30 years. Since the first European Conference in Cambridge in 1992, music therapists across Europe have come together to share knowledge and experiences with each other in conferences of high quality, profiting from this unique opportunity for professional development. During the conference in Edinburgh 2022, we will celebrate the 30th anniversary both of the EMTC and the European Music Therapy Conference, supporting the profession and broadening knowledge to develop it further.

The Core Board of the EMTC welcomes you to the European Music Therapy Conference in Edinburgh. We wish you fruitful encounters, meaningful insights, and new ideas to support your work! Yes, we would like to repeat: “music therapy in progress: please disturb!”

Esa Ala-Ruona
President

Alice Pehk
Vice-President/Treasurer

Melanie Voigt
Vice-President/Secretary General
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Welcome from the British Association for Music Therapy



The British Association for Music Therapy (BAMT) is delighted to host the 12th European Music Therapy Conference 'Music Therapy in Progress: please disturb' at Queen Margaret University Edinburgh. We hope that the conference will bring together Music Therapists from across Europe and from further afield to celebrate this transformative clinical intervention.

Our thanks go to the conference Chairs: Dr Philippa Derrington, Dr Giorgos Tsiris, Luke Annesley, Dr Claire Flower and to all of the Conference Organising and Scientific Committee members. Together with Usha Aravinth and Jonathan Cousins-Booth from BAMT, this group has worked with immense dedication to make the conference happen against the backdrop of uncertainty caused by the Covid pandemic. This work has been supported and informed by strong sub-committees which have provided invaluable insight and recommendations to ensure the conference is as effective as possible - their enthusiasm, tenacity and commitment has been outstanding.

Our appreciation also goes to all those who are presenting at the conference. Each and every one of you is contributing to the advancement of the profession, and improving the knowledge base which demonstrates the immense importance and efficacy of Music Therapy.

Since the last EMTC conference in Aalborg in 2019 the Covid pandemic has devastated the world. It has been incredible to witness and support the Music Therapy community as it has responded creatively, effectively, and with determination, to continue to provide as much care, support and treatment as possible. Music Therapists have successfully developed their practice to provide effective online and other provisions which have allowed so many people to access the Music Therapy they need. In addition, vital new services have been developed for those affected by Covid. All such work has added to the clinical, caring and support services available throughout the pandemic and in its aftermath.

In 2020, following a survey of BAMT members and the subsequent publication of [BAMT's Diversity Report](#), there has been the crucial need for us all to look critically at Equity, Diversity, Inclusion and Belonging within Music Therapy and to work towards improvement and change. We are delighted that these fundamental issues will be addressed within the conference and seek to increase the momentum and opportunities for effective changes to be made within the profession and its practice.

We hope that everyone attending in person and online will enjoy the experience of connection; benefit from professional conversations, discussions, and the sharing of research; and be both challenged and reaffirmed in their clinical and professional practice. Together we can celebrate the work in progress of Music Therapy and be disturbed, renewed and re-energised in order to step forwards and forge a stronger profession able to serve even better the many individuals and communities who can benefit from our work.

Eleanor Tingle

Chair, British Association for Music Therapy

Andrew Langford

Chief Executive, British Association for Music Therapy

Andrew@BAMT.org

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sponsors and exhibitors

We are delighted to have the following sponsors and exhibitors supporting the 12th European Music Therapy Conference.

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Warm thanks to Paul Dowling at
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Music Therapy in the UK Today: a weekend conference exploring current research and clinical practice.

Organised by The Music Therapy Charity and the Music Therapy Department at Guildhall School of Music & Drama from 29-30 October 2022.

The conference will be held at Guildhall School of Music & Drama, London. The programme will comprise keynote presentations, shorter research papers by recipients of MTC grants and live clinical discussion/workshop sessions given by music therapists associated with Guildhall School. The conference fee will include lunch on Saturday, tea/coffee and a drinks reception on the Saturday evening. The conference will close around 2pm on Sunday.

Tickets are available on EventBrite and include early bird and student rates:

<https://www.eventbrite.co.uk/e/music-therapy-in-the-uk-today-tickets-335304664277> All enquiries should be addressed to the Conference Secretary, Nicola Barton, info@musictherapy.org.uk

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AN EVENING WITH MR HANDEL



Thursday 3rd November, 2022
at 7.00pm

*The Grosvenor Chapel,
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Tickets will be available shortly on our
website: www.musictherapy.org.uk

Full details to be announced soon

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July 24 - 29, 2023
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wcmt2023.org

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WCMT2023

The background of the poster features a person with a backpack standing on a rocky outcrop, looking out over a vast, turquoise lake surrounded by snow-capped mountains under a cloudy sky.

Spotlight presentations



The artistry and creativity of knowledge: The rhythm, movement and flow of authentic being

Brendan McCormack

Queen Margaret University, UK

The connections between the arts and research are well established and arts-based research is a well-established methodology. In addition, the use of arts-based methods in mainstream programmes is more common. However, a key challenge for all of us as researchers is the adoption of integrated and authentic approaches to knowledge generation and translation, set within a philosophy of respect for all persons. Whilst there is greater acceptance of co-design as a legitimate approach to generating knowledge it is still the case that research methods are often devoid of creative processes – reinforcing the suspicion with which these methods are treated by mainstream researchers. There is a need to disrupt and disturb normative thinking and practice in research. This spotlight presentation will articulate the holistic knowing that is at the heart of person-centred creative practice and in doing so will make the case for associated knowledge frameworks to also be holistic and authentic. The key themes of ‘movement and flow’ will be illustrated and energised through the use of poetry, imagery and practice examples.



Challenging representation in music therapy

Nate Holder¹, Jamal Glynn²

¹Royal Northern College of Music, UK; ²St Ann's Hospital, Trinidad and Tobago

This spotlight presentation intends to explore the impact of the recent 'Black Lives Matter' protest in considering the growing importance of the methods and practice of teaching in music education and music therapy. A much-debated question is whether the role of racially minoritized people within music education and music therapy can benefit from a shift in a revised pedagogy framework? What is less clear in working with and within racially minoritized communities is the access to music education and music therapy. How can understanding the various perceptions of positionality and historically embedded whiteness that currently exist in music education and music therapy prevent best practice from enriching the vulnerable lives of those who need it? Therefore, in this presentation, we challenge the music therapy community to further understand how cultural differences and lack of representation may hinder practice. Thus, drawing upon personal experiences in the United Kingdom and Trinidad and Tobago and contemporary writings on music therapy and whiteness.



Hear how the music heals

Karan Casey

Ireland

I will discuss ideas around my role as an Irish female traditional and folk singer. Much of my arts practice PhD research focused on the performance of social justice. The key questions I keep coming back to are: does singing create a potent political experience? Can the singing of social justice songs be a political act and effectively create political agency within the community or put more simply can songs change people's attitudes? In responding to these questions, I will sing my way through some ideas and discuss them with Luke Annesley.

Workshops

A radical un-workshop

K Maya Story

United States Veteran Administration (VA) Center for Health Information and Communication (CHIC), USA

This un-workshop is based on the premise of an un-conference. The purpose is to foster ideas, conversation and engagement between attendees, to have fun, and to be receptive to what emerges from the group. A facilitator/ moderator will hold the structure and space for the experience. A general topic will be provided as a starting point. This topic will relate to the conference title: “music therapy in progress: please disturb.” Any subtopics and methods of engagement (e.g., experientials, discussion) will be created by attendees at the beginning of the meeting. Attendees will be able to explore several subtopics during the workshop. Games, music improvisations, art-making, and serious conversation, are all potential experiences in an un-workshop. The culture is designed to be encouraging, participatory, and not passive.

The magic of an un-workshop is that the structural design is flipped. Ground rules are provided, but the topic, engagement and overall experience emerges from the attendees. The underlying premise is that the most knowledgeable person in the room may be the individual(s) attending the session, rather than the facilitator. Attending this workshop requires some desire to engage, trust that you will learn something new, and trust that the facilitator will not let the room spiral into uncontrolled chaos (unless it is planned, fun chaos of course). The leader for this un-workshop has experience attending and facilitating un-conferences and un-sessions.

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Body, voice, movement and space – the essence of clinical improvisation

Bettina Eichmanns

Musiktherapie Eichmanns, Germany

In some clinical contexts, clients are physically not capable of manipulating or playing instruments. They may be afraid of them (in psychiatry, for example). Instruments may form a barrier between client and therapist, or cannot be brought into the setting for hygienic reasons (intensive care). The sound stimulus they produce could be too intense, or otherwise inappropriate in fragile clinical situations, such as coma, low awareness states (Gustorff & Hannich, 2000).

Rolando Benenzon, 70 years ago, embarked on creating an approach called Benenzonian Nonverbal Therapy (TNVB), which is not so much a clinical method, but rather a systematic learning process aimed at facilitating the creative use of our intrinsic nonverbal communication channels. In fact, Benenzon calls it a “philosophy of being a therapist” that follows a specific ethical framework: the “ethics of the non-verbal” (Benenzon, 2017). The European music therapy community is less and less familiar with his model: he has published very little in English; he draws on the nonverbal sphere in his teachings (by teaching only in person/ through his certified students); and he is critical of research on his own clients.

This in-person workshop introduces participants to the core aspects of Benenzon’s approach, through a series of experiential modules suitable for music therapists from all clinical backgrounds. Instruments or other materials are not required, as we will work on ourselves as our most precious instrument, through a holistic - or using Stern’s term “a-modal” (Stern, 2000) - improvisation exercise, coming from the unconventional – and by now potentially disruptive – voice of one of the first generation music therapy pioneers who has been active from the 1960s until today.

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DrumPower, a group music therapy program to prevent violence: Lively breaks in everyday school life

Andreas Wölfl

Freies Musikzentrum München, Germany

DrumPower is a music therapy program for violence prevention, social integration and personal empowerment developed in a clinical context and elaborated for preventive work in schools and social institutions. Regulation of affect and aggression, resolution of conflict situations, avoidance and resistance of threatening situations, and constructive handling of aggression, can be produced and practised musically within a thematic framework. Expressing aggressive qualities in improvisational drumming is helpful to distinguish between destructive and constructive forms of behaviour. Within the group, it is possible to work on constructive forms in dealing with aggression. The program was examined and evaluated in different studies.

This workshop will give an introduction into the methodological structure of the DrumPower program. In addition, new focal points from practical work with special target groups, such as traumatised young men or refugees, will be presented. Some interventions for group cohesion, affect regulation and handling of aggression and conflicts as well as forms of workshop performances are practised in selected exercises.

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Empathy versus offending, aggression and bullying: Understanding empathy development and measurement in music therapy

Stella Compton Dickinson¹, Darrick Jolliffe², Geert Jan Stams³

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Empathy is a psychological concept that involves the experience and understanding of the other person's emotions (Hogan 1969). Low empathy is a risk factor for aggression and violent behaviour. Jolliffe and Farrington's (2006) research suggests a plausible basic relation between low empathy and antisocial behaviour, but this is not as simple as common sense assumes. There are various aspects of empathy. Affective empathy indicates emotional resonance, triggering feelings that are similar to those of the other person, hence it is a crucial aspect in relationally based music therapy. Cognitive empathy is primarily attributable to processes in the prefrontal cortex and contains perspective taking with regard to the other person's motives and intentions. Disturbingly it can be strategically used as a camouflage to reach a person's own goals. Antisocial individuals can have deficits in empathy, even when confronted with scenarios where others suffer from major injuries or pain. These deficits may also be an issue for Music Therapists when working with people who have been violent or if they themselves are suffering compassion fatigue or burn out.

Geert-Jan will describe his on-going meta -analyses in measuring empathy in normal and specific offender groups in child and youth welfare. Darrick will provide an overview of research techniques explaining how to use the Basic Empathy scale in clinical practice. Stella will explain how and why developments in empathy have been measured in music therapy for people with serious mental illness. We will together discuss and explore the meanings and challenges in developing empathy.

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Enabling paths into speech: Challenging conventions in developing an innovative music therapy toolkit for children with selective mutism

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Selective Mutism (SM) is a serious anxiety disorder that affects some children when they begin school (Toppelberg, 2005). The long-term impact of the disorder, if untreated, can include complex, debilitating mental health conditions. Usual presentation is lack of speech in educational settings, contrasting with confident speech at home. Incidence is estimated at around 0.7% (Bergman, 2002) but can be three times higher for children with immigrant backgrounds (Elizur, 2003). Care pathways indicate manualised behavioural treatment as a first-line intervention for SM. However, strong evidence suggests Music Therapy can have a powerful impact (Jones, 2012; Jones and Odell-Miller, *at review*) but increased awareness of SM and our potential therapeutic role is needed.

The aim of this interactive, experiential workshop is to help resource Music Therapists to step onto the current therapeutic landscape for SM. We will begin by discussing the key features of SM and dispelling some common myths. The main components of a theoretical framework of Music Therapy for children with SM will be shared and explored including the role of physical self-expression, humour and enabling speech generalisation through transdisciplinary practice. We will interrogate the usefulness of many 'normal' therapy boundaries when working with children with SM and see what happens when you purposely challenge conventional practice.

The session will use clinical case examples and experiential techniques to workshop and illustrate some key elements and give practical support to clinicians interested in working with children with SM.

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Encouraging writers: Introduction to scientific publication as exemplified by the “Musiktherapeutische Umschau”

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Background: The editors of the German scientific journal "Musiktherapeutische Umschau" (MU) invite authors, potential authors, reviewers and editors of other journals, as well as interested readership, to learn about the MU publishing process and partake in a discussion forum. **Objective:** We will introduce editorial board work providing information regarding the scope of the journal. Different publication formats will be presented. Our goal is to encourage interested scientists and practitioners in publishing research articles, clinical reports and case studies which are accessible to the greater music therapy community. **Methods:** Presentations, practical work in small groups, discussions. **Results:** Participants will find answers to the following questions: What is the profile of the journal and which types of articles are accepted? What to do before starting to write? What are the various requirements for different publication formats (e.g. original work, document)? What is involved in the process of initial manuscript submission to the final publication of an article (e.g. peer review)? What can I do to improve my manuscript and increase chances of getting published?

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Expressing disturbing emotions: Emotional expression through Rap Music Therapy

Laurien Hakvoort

Artez University of The Arts, The Netherlands

Hip-hop music is very popular among adolescents and (young) adults and can support them in expressing emotions that might not be accepted to share in public (like anger, rage, jealousy, grudge). This workshop supports music therapists in allowing their clients to express these emotions. It offers participants practical skills to apply rap and hip hop as a musical tool for emotional expression and behavioural adjustment.

Rap is one of the (major) elements of popular music. Sometimes, rap music is perceived as “bad music” since it combines explicit texts with very strong beats. Nevertheless, this music can be a very good starting point to support clients to learn to express their emotions in a therapeutic treatment.

Rap Music Therapy is a music therapy approach with the emphasis on the musical elements of rap music, such as its specific rhythm, dynamics and expression. Rap Music Therapy aims to bypass text analysis of rap songs, to engage clients in musically expressing themselves. Treatment goals that are targeted with this approach are related to improving self-esteem, self-confidence, a (canalised way of) expression of emotions, as well as behavioural change, anger-management and stress-regulation. Rap Music Therapy consists of seven steps: (1) performing a rap technically; (2) mastering the rap song musically; (3) recording; (4) expressing one’s own lyrics; (5) composing one’s own accompaniment; (6) creating one’s own rap song; (7) termination or continuation of Rap Music Therapy. These steps can easily be adjusted to the expertise and limitations of the client as well as the music therapist.

Although the Rap Music Therapy approach is developed mainly within the context of forensic psychiatry, it can also be useful for other client populations who struggle with the expression of ‘disturbing’ emotions in an acceptable manner. In addition, it often meets the motivational needs as well as musical interests of the client(s).

This workshop is intended for music therapists with limited expertise or skills with rap and hip hop but realise the potential of rap for the treatment of their clients. It will provide the participants with first experience of a Rap Music Therapy approach.

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How privileged are you? A workshop to expose privilege, oppression and otherness

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Oppression takes many different forms, and its purpose is to uphold wealth and power to those who sit at the top of the privileged system (Freire, 1970, 2016). To truly understand how oppression works, it is vital that we pull apart the entire system to see how oppressive structures have been assembled in the first place and maintained. In this workshop, several techniques are used to physically highlight our privilege, to understand how we as individuals have participated in a system which supports oppression and its ideologies. With the use of a 'Privilege Walk' (Young, 2006) and a 'Web Chart' technique (Bishop, 2015), the facilitators will take the participants through a journey exploring oppression and embodying privilege: questioning how they are interlinked to maintain the status quo of today's society. The workshop will support participants in identifying their dual roles as oppressors and oppressed in a complex matrix.

The facilitators will share their rich, global lived experiences, spanning three continents and historical contexts to frame the practical elements of the workshop. We will provide opportunities for participants to deeply reflect upon their own life experiences, in a safe and contained environment, and disrupt limiting practices and perspectives in music therapy practice (Fansler et al., 2019). The path to becoming a true ally in the face of oppression can only start with introspection and recognition of our own complicity in its preservation. This workshop endeavours to start that journey.

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I'm sorry, what do you do?

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Imagine you are in a busy multi-disciplinary team meeting, there are many different professionals and perhaps a client and their family member too. You offer your opinion based on observations in music therapy and are perhaps not that surprised when someone interrupts you - "I'm sorry, what do you do?" You know they know you are a music therapist and you thought you had explained your role before and yet still the age-old question - what do you do?

This is a question we have to answer on a regular basis. It's amazing how many times this can come up over the course of your working day. I've been asked this by managers, cleaning staff, clients and their family members. But how to answer it? That's the question we will be looking at. It's important to be able to answer quickly and succinctly and this workshop has been designed to help you not only practice and think about what you want to say but also analyse and consider what is needed so that you don't have to think about it when asked next time. We'll start with a quick round up of what we think we need to say in given scenarios and then move onto exercises to try out our new spiel.

Inclusive teaching practices in music therapy clinical training and supervision

Melody Schwantes

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Inclusive teaching practices have been employed at many universities in order to reach a diverse spectrum of learners. Inclusive teaching is especially necessary to create classroom environments that are supportive of students with intersecting racial, gender, cultural, disability, economic, social, and cultural backgrounds. Inclusive teaching involves creating a high trust and low stress environment, while still maintaining high expectations of students. It is an iterative process and practice that involves assessment, curriculum, and pedagogy and includes: a) selecting course content that recognizes diverse scholars and learners, b) designing course content for accessibility, c) reflecting on pedagogy and social location as an instructor, d) setting explicit expectations, and e) establishing and supporting a course climate that supports belonging. For music therapy clinical trainers and educators, inclusive practices are relevant and important to supporting diverse clinicians to meet a diverse clientele. This workshop will cover specific inclusive curriculum and pedagogy applications to support music therapy trainees in the classroom and in clinical supervision. Participants will leave with specific tools they can utilise as well as an abundance of resources for further development.

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Listening to yourself: Self-care for music therapists

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This workshop will offer a 360° view on how we look after ourselves as music therapy practitioners in order to ensure the best possible outcomes and the sustainability of our practice. By building on participants' insights and experiences around self-care, we will explore some strategies and practices that can help us take an active role in protecting our wellbeing when working therapeutically. We will also look at managing our external working environment as an important part of general life-management and self-care between sessions. We will consider cognitive mechanisms and the psychological impact of therapeutic risks, as well as relevant neuropsychological and somatic aspects. Some themes that will be covered include:

- The consequences of interactions between therapist and client – when and why the act of helping can sometimes hurt the therapist
- Self-supervision and being mindful of body sensations, mental images and behaviours that might arise in our responses to the client
- General problems of the workplace that can contribute to burnout and how these might be managed

The workshop will offer practical strategies and exercises based on:

- Mindfulness and body-based practices
- Guided visualisation and self-reflection
- Guided deep listening to music and creative reflection through imaging, drawing or writing
- Music improvisation
- Intention setting and action planning

The authors developed this integrative workshop, conceived as a collaboration between music therapy and life-coaching practices, during the COVID-19 pandemic as a response to the need for support programmes which included both therapeutic considerations and more goal-oriented strategies.

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Movement data and you: How motion capture, video cameras, and smart watches can revolutionise music therapy research and evaluation

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Human movement is a rich and complex source of information about our social, psychological, and neurological functioning. Although we are naturally skilled at decoding this information in our everyday and therapeutic social interactions, it is only in recent decades that advances in technology and computation have allowed researchers to quantify aspects of human movement (particularly dance movement) which reveal our abstract qualities such as personality, empathy, emotion and depression. Movement research has further shown that common micromovement patterns can serve as biomarkers for autism spectrum disorders, Parkinson's disease, and other neurological disorders. Although music-based interactions that permeate music therapy are embodied, and music therapists instinctively 'read' and respond to information based on their clients' bodily movements constantly, the role of movement data in music therapy research has traditionally been limited to contexts in which movement rehabilitation is the focus of therapy (e.g., for clients with stroke, Parkinson's, or acquired brain injury). The aim of this workshop is to for participants to interactively explore some of the latest in human movement research and its relevance to music therapy contexts, learn about a wide range of low- to high-cost methods for recording movement data, and develop participants' understanding of basic concepts in complex movement analysis (no maths required!) Modalities of the workshop will include presentation, demonstration, and both large and small group discussion.

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Music production as therapy in the digital era: Producing 'live' and theoretical implications

Yuval Bairey

Israel

Music therapy nowadays focuses mostly on music in psychotherapy and music as therapy in various forms (e.g. free improvisation, song writing and community music therapy). This workshop will explore the field of music production in a therapeutic context. We will explore the process of “live” musical production and its different working options in therapy, using modern sounds to create beat, base line, harmonic development, melodic lines, voice audio and editing the piece to create feel and dynamic interest. Furthermore, we will discuss the ways musical production can be implemented in therapy and some of its benefits. The usage of computer programs, midi controllers and sound production tools speak the same ‘language’ of nowadays digital times and pace. Using music production in therapy is ‘cool’, fun and raises the motivation of patients to be involved and ‘work’ in therapy. The recording studio is the artist’s most sacred and therapeutic space. His production decisions are extremely meaningful to his self-creation and inner processes. Musical production also involves processes of focusing versus elimination in the production process (musical and verbal), the development of self arrangement, commitment, persistence and the process of expressing and externalising the self to the outer world. The inner work processes in musical production have great implications on the self as a whole, and producing music enables storing ideas and working on “long term” processes inside music.

Music therapy for women: Approach from voice, sound and movement to the vital processes of women

Carmen Miranda Pereda

Carmen Miranda Pereda Huella Sonora Musicoterapia, Spain

From the motto of the conference, "please, disturb", we present an untraditional approach to the female vital processes, "shaking" in a certain way the traditional perspective on them and offering new perspectives and approaches from music therapy. Menarche, menstruation, pregnancy, childbirth and menopause are non-pathological processes, still largely unknown, not so much in the physical-physiological part from a medical perspective, but rather in the experiential and emotional part of the women who go through them. They are processes that encompass social, economic, sexual and even violent spheres, and which continue to be invisibilised, ignored and silenced in most of their aspects.

The multimodality of music therapy offers a space of containment and understanding, to live these stages from knowledge and self-knowledge, in a healthy, active and empowered way. Understanding stages and rites of passage, accepting changes, understanding what is happening on a physical, emotional, social and spiritual level will be some of the therapeutic objectives to be considered in these interventions.

Voice, sound and movement will be the strategies used. The sound expressed from the body itself, the emotional expression of the voice, free movement... the interior and the exterior coming together, expressing themselves, connecting and converging. Music therapy can change paradigms, working for integral health and favouring the quality of life of women.

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Practice like an ally: Integrating activism in music therapy

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What does it mean to be an 'ally' for social justice as a music therapist? Increasingly, the music therapy profession is starting to sit up and take notice of systems of oppression; the ways in which all of us - our clients, colleagues and communities - are entangled in mechanisms of power and privilege. Clearly, being a 'nice' music therapist isn't going to let us off the political hook. As we acknowledge our privilege, we discover our responsibility: to stand together with the people we are working with for a future of equal opportunities and access to resources, well-being and respect. Drawing inspiration from Sara Ahmed's 'feminist killjoy', we invite delegates to explore how less visible aspects of our day-to-day practice might be reimagined for resistance. Through sharing stories, exchanging questions, ideas and playful activities, we hope to collectively infuse the various nuts and bolts of music therapy with potential for social activism.

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Strategies for success in peer-reviewed publications: Insights from the NJMT editorial team

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Disseminating our clinical and research findings in scientific journals is essential for the music therapy profession. Yet, writing a peer-reviewed article and navigating the peer review process can be challenging. The purpose of this workshop is to provide essential information on scientific article writing and on preparing a manuscript for submission, and to develop participants' understanding of what editors and reviewers are looking for.

The workshop will combine a presentation on essentials of scientific writing by the NJMT editorial team and small break-out groups to meet participants' specific needs. The presentation will cover: 1) types of articles, 2) writing style, 3) resources for non-native English writers, 4) how to structure your manuscript, 5) common reasons manuscripts are declined publication, and 6) strategies for responding to reviewers' comments. For the break-out sessions, participants will be divided into 3 or 4 groups according to their level of experience with peer-reviewed publications and members of the NJMT team will be assigned to work with each group to address specific questions and facilitate group discussion.

TEAM-GIM: A creative “disturbing” group method for team building

Alice Pehk

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TEAM-GIM is an interactive group imagination process, which is indicated from the actual needs of the team/institution and initiated by specially chosen music examples. TEAM-GIM provides a unique cooperation experience by observing and experiencing the actual situation and the intentions and potentials of the team and relationships between team members in a creative and safe mode. The sessions are provided for institutions and organisations that have an aim of development, change and/or integration of new members or leaders. The intention of the training is to “disturb” the team’s hidden patterns and to gain “therapeutic changes” in the institutions’ everyday functioning.

TEAM-GIM is based on three cornerstones: the Group Music and Imagery Therapy method, the Systems Psychodynamic Approach and the Systemic Approach to Organisational Development. The organisation as a system has its own life, which is conscious and unconscious, with subsystems relating to and mirroring one another. The study of this unconscious behaviour and dynamics leads to a deeper understanding of organisational behaviour and facilitates organisational change. TEAM-GIM supports and sustains experiences in an altered state of consciousness. The imaginary process helps to bring out the unconscious intentions and attitudes as well as to show the possible hidden patterns of the team. It is “the power of the music” that makes the material that is not seen or noticed before more visible.

In the workshop, the basic principles of the TEAM-GIM will be introduced, including case-examples. A shortened TEAM-GIM-session will be provided in the group of participants.

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“The Rocky Horror NICU show”: Challenges and potentials of disturbances in neonatal music therapy. A forum theatre workshop

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Alarms abruptly go off, machines and devices are hissing and buzzing, parents are busy feeding or sleeping, infants suffer from painful procedures, and staff come and go. Disturbances, interruptions, and inconveniences are part of everyday work in the music therapist’s practice in the neonatal intensive care unit (NICU) and other hospital settings.

Some disruptions are, however, both beneficial and welcome and may create favourable circumstances for the music therapy service and the music therapist. Parents sing along, staff and students stay to observe, siblings want attention, the head of the department comes by.

Our workshop performs four challenging everyday scenarios that music therapists from many clinical settings will recognize. Instead of delivering premade solutions, we engage the audience to suggest and explore creative and therapeutically meaningful solutions to the exemplified disturbances. Based on the principles of forum theatre developed by Augusto Boal, our workshop takes an interactive and participatory format such that the knowledge and capacities of the workshop participants may be brought to bear on the exploration of viable strategies and solutions on the stage. In our workshop, spectators are transformed into “spect-actors”. By stopping the scenario at any point and replacing a character, the workshop participants may redesign the disturbances they are presented.

We aim to empower the participants and facilitate spontaneity and creativity, awareness, communication, confidence, education, problem-solving and community development. Thereby we aim to widen the horizon of therapeutic responsiveness, from the macro level of environmental circumstances to the micro level of the tiniest patient signs.

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What can I do? Action planning to promote equity in our profession (and beyond)

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When we sit in positions of privilege, we can feel stuck, not knowing how to support those who have not received the same privilege as ourselves. However, positions of privilege are positions in which we often have power to make change (Hadley, 2013). This workshop provides a space to think together with colleagues from minorities and marginalised groups about how we can progress to greater equity in our profession, meeting diversity with real – and not tokenistic – inclusion. Presenters will highlight areas of work in which we encounter barriers, lack of- or misunderstanding as a starting point from which participants can develop specific action plans; these may respond directly to the starting points, or emerge from further discussion. The aim is for participants to leave with clear and practical ways to disrupt a status quo that does not meet diverse needs, neither within the therapist population, nor the wider population.

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Roundtables

Caring for music? Gently disturbing music therapy practice, theory, research, and policy in later life and end of life settings

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We take the conference invitation to 'shoogles' – encouraging gentle disturbance of current perspectives on music and music therapy in care home and hospice settings. The discussion will be informed by emerging results from a major UK Arts and Humanities Research Council funded project called Care for Music: an ethnography of music in late life and end of life settings – a collaboration between Exeter University UK and the Grieg Academy, University of Bergen, Norway [careformusic.org]. This detailed ethnography has taken an intentionally 'shooglish' stance towards the standard perspective of researching 'music in or for care', exploring instead the nature of mutual care for music experienced and exchanged between residents/patients, staff, family and friends in care homes and hospices. The project is exploring how shared and distributed musical care can in turn allow other kinds of everyday caring to happen in particular and helpful ways. New methodological and theoretical perspectives have evolved, including how disruptions in practice during the Covid pandemic have provided an 'accidental experiment' that has helped better identify certain key aspects of caring for music.

This interdisciplinary and inter-professional roundtable will dialogue on the implications of this research and other recent studies for the practice, theory, research, and policy dimensions of musical care in later and end of life settings. Is it time for gentle disturbance of previous perspectives? Could this lead to better services and opportunities for people who care for music, and for the places where musical care matters?

Changing the dynamic: How recovery sets a new agenda for music therapy research in mental health care

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Recovery is a radical redefinition of what it means to cope and live with severe mental health problems. Recovery in mental health acknowledges that each person has their own unique journey of recovery, and it values the expertise held by each individual about themselves. As the leading vision for mental health care internationally, recovery has led to increased involvement of service users in the design and development of mental health practice and research. However, one of the biggest challenges to realising a recovery vision is that most mental health services have originally been designed to espouse the expert view of healthcare practitioners, and changing this existing dynamic requires an ongoing process of mental health reform.

Over the past decade there has been increased utilisation of recovery-oriented approaches to music therapy provision in mental health services. This is reflected through several related publications that collectively illustrate music therapy's capacity to support individuals through the recovery journey. Yet despite growing awareness of recovery-oriented practices, a situation still prevails where music therapy practitioners and researchers are predominantly setting the agenda for mental health research and practice.

This roundtable will feature the work of the Alliance for Recovery Research in Music Therapy, founded in 2017 to promote the recovery vision in the field of music therapy and mental health. During this presentation various ARRIMT projects will be outlined with a central focus on the development of the first international research platform to enable music therapy service users, practitioners and researchers to discuss ideas for recovery-oriented research in mental health.

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Clinical applications of Neurologic Music Therapy

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Clinical applications in Neurologic Music Therapy (NMT) are very versatile. This is illustrated with six short lectures as part of a panel discussion. These lectures will be on: (1) Musical Sensory Orientation Training with people with disorders of consciousness (W.L. Magee). A body of evidence supports music as a facilitator for improving arousal, consciousness and awareness after acquired brain injury. (2) Musical gymnastics for patients with Parkinson's disease (PD) (S. Gros). A structured program with pre-composed music is presented. (3) Musification (S. Mainka) is an innovative technique that uses a smartphone app for musical movement feedback. Clinical evaluations for patients with PD are shown. (4) NMT techniques for speech and language training (E. Rohde) that are applied in stroke rehabilitation in cases of severe non-fluent aphasia, speech apraxia or dysarthria. They are illustrated by case videos. (5) Auditory Perception Training for people with autism (S. Oliver). Music is used to facilitate sensory integration and optimize cognitive function. Improved brain connectivity directly assists with minimizing behavioural difficulties in autism. (6) Cognitive music-based group training (A. Engel) in cognitive rehabilitation for neurologic patients is an adventurous new approach. The workflow of a group therapy together with results on the effects of such treatment on cognitive functions is presented.

Clinical BOPulations the podcast: Recording LIVE from the EMTC

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USA

Podcasting is the practice of using the internet to make digital recordings of broadcasts available for streaming or downloading. While once reserved for radio stations and large media conglomerates, technological advancements make it possible for anyone with a computer or phone to record themselves speaking and share it to the world as a podcast. This ease of creation and consumption affords innovative opportunities in music therapy for greater engagement and connection, both professionally and clinically. Amongst professionals, educators, and students, podcasts have increased in popularity as a means to share approaches, discuss differences, and learn about current clinical practice and research trends. Within therapeutic settings, podcasts and broadcasts are also utilised to promote expression, agency, empowerment, and social interaction.

The roundtable will begin with an overview of podcasting in and for music therapy, followed by a discussion of ethical considerations when producing and maintaining a podcast. The audience will then experience a recording of an episode in which they will be encouraged to participate through listening to and exploring possible clinical uses of a song. A Scottish songwriter will be chosen to localise the discussion.

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COVID-19: Difficult disturbances or new possibilities? Navigating challenges of implementing an International RCT with people with dementia during a pandemic

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Background: The randomised controlled trial “Home-based caregiver-delivered music and reading interventions for people living with dementia (HOMESIDE)” has been running since 2019 across five countries, bringing research and practice together by supporting informal caregivers through indirect music or reading interventions. Unexpectedly at the beginning of 2020, due to the pandemic, researchers had to adapt the trial to new circumstances. **Objective:** This round table will provide different perspectives on continuing the international RCT online. It will bring the voices of country leaders, clinical trial managers and interventionists from five cultural backgrounds together, whose fruitful dialogue enabled them to collaborate in an optimal way. **Content:** The dialogue of the different cultural and dimensional voices of this large international outcome research (N=990), investigating Behavioural and Psychological Symptoms of Dementia (BPSD), quality of life, quality of relationship and cost effectiveness, will include:

- Current status of HOMESIDE, and the challenges for an RCT during the pandemic
- Permanent disturbances in the governance of the project
- Challenges and possibilities: the potential value of interventions provided during COVID-19
- RCT with the online assessment and online music & reading interventions in dementia care
- A case study illustrating the transition of the intervention from face to face to online delivery.

Conclusions: The round table will provide insights from the implementation of the international RCT during the challenging pandemic times. Solutions and questions will be provided and discussed. Main focuses are changes of the interventions, transfer of in person interventions into online delivery, and cultural differences for coping with these disturbances.

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Creating a community of care: A generative peer DEI workgroup

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We are at a time of reckoning in music therapy with respect to our field's complacency in various systems of oppression (Baines, 2013; Leonard, 2020; Norris, 2020; Scrine, 2021; Swamy & Webb, 2020). We are a peer-generated group of 6 music therapists from diverse intersectional socio-cultural locations that meet regularly as part of a music therapy peer supervision group. The gatherings comprise of a range of topics related to diversity, equity, inclusivity, and accessibility in clinical practice, supervision, academia, education and training, healthcare systems, music therapy organisations, service, and more. The group members have a shared interest in challenging various systems of oppression and existing power structures. A primary goal of this group is to utilise the diverse perspectives and philosophies of the individual members to strategically develop tools for disruption. This panel will reflect on the group's formation, structure, and sustainability within a community-minded framework. We engage in critical, cultural reflexivity and collaborative group dialogue. Our roundtable will engage the audience in dialoguing the following questions: (a) How do we understand change and how does that influence the actions/advocacy that we each take?; (b) How do our socio-cultural locations influence the way in which we interrelate with one another?; (c) How do we sustain ourselves within social justice-minded work?; (d) How do systems disrupt our work and perpetuate harm to us?; (e) What is the radical reimagining—are there other acts of resistance?

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Decolonising music therapy: What's the role of open access journals?

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Open access publishing has been rapidly developed and prioritised across disciplines and professional fields. In addition to technological advancements, this development has been driven by societal, ethical and financial considerations around accessibility and dissemination of knowledge.

This roundtable brings together the editors of four open access, peer-reviewed music therapy journals: “Approaches: An Interdisciplinary Journal of Music Therapy”, “Australian Journal of Music Therapy”, “Qualitative Inquiries in Music Therapy” and “Voices: A World Forum for Music Therapy”. Drawing on each journal’s unique trajectory and current positioning, the presenters will promote a critical dialogue regarding the role and scope of open access publishing in music therapy. Issues pertaining to culture, language, accessibility, power and diversity will underpin this dialogue alongside advancements, findings and recommendations emerging from the wider open access world (Bosman et al., 2021; Becerril et al., 2021).

In an attempt to disturb conventional assumptions around scholarly publishing, the panel presenters will consider how open access journals can play a unique role in decolonising music therapy and fostering new forms of knowledge and knowing. New collaborative and community-led publishing approaches will be discussed while considering sustainability and funding implications for open access publishing in music therapy.

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Deconstructing a clinical trial: What does experimental research disturb and what does it afford?

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Responding to the theme of this year's conference, we aim to disrupt conventional thinking about experimental research by deconstructing our taken-for-granted understanding of a pragmatic clinical trial. Our aim is to challenge the givens of experimental research by considering the informal knowledge accumulated during the implementation of a multinational randomised controlled trial. Instead of presenting our hypothesis, methods and results, we examine informal sites of knowledge creation that arose between participants and music therapists, study personnel and participating families, and between site personnel and core team members. We consider what the trial afforded above and beyond the knowledge resulting from study outcomes. Thus, we aim to examine that which is typically left unexamined, for purposes of destabilising what we tend to assume is the value of clinical trials. In so doing, we hope to gain a broader appreciation for and understanding of how knowledge arises, who uses this knowledge, and for whom this knowledge has worth.

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Demystifying the Sufi zekr [dhikr]

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The Sufi practice of *zekr* (chanting and remembrance) have been typically discussed in terms of trancing and alterity from social science perspectives. In many instances exotic, mystical, and ecstatic characterizations have reduced the diverse approaches and distinct intentions of *zekr* into misleading simplifications. This roundtable addresses this gap in understanding through a multidisciplinary conversation between zikr practitioners, a neurologist, psychologist, cognitive scientist, and ethnomusicologist. The goal of the discussion is to demystify the prevalent notions about Sufi chanting and move towards a more comprehensive understanding of the philosophy and practicality of this experiential practice. Meaningful distinctions frame this conversation and discuss *zekr* using its own terms and perspectives rooted in intention: i.e., illuminating the concept of focus-rather-than-trance; presence-rather-than-alterity; and control-over-ecstasism. Formulating this roundtable at the crossroads of the sciences, humanities and social sciences aims to illuminate this practice and its effects on the human through a holistic perspective rather than focusing on cultural particularities or disciplinary trends. The influence of this concept in M.T.O. Sufi Psychology and psychotherapy will also be discussed. Similarly, practitioners' accounts of the effects of *zekr*, as well as historical references to this subject, will be presented as points of reference for this discussion.

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Developing musical skills within music therapy education

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The development of musical skills is a central topic at many music therapy training programs. However, the number of references on this topic is limited compared to other music therapy training and education issues. The different music therapy education programs at Aalborg University have a very particular way of approaching musical skills in education, focusing mainly on ear training, musical leadership, musical instruction, accompaniment, vocal work, and musical improvisation. This roundtable aims to share some experiences from the Aalborg University Music Therapy training programme, in order to discuss both strengths and difficulties of teaching musical contents and developing musical skills with music therapy students. Each presenter will exemplify his/her practice based on practical examples and theoretical and philosophical reflections. This roundtable is intended for music therapist educators and music therapy students who wish to reflect on and discuss what and how to deal with the teaching and learning processes on developing musical skills during music therapy education.

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Developing NICU music therapy programs in Europe

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The last decade has seen a growing body of literature and research focusing on music therapy in Neonatal Intensive Care Units. This includes working with premature (Bieleninik et al., 2016) and full term infants (Shoemark & Dearn, 2015), their parents (Loewy et al., 2021) and other family members during or post hospitalisation, using a variety of techniques to support goals ranging from regulating vital signs to palliative care. In many European countries, however, music therapy in neonatal units is still in its infancy or non-existent. This round table will offer experiences and reflections from six music therapists who have developed and led music therapy programs in NICUs in Estonia, Greece, Netherlands, Norway, Spain and Wales where music therapy with this population has only been in existence for a short time. After brief descriptions about planning, development and content of each NICU program, we want to engage in a discussion -encouraging audience participation- that will include cultural considerations (Shoemark & Ettenberger, 2020), challenges and opportunities regarding sustainability and growth of such NICU music therapy programs in an attempt to explore new directions and possibilities for NICU music therapy work.

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Disturbance or enrichment? Attachment-focused perspectives in music therapy

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Attachment theory is considered to be one of the central theories of modern developmental psychology. The experiences of children with their caregivers in the first years of life are of great importance for their further development. Besides providing for a child's physiological needs, it is crucial for caregivers to be sensitive enough and emotionally available.

Mismatches and minor misunderstandings between child and caregiver can lead to important developmental steps if they are "repaired" promptly and sufficiently. Looking at practical music therapy work through the "attachment theory lens" might also initially have the potential to disturb or shooglesome of our established usual routines. But after closer consideration, an attachment-focused approach may offer exciting and highly valuable additional perspectives on music therapeutic work and research across the lifespan.

This roundtable discusses core concepts of attachment theory in the context of diverse clinical fields like NICU, early childhood or foster care and adoption. Central terms, e.g. sensitivity, exploration, secure base/safe haven, separation, or differences between bonding and attachment are related to our own practical experiences in various working fields. Since this is of course limited to certain specific areas, we especially invite colleagues who work with people of other age groups to join our discussion. The intention of this round table is to promote professional exchange and a sharing of practical experiences on this exciting issue.

Come, shoogles and share!

Disturbing music therapy: Engaging critical perspectives across the world via the open access journal “Voices”

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Since its inception, cultivating critical socio-cultural awareness has been a key value of the open access online journal, *Voices: A World Forum for Music Therapy*. The journal seeks to promote radical participation in the co-creation of the music therapy discourse, by interrogating normative assumptions and fostering exchange between Eastern and Western, and Southern and Northern understandings of the discipline. Consistent with this aim, the journal opens for interdisciplinary dialogue extending our understandings in and beyond music therapy as traditionally conceived.

In this roundtable discussion, members of the Voices editorial team will explore how this journal aims to disturb the status quo in academic publishing. We will consider how the journal encourages participation of a diversity of perspectives and formats, contributes to both destabilisation and reconstruction of the discipline, and attends to a gamut of voices often rendered inconsequential. We will examine systems that perpetuate compliance and conformity and consider how Voices has and has not responded to such forces. We will dialogue with attendees and invite critical reflection on the degree to which Voices does or does not uphold normative frameworks in exploring the intersections of music, health, and social change.

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Does culture disturb? Perspectives on cultural differences in Guided Imagery and Music (GIM)

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GIM is now practised and taught on every inhabited continent. This means that both GIM therapists and clients have unique cultural backgrounds that are often different from the US American context in which the method was developed. Yet, GIM involves a number of aspects that are culturally-bound: music, imagery, the use of verbal language to report and process the imagery, spirituality, and conceptualizations of health. With this in mind, we established a multi-national research collaboration to explore ways that culture can – and should – disturb the GIM process.

In this two-part presentation, we begin by sharing findings from our qualitative research that explores cultural factors in the ways that clients learn to engage in the GIM process. Serving as a launching point, the presenters then weave these findings into our own experiences of cultural disruptions in GIM from our perspectives as GIM therapists, trainers, and travellers in a moderated roundtable discussion.

Our hope is that this research and the ensuing discourse will point towards more effective and culturally-sustaining practices in GIM that help decouple the method from dominant Western cultural norms and assumptions.

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Don't disturb the silence: Reflections on silence in music therapy

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Background: Silence is a ubiquitous phenomenon in music therapy, but difficult to grasp scientifically and often remains undervalued in its relevance as a standalone research subject. However, there is evidence of a growing interest and an increasing number of studies. Results show that a therapeutically led silence positively affects self-awareness, present-moment orientation, mood states, relaxation, and rumination (Pfeifer et al, 2020; Pfeifer & Wittmann, 2020). Further, we often notice the particular capacity that the acceptance of silence might have, e.g. by holding and sustaining interpersonal emptiness or fragile relational processes (De Backer & Sutton, 2014; Smetana, 2005). **Objective:** Within this roundtable, we want to approach this “inaudible” phenomenon from different perspectives: as researchers, practitioners, theorists, or just (listening) individuals. Together with the participants, we want to explore and discuss the various forms of application and appearance of silence in music therapy. Key questions may be: Is silence an inherent part of music, such as an occurring pause? Is it a transitional moment, being part of rhythmic, dynamic, or melodic movement? Is it a standalone component, a “basic ground” on which every sound arises and into which it ultimately dissolves? **Methods:** The roundtable will include practical and theoretical inputs, and joint discussions. Participants will be invited to approach and explore silence by guided active and receptive music therapy interventions. **Conclusion:** Although still an underrepresented topic in research, practice, and theory, silence is an indispensable element of music (therapy). This roundtable aims to reflect and emphasise silence’s value for music therapy.

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Global perspectives on addressing systemic issues in music therapy curricula and healthcare

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The profession and practice of music therapy looks different depending on the region of the globe where one resides. Further, education and training programs vary significantly in terms of their history, scope, local culture and education needs. It is important to observe and study the relationship between how knowledge is developed in the music therapist's training. This presentation will highlight systemic issues within music therapy curricula as well as significant issues in healthcare settings (multiculturalism, equity, and race) in various regions throughout the globe. The focus will be on establishing a platform to dialogue about how music therapy educators, music therapists, supervisors, allied healthcare professionals, researchers, and policy makers can be reflexive and respond to challenges. Accordingly, improving education and training curricula relevant to the socio-political and cultural context, making necessary changes while considering contemporary issues such as access, unconscious bias, power, language and diversity will all be debated.

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HOMESIDE: The UK experience of recruitment to an online randomised controlled trial for people affected by dementia

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Cambridge Institute for Music Therapy Research, Anglia Ruskin University

This electrified roundtable will explore recruitment into large-scale music therapy dementia studies. A few months into the Homeside study (Baker et al., 2019), a randomised controlled trial for people with dementia and their carers, COVID-19 was declared a worldwide pandemic. This disrupted a well-planned international research study, which involved meeting face-to-face with participants. However, recruitment actually began to pick up pace as we moved the study to online delivery.

We will start by presenting the findings of a systematic review by Baker et al. (in press) that examined recruitment strategies in music therapy clinical trials involving people living with dementia and their family carers. Thirty studies were included, which described enrolment, consent, accrual, or recruitment methods as well as recruitment or consent rates. We will explore how study design and settings can influence recruitment rates, and identify the complexities and challenges of recruiting to dementia studies. We will then present an analysis of recruitment in the UK arm of the Homeside Study. This will include quantitative analysis of the baseline characteristics of the UK participants and exploration of the reasons for participation, refusal, and withdrawal based on qualitative data from the study. This will also include excerpts from participants' reflections on the recruitment experience. Based on the results of the systematic review and the UK recruitment data, we will consider recommendations for planning large-scale music therapy dementia studies. This presentation will include demonstration of the interventions through role playing them with the audience, using a combination of online and face-to-face participation.

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How do we understand the concept of containment in contemporary music therapy?

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Background: In music therapy, the concept of containment has long been important, especially in psychodynamic music therapy. Containment is fundamental in early communication and is the core of all later developments of feeling, thinking and relating. Modern approaches in music therapy, such as those that draw on theories of 'communicative musicality' (mother-infant interaction), attachment and mentalization, along with recent neuroscience-oriented research and perspectives, can be related to Bion's original concept of the container – contained. In improvisation-based music therapy the music therapist serves as a musical container for the client's feelings, which are then processed interactively. In Guided Imagery and Music (GIM), the recorded music used serves a similar containing function. This enables the client to transform previously unmanageable feelings, and promotes their growth.

Objective: The purpose of this roundtable presentation is to reflect on containment in music therapy. How does the container-contained dynamic manifest itself in the musical relationship between client and therapist? How does it help clients in processing their experience? Is containment different from holding? How do we integrate the concept with other concepts used in contemporary music therapy?

Methods: Music therapy practitioners and researchers from five different countries (Austria, Denmark, Israel, Germany and the UK) will provide various perspectives that link to containment. Through case vignettes we will explore how, why and when we apply the concept of containment. **Conclusion:** In our different ways, we hope to clarify how the concept of containment enhances understanding of our clinical work. We wish to discuss this with our audience.

Mistakes, failures, and all that disturbing stuff: Sharing our forthcoming book on making meaning of mistakes in music therapy

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Discussing and sharing mistakes and talking about “failures” overtly in music therapy could be a provocative yet innovative part of how our profession develops. This “maturing” process has happened with other professions such as psychotherapy, medicine and aviation, and took conversations about mistakes beyond the intimacy of supervision, to more public locations such as conferences, journal publications, books and Standard Operating Procedures. In line with this, our roundtable focuses on mistakes and failures, teasing out the unique essence of this subject in music therapy. This is part of our broader effort to bring this subject to awareness through lectures and roundtables at conferences around the world, and through the publication of a book on this subject.

In this roundtable, we will unveil material from our forthcoming book “Making Meaning from Mistakes in Music Therapy” that we are about to publish under ArtEZ press. Speakers at our roundtable who authored different chapters of the book, will read and discuss short parts of their chapters, some of which are case material and others theoretical. The co-editors of the book will moderate the roundtable, inviting the audience to comment, share personal experiences, and ask questions. Through dialogue with the audience we hope not only to model the open discourse we are aiming at, but also to gain richer insight and understanding about mistakes from the perspectives of music therapists from around the world.

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Music therapists' lived experience as a radical resource: Disrupting traditional views on divergent bodies and minds

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Traditional approaches in healthcare typically aim to amend perceived deficits. Contemporary approaches have now expanded to include a focus on supporting individuals to access their full potential by utilising their personal strengths and resources. Despite this shift, the options considered viable within this “full potential” still appear to be influenced by ableist assumptions embedded in healthcare literature, professional registration requirements, and wider societal systems and structures. Cumulatively, these assumptions position disabled identities and experiences as inherently incompatible with the identities and experiences of healthcare professionals. Unsurprisingly, healthcare students and professionals across disciplines report hiding their own disabilities to avoid discrimination, making it difficult to ascertain the current proportion of disabled clinicians.

Beyond perpetuating disempowering narratives, excluding these perspectives compromises the inclusivity and future potential of music therapy as a discipline and profession. Disabled clinicians are uniquely positioned to identify the aspects of clinical practice and study that disproportionately disadvantage disabled people, as well as considerations for individually circumventing or collectively dismantling these barriers. Similarly, expertise developed through both receiving and facilitating professional healthcare services as a disabled person can enhance therapeutic practice and improve participant experiences.

In this roundtable, health divergent music therapists from Australia and New Zealand will expand upon these concepts by sharing insights from current literature and their lived experiences of disability, neurodivergence, and chronic health conditions. We contend that the perspectives of music therapists with health divergent lived experiences are essential for informing the development and provision of more inclusive and relevant therapeutic services and frameworks.

Music therapy and autism: Different perspectives around the globe

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Music therapy for autistic people has undergone several transformations over the years. This is one of the areas with the most publications in music therapy and one which arouses the interest of a good part of the community of music therapists. There are different perspectives on how a music therapist may carry out clinical practice with autistic clients in music therapy. These different understandings directly affect the clinical practice, as well as research and music therapy education in this area of practice. This roundtable aims to present different perspectives from within the field of music therapy and autism. Music therapists and service users from different regions of the world will share their experiences in practice, education and research in music therapy using the paradigm of neurodiversity. It is hoped that by drawing together people with a range of experiences from worldwide perspectives key concepts and future developments for our profession can be part of an emerging discourse. This discourse may disturb current narratives and offer different perspectives that will continue to inform and influence future positions on clinical work with autistic people.

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Music therapy research across Europe: Current areas, approaches and methodologies, and their connection with the practice of music therapy

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The importance and role of research to both the practice and profession of music therapy is well acknowledged. Research challenges us to modify the way we work as music therapists, helps define direction for new discoveries, reaffirms what we know, helps us change the way we view what we already know. Research could lead to developments as well as support jobs. It is these possibilities of discovery and change that make research so exciting and diverse.

An increasing number of trained music therapy researchers and clinicians from many parts of the world, therefore, have taken on the challenge of conducting research and are directly or implicitly influencing the music therapy journeys of others. Music therapy research increasingly reflects the diverse and growing areas of the practice and profession of music therapy.

The EMTC Research Action Team has undertaken the task of collecting and mapping updated information regarding music therapy research across Europe (from PhD level and beyond), and their findings will form the basis of this round table discussion. Members of the team, together with leading music therapy researchers from different parts of Europe, will zoom-in on the main areas of research, the different research settings, and the contribution of research to the development and recognition of the music therapy profession. Neglected areas of research and cultural diversities will be acknowledged and discussed, in the light of social-justice and integration.

Music therapy training in Europe: A “disturbance” in the development of recommendations for minimum standards?

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What determines a “qualified music therapist” in Europe? Must all music therapists use the same models, methods and interventions? Is one model or method suitable for use with all client populations?

Music therapy training in Europe differs from country to country and within countries. Training courses are situated within universities and private training institutions. In a survey distributed among the European music therapy training courses in 2018, the European Music Therapy Confederation (EMTC) gathered rich data regarding general information, learning contents, outcomes of study and required competencies. A detailed analysis of the data by the European Music Therapy Standards Commission (EMTS) was undertaken in order to provide an overall picture of the spectrum of music therapy training in Europe. Acknowledging that the curriculum develops to follow changes in society and associated pedagogies, this roundtable will present and discuss the results from the 2018 survey. These have formed the basis for the development of EMTC suggested minimum standards of training. These recommended standards are intended to ensure that competencies necessary for the safe and effective practice of music therapy with clients are developed.

This round table, whose participants were all members of the survey process, will present the work of the EMTS commission. This will include the results of the analyses, the process used to formulate minimum standards and recommendations for these standards. Comments and debate from the audience are welcome!

Musical mastery: Equality in access to music therapy training

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This roundtable will draw together trainers, graduates, students and placement educators to hear their different perspectives and to explore access to music therapy training. In particular, how do trainers critically engage with the concept of ‘musical mastery’ during the selection process and what does this then mean for diversity within training? How might communications about what is needed to become a music therapist create exclusion or inclusion? What might placement educators expect of musical mastery?

This roundtable will focus on the lived experience of the panel from their different perspectives as current and past consumers, as trainers and as stakeholders in the process of training. Critical reflection upon equality of opportunity, diversity and inclusion will be the main focus (Burke et al 2017; Ewell, 2020; Baines, 2013). We will consider these issues within a primarily European scope with examples from Norway, Romania and the UK, although there is potential to consider this beyond Europe as well. The roundtable will give a platform for participants and audience to dialogue creatively – to disturb and disrupt conventional ideas about inclusion in training and to consider future directions (Ellis, 2021).

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Outcome and outlook of interdisciplinary research projects on personalized music therapy in neuro rehabilitation

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Between September 2016 and February 2022 two interdisciplinary research teams (names omitted) investigated underlying principles of personalized music therapy. Project 1 investigated the individual therapy readiness of patients using a self-developed questionnaire and physiological measure of heart rate variability with the aim to find “right periods” for therapy and to optimize time tables in rehabilitation. Project 2 examined Moments of Interest in personalized music therapy with patients after stroke, using interviews and video analysis to understand which moments of therapy are most interesting to patients and therapists. Neuroscientific measure of hyperscanning EEG allowed an insight into the brain activity of participants in real-life clinical setting and showed interesting features for further understanding the underlying principles of music therapy. In addition to these two clinical studies with music therapy patients and therapists, project 3 examined empathy as underlying principle for building therapeutic relationships and to perceive patients’ therapy readiness. The focus of this project was on the investigation of endocrinological markers and the efficacy of empathy training with allied health professionals. The interdisciplinary research approach allowed to combine and discuss different professional perspectives to avoid one-sided thinking and interpretations. This round table discusses the outcomes of the three projects, their impact on existing knowledge on music therapy and an outlook for future research.

Racial awareness take two: Continuing the conversation

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In April 2021, the British Association for Music Therapy (BAMT) held a seminal racial awareness event to explore racial discrimination within the music therapy profession. It involved 10 panellists including the CEO of BAMT, six primary speakers and three respondents. The concept was to 'start' a conversation about how systems of oppression had shaped a profession where over 90% identified as white and middle class (BAMT, 2020) and therapists of colour were left with little to no representation, visible or otherwise. This led to further discussions about racialisation and the intrinsic influence of colonialism within the mechanisms of the profession. Accepting the EMTC's invitation to "disturb", the panel will extend their exploration of race and belonging in the context of the changing landscape of Britain (Hirsch, 2018) in the aftermath of Brexit and a swell in support for right-wing populist politics across Europe during an ongoing pandemic. Changes in the state of the profession and the panellists' experiences since the first event will be examined. The complexities of how oppression manifests itself (Bishop, 2015) will be more deeply scrutinised through discussion with the audience to hold the profession accountable to take the necessary steps towards multicultural awareness and competency (Hadley and Norris, 2015), alongside acknowledging the systemic racism (denied by the (Sewell Report, 2021)) that affects all aspects of society and by extension, music therapy clinical work (Kwong, 2021). The panel will also present a song written together as part of an original initiative called "Songwriting to Disturb".

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The hero's journey in GIM: Unexpected integrative connections between emotional and physical health

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The hero's journey is prevalent in literature and the cinema. It is also often utilised as a framework within which to explore and understand the circuitous nature of a client's therapeutic process. The hero's journey is often thought of and discussed predominantly as a psychological and emotional process occurring within the mythological and imagery world of the client, typically accompanied and facilitated by the GIM therapist. However, qualitative research/case studies conducted by researchers/clinicians from four different countries have unearthed unexpected affordances of the hero's journey via narrative and thematic analyses of clients' GIM experiences. This presentation examines relevant research and writings in this area, challenges predominant assumptions, and expands the concept of the hero's journey in relation to physical and mental health. The presenters explore and review four applied clinical research/case studies using GIM, where clients have undergone literal physical transformation and/or engaged with both physical and psychological aspects of their health conditions within their therapeutic and recovery processes. They adopt a cross-case analysis approach to compare and contrast four GIM clients' experiences within four different contexts: cardiac rehabilitation, addictions treatment, cancer care, and a single musician. Client history and case material from each research/case study is clearly presented in terms of methodology and the emergence of the hero's journey. Clinical illustrations, imagery, and music excerpts are also included. The cross-case analysis elucidates processes and outcomes, and a new integrative model is proposed which links manifestations of mental and physical health with the hero's journey.

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The identity and role of music therapy in the UK

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Building on themes discussed in recent literature published by UK music therapists, this round table will feature a structured, open dialogue amongst a panel of leading UK music therapists, trainers and researchers in which the audience will also be invited to participate. Considering the identity and role of music therapy in the UK and its connection to the wider European context, the following questions will be posed as a starting point for discussion: 1) What stage have we reached in the development of our profession? 2) What is our role as specialist arts and health practitioners within the wider social, cultural, and political context and changes in that? 3) How can we best identify and explain our work to others both individually and as a profession, taking account of the range of our work and diversity of approaches? 4) What are the opportunities and challenges for the profession moving forward? 5) What mutual learning, un-learning and re-learning might there be through exchanging perspectives, practices, and experiences within a wider international context?

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The use of Music and Imagery methods as stand-alone interventions and as part of the continuum model

Carine Ries, Helen Wallace, Motoko Hayata, Elien De Schryver, Anouska Henderson

UK

This roundtable presents a number of music and imagery (MI) methods, both as stand-alone interventions and as part of the continuum model, developed by Lisa Summer over many years. The interventions are derived from Guided Imagery & Music (GIM) practice and the case studies illustrate their flexibility in meeting the needs of a wide variety of clients. The MI methods presented here include Supportive Music and Imagery (SMI) and Re-educative Music and Imagery (RMI), showing the versatility and effectiveness of the interventions in supporting the development of resources and addressing tensions and difficulties.

In this round table we will present case studies using MI interventions with several client groups in individual and group settings and an adaptation of the delivery in the form of online sessions. The presentation will give music therapists the opportunity to learn about integrating innovative music and imagery techniques into clinical music therapy work through varied method exchanges. After an introduction to the theory of MI interventions, we will proceed with the following case studies

- Integrating SMI into improvisational music therapy with a client suffering from depression
- SMI within music therapy for a teenage girl with autism and anxiety in a SEN school
- Individual case study with a male client in Supportive Music & Imagery (SMI): working with Schizophrenia in remission
- The use of MI interventions as part of the continuum model - Strengthening resilience and sense of self
- Supportive Music & Imagery (SMI) group work: collaborative work with a charity organisation to provide online sessions during lockdown.

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Valuing music therapy work with adults with severe multiple disabilities; international perspectives

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This roundtable will draw together a panel who are strongly committed to supporting people with severe multiple disabilities through their work as Music Therapists. The state of the art (music therapy) in supporting people with severe and profound disabilities in the different countries represented by the panel will be presented and contextualised, including an exploration of terminology and culture (Niedecken 2003; Fröhlich et al 2017), and the different perspectives for the work. The heart of the roundtable will be to explore how this group of people might use music therapy to be more empowered, heard and seen in society. The panel will discuss the different concepts, approaches and techniques that are used in music therapy and will consider how music therapy can contribute to removing the institutional and societal barriers that continue to exist in understanding and supporting emotional well-being for this group of people (Sheehy and Nind 2005; Watson, 2017). The panel will also explore the silence of Music Therapists about this work, reflecting upon the lack of published literature in this area.

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Vocal interactions in preterm mother-infant dyads and NICU music therapy in Portugal and Brazil

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Preterm birth and the admission of an infant in the Neonatal Intensive Care Unit (NICU) represent a threat for the unfolding of maternal intuitive abilities and for mother-infant interactional competences. NICU music therapy is an emerging family-centered approach that showed to enhance parent-infant wellbeing and bonding. In this roundtable music therapists from Portugal and Brazil will present findings of observational, experimental, and qualitative studies that investigated the characteristics of mother's spontaneous speech and singing with the preterm baby, and how music therapy can affect maternal vocalizations and the dyad's interactional competences. The first presentation will highlight the temporal features of preterm infant's responsiveness to maternal speech and humming during Kangaroo Care in a Portuguese NICU. The second presentation will focus on the acoustic characteristics of the vocal interactions of a mother with her twin babies (a daughter and a son) in the conditions of speech and maternal humming during Kangaroo Care in the same Portuguese NICU. The third presentation will describe, through a multiple case study, the melodic and rhythmic characteristics of maternal spontaneous vocalizations in a NICU in the South of Brazil. The fourth presentation, carried out in the same South-Brazilian NICU, will show how music therapy can enhance maternal vocalizations and preterm infants' signs of engagement during the interaction, as well as being beneficial for infant's physiological responses and maternal mental health. Overall, the roundtable highlights the relevance of maternal vocalizations and music therapy in sustaining mother-infant interaction in the NICU.

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Vocal psychotherapy in progress: How this newly recognised model is helping music therapists across the globe work with trauma

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Vocal psychotherapy is an innovative, advanced music therapy method founded by Dr Diane Austin, and the first recognised model of voice-based music psychotherapy. It is the use of breath, sounds, vocal improvisation, songs and dialogue within a client therapist relationship to promote intrapsychic and interpersonal growth and change. The main theoretical influences are Carl Jung, object relations theory and psychodrama.

Dare we speculate that there are many music therapists out there who find the idea of meeting and treating their client's trauma daunting, challenging or even disturbing? While music therapists are trained to use musical improvisation as their tool, their relationship with their singing voice is highly personal and complex, and confidence to use it with or without words varies enormously.

Vocal psychotherapy training enables music therapists to discover the full potential of their own and their client's voices as vehicles for meaningful connection with the Self, and the safe processing of trauma. The strong Jungian foundation and experiential learning within a therapeutic context over a two-year period allows space for deep assimilation of the method and its impact.

Drawing on the core elements of the model - vocal holding and free associative singing, and current thinking about trauma being held in the body, questions will be considered including: Why is the voice so helpful in trauma work? How do Jungian and other psychoanalytic theories support the method? What impact does the training have both personally and professionally? How does it help music therapists to support different client populations?

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Why and how to work with parents in music therapy? Zooming-in on the needs and resources of parents

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Therapeutic work with parents has been discussed in the literature since the middle of the last century, highlighting different perspectives of the therapeutic work with parents and their parenthood. In music therapy with children, the involvement of parents in the therapeutic process is often connected to their child's needs. Parents are encouraged by music therapists to take part in their child's therapeutic process, either by being active partners in music therapy sessions or by participating in parent sessions, discussing their child's situation. But what happens when we realise that the child's mental and emotional state reflects difficulties and challenged parenting? How do we work when parenting IS the focus? What can music therapy specifically offer to this kind of setting? What is the music therapist role in this therapeutic alliance with the parents? And what is the role of music?

This round table brings together four international experts, who will reflect and discuss these points, and more, together with the participants. Through a variety of clinical vignettes, theoretical foundations, and approaches, we will highlight different clinical situations where parenting becomes the centre of the therapeutic process. In the light of this parent-focused approach, we will explore how we plan a treatment program tailored specifically to the parents' needs and resources, and balance it with those of their child/adolescent and address different techniques that can be applied clinically. Cultural considerations regarding parent therapy will be discussed as well, through the lens of social justice, ethical implications, and family welfare.

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Poster presentations

(A-) Integration in music therapy with clients who are coping with trauma and stress: Towards specification of a challenging term

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A growing area of research, theory, and practice, particularly in relation to traumatic and stressful events, focusses on the importance of integration in psychotherapy. According to Winnicott (1965), integration is achieved as a result of protective mothering in the early stages of life, during which the baby recovers again and again from experiences of threat and annihilation. Lomranz (1998) developed the idea of 'A-integration' as the human ability to bear cognitive and emotional complexity manifested in the ability to live with inconsistencies and paradoxes, and yet being able to live life fully. In relation to trauma, Janet (1925) was the first to develop the idea that the psychic effects of traumatic events are so powerful and overwhelming that integration is no longer possible. He concluded that trauma events are stored in memory in ways that render them unavailable for retrieval under ordinary conditions. While integration has been addressed in the literature on music therapy, the term is rarely at the centre of the discourse. In this presentation, the meaning, role and the different approaches of integration in music therapy processes will be discussed, and several techniques to achieve it will be presented, with the help of sounds, voices and music. The discussion of the term integration will relate to other terms such as A-integration, disintegration and un-integration and techniques. Different levels of integration in music therapy will be presented from a recent study.

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An autoethnographic exploration of a music therapists' network formed during the pandemic

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The pandemic lockdowns in Greece during 2020 and 2021 brought many unexpected changes in the clinical work in our profession, and at the same time revealed an inner need for connectivity and collaborations in order to support each other and share experiences. As we are seven music therapists living in three different places in Greece, we expressed a desire to connect and communicate on a regular basis. This desire gave birth to forming the "music therapy network" in the beginning of 2021 with the intention to advocate more broadly about music therapy and organise an online event for World Music Therapy Day. Since then, we have organised several online meetings, have participated in conferences, have been informing the public on music therapy through social media, and have connected with a broader circle of Greek colleagues residing and working in Greece or in other European countries. Using an arts-based autoethnographic approach (Knowles & Cole, 2007), we explored our lived experience of this joint venture through various artistic mediums individually and we analysed a focus group discussion which included both verbal and musical expressions that we shared as a team. Following Giorgi's (2012) descriptive phenomenological psychological analysis, various themes emerged, which will be presented in the form of a 10' video-poster. Benefits and difficulties will be highlighted in a reflexive manner, both individually and as a group. Concepts that will be discussed include provisions on support, resilience, and connectivity, all driven by our need to promote our common vision on music therapy.

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A sense of belonging: Piloting online group supportive Music & Imagery therapy for adult carers during Covid-19

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Music & Imagery Therapy (MIT), is a short-term goal based receptive method, created by Professor Lisa Summer (Summer, 2015). Supportive Music & Imagery therapy (SMI), focuses on building ego strength, self-worth, and supportive inner resources. Sessions utilise music-listening and imagery, as well as verbal psychotherapeutic interactions linking a client's experience in sessions with their everyday life (Paik-Maier, 2010).

The purpose of this pilot was to investigate the efficacy of online SMI group sessions in reducing anxiety, stress, and depression in adult carers coping with lockdown during Covid-19. This clinical need was highlighted by conversations with a local charity organisation supporting carers, which indicated a lack of online therapeutic support available to this client group. Five adult carers were referred for eight 1.5-hour sessions, held weekly via Zoom. Clients completed pre/post therapy questionnaires based on the General Anxiety Disorder Scale and the Patient Health Questionnaire, as well as an online feedback survey following the sessions. Analysis of data showed marked decrease in anxiety/depression, with feedback also indicating the accessibility of online SMI therapy and value of learning new strategies to deal with difficult feelings and situations. Although further pilot projects utilising MIT with more clients and in additional clinical areas are needed in order to build a larger evidence base, data from this project indicates that online group SMI therapy is highly effective in developing and instilling self-care strategies, building self-worth and resilience, decreasing levels of anxiety, stress, depression, and social isolation, and building additional support networks.

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Attachment-based music therapy in a parent-infant setting

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Attachment theory is a central concept of modern developmental psychology and highly relevant for music therapy work across the lifespan. Having an available and sensitive enough caregiver who is able to meet elementary basic needs for closeness and security is of great importance for any child. In the long term this represents an important protection and resilience factor for a healthy development even under difficult conditions. Music therapy can be beneficial to reinforce sensitive attunement of the parental behaviour to the child's signals and needs and to facilitate positive emotional exchanges within the dyad.

This poster presents an attachment-based music therapy approach for vulnerable families in a parent-infant setting. The infant and his/her caregiver attend weekly music therapy sessions, each of them videotaped, and accompanied by parent counselling sessions. Working closely with the caregiver supports him/her to further develop mentalizing skills and is of fundamental importance for the effectiveness of this therapeutic approach. When linked to the experiences they have made in musical play with their child, parent-child interaction can be more easily addressed and reflected.

Based on a multiple single-case-study-design, this currently running PhD-research project investigates various factors like parental stress, quality of life or resilience of caregivers. Additionally, music therapeutic interventions and techniques will be identified that are particularly suitable to support mutual attuned and sensitive parent-child interaction. First results of this study provide information about possible application areas, limitations and benefits of this concept.

Beyond skills sharing: Music therapists, teachers and teacher educators working together

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This presentation reflects on findings and recommendations from work shared between music therapists, teachers and teacher educators during the ERASMUS + project Learning in a New Key (LINK) recently published by Routledge (Clough & Tarr 2021). It focusses on classroom based inter professional participatory action research (PAR) that framed and identified new competences relevant to facilitating the social and emotional access to learning of young people affected by adverse childhood experiences. Data are presented through descriptive drawings and narrative accounts of improvisatory group music making in the classroom. Through shared reflection on these experiences, new professional ways of being, understanding, doing and living alongside others were differentiated and named by the participating professionals. The presentation explores how these were incorporated within a music based therapeutic teaching practice framework. There is evidence that these new competences facilitated safe, inclusive, and dialogic non verbal interactions of groups of young people with social, emotional and mental health concerns, thus supporting their momentary recoveries and reconnections in the classroom. PAR approaches that include experiential learning through cycles of concrete experience, reflection, theorisation and active experimentation (Kolb: 1976) are seen to have supported this innovative inter professional development. These findings are complemented by subsequent enquiries in initial teacher education in Poland focussing on beginning teachers' capacities to build their own resilience in challenging classroom contexts. The presentation is a relevant inter professional response to schools' growing concerns about the social, emotional and mental health of children / young people during the experiences of the COVID-19 pandemic.

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Binaural beats in music therapy interventions for substance addiction treatment

Andreas Asimakopoulos

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The connection between brainwaves (periodic electrical signals from the brain) and the state of a subject's consciousness has been widely investigated and established. Methods like targeted neurofeedback, the hemi-sync method, meditation, and breathing exercises have been shown to induce certain brainwave frequency patterns which can have a positive impact on important aspects of mental health, such as stress, depression and anxiety. These aspects can be significantly disturbed during substance addiction and constitute significant therapeutic targets due to their strong association with craving and relapse. As music therapy interventions are increasingly employed in substance addiction rehabilitation programs for the management and counterbalance of negative affective and mental states, this presentation introduces the potential added therapeutic benefits of binaural beats (BAB), as a means of brainwave entrainment, in active music therapy interventions for drug addiction treatment. A double-blind pilot study is presented. The participant will be informed about the methodology and results of the study, which was held in the ARGO rehabilitation facility in Thessaloniki, Greece, for volunteers with substance abuse disorder. We combined listening to BAB via headphones with a music therapy protocol, to explore the effects of BAB on the distress, anxiety and craving levels of drug-addicted individuals, as well as on their cardiovascular functions. The participants will be presented with a short background literature review and an introduction to the binaural beat concept, together with a description of the methodology. Results and potential for future research will also be discussed.

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Case study of a child with dyslexia: Improving reading accuracy and reading fluency through singing activities

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Background: Dyslexia is the most frequent neurodevelopmental specific learning disorder among francophones. Children with dyslexia show difficulties in decoding words and in relating letters to speech sounds, resulting in low reading rate and low reading accuracy. Previous studies reported that music could be an essential tool in the treatment of children with dyslexia. **Aim:** The purpose of this music therapy case study was to describe the improvement in reading accuracy and in reading fluency of an 11-year-old child diagnosed with dyslexia. **Method:** A music therapy program including rhythmic chanting and target words singing activities was specifically designed to address the graphemes and phonemes that were problematic for the child. During ten weeks the child received 30 minutes of individual music therapy sessions. Before and after each session, the child's reading rate and word reading accuracy were evaluated by measuring the number of words read within one minute and by counting the number of misread words. **Results:** A decreasing number of misread words as well as an increase in the number of words read in one minute were observed. Particularly from session six, the child's reading rate enhanced progressively at the beginning of the sessions. The results showed improvements in reading accuracy and in reading fluency. **Conclusion:** The promising results of this case study demonstrates that an individualised music therapy intervention can effectively improve reading skills in children with dyslexia.

"Cellular" representation of a music therapy setting, based on the Self: Voice interaction

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"Cellular" representation of a Music Therapy setting, based on the Self – voice interaction is an innovative method that developed in the context of the clinical work with individuals in the autism spectrum, examining, describing and interpreting the therapeutic setting as a living system, through a process of microanalysis. The aim of this pilot study is to highlight the contribution of vocal improvisation to the emergence of the Self in individuals at the autism spectrum, with emphasis on its non-verbal form. In order to investigate the above issue, a research design of multiple case studies was selected. Data were collected from two case studies, which respectively present a 21- year-old young man and an 11-year-old teenage girl, both diagnosed in the autism spectrum, who participated in individual weekly music therapy sessions. The expected results are included in the overall context of a general change in the clinical picture of autism. The vocal improvisation seems to awaken, to encourage to emerge the healthy and authentic Self of the individuals, while at the same time it seems to move them into a more connected with their inner and unique truth state of being. Considering this factor, we hope that the results of the research will confirm precisely the importance of the therapeutic use of voice, both for the clients, as well as for the music therapy profession and other music therapists.

Combination of music and meditation therapy in mental health: The digital health application “Tamarkoz App”

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The past 20 years has shown a surge in the use of meditative practices in Western medicine, specifically in mental health and rehabilitation settings. M.T.O. Tamarkoz is a meditative method combining guided deep breathing exercises, slow physical movements, and heart-focused meditation techniques based on Sufi practices. Sufi meditation practices usually are accompanied by musical elements that facilitate a shift of attention towards oneself.

In 2019, a mobile application for Tamarkoz was launched and in 2020 music composed and curated by M.T.O. Zende Delan, a musical ensemble specialising in music for Sufi meditation practices, was added to the application. Preliminary user testimonials include a dramatic increase in the ability to regulate stress and anxiety, in addition to an enhanced sense of well-being and positive affect. After the addition of Zende Delan music to the app, user testimonials reported enhanced effects. The unique combination of easily applicable mediation techniques with harmonising music may be key to promoting mental health.

We explore the findings of a randomised study with users of the Tamarkoz mobile application with a control group over 12 weeks. The music and meditation group (n=50) and the meditation only (n=50) are asked to practice three days a week, 20 minutes per session. Validated measures of mindfulness (MAAS), depression (DASS), stress (PSS), and self-concept (SCC) will be used pre-intervention and at seven weeks. We hypothesise the music and meditation group will experience more pronounced positive benefits.

Comparative study of music-therapy types on anxiety in early stage cancer

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Iran

This study was conducted to compare the effectiveness of active and receptive music-therapy on anxiety in cancer patients undergoing chemotherapy or radiotherapy. Three groups were created and 184 young adult patients, who were diagnosed with early-stage cancer and were undergoing treatment, were divided into these. Two groups received music therapy as a parallel treatment and the third group was a control group. In active music therapy, a music specialist helped the patients to play guitar and sing. In the receptive music therapy, patients were offered pre-recorded music played by an MP3 player. The level of anxiety was measured by the Beck Anxiety Inventory as a pre-test and post-test. ANCOVA revealed that both types of music-therapy reduced anxiety levels of patients with the active music-therapy intervention found to be more effective. The results suggest that music therapy can be applied as an intervention method contemporary with cancer medical treatment, for improving quality of life in cancer patients by reducing their anxiety.

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Comparative study on the effectiveness of music therapy versus music on stress and burnout syndrome healthcare professionals working with COVID-19

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Introduction: The consequences of the COVID-19 pandemic were not only health and economic, but also one of the important consequences was the emotional exhaustion and stress, anxiety and subsequent burnout syndrome in health and social care professionals who worked directly during the most difficult period of this pandemic. We as music therapists help to contribute to the overall wellbeing and health of people in need. This work presented here is a project carried out after house confinement in Spain. Specifically, the project was developed from April to July 2020. One-hour online music therapy sessions were given once a week to 20 health and social care professionals who were actively working with patients with COVID-19. **Aim:** The aim of the research is to see the effectiveness of music therapy versus listening to music in improving symptoms of stress and burnout in health and social care professionals. **Method:** The process consisted of an initial individual interview lasting half an hour in which tests such as the MBI (Maslach Burnout Inventory), The Perceived Stress Scale (PSS), the Visual Analogue Scale of Emotional Well-being and a music therapy form were administered by an external reviewer. Two groups were randomly divided. A control group of 10 people listened only to music of the group members' preference for 45 minutes of session per week during the four-month process. The study group of 10 people received online music therapy sessions for the same amount of time as the control group, on a different day, but conducted by the same music therapist researcher.

Results: A statistical analysis of the data obtained was carried out with the SPSS programme and the following results were seen. All participants had stress, signs of Burnout or confirmed Burnout at the beginning of the treatment. Patients who received music therapy substantially improved their levels of stress and burnout syndrome compared to those who only listened to music. On an emotional level, there was an improvement in both groups, but this was more pronounced in those who received music therapy. We can conclude that the people who participated in the online music therapy group had a significant improvement in the levels of stress, Burnout syndrome and emotional well-being compared to the group that only listened to music.

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Comparing music therapy interventions through craving and withdrawal in adults with substance use disorder on a detoxification unit

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Background: Craving and withdrawal contribute to the development and maintenance of substance use disorder (SUD) as well as relapse. Although there is literature indicating that music therapy can positively impact craving and withdrawal for adults with SUD on a detoxification unit, there is a lack of randomised research comparing different music therapy interventions and within-session changes.

Objective: The purpose of this effectiveness study was to compare motivational-educational song writing (MESW) and recreational music therapy (RMT) on craving and withdrawal in adults with SUD on a detoxification unit using a two-group pre- and post-test design. **Method:** Participants (N = 134) were cluster-randomised to single-session group-based MESW or RMT conditions. Established craving and withdrawal psychometric instruments were used as pre- and post-test measures to determine potential between- and within-group differences. **Results:** There were significant within-group differences in craving subscales of urges and coping as well as withdrawal, all $p < .001$. Within-group effect sizes ranged from .244 to .456 with favourable changes from pre-to-post-test. There was no between-group difference among the MESW and RMT conditions, all $p > .05$. **Conclusions:** Although the specific music therapy intervention did not impact craving or withdrawal, a single MESW or RMT session can have an immediate and significant positive impact on craving and withdrawal in adults with SUD on a detoxification unit. As the MESW condition also addressed motivation, relapse prevention, and recovery, perhaps MESW interventions are ideal in detoxification settings. Implications for clinical practice, limitations, and suggestions for future research are included.

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Comparing the use of individual in-person music therapy and online group music therapy for people living with chronic pain

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This paper presents and compares the findings from mixed methods studies on the use of music therapy for people with chronic pain. The first study explored the use of individual music therapy and indicated the need to explore the group music therapy for this population. For the second study, due to the Covid-19 pandemic, it was deemed necessary and relevant to explore online music therapy. Previous trials of group vocal music therapy have showed enhanced self-efficacy, motivation, empowerment, and social engagement (Bradt et al., 2016; Low et al., 2020). This research aims to explore these potential benefits and people with chronic pain's experience of music therapy.

In the first study, ten participants were recruited to attend eight hour-long weekly sessions of individual music therapy. In the second study, 12-weeks of online music therapy was provided for eight participants. In both studies quantitative data was gathered through pain ratings and questionnaires, and qualitative data through interviews. Data sets were analysed separately and integrated for interpretation and congruence. Results suggested that music therapy can be supportive for those with chronic pain in terms of pain reduction or distraction. Qualitative data showed that participants experienced emotional support, social engagement, coping and resourcing through music therapy. While individual in-person music therapy is beneficial, it is not always accessible. Since the pandemic, many people living with chronic pain are isolated and unable to access usual supports. Although limited by study size, this research positions online music as an effective intervention in chronic pain management.

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Connecting through music: Music therapy with people with Dementia and their caregivers

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Following a family-centred approach, this work focuses on people with dementia (PwD) and their caregivers (CG) in an inclusive setting. The research implements a quali-quantitative approach. Since music therapy has a holistic nature, this approach allows capturing facets of relationship-building that only get missing with only one or the other. For eight sessions, the Canterbury Wellbeing Scales (CWS) are used to measure different aspects of wellbeing in both PwD and CG – pre and post-session. Observational data is collected by the staff in each session and evaluated through the subsequent protocol analysis. Additionally, there is a content analysis based on a collection of verbal statements by PwD and their CGs. CWS shows significant differences between the pre-and-post measurements, indicating that the participants' mood improves during the course of the session. This effect remains stable throughout the measurements, even at the point of follow-up. This indicates that the interventions positively affect wellbeing, even after several weeks. That impact remains stable even after months of regular interventions – in both PwD and CG. Thus, music therapy interventions seem to be suitable for long-term application in inclusive PwD-CG- groups. Observational data shows that caregivers get more relaxed over time. Additionally, there is an increase in interpersonal interactions between all the participants, crossing the borders of family units. CGs mention that the activities “work for everyone” and “allow PwD to be treated as an integral part of a group”. In general, CGs and PwDs tend to be interested in different parts of the activity. Notably, CGs perceived music therapy as a restorative and relaxing moment, while PwDs show an increase in attention and initiative during music therapy. The results of the study indicate that music therapy can be used in inclusive settings and improve wellbeing in both PwD and CG. The project has been realised thanks to the funding through the project 8xMille by the Chiesa Valdese and Alzheimer Uniti.

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Considerations on the lifelong development and their connections with the music therapy assessment practice

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Rationale: The music therapy assessment practices involve assessing clients. Thus, it is vital to understand how these subjects develop throughout their lifespan and their complex transformations over time. These transformations are a consequence of internal factors (biological aspects) and external factors based on the individual's interaction with the environment and the people who are part of that environment. **Objective:** This presentation aims to show a general notion about human development based on the physical, emotional, social and cognitive changes that occur during typical development and their relationships with the music therapy assessment practices. **Presentation approach and theoretical background:** This presentation is based on assessing some case vignettes and their connections with typical development (general and musical development) aspects. These aspects include milestones, processes, theories and domains about overall development and some specificities about musical development that will directly influence the understanding of music therapy assessments. **Discussion and conclusions:** The music therapist must have a general notion about human development based on the physical, emotional, social and cognitive changes that occur during typical development. Understanding development is essential for the music therapist to have clear comparison parameters based on the context or condition of the client assessed.

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Creative collaborations: Integrated online arts therapies to support primary school teachers

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During the Covid-19 pandemic, teachers face uncertainty, limited contact with learners, social distancing, lack of resources and intense stress. Three arts therapists (a music therapist, a drama therapist and an art therapist) worked together with nine primary school teachers during four, online, two-hour group sessions. Their goal was to create a space for the teachers to engage in supportive processes directed at the stress and challenges that they have faced during Covid-19. The therapists carefully tracked their own collaborative process through extended meetings after each session to unpack themes that emerged and to explore how the different therapeutic mediums could continue to best serve the group. Two additional music therapists and a Masters student offered support to the project and participated in the therapists' reflection sessions to provide peer supervision. The sessions with the teachers and the therapists' planning and reflection sessions were recorded and analysed thematically. Through the process, teachers were able to express how they were feeling, the struggles they were facing, and the resilience they had discovered. Realising shared experiences enabled them to develop a sense of connectedness and validation. The teachers also gained insight into using arts-based techniques for supporting learners in their classrooms. Supportive collaboration between the arts therapists afforded fluid co-facilitating via a variety of rich, multisensory modalities. The sense of connectedness that developed between this diverse group of arts therapists is important as we navigate a professional field that is still developing in South Africa.

Development of Person Attuned Musical Interaction UK version (PAMI-UK): Online training for care home staff working with people with dementia

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Background: Many care home residents with dementia struggle to have meaningful interactions with staff and fellow residents. Care home staff typically need to pick up subtle cues from the residents to maintain meaningful communications but training to encourage such ‘attuned interactions’ has not been available. Person-Attuned Musical Interaction (PAMI) in dementia care has been developed as a music therapy skill-sharing project by the research group in Aalborg University, Denmark. **Methods:** This three-year doctoral project consists of: 1) a systematic literature review on the impact of music interventions on social interactions between care home residents with dementia and staff, 2) translation and cultural adaptation of the original Danish PAMI manual, 3) Development of PAMI-UK, an online/remote training package for care home staff, 4) Field-testing of PAMI-UK and 5) Evaluation of PAMI-UK using a mixed method approach. **Results and Discussion:** Development of PAMI-UK as a remote training package has its advantages as well as shortcomings. The online training package is potentially more widely implementable, thus contributing to wider dissemination of PAMI training. However, PAMI-UK might not have the same impact as face-to-face training with music therapists as the original Danish training. **Conclusion:** Despite its limitations, PAMI-UK offers a unique training package for care home staff to enhance a reciprocal person-centred approach in dementia care by incorporating person-attuned interaction into their daily routine. Further evaluation of PAMI-UK is recommended.

Does music therapy support or hinder inclusion processes in music schools and their cooperation? Illustrated by the example of Germany

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Background: In Germany, music therapy has been established in music schools since the 1970s. Besides offering instrumental lessons in leisure time to facilitate cultural activities for children and adolescents, music schools have extended their supply in the service of public welfare to cooperation with schools and various other educational and social institutions in the past decades. To face the special musical and personal needs of people in critical life situations, of children and teenagers with risk factors, music therapy has been added to the regular and special educational program. In this sense, music therapy completes the educational services and enables vulnerable people to get preventive support and to participate in a musical experience. **Objectives/Content:** Do music therapists really want to contribute to inclusive development in educational settings where diversity is welcome and different learning conditions are normal? Do they critically clarify and reflect on each request, whether it is an educational or therapeutic concern? Especially in an inclusive setting, music therapists need to precisely differentiate their concept of therapy and protect it from inflationary use. Successful interdisciplinary cooperation with clear delineation of roles and tasks seems to us to be an important contribution. We would like to share our experiences with the music therapy community and discuss the challenges and opportunities of the setting in a perhaps disturbing but hopefully inspiring way. As the pandemic has again made particularly clear, it is so important that vulnerable children are comprehensively strengthened in the development of protective factors and resilience.

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Don't disturb me: Oh, but what if I do? The dynamics of resistance and meeting clients where they must stay

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This paper explores the relationship between the music therapist and the client 'L', an Autistic young woman with a brain injury who was initially presented as averse to leaving her room or accepting new contacts having left her school placement aged 17. The initial meeting, where the music therapist experienced little engagement amidst a room full of competing screens playing videos and audio, is described and discussed within the context of meeting clients where they are, and resistiveness, drawing on Ansdell's case study of Emanuella (Ansdell, 1995). The emerging relationship between the music therapist and client 'L' is shared using case study material and relating innovative methods of connecting utilising tools such as mini pool balls on a laptop snare drum to traditional music therapy techniques. Evidence of emerging desensitisation and acceptance of additional social change is presented. Positive outcomes using team feedback and Nordoff-Robbins Rating Scales (Nordoff and Robbins, 2011) is evidenced.

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Dyadic nonverbal synchrony during pre and post music therapy interventions and its relationship to self-reported therapy readiness

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Nonverbal interpersonal synchronization has been established as an important factor in therapeutic relationships, and the differentiation of who leads the interaction appears to provide further important information. We investigated nonverbal synchrony – quantified as the coordination of body-movement between patient and therapist – in dyads before and after a music intervention, when they were engaged in verbal interaction. We further examined associations with patient’s self-reported therapy readiness at the beginning of the session. Eleven neurological in-patients participated in this study, and one music therapist conducted all the eleven recorded sessions. Our results showed an increase of nonverbal synchrony after the music intervention and also an increase in patient-leading. A significant correlation was found between nonverbal synchrony after the music interaction and self-reported therapy readiness. These findings suggest a certain perceivability of patients’ therapy readiness by the music therapist. Higher patient leading in nonverbal synchrony after the music intervention may thus indicate that the music intervention may have allowed dyadic entrainment to take place, potentially increasing self-regulation and thus empowering patients.

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Experience from music therapy practice focused on significant cognitive disabilities with patients after Acquired Brain Injury (ABI) within interdisciplinary rehabilitation

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The role of music therapy within the interdisciplinary team approach in the rehabilitation of patients after acquired brain injury (ABI) proves important. A day care centre focused on patients with significant motor disabilities has been operating for over 20 years at the Department of Rehabilitation at the 1st Faculty of Medicine, Charles University, and the General University Hospital in Prague. The interdisciplinary team comprises a rehabilitation doctor, psychologist, physiotherapist, occupational therapist, special educator, social worker and a music therapist.

However, there is also a relatively new project focused on therapeutic intervention concerning patients with a cognitive deficit without any motor difficulties. Substantially fewer rehabilitation programmes are being offered to these patients with cognitive disabilities only than to those with motor difficulties. This type of programme was introduced at the Department of Rehabilitation Medicine in 2020, but we already have the first results. The presentation will include case studies of patients whose level of cognitive functions has been improved by comprehensive rehabilitation including music therapy and these patients were able to return to work successfully. Furthermore, music therapy techniques and methods that have proved most successful in these cases will be presented, training memory, attention, auditory perception as well as executive functions. The techniques that patients themselves evaluate as the most efficient will be stated, too.

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Exploring innovations in music therapy and trauma around the world

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Using music therapy to support children and families who have experienced trauma requires therapists to be creative, flexible and resilient in their work. Several music therapists have started to write about the impact of trauma on families and how music therapy interventions can support them (Swanick and Jacobson, 2019, Pasiali, 2017). Furthermore, there has been a move towards giving space to the voices of non-dominant cultures and societies – a much needed progression in the field of music therapy. With a move to online working being more acceptable due to Covid19, music therapists are adapting their practice to engage with the changing needs of the communities they serve. In the area of music therapy where music is the common thread, thinking about diversity and connecting with those outside of mainstream communities has become a new and innovative stream of consciousness which needs to be explored.

This presentation brings therapists connecting from around the world with the aim of understanding what we can learn as a profession from cultural, societal and musical aspects of communities.

A discussion will take place to understand:

- How is music used/related to in communities around the world?
- What are the cultural and societal expectations of traumatised families?
- How does their music reflect their experiences?
- How does and can music therapy support the families we work with?
- How can we support each other as colleagues in this challenging work?

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Exploring older adults' perspectives on participating in online music experiences

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Rationale: The COVID-19 pandemic has highlighted and further exacerbated the social isolation often experienced by older adults. The importance of music as a wellness resource for older adults is also well documented. Since the pandemic, online music/music therapy programs have emerged as potentially viable and physically safe ways to promote cognitive and mental health and reduce feelings of social isolation for older adults in various contexts. However, collaborative online music experiences have to be adapted in order to accommodate sound latency issues. Furthermore, in music therapy, the aesthetic and relational components of music experiences typically contribute to the realisation of positive therapeutic outcomes, but we do not know how these components are best realised in an online format. The purpose of this study is to understand older adults' perspectives on aesthetic, relational, and technological components of online group music activities. **Method:** This study employs a qualitative descriptive design that incorporates content analysis techniques to analyse survey and interview data gathered via older adults' participation in online group music sessions organised according to four main methods of music experiences utilised in music therapy. **Results and conclusions:** The results of this study are being used to design realistic parameters for quality online music experiences to be applied in future music therapy research and practice with older adults. Moving forward, even in a post pandemic world, quality and accessible online music experiences could offer a feasible social or therapeutic alternative for older adults who are socially/geographically isolated.

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Exploring the quality of the relationship between adolescents with intellectual disabilities and their siblings: A narrative review

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Background: The impact of a child with Intellectual Disability (ID) on family life has been widely researched, often from the parental perspective. The quality of the sibling relationship, however, is important because peer interactions in this relationship during adolescence shape the identity. This research aims to identify modalities that can affect the quality of the sibling relationship when one of the siblings has ID. **Methods:** A narrative review of recent studies (2000-2020) was conducted to identify different modalities that can affect the sibling relationship's quality. **Results:** The quality of the sibling relationship was determined by three general modalities: (i) context involving the practical aspect of daily life, including planning, structure, home- and school-environment; (ii) role involving different roles siblings can assume (e.g. caregiving, advocacy) and the consequences these roles entail (e.g. feelings of guilt, anxiety); (iii) creativity involving creative abilities and skills of siblings and its use in interaction with their sibling with ID. **Conclusions:** While creativity has important implications for the quality of sibling interactions, research is scarce in comparison with context and role. This review indicates the need for further research about creativity: (i) which creative abilities do siblings use to interact with their sibling with ID, and (ii) how could music therapy be helpful to support and facilitate this creativity? From science to practice: A music-based support program to facilitate the creative relationship between siblings in daily life could be developed.

Increased valence and arousal modulation with music therapy in Williams Syndrome

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Williams syndrome is characterised by specific alterations in neurocognitive architecture and functioning. Here we analyse the brain (EEG) activity of a 26-year-old man with Williams syndrome during a music therapy session involving both active (piano performance and improvisation) and passive (relaxing music listening) interventions. For each type of intervention, EEG data was segmented and frequency bands (e.g. alpha, beta, theta, gamma) were extracted, as well as arousal and valence indicators. Data analysis revealed a significant increase of valence ($p < .05$) at the end of the music therapy session. The passive intervention produced a significant decrease of arousal ($p < .05$) while active interventions produced an (non-significant) increase in arousal. Greater alpha power was demonstrated in response to active interventions. Although further research is needed, these results seem to indicate that music therapy interventions may be useful to modulate emotional states in Williams Syndrome.

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Intersectionality of gender, age and being ‘yellow’: Experiences of an East-Asian music therapist

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What can we do when our clients expose their racial prejudices in therapy spaces? Furthermore, is it possible to share therapeutic spaces whilst holding the multitude of assumptions of ethnicity? The complexity of racism and systems of oppression cannot be overlooked, as it is often multi-faceted and non-linear (Collins & Bilge, 2016). In this paper I will focus on my three intersectional axes contributing to my experiences (Crenshaw 1989): being East-Asian, being a woman, and the perception of my age. The last axis is significant as I am often mistaken for being too young to hold a position of therapeutic professionalism and by extension, boundaries within the music therapy space. It will also ask the question, “what does it mean to call Britain home when painful experiences of racial, sexist and ageist discrimination are an everyday occurrence?” The negative impact beyond the therapy space will also be explored in more detail.

Inspired by a recent paper on experiences as yellow women living through COVID-19’ (Fang and Liu, 2021) and being involved as a panellist in the “Racial Awareness in Music Therapy” event (BAMT, 2021) hosted by British Association for Music Therapy in April 2021, I will highlight my lived experience of being an East-Asian woman in the UK and draw upon similar experiences across Western European ideologies. To probe the complexities further, Cynthia*, who recently chaired the aforementioned BAMT event, will be raising questions throughout this presentation, in a dynamic discussion, disturbing the normal manifestation of a paper presentation.

*Anonymised name

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Intimacy, mutuality and negotiations: Dialogic moments in joint improvisation

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Introduction: Joint improvisation between therapist and client is fundamental to most approaches in music therapy practice but is far from being fully understood. The present study aims to shed light on the potential meanings of joint improvisation between therapist and client in music therapy.

Method: Deploying phenomenological methods, semi-structured interviews were conducted with five musicians and five music therapists, each of whom provided a recorded musical example of their joint improvisations with a client or another musician. **Results:** Two types of dialogic moments emerged across both groups: “primal” and “mature” moments. Primal moments included “moments of listening and attuning” and “musical proficiency” (musicians); and “moments of listening and attuning to the client’s being” and “transforming the moment” (music therapists). Mature moments incorporated “moments of forming musical relationships” (musicians); and “moments of creating a significant bond between therapist and client” (music therapists). **Discussion:** Mature moments were illustrated as moments where both therapist and client expressed themselves authentically, and often incorporated synchronisation discrepancies between them. Amongst the musicians, mature moments involved challenging each other’s boundaries as well as becoming closely and intimately acquainted. Primal moments incorporated the conditions that facilitated dialogues: active listening, active musical gestures and facilitation of augmented musical time frames between therapist and client; and deep listening and musical virtuosity among the musicians. The comparison between the two groups highlighted the music therapists’ technique of creating versatile time frames while inviting their clients to improvise and emphasised the musicians’ capacity to engage in a wide range of musical relationships.

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Live, personalised, improvisatory music in a UK hospital: How do musicians develop a 'vocational habitus' for delivering such work?

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Research has demonstrated many patient benefits of music engagement in hospital settings (e.g. Evans, 2002, Nilsson, 2008). Live music has been shown to be particularly adaptable to patients' situations, providing social interactions and enhancing patient satisfaction (Van der Wal-Huisman et al., 2018). Yet, research tends to focus on patients rather than musicians, with less understanding of how musicians train for, adapt to, and experience delivering live music in hospitals. This is particularly important when musicians are increasingly working in health contexts, without necessarily having trained as music therapists.

This presentation will report on the experiences of musicians delivering a new service at Chelsea and Westminster hospital, London. The service – named ProMiMiC – is based on a practice developed by Hanzehogeschool Groningen and the University Medical Center Groningen (The Netherlands) in which small groups of musicians make tailor-made music with patients. Research will focus on the development of knowledge and skills related to the 'vocational habitus' of the musicians working on the project. Vocational habitus can be thought of as “developing not only a 'sense' of how to be, but also 'sensitivity': requisite feelings and morals, and the capacity for emotional labour” (Colley et al., 2007). The aim is to investigate how musicians enter a new field (the hospital) and, through interacting with other contexts and people, develop a sense of how to be and the feelings and morals involved in delivery of this service. The presentation will close with reflections on the intersection of ProMiMiC with music therapy at the hospital.

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“Mourning as a motivation for creativity”: A person-centred approach for music therapy in the processes of mourning and loss

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People who faced death encounter spiritual and existential problems due to the fact that the normal flow of their lives is disrupted. Music therapy is referred by many researchers as a supportive and alleviative therapeutic approach, which promotes the physical, mental, emotional and existential well-being of the mourners. Since the process of mourning is unique, a qualitative research pilot study of phenomenological approach was conducted to investigate the contribution of music therapy to the client's process in accepting and coping with mourning. This case study is with a music therapy client, Maria, who is 42 years old, and suffered from her companion's loss. She lived in a Chronic Diseases Institution, where she participated in a weekly interactive music therapy (of humanistic orientation) having individual sessions for a year (2019-2020). Clinical music and lyric improvisation, pre-recorded songs, songwriting and music composition were the main interventions used. All sessions were videotaped and analysed according to the therapeutic, narrative analysis. The emphasis was given to three milestone sessions. After them, Maria felt safe to express and process feelings of anger, sadness, shame, pain in different creative ways. She gained courage and developed a sense of self-worth, leading her to peek experiences with hope and faith. It seems that Music Therapy contributes effectively to the expression and process of deep and painful feelings and thoughts, while it awakes and blossoms the innate humans' creativity. Further research is needed.

Music-guided resonance breathing during gynaecological surgery under local anaesthesia

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A published meta-analysis on music interventions in the context of surgical settings revealed reduced postoperative pain, anxiety, and analgesia needs as well as improved patient satisfaction (Hole et al., 2015). Clinical studies have shown that music before or during gynaecological surgeries can soothe anxiety and pain levels (Schaal et al., 2021; Hepp et al., 2018). During the COVID-19 pandemic, pressure increased to perform procedures previously performed under general anaesthesia now under local anaesthesia in order to save anaesthesiologic resources. For the frequent procedure of conisation of cervical dysplasia, it has been shown that the procedure under local anaesthesia has a comparable oncological safety as under general anaesthesia (Rezniczek et al., 2020). Nevertheless, even with complete analgesia (which cannot always be achieved), the technique requires the patient to be exposed to a highly stressful and anxiety-inducing situation. There is growing evidence, that patients' active participation in music-based interventions could yield higher effect sizes in terms of cardiovascular relaxation and anxiety reduction (Howlin and Rooney, 2021). To achieve this, we developed the method of music-guided resonance breathing (MGRB) based on a single slow-paced breathing session (Fuchs et al., 2018; You et al., 2021). Specifically composed music guides patients to actively regulate their own breathing and minimise the psychophysical distress. The aim of our project was firstly to establish perioperative MGRB in a feasibility study and secondly to systematically investigate its influence on anxiety and pain levels. The poster presents the process of developing and implementing MGRB and the results measured by State-Trait-Anxiety Inventory and McGill Pain Questionnaire.

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Music making with people with dementia: Perspectives from music therapists and community musicians

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There is an increasing body of evidence to suggest that engaging with music can have beneficial effects on people living with dementia (van der Steen et al., 2017). Over the last few years, the number of music and dementia activities in the UK has been increasing, and large numbers of music therapists, and musicians who work in the community, have been working with this population (Bowell, 2017).

The aim of my research is to gain a better understanding of how music making with people with dementia is approached and delivered. To achieve this, I have conducted interviews with a number of music therapists and community musicians who are actively involved in delivering music-based activities with people living with dementia. These interviews cover the content of music sessions with people living with dementia, the impact of this work on the people involved, and the kinds of experience and training that are relevant to delivering this work. In addition, I have explored how these music professionals, and the music organisations and initiatives they work within, have adapted and developed their practice in response to the Covid-19 pandemic.

By drawing out the key themes from these interviews using thematic analysis, I hope to bring about a better understanding of both the skills and techniques used by music professionals, and the impact of the work on people with dementia and the music professionals themselves.

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MuSICCA: The Music therapy Sensory Instrument for Cognition, Consciousness and Awareness

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A growing number of children and young people are surviving severe acquired brain injuries due to advances in healthcare. However, many fail to emerge from disorders of consciousness (DOC). Diagnostic, clinical, and ethical challenges are prominent in work with this group. Misdiagnosis can have severe consequences for children and their families, including inadequate care, rehabilitation and stimulation, reduced accessibility to services, and inappropriately limited opportunities for participation. The family and the professionals in a collaborative constellation of support often contribute to caring for the child.

Information about the child's responses to sensory stimuli are fundamental to maximise the quality, mode and intensity of the sensory stimulation provided within care, treatment and education. The Music therapy Sensory Instrument for Cognition, Consciousness and Awareness (MuSICCA) has been developed to address this need. Using a standardised protocol with live music, it assesses responsiveness across the auditory, visual, motor, tactile and communication domains. Drawing on the experiences and opinions of families, multidisciplinary teams and international experts in music therapy and paediatric DOC, its development involved adaptation of a standardised adult assessment tool in order to meet the specific needs of children with DOC. This presentation will describe an international multisite study to validate the MuSICCA. The presenters will present preliminary findings from the clinical use of the MuSICCA.

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Music for classroom wellbeing professional learning: New practices for music therapist teacher support

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This paper will present a new approach to music therapy practice in schools that disrupts the traditional model of working as an expert with individuals and groups of students. The practices described in this presentation will be positioned as a critical response to the body of literature pertaining to music therapists working to support teachers.

The presenter will draw on her PhD research, which used an ethnographic approach, to provide rich descriptions of the ways in which working directly with teachers can foster the wellbeing of the students in their class, student-teacher relationships, and teachers' own understanding of self in the school system. Data captured in the field of study (including video and audio footage, photographs and planning materials) will be shared to illuminate the growth of six participating teachers through their engagement in a music therapist-led professional learning program. The difference between this approach, in which teacher needs were foregrounded, and traditional music therapist teacher support programs will be highlighted. This presentation will further illustrate the ways in which teachers can develop practices to counter the performative pressures of the current neoliberal school context when working alongside a music therapist positioning as enabler rather than expert. The presenter will conclude by proposing a disruption to the traditional enactment of music therapist consultation and collaboration programs. Principles for supporting professionals and caregivers to use music to transform the lives of themselves and the people they are caring for without a music therapist present will be suggested.

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“Musicoterapia Migrante (Migrant Music Therapy)”: Pilot project of integration between music therapy and ethnopsychiatry

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Migration phenomena pose the need for music therapists to use integrated methodologies that allow a sensitive approach to cultural differences.

The interaction among music therapy, child neuropsychiatry and ethno-psychoanalysis, which share a psychodynamic approach, has been of fundamental importance in a seven-year project at San Paolo Hospital Milan, aimed at the treatment of neuropsychic development disorders linked to migration trauma.

The collaboration in the project of the CMT School of Music Therapy of Milan has guaranteed the availability of music therapists trained with a critical knowledge of music therapy, who have been able to operate with flexibility through different music therapy psychodynamic and relational approaches (intersubjective approach, Benenzon model, etc.) and to adapt the music therapy component of the treatment settings in relation to the interventions of the other treatment disciplines involved.

The presentation illustrates the integration of different disciplinary contributions: cultural mediation based on the ethno-psychoanalytic model (Moro, 1994), the involvement of parents in observation sessions (Vallino, 2009), and the balance, in the setting, between the neuropsychiatric and music therapeutic approaches of the therapeutic couple. This equilibrium has reinforced the function of containment, has expanded the identification models offered to the patient and has encouraged the mutual translation from verbal to non-verbal, supporting the development of language and thought. This has been a model of intervention that turned out to be functional in the treatment of children and adolescents (with autism, selective mutism, ADHD, conduct disorders) and an application of Music Therapy in a “transdisciplinary” perspective.

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Music medicine for mechanically ventilated patients: Evaluating the effect of music interventions on delirium prevention, psychological and physical outcomes

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Mechanically ventilated (MV) patients experience several stressors at intensive care units (ICU). Continuous noise (50-60 dB), artificial lighting, patient isolation, sensory deprivation, inhibition in communication and control are associated with high distress and anxiety (Lindgren et al., 2005), as well as the development of psychiatric disorders such as delirium, anxiety disorders, or depression (Ampelas et al., 2002). The longer the delirium condition persists, the more it contributes to prolonged duration of mechanical ventilation and hospital stays, increasing the rate of morbidity and mortality (Browning et al., 2020). In addition, invasive mechanical ventilation is an expensive intervention, and the length of its use is positively correlated with the risk of further complications (Lindgren et al., 2002, Browning et al., 2020). Music therapies are ideal supplementary interventions to reduce anxiety and promote relaxation in critically ill patients (Chlan et al., 2014).

We are launching a Music Medicine Program in RCT design, providing a nonpharmacological method to improve the living conditions of MV patients. Our primary goal is to reduce their stressors, and to prevent the development of delirium by regular music listening. We hypothesise that the music group may require less sedation, shorter period on mechanical ventilation, and shorter time spent in the ICU, than the control groups. Further, values of the music group on some psychological and physiological parameters are expected to be closer to the normal range. In our study we compare the effects of classical music, with white noise listening, and retrospectively examine the impact of musical preference as an influencing factor. Our research could also help to understand the role of music interventions in the development of delirium.

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Music therapy assessment and children's musical development

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The area of music therapy assessment has been a topic of interest since the early stages of the music therapy profession. Historically, in the 1980's and 1990's assessment in music therapy was an evolving topic. Informal assessment procedures were common in clinical practice and there were not so many formal assessment tools designed for the different client populations. It was very common for music therapists to adapt assessment tools from other disciplines (e.g., music education, psychotherapy, physical rehabilitation). At the beginning of the 21st century, music therapy clinicians and researchers became involved in the evaluation of music therapy as a research topic. Linking clinical practice and research methods, different assessment procedures and tools were designed and tested with different client populations

Music therapy literature reports that "music-centred assessment experiences" can be used to assess children's needs and to detect correspondences between musical and non-musical areas (sensory-motor; perceptual-auditory; psycho-emotional; cognitive; communicative; social). Multidisciplinary research on children's musical development highlights the results of making music for their development. Therefore, professionals and researchers from different disciplines (e.g. music therapy, music education, special education, music psychology or neuroscience) are interested in the potential of music for stimulating areas of children's development and as an assessment tool.

This paper presents the theoretical and methodological connections between children's musical development and music therapy assessment to explore, from research and clinical practice, theoretical and methodological issues that contribute to the assessment and intervention of children with different clinical needs including developmental and neurological disorders.

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Music therapy assessments as a contribution to the process of clinical reasoning

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This presentation focuses on the importance of clinical reasoning – including assessments, therapeutic objectives and evaluation of therapy outcomes. It gives an insight to the psychometric standards of assessment tools, their clinical application and interpretation. Different assessment tools are presented with a focus on the music therapy expression and communication scale MAKS, developed by the author. Challenges are discussed when using assessment tools following the clinical reasoning process. In conclusion this presentation makes a contribution to a systematic and professional clinical performance in music therapy.

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Music therapy for clients and staff -support for rehabilitation team members through music therapy during the SARS-CoV-2 pandemic

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In the Hungarian National Institute for Medical Rehabilitation music therapy has a 25- year-old tradition. In 1997 music therapy was limited to one department with one music therapist; now three music therapists work together, and most of the departments apply music therapy in the multidisciplinary rehabilitation team.

Since the outbreak of SARS-CoV-2 pandemic the Hungarian National Institute for Medical Rehabilitation has been obliged to reorganise the departments. Professional colleagues specialised in rehabilitation were obliged to care for Covid patients. This situation of the colleagues was very stressful for the whole rehab team, fostering instability, and unpredictability. This uncertainty was also exacerbated by the sudden change in hospital management due to orders from a higher level. The music therapists decided to sing supportive songs together with staff and make video clips with the medical teams to give support to the Institute.

These short musical films gained much attention, thanks to which a choir based on staff was also formed. These musical organisations - in addition to the beneficial effect of stress release - had an unexpected positive incidental consequence, that through inviting colleagues to express their frustration with the pandemic, and with the restrictions, the music therapists found that through this situation more colleagues became open to music therapy, and the professional communication between the music therapists and other rehabilitation specialists also improved.

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Music therapy for preoperative anxiety reduction in women undergoing total laparoscopic hysterectomy: A randomised controlled trial

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Hysterectomy is the second most common surgical procedure in the uterine fibroids and represents the primary indication for surgery with a laparoscopic approach that guarantees benefits in terms of perioperative surgical outcomes and better patients' quality of life if compared with open surgery. Music therapy is a non-invasive, safe, and inexpensive intervention that can be delivered easily and successfully. Results of a recent meta-analysis demonstrated that music could be offered as a way to help patients reduce pain and anxiety during the postoperative period. Our aim was to investigate the role of music therapy on anxiety and perception of pain in patients undergoing elective hysterectomy for benign disease. The music therapy protocol is based on results from psychological and music tests offered to patients which were personalised. Music therapy techniques that were proposed to patients were listening to recorded music to relax the patient and playing live music with improvisation techniques. On the surgery day, the patient was accompanied by the music therapist all the way from her room to the operating theatre in order to play music together live and adapt the playlist, based on the patient's needs, in the preoperative period. Subsequently the music therapist monitored playlist listening during surgical intervention until the patient's awakening. Our first findings offered evidence in favour of the use of music therapy as the method to reduce perioperative anxiety and postoperative pain in patients undergoing total laparoscopic hysterectomy for benign disease. The music therapy study was performed at "Del Ponte" Women's and Children Hospital of Varese (Italy).

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Music therapy for surgical patients: A comparative study of the course of surgical patients with or without music therapy

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Undergoing a surgical procedure can be an extremely stressful and overwhelming experience for many patients. Hospital anxiety may cause acute psychological distress before an operation. It is possible to affect both the anaesthesia process and the patient's recovery. As music has been proven to be beneficial for people's wellbeing, in this study we examine whether music therapy has a measurable relaxing effect on surgical patients with the possible benefit of reduced drug use and patient hospitalisation time. Of course, we do not suggest that music therapy will replace medical and pharmacological treatment, but only investigating how the intervention of music therapy can improve and support the mental health of the patient. This study is comparing the effects of receptive and interactive music therapy. The experimental design includes four groups: a group having Receptive Music Therapy in Greece, a group receiving Interactive Music Therapy in the UK and two control groups, one for each location. The group having Receptive Music Therapy was given headphones to listen to music, choosing between different musical genres. The group receiving Interactive Music Therapy had music therapy sessions with a qualified music therapist. All four groups had similar demographic and clinical features. Physiological characteristics (i.e., blood pressure, electrocardiogram, number of breaths, blood oxygen saturation, epinephrine secretion) and psychological responses (i.e., questionnaire completion) were measured before and after the operation. We will present the preliminary results of the study and discuss the next steps.

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Music therapy in a pandemic: Possibilities and limitations

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The COVID-19 (SARS-CoV-2) pandemic has caused a global health, social, economic and emotional crisis of the people around the whole world. Apart from health consequences (the death of many people, bad health conditions during and after the infection), one can also observe serious psychological consequences which have an impact on individuals regardless of their age and geographic location. Due to the risk of virus transmission, the personal contact between people has been reduced to the minimum and social and professional functioning has been moved to virtual space. Thanks to such platforms as Zoom, Teams, Skype, WhatsApp and Google Meet, we can still actively take part in our professional or family life without any significant obstacles.

The therapeutic and music therapeutic services – conducting sessions, counselling, meetings have also been transferred to virtual reality. The aim of this poster is to show the possibilities but also limitations of conducting music therapy sessions online as well as present how a Music Therapy Centre has been functioning and supporting its clients – the new and old ones from before the onset of the pandemic, during lockdowns and rising epidemic waves. The author will present practical tips and solutions to particular therapeutic actions as well as organisational strategies.

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Music therapy interventions for regulating symptoms of delirium in acutely hospitalised older patients: A PhD project

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This feasibility study aims to explore music therapy as a treatment for delirium in acute-geriatric patients. Delirium is a neuropsychiatric syndrome represented by an acute change in awareness, attention and cognition, precipitated by an acute illness. Its prevalence is high among acutely hospitalised elderly patients, particularly those with pre-existing dementia. Delirium is under-recognized, prolongs hospitalisation, and is associated with a functional decline and mortality. It is under-researched and efficient treatment alternatives are still lacking. Music therapy interventions show positive effects in decreasing agitation and improving engagement in persons with dementia, and in inducing relaxation and reducing anxiety in general hospitals and ICU, but there is little evidence on their effectiveness in treatment of delirium in acutely hospitalised elderly patients. This PhD project aims to develop single session music therapy protocols (SSMTPs) for regulating symptoms of delirium in acutely admitted geriatric patients, necessary for designing future randomised controlled trials. The reasons for focusing upon SSMTPs are the patients' short and unpredictable length of stay at the acute geriatric wards, as well as the high individual differences between the patients. SSMTPs will be developed through a sequence of two interrelated sub-studies: an experimental study on music therapy intervention types and an experimental study on optimal dosages (duration, frequency, time of day). The studies will explore which delirium symptoms to target, sensitivity of the assessment tools for evaluation of effect, and practicalities regarding patient recruitment. Data will be collected using standardised delirium assessment scales, and through videotaping and microanalyses of the music therapy sessions.

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Music therapy in the classroom: A powerful tool to promote inclusion and emotional literacy in mainstream education

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This paper describes a specific group music therapy intervention and introduces Music Therapy for Inclusion (MTI), showing how music therapy can support inclusion and the development of emotional and social skills. Paola Esperson will present the results of an international research project, run in Italian and British primary schools. Theoretical references and a set of practical tools will be presented, highlighting the potential of MTI as a strategy to promote inclusion, and to engage the schools' communities in the process of systemic changes. Group MTI can become a playground and environmental facilitator to experience empathy and promote a cultural shift: students can engage, through music, in social interaction and develop the ability to understand and relate with all forms of diversity, initiating dialogues to prevent discrimination, separation and violence. Silvia Ragni will present music therapy projects run in international schools. Her work was organised in close collaboration with families and teachers, to support the inclusion and the wellbeing of children from different countries, with multicultural backgrounds, who experienced several changes, uprooting, loss of friends and communities. The full inclusive Italian school system and the UNESCO guidelines for inclusion have inspired new strategies and methods of intervention. Decades of music therapy in inclusive settings have led Silvia and Paola to a deeper understanding of the impact of music therapy in supporting inclusive education and therefore the development of a culture of peace.

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Music therapy, neural dynamics of craving and intense emotions in addiction treatment: A feasibility study in a community setting

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This project presentation aims to show first results demonstrating the feasibility of implementing music therapy in a Community Substance Misuse Treatment Service (CSMTS) while also biomarking therapeutic processes utilising EEG hyperscanning. Music therapy in CSMTS is relatively unknown, even though a much larger number of patients could be treated with these services. There is a large evidence base that music therapy can help patients with substance use disorder, showing efficacy in a number of outcomes, although conclusions are somewhat incongruent and inconsistent (Ghetti C et al., 2019; Hohmann et al., 2017). However, musical elements can become cues inducing memories of drug taking experiences and associated strong emotions, which can lead to strong craving and has to be dealt with within therapy/therapeutic relationship (Fachner, 2017; Short and Dingle, 2016). This process has not been studied in situ so far and we aim to describe and analyse context related data of naturalistic occurrences.

Main goals are to establish an in-situ documentation and analysis of authentic neural dynamics of intense emotions in music therapy and to investigate how emotions and state-dependent recall are related to drug memory. We will explore what effect group or individual music therapy sessions have on treatment outcomes, and the effect on biomarkers of depression, anxiety, craving measures and the neural dynamics of music and emotion and brain to brain coupling as measured by EEG. Due to Covid, causing a delayed project start, we will present first results of the feasibility study reporting on the research design, methodological challenges and objectivist case studies (Ridder and Fachner, 2016) of group and individual treatment.

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Music therapy on site in COVID-19 ICU: Effects of a single session on anxiety, HR, SpO2 and satisfaction

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Introduction: Hospitalised Covid-19 Patients are isolated from their families for a long and uncertain period. They remain in an undefined mental space to wonder if this is a temporary separation or a step towards final departure. This traumatic separation could make patients vulnerable to different degrees of stress disorders as well as depression and anxiety. The aim of this study was to evaluate the feasibility of introducing music therapy on site in an Intensive Care Unit Covid-19 (ICU19) and investigate the immediate effects a single music therapy session has on patients' anxiety, HR, SpO2, satisfaction compared to standard care. **Material and method:** Patients with SARS-COV2, hospitalised at ICU19 - Bari (Italy) were enrolled in this study. A mixed methods approach pre -post design was used. Participants were randomly assigned to the control group (CG) or the music group (MG). Participants in MG received an individual bed-site single session of 20–26 min of receptive music therapy (RMT) by a certified music therapist GIM fellow (MTt) on site. STAI Y-1 (PRE and POST) was administered. HR and SpO2 were recorded from the bedside monitor. Participants in MG were asked to fill in an optional open-ended question. **Results:** Significant differences in pre- and post-anxiety levels, decreased HR and increased SpO2 were observed in MG compared to CG. High levels of satisfaction were recorded in MG. **Conclusion:** This study indicates the feasibility and effectiveness of introducing on-site music therapy in a Covid-19 ICU on anxiety, HR, SpO2 and patient satisfaction.

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Music therapy outcome study for children with Autism Spectrum Disorder through integration of child neuroimaging and neuropsychology: An exploratory study

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The study investigated effects of improvisational music therapy (IMT) on social interaction and communication skills of young children with ASD and the relationship between behavioural and neurodevelopmental changes over time. Children ($n=15$, mean age = 4.44 ± 0.84) participated once weekly IMT for a year plus the treatment as usual (TAU) whereas children in the TAU group without IMT ($n=13$, mean age = $4.62, \pm 0.87$) were selected using 1:1 propensity score matching technique from the existing data of a larger study. A single-blind pre and post measurements were employed: The Autism Diagnostic Observation Scale (ADOS) social affect domain and the Childhood Autism Rating Scale (CARS) scores were the primary outcome measurements. Secondary outcomes were various measures, including child neuroimaging. Repeated measures ANCOVA and GEE were applied to determine whether changes were clinically meaningful. The overall results indicated that IMT was more effective at facilitating social affect domain in children with ASD than the TAU condition (ADOS social communication & CARS, $p < .05$). In children who received IMT, functional connectivity increased significantly after treatment in one area (right precuneus) and decreased in four areas (right inferior temporal gyrus, right anterior cingulate gyrus, right temporal pole, right ventral diencephalon). There were significant correlations with clinical outcomes in three areas (right precuneus, right anterior cingulate gyrus, right temporal pole). The implication of the results will be discussed further. This work was supported by the Ministry of Education of the Republic of Korea and the National Research Foundation of Korea (NRF- 2017S1A5A2A03068100).

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Music therapy research trends in Spain

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The use of music for therapeutic purposes has a long history in Spain, but research in Music Therapy is under development. Music therapy is applied in education, medical and community settings and training programmes for music therapists are offered at different universities and private institutions. Previous studies on the status of music therapy research in Spain underlined the need for increasing the number of doctoral theses, journal indexed publications and research studies carried out by Spanish music therapists. The aim of this study is to update information on the status of Music therapy research in Spain. Data collection includes the review of online databases as SCOPUS, WOS, MEDLINE, PSYCINFO, PUBMED, TESEO (Spanish Dissertation Database). Inclusion criteria are journal indexed publications, research studies and doctoral theses carried out by Spanish music therapists in the last fourth decades. Data analysis covers single and cross-data categories of information to identify strengths and weaknesses, opportunities and threats (SWOT analysis). Descriptive results of this study presents and profiles "trends and gaps" of music therapy research in Spain and provide clinicians, researchers and students information related to clinical practice and other professional areas of music therapy in this country.

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Getting together: Parents' reflections on participating in music therapy with their preterm infant in the NICU

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Background: Neonatal music therapy services have progressed in the last decades to an evidence-based modality for preterm infants and their parents during their treatment period in the neonatal intensive care unit. While there are increasing numbers of randomised controlled trials of neonatal music therapy studies applied within a family-centred approach, parental perspectives in qualitative reports in the field are scarce. This qualitative inquiry aimed to explore parents' experiences from participation in a family-centred music therapy intervention. **Method:** The qualitative inquiry was part of an embedded mixed-methods study, in which the collection of interview data took place after the procedures of a cluster-randomised clinical trial. Nine parents shared their experiences through semi-structured interviews after completing their participation in the music therapy intervention. The knowledge shared by parents was gathered and analysed using thematic analysis methods. **Findings:** A global theme of "being together in the music" emerged, encompassing the main concepts that parents described to occur during music therapy sessions. These include processes of connection to oneself or the baby, experiencing relaxation, and reaching a state of focus in the here-and-now. **Conclusions:** Parents were able to engage musically with their preterm infant during their NICU admission period and the music therapy was experienced as meaningful and important for creating special moments of connection with their babies.

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Music therapy with non-symbolic therapy owners: On using fully our special potential

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Recently, there is a growing awareness of social justice in music therapy (Pickard, 2020): power and roles are challenged, diverse identities are given more attention (Pickard, Thompson, Metell, Roginsky and Elefant, 2020). The following presentation attends to the overlooked worlds of non-symbolic communicators, and what music therapy can offer to improve their lives.

Symbolic thinking is humankind's special potential: it has a main role within our cultures and everyday lives. Wordless experiences, on the other hand, belong to the very beginning of life. As we develop, around two years of age, words, ideas, and symbols take over; nonverbal experiences are left mainly as inner realms, worlds of play, of arts, and culture (Stern, 1998). Moreover, people's lack of symbolic potential is considered a disability.

The number of non-symbolic communicators in our world was never examined. We can only guess that they are young and older - survivors of severe brain trauma, neurologically divergent people, those struggling with dementia, and more. These people cannot easily share their life experiences, meanings, and needs. In the absence of words, these people are highly marginalised, and depend on life-long support for their survival (Roginsky and Elefant, 2021).

This presentation offers that so long as humanity sustains the lives of non-symbolic communicators, it is equally fair to care for their psycho-social wellbeing, to gain interest in their worlds, and afford them better means of social participation. Short case examples and some thoughts are offered on the unique potential of music, and music therapy with non-symbolic individuals.

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Music therapy with preterm infants during kangaroo-care: A mixed-methods pilot study on physiological and electroencephalographic parameters and parental perspectives

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Background: Music therapy in neonatal care is a rising field of interdisciplinary interest in clinical practice and research. We aimed to explore the influence of music therapy on physiological parameters in premature infants during skin-to-skin care and to assess the parent's perspectives on music therapy and participation in the research project. **Methods:** The pilot project was conducted in an Austrian neonatal intensive care unit with a mixed- methods design with six preterm infants and their parents. We collected quantitative heart rate, oxygen saturation, brain activity EEG data and analysed them descriptively. Qualitative interviews were conducted to explore the parent's perspective and analysed by using Grounded Theory principles. **Results:** The results of the quantitative data indicate a stabilising effect on the vital parameters of premature infants. We identified longer interburst intervals during music therapy than the time before music therapy through EEG measurements. The parents reported that music therapy relaxed them and intensified the relationship with their children.

Discussion/Conclusion: In summary, positive changes regarding the vital parameters and brain activity of premature infants in the context of music therapy could be detected and numerous beneficial aspects for parents and children became clear. However, due to the small number of participants, the results should be interpreted with caution and call for more extensive future investigation in EEG measurements in preterm infants.

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Music therapy with young people from multicultural backgrounds

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The background of the research comes from the researcher's previous clinical experiences with migrant workers and young people in need. As part of the PhD project, this study ultimately focuses on giving voices to young people from multicultural backgrounds, collaborating together, and sharing experiences through music.

The purpose of this study is to gain an in-depth understanding of the music therapy experience of young people from multicultural backgrounds and to explore any effects of music therapy on their mental wellbeing. Particularly, the researcher investigates what person-centredness in music therapy with young people from multicultural backgrounds is and how it is perceived in what situation.

In this study, a mixed methodology will be employed. Participants will engage in 'Mu-Being', a music therapy programme based on a humanistic approach that has been used and developed through previous clinical experiences and collaborative works with clients from multicultural backgrounds. Qualitative data such as narrative and musical works are used to gain a holistic and integrated understanding of the experiences between young people, therapists, and music in sessions. At the same time, quantitative measures based on well-being theories are used to investigate how music therapy might affect the mental well-being of young people.

The results of the research are hoped to offer valuable data necessary to share the voice of young people from multicultural backgrounds in a creative way and to develop the social support and educational programme that reflect their experiences. The poster presents the overall context and works of this study.

New directions for Community Music Therapy: 30 years of a music therapy business

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Music therapists face an increasing number of employment options in their career. (American Music Therapy Association, 2020; Wheeler, 2015). One of these options is a community based private practice or music therapy business. With 14,623 music therapists worldwide (World Federation of Music Therapy, 2012), there is increasing need and opportunity to explore the music therapy business as a service delivery model (American Music Therapy Association, 2015). Challenges in service delivery have created opportunities for new directions in community music therapy that reflect social change (Trondalen and Bonde, 2019). Established in 1991, Creative Arts Therapies, Inc. provides music, dance/movement, and art therapy services to community agencies and private clients throughout the metropolitan Detroit area and Southeast Michigan, USA. Individuals of all ages and abilities are served through creative arts therapy modalities in the accomplishment of therapeutic aims: addressing physical, emotional, cognitive and psychosocial and spiritual needs. This poster looks back on the author's experience of 30 years of music therapy business ownership, with recommendations for new directions in future service delivery.

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Older men, masculinities, and music as a wellbeing resource

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Why do men commit suicide more than women? Why are there, generally, more women than men in therapy? Why are there more women than men in social support groups, choirs and dance halls? Why do men play instruments while women sing? All these issues are tied to norms of masculinity, which state for men not to show weakness, vulnerability or anything that might be associated with femininity. Without confusing norms with traits, it is important for music therapists to acknowledge that norms of masculinity exist and affect many lives. However, while some norms are detrimental to men's mental and physical health, others may also be seen as resources.

This poster is based on an empirical study with eight socially and economically vulnerable older men (64-86), who came together in a music listening group for 16 sessions to listen to music of their own choice and discuss self-defined topics. The materials were analysed thematically, with theories on men and masculinities, affect attunement and Goffman's dramaturgical perspective. The analysis shows that listening to and discussing music can serve as a wellbeing resource for older men in three ways: in offering an asylum where they can connect to, experience and express their emotional lives without jeopardising their "front stage" performances of traditional masculinity; generating a sense of cultural belongingness also in groups which do not engage in personal self-disclosure; supporting a sense of competence and agency through affording possibilities to learn and share their knowledge, which strengthens a positive sense of masculine identity.

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Online application of music choice method in community music therapy

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During the pandemic music therapists had to adjust their music therapy methods to be applicable online so that it would be safe and accessible to a larger group of people. The goal of the paper is to present the application of my group music choice method online as a diagnostic and therapeutic tool, which will enable early detection of complicated grief reactions, maladaptive defence mechanisms and mental disorders in the general population as well as therapeutic shifts in a limited period.

The poster presents a prospective, comparative study in the application of this method online during the pandemics of 2020 and 2021, within two small groups of adult participants from the general population, lasting three months. The paper MCM forms and individual and group protocols will be presented graphically. A new integrative model of grief therapy that includes several theoretical models of grief was used in the protocol analysis. The group as a whole showed a normal process of adaptation to the numerous losses we experienced, and in the individual protocols of the group members we clearly distinguish the normal grieving process from the complicated grief reaction which carries the risk of later psychiatric disorders, psychosomatic disorders and addiction.

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Online music therapy service during COVID-19 pandemic: Effects of DO.MUS protocol on elderly people

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Due to COVID-19 the pandemic has not only caused enormous losses in terms of human lives, it has also increased the sense of insecurity towards the future, isolation and social distancing which subsequently caused an increase of stress, depression and anxiety, especially in the elderly population. Lockdown measures and the need to reduce social contact to contrast contagion adopted by many countries led to the implementation of telemedicine and remote assistance interventions aimed at stimulating cognitive functions, keeping socialisation active in a protected dimension, promoting well-being and preventing the effects of stress. Pursuing these goals, the DO.MUS (DOMiciliary MUSic) protocol was built. DO.MUS consists of a detailed protocol of musical experiences for a total of 32 online meetings and two home meetings, when possible. Each meeting is divided into seven distinct moments: greeting, muscle awakening, singing, rhythmic instrumental activity on coded proposals, melodic instrumental involvement, verbalization and final greeting. In addition to the aforementioned purposes, DO.MUS also intends to strengthen family / caregiver ties by relieving families of the concern related to the search for activities and occupations for their loved one. Moreover, it strives to restore, within the functional limits of the elderly and create connections using "remote" mode with the community. During the presentation, DO.MUS will be thoroughly described. Additionally, results and difficulties of a pilot study conducted on elderly healthy and depressed people will be presented.

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Opening windows: New frameworks in music therapy

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The Hospital Music Therapy Project run by the Mapfre Guanarteme Foundation has been present since 2016 in different units for both adults and children of the main public hospitals in the Canary Islands. Since the advent of the COVID-19 pandemic in March 2020, music therapists have been subjected to limitations and restrictions on access to the units where they usually work. As a result, the team has had to reinvent itself, implementing a series of actions to allow it to provide continued support for both the patients and the medical staff.

This poster describes these different actions, ranging from remote service delivery tools (Knott & Block, 2020) through to the incorporation of new safety and hygiene protocols, along with other actions that seek to counteract the reduced humanisation of the hospital environment. The clinical objectives defined are the safety and proximity of the patient care and the support for healthcare professionals. In the case of the patients, complementary actions are implemented in addition to the online therapeutic process. Meanwhile, healthcare professionals are offered team sessions, relaxation support videos and actions to foster networking. The total number of sessions and actions carried out with patients and healthcare professionals is presented in the results. Finally, conclusions are drawn regarding the application of this methodology as a creative response to the healthcare challenges posed by the pandemic drawing on the versatility and flexibility of music therapy (Dileo, 2020).

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Parents' experiences of music therapy with their preterm infants from birth to home: An interpretive phenomenological study

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Israel

Background: Neonatal intensive care music therapy is an evidence-based intervention for preterm infants and their caregivers during neonatal intensive care unit (NICU) hospitalisation. Only scarce literature describes parents' experiences of NICU music therapy in a long-term perspective. The current qualitative study takes place as part of an international multisite randomised controlled longitudinal study evaluating the long-term effect of music therapy on parent-infant bonding. **Objective:** This presentation will discuss the findings of an interpretive - phenomenological study which aimed to explore parents' experiences of music therapy with their preterm infants in a long-term perspective from hospitalisation to home. **Method:** Fourteen participants of the main trial were invited to engage in semi-structured in-depth interviews intertwining listening to audio recordings from their music therapy sessions. The interviews were transcribed and analysed according to the principles of interpretative phenomenological analysis (IPA). **Discussion:** The discussion centres on the transformative potential of music therapy for parents with their preterm babies in the NICU and post discharge at their homes; the conditions which facilitate parents' engagement in musical dialogues and music therapy with their preterm infants and parents' daily use of music with their infants at home. **Conclusion:** The findings reveal how parents perceive the potential of music therapy to contribute to their relationship building, parental agency and well-being with their preterm infants from birth to home. This work may provide knowledge for music therapists working with preterm infants and caregivers in different stages of their development, as well as promote the implementation of music therapy into health services.

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Power, patriarchy and white supremacy in therapeutic spaces

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When considering the split within music therapy in the UK between a music centred approach and one based in psychoanalytic or psychodynamic informed thinking, the debate remains ever present. Annesley (2019) explores the conflict between the two approaches in a paper which highlights that a flexibility of approach is perhaps the answer to this conflict. I postulate that, in reality, Western centric ideologies with historical foundations in colonialism and white supremacy have a stronghold on the mindset of what is 'good enough' (Cozolino, 2004) which then denigrates the efficacy of other modalities of music therapy.

However, using a critical humanistic approach (Hadley and Thomas, 2020), it is becoming evident that a relaxing of the therapeutic boundaries that have held steadfast since the birth of psychoanalysis is becoming the accepted way to better meet a client of colour (Ajayi, 2020). In offering them a space that is considered 'alternative' to the traditional ideologies of music therapy practice, do we then further marginalise them, placing their experience in the 'other'? This paper explores this phenomenon and poses the question, 'In our practice, do we run the risk of perpetuating the oppression therapy was meant to diminish?'. It will turn a spotlight on the arguably elitist and patriarchal stance of Westernised, colonial therapy models. Furthermore, it endeavours explore the role feminist approaches can play and explore themes of power dynamics within the therapy space.

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Practising music therapy in the US, Sudan, and Japan and findings from a cross cultural perspective

Ai Nakatsuka

Japan

This presentation shares the journey of a Japanese music therapist who practised music therapy with individuals with disabilities in three countries, the US, Sudan, and Japan and findings from a cross-cultural perspective. Since she returned to Japan after gaining her education in the US and the Netherlands and practising music therapy in the US and Sudan, the essence of a cross-cultural perspective was applied not only in Sudan and the US but also in her home country, Japan. The music therapist's clinical and personal experiences will be shared in order to address the recognition of the importance of culture, the transcendental nature of music therapy to work across different cultures, and some challenges. The presentation will focus on ways to develop self-awareness, engagement, collaboration, flexibility, consultation, and empathy. Some episodes will be shared such as developing a strong rapport and teamwork with colleagues, making both local friends and non-local friends, and journaling. Moreover, it will focus on the cultural gap and expectations regarding the roles of the music therapist in addition to the therapeutic relationships and boundaries. Some necessary competencies and skills will be discussed such as collaborative leadership, advocacy, networking, and presentation skills. Furthermore, some examples will be shared in order to gain understanding and support for the music therapy service from colleagues, clients' family members, as well as budget holders in all three countries such as having them watch session videos and organising music concerts where the clients performed.

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Precarious, entrepreneurial, or subversive? The work of music therapy under neoliberalism

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Musicians applying to music therapy trainings often report being motivated by feelings of solidarity with the disadvantaged. Some see music therapy as a means of being less vulnerable to precarity themselves by earning a regular salary within a recognised profession. Others, perhaps from different social backgrounds, embrace the notion of a portfolio career, combining freelance music therapy with teaching, composition or performance.

Permanent posts (e.g. in the UK's National Health Service) are disappearing under government directed austerity and replaced by openings in commercial or third sector organisations which often employ therapists sessionally, transferring a greater proportion of risk to the therapist. Simultaneously the profession uses the apparatus of neoliberal medicine – the RCT, claims of achieving government policy objectives, neglect of people's social contexts in favour of symptomology – as markers of distinction.

Thus music therapy exemplifies some of the complexities of precarity in today's working landscape – with therapists seeking to evade neo-liberalism finding themselves exhorted to be “entrepreneurial” (e.g. Reuer 2007). Bourdieu's (1991) insistence on the relevance of a person's social position to their experience of precarity suggests potential ramifications of this for the profession and practice of music therapy.

It will be argued that music therapists (along with fellow socially-engaged musicians) have a particular role to play in subverting neoliberal norms by understanding their work as a situated activist craft. A skill-based focus on restoring rights to music (Rolvjord 2006) and serving communities ecologically (Stige 2002) redeploys entrepreneurialism in a musicianly and socially radical way.

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Promoting self-determination in music therapy for people with I/DD

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Self-advocacy is an important skill for all people. In order to work on self-advocacy, skills in self-determination must be first established. Self-determination involves decision-making, choice-making, self-awareness, and acting intentionally. For people with intellectual/developmental disabilities, self-advocacy and self-determination may be challenging due to environmental, social, or cultural barriers. Music therapy could be useful in the promotion of these skills, especially when approached from the perspective of social and affirmative models of disability. In this study, the researcher will utilise an action research approach as well as a set of therapeutic guidelines in order to explore the relationship between music therapy and self-determination in individuals with intellectual and/or developmental disabilities who communicate non-verbally.

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Psychometric sound! Replicating the diagnostic algorithm of the Music-based Scale for Autism Diagnostics (MUSAD)

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Introduction: Autism spectrum conditions (ASC) are common in people with intellectual developmental disability (IDD), but often remain undetected into adulthood. The Music-based scale for Autism Diagnostics (MUSAD) is a structured, ICD-10/DSM-5-based observational instrument and uses musical interaction to detect ASC-typical behaviour in adults with IDD and impaired speech. Calculations in a clinical sample of 124 adults with IDD provided promising results regarding interrater reliability and the ability of MUSAD to differentiate between people with and without ASD. The present study aims to replicate these findings in an independent sample. **Methods:** The MUSAD was applied to 71 adults with IDD. To validate the MUSAD's diagnostic algorithm, a ROC analysis was performed; the clinical judgement of an expert consensus conference was used as reference criterion. Interrater reliability was determined based on the ratings of two independent observers in a sub-sample ($n = 10$) using the intraclass correlation coefficient (ICC). **Results:** Application of the proposed cut-off score resulted in a sensitivity of 0.87 (95 %-CI [0.77, 0.96]), a specificity of 0.89 (95 %-CI [0.74, 1.0]) and an AUC of 0.90 (95 %-CI [0.81, 0.97]). The interrater agreement was $ICC(1.1) = 0.88$ (95 %-CI [0.61, 0.97]). **Conclusion:** The results support the objectivity and diagnostic validity of the MUSAD, enabling music therapists to contribute to team-based ASD diagnostics in verbally impaired people on a lower level of functioning.

Public health during pandemic times: Music audition, state change, and the therapeutics of Sufi approaches to listening

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Sound, whilst not visible, is a physical phenomenon that resonates in space and through individuals. Such vibrating sound waves are converted into electrical signals and processed by the brain's auditory network, affecting and leaving impressions on listeners. As a form of state change, sound is an immersive phenomenon, but approaches to how we encounter this immersion yield different results. Philosophical Sufi writings have for centuries made distinctions between 'passive hearing' and 'active listening'--advocating for the latter as a method for achieving spiritual balance through focused musical practices. Musical practices of Sufism in addition to promoting inward balance through active listening, also by extension facilitate the enhancement of attention and mental presence, emotional regulation, and reduced stress levels. This paper examines contemporary implementations of these centuries-old methods in relation to state change and its therapeutic benefits during the COVID-19 pandemic.

During pandemic lockdowns, the M.T.O. *Zende Delan Ensemble* released new music designed for use with Sufi meditation. Presented publicly via Instagram live, these guided daily sessions utilised Sufi music, motion, and meditation for the promotion of therapeutic benefits. This paper presents this example of accessible public health and examines the efficacy of active listening in managing stressors. Several questions frame this study: How do specific methods of musical audition transform space in a time of pandemic lockdowns to help reduce stress and anxiety? What are the specific features and approaches of Sufi music and listening that guide individual's faculties to concentration and relief from stressors?

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Reclaiming Jocelyn: One woman's journey back to her self through Music & Imagery Therapy

Helen Wallace

Whole Step CIC, UK

Music & Imagery Therapy (MIT), is a short-term goal based receptive method, created by Professor Lisa Summer (Summer, 2015). Supportive Music & Imagery therapy (SMI), focuses on building ego strength, self-worth, and supportive inner resources. Sessions utilise music-listening and imagery, as well as verbal psychotherapeutic interactions linking a client's experience in sessions with their everyday life (Paik-Maier, 2010). This paper describes a series of eight online Music & Imagery Therapy (MIT) sessions with an adult referred for mental health needs, which took place during lockdown in 2021.

The presentation details the emotional process and growth in sense of self which manifested over the series of sessions, and explores how the MIT method nurtured and supported self-exploration at a time of great stress and anxiety.

The case study uses insights from therapist and client to explore meaning and emerging narrative seen in music choices and changes in imagery created during sessions. Important life events and reframing of the client's understanding of self is discussed in relation to SMI as an agent for change in unhelpful patterns embedded in the client's self-belief system, alongside the importance of the therapeutic relationship, and socio-emotional impacts of Covid-19 on physical and mental wellbeing.

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Rethinking music therapy in the context of children and families: What next?

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In this presentation we draw on two ongoing PhD music therapy projects that involve children and their families in a community setting and a mainstream school. Similarly, the projects focus on following people's actions in music with an emphasis on how these actions stem from their own knowledge, resources and skills. We place this research alongside music therapy discourse which advocates for a broader understanding of music's affordances from various music and health practices. In accordance with this broad perspective, and through examples from our projects, we discuss how our work challenges current music therapy thinking in the context of children and families. In doing so, we aim to intentionally disturb narrow understandings of music therapy, but also extend an invitation to think about – what next?

Singing the same song: A survey of diverse music therapy practices and contexts on the African continent

Cara Smith

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The scope of music therapy practices in Africa is largely unknown. Reports of music therapy work are limited to those working in Africa independently, those who have witnessed the work of therapeutic music practitioners, or research from South Africa, from the continent's only accredited music therapy program. These practices appear to have no connection between them. Moreover, divisions exist between the ways practitioners support different ways of working. This exploratory study sought to plant the first seeds of mapping the scope of diverse music therapy practices on the African continent. Individuals included in this study identified themselves as music therapists, music therapy students, musicians who framed their work as "therapeutic," and practitioners who framed (part or all of) their practice as "music therapy" or "therapeutic musicing." Twenty-two participants from 11 African countries responded to an electronic survey. Participants described their professional identities, the contexts of their practices, and the intended purposes of their work in diverse ways. Results indicated that practitioners of a similar professional identity and context of work tended to use similar wording and phrases in their descriptions, regardless of their location, clientele, or whether these individuals are connected or have interacted. Strong interest was expressed for collaborating and connecting if avenues become available to do so. This is the first survey of diverse music therapy and therapeutic musicing practices in Africa and contributes towards creating a network of practitioners. The small sample size of this exploratory study invites future researchers to continue investigating this topic.

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Sing, play, move & soothe: An integrative review of music therapy with former preterm infants and their families

Verena Clemencic-Jones

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This presentation focuses on the process of conducting an integrative literature review into the effects of music therapy for former preterm infants and their families, with some potentially disruptive reflections and questions arising therefrom. Neonatal intensive care music therapy is a well-established therapeutic intervention worldwide, with professional literature demonstrating short-term benefits for preterm infants' neurodevelopment as well as for parent-infant bonding, and parental stress and anxiety (Ettenberger et al., 2014; Haslbeck et al., 2017; Loewy et al., 2013; Shoemark et al., 2015). However, minimal research has been published on the longer-term benefits of music therapy for this client population after hospital discharge (Bieleninik & Ghetti, 2019). The presenter will utilise both conventional academic literature sources, i.e. peer-reviewed journals, in addition to grey literature. S/he/they will also disrupt scholarly tradition by evaluating non-academic evidence of music therapy programs for former premature infants and their families, e.g. webinars, and/or social media posts. Such materials might not be considered rigorous enough for literature reviews. Nevertheless, arguments for their inclusion will be discussed. Additionally, questions to be examined include:

1. By researching a poorly represented area in the "written" literature, are we really "addressing a gap" or just not considering other forms of evidence available?
2. Could we broaden the term "literature" to include audio-visual evidence in music therapy literature reviews?
3. By not including non-English literature in an English language literature review, are researchers demonstrating bias?
4. How could music therapy develop professionally besides conforming to the current model of research/publication/presentation?

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Some sing to remember, some sing to forget: Music therapy with people experiencing homelessness in Swansea, Wales during the pandemic

Jo Humphreys

Nordoff Robbins, UK

At a time when staying home has been central to our lives, the crisis of homelessness has never been more pertinent; having somewhere safe and comfortable to call home is not only a fundamental human right but, as exemplified during the pandemic, an issue of public health. At the start of the COVID-19 crisis, local authorities across Wales provided emergency accommodation for 2,266 people, 407 of whom had been sleeping rough. The Wallich, a leading Welsh homelessness charity, is an organisation that has been instrumental in this effort.

In partnership with Nordoff Robbins, the largest independent music therapy charity in the UK, a music therapist began working at a hostel operated by The Wallich in the city of Swansea in August 2020. A qualitative therapist led research project on this work began in late 2021.

This poster will be informed by the research findings, providing a general snapshot of the role music plays in this specific context, whilst focusing on how the inherent flexibility, versatility and richness of musical engagement meets the complexities of individuals presenting with physical and mental illness, trauma, complex life circumstances, substance misuse and addiction.

The devastating economic, health and social impact of the COVID-19 pandemic is likely to exacerbate the homelessness crisis in the UK further. Music therapists and music therapy providers have a role to play in proactively responding to this growing area of need and using their unique expertise to provide crucial support to join the shared movement to end homelessness for good.

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Sounds of life: Music therapy in paediatric palliative care

Laura Cañellas García

Angeles Sin Alas Balears, Spain

The poster will present the Music Therapy in Paediatric Palliative Care (CPP) project in home care, which is carried out from the Asociación Ángeles Sin Alas thanks to the grant of Obra Social La Caixa. All of this is managed from the palliative care Unit of the Hospital Universitario Son Espases (HUSE) in Palma de Mallorca, Spain. This project began as a pilot project to accompany this vital moment and offer wellbeing and quality of life to children and their families, from October 2018.

This interdisciplinary work is carried out with HUSE UCPP, which is responsible for choosing the cases and objectives to work with, as well as monitoring them during team meetings. The poster will present the total number of cases who have received the intervention, the methodology used, the specific objectives and the evaluation and monitoring of these, as well as the results obtained following the intervention of the music therapist. In addition, the results of a family assessment questionnaire will also be presented at the end of the treatment plan. The literature that underpins the scientific poster will also be included.

Attention in the last moments of a person's life is of vital importance in promoting their quality of life until the end of a person's life. Paediatric palliative care not only addresses the patient's medical needs, but more and more units have qualified music therapists who perform commendable work, taking into account aspects of their overall health.

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Story continued with music

Krzysztof Stachyra

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Story Continued with Music (SCM) is a new receptive technique. The technique was created in 2015 during work on a project aimed at opening the possibility of wider use of music by teachers in order to take care for the mental health of students on various levels of education. It was a response to the need for a universal, simple technique that could be used in an education setting by music therapists as well as teachers. The author was looking for a technique that was similar to the theoretical foundation of Song Lyric Discussion, but offered much more space and relevance to music and experiences.

After a short induction phase, the story is presented as focus (using the terminology from BMGIM) to direct the experiences to a specific issue often presented in a metaphorical form. After it, a piece of music is played, the character of which is to extend and deepen the experience from the storytelling phase. The story is an inspiration, an introduction to the stage of listening to music, which offers time and space to deepen the experience and thoughts.

The poster will present the course of the SCM technique, its theoretical background and possible applications. An example of a course of action with the use of SCM will be shown.

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Stress management for non-clinical healthcare staff: A music therapy and wellness pilot program

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The number of people experiencing stress related to their jobs appears to be increasing as evidenced by eight in ten Americans reporting stress at work and nearly half of them reporting they need help managing stress (The American Institute of Stress, n.d.). These experiences have likely increased since the onset of the global COVID-19 pandemic, especially in healthcare settings. This writer has experienced what appeared to be a lack of support for non-clinical staff as compared to clinical staff in one place of employment, which encouraged this writer to focus on creating a music therapy and wellness program for non-clinical staff. The purpose of this pilot is to implement a six-week music therapy and wellness program which can be used with non-clinical healthcare staff to address experiences of stress. The needs of non-clinical healthcare staff, stress, wellness models, and wellness programs were closely examined to determine appropriate music therapy experiences and session plans for the program. This pilot provides a program manual and proposal which music therapists can use to implement a music therapy and wellness program to address experiences of stress in non-clinical healthcare staff but can also be easily adapted to a variety of clinical populations. This presentation will review the program model, session outline, and discuss potential modifications for use in various settings.

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Supporting families with infants on a palliative pathway through life on the NNU to end of life

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This presentation depicts the support of music therapy for one family on UCLH Neonatal Unit through to End of Life supported by the local hospice. The Music Therapist's involvement starts on the Neonatal Unit when a palliative pathway has been decided. Sessions form a means of providing 'normal' time together as a family, creating positive memories and support with interpreting infant cues. There is then the move to the decision to include music to hold the family when the infant is extubated at the family home.

It is well documented [Pinney, 2020] that neonatal referrals to hospices and palliative care services are much lower than they should be and links between neonatal units and hospices need to be further developed and strengthened. Further research needs to be conducted to enable us to explore how we can collaborate with the neonatal unit in strengthening and promoting the importance of supporting these families throughout their baby's life and into continuing bereavement. In this instance Music Therapy provided the transitional link.

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The Brass of the Saff: A practical guide to embedding diversity in music

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Leicester City is one of the most diverse city populations in England (Gov.uk 2018) but currently has no orchestra for young people. In a world where the lack of diversity amongst classical musicians is extremely poor (Bull 2019), Drum & Brass set up a project with funding from the Arts Council to start a brass band in the heart of the city. This paper will outline the project inception, pathway and measurable outcomes with impact report data to support its findings.

Placing the orchestra in a disadvantaged inner-city school meant a diverse representation from the community accessed the project. The young people had never played music before but with support were able to be part of a music making experience. They were given opportunities to play musical instruments where there would have been none before and they were able to perform in local and national competitions.

As a model of inclusivity, innovation and ingenuity in truly affecting change in classical music, the Brass of the Saff exemplifies a model that could revolutionise music educational practices nationally (Savage and Barnard, 2019). The use of mentors, young leaders and peer support means developing skill sets to further life chances and opportunities to take musical journeys to the highest levels. This paper outlines a model that should be replicated as it has proved to genuinely change the ethnic make-up of traditional brass bands with data to support its claims.

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The carbon footprint and impact upon biodiversity of the music therapy profession

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Many governments around the world have declared a Climate Emergency. A wide range of organisations, including those focusing on the arts, healthcare and education are working towards sustainability goals. These are being actioned by identifying key areas to investigate and cut carbon footprints (Badiali et. al., 2019; PHW, n.d; Sidford and Frasz, 2016; USW, 2020). As music therapists and music therapy providers, what areas of our work have a carbon footprint and an impact on biodiversity? How can we practice in the most environmentally responsible way?

This poster focuses on the areas of transportation, resources, and procurement. It will give examples of the carbon footprint and/or risk to biodiversity of various aspects of the provision of music therapy. At the same time, it will offer suggestions as to potential solutions leading to a greener music therapy, suggestions that may disturb and stimulate discourse as to the future of our profession. Elements explored will include:

- how practitioners and those administering music therapy services travel to work
- the broader picture of energy consumption by music therapy organisations including administration and session delivery
- musical instrument purchase and production
- accessing CPD trainings or events and materials

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The contributions of music therapy to the prevention and mitigation of paediatric medical trauma

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This research was completed as part of the doctoral program at Temple University. While trauma-informed care principles are gaining popularity within the field of music therapy, paediatric medical trauma is often underrepresented. However, it is well documented that medical treatment, especially during childhood can be stressful and potentially traumatic, leading to Post-Traumatic Stress Disorder or Symptoms after treatment. This is especially true for lengthy and invasive medical treatment. Music therapists in paediatric hospital settings are uniquely positioned to not only respond to previous trauma that is exacerbated by the hospital environment but work to mitigate the potential trauma that occurs within the hospital as a result of life-saving medical treatment. Through a qualitative longitudinal multi-case study, patterns of trauma and toxic stress were discovered in electronic medical record data of 14 paediatric stem cell transplant patients and analysed utilising relevant theoretical constructs, creating the Music Therapy for Paediatric Medical Trauma model. This novel music therapy model breaks down the experience of paediatric stem cell transplant patients into three distinct phases of toxic stress and trauma with associated foci for music therapy intervention. This presentation will report the findings of the author's dissertation research and discuss implications for clinical practice, education, and future research.

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The disturbance of COVID-19: An international survey exploring the impact of the pandemic on the music therapy profession

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In January 2020, the World Health Organisation declared COVID-19 a global pandemic; throughout the following year (and beyond), lockdowns and restrictions were enforced across the world to limit the spread of the virus. Disruptions to our daily lives have impacted everyone, and the challenges of the pandemic for the music therapy profession have been felt by practitioners globally (Cole et al., 2021, Gaddy et al., 2020). Music therapists have had to grapple with the identity of the profession – are music therapists essential workers? Is it possible for music therapy to be delivered remotely? Can I sing with a mask on and play the guitar with latex gloves?! The pandemic has disturbed the profession of music therapy, which has been incredibly challenging whilst also providing opportunities for the development of innovative ways of working, recognition of the profession, and moments of pause for reflecting on the past and the future.

This poster will present the results of an international survey exploring the experiences of music therapists during the COVID-19 global pandemic. This questionnaire-based survey (Curtis, 2016) aimed to answer the question ‘What will the lasting impact of COVID-19 be on the field of music therapy?’. The authors will reflect on the profession’s pandemic response throughout the world by exploring how music therapy practice has changed, recognising the personal and professional issues that music therapists have faced, and examining the sustainability of the field within the context of the lasting impact of COVID-19.

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The effect of music therapy on psychomotor and gastrointestinal manifestations in preterm infants: A prospective randomised controlled study

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Functional gastrointestinal disorders (FGIDs) are common in infants and particularly in preterm neonates. Music therapy is used as an educational, rehabilitative, or complementary therapeutic instrument in various conditions. The aim of this study was to evaluate the impact of music therapy on wellbeing and FGIDs in a cohort of preterm infants. This was an open randomised controlled study that consecutively recruited at birth all preterm infants with a very low birth weight (<1500 gr) born in 2016-2018. The music intervention started between the seventh and fifteenth day of life and was based on sessions of active music (live music and parents' lullabies) and receptive music (recorded songs).

After discharge, the music therapist organised for everyone in the intervention group to have a music session 30 minutes once a week which continued up to the twelfth month of life. Gestational age, type of delivery, APGAR score, anthropometric parameters, neonatal antibiotic, type of breathing and feeding, length of hospital stay, and maternal education were recorded. Infants' stress level was assessed by measuring salivary cortisol levels at birth and discharge. Gastrointestinal symptoms spontaneously reported by parents at one, three, six and twelve months of life were analysed and classified according to Rome criteria. Psychomotor and behavioural development was evaluated by the Griffith's scale at 12 months. Music therapy showed preliminary promising results in reducing neonatal stress and occurrence of colic while improving cognitive and global development at 12 months of life in a high-risk population of preterm infants.

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The European Music Therapy Confederation (EMTC): Using “disturbances” as possibilities for development

Melanie Voigt, Esa Ala-Ruona, Alice Pehk, Ingeborg Nebelung, Elisabeth Kaczynski, Elide Scarlata

European Music Therapy Confederation

The members of the European Music Therapy Confederation are presently 41 professional music therapy organisations from 31 countries. Its aim is “to nurture mutual respect, understanding and exchange between music therapists in Europe” (EMTC, n.d.) and thus to support the development of the profession. Bringing so many different philosophies, cultures, theoretical backgrounds and approaches together to achieve this naturally contains “disturbances”. The EMTC aims to use these supposed “disturbances” as chances for further development. This poster will provide general information about the EMTC and its three regions. Additionally, important events from the past and current projects for change and further development of music therapy in Europe will be presented.

The impact of music therapy on infants with hypoxic ischemic encephalopathy and their caregivers on the NICU

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The experience of having a critically ill baby is reported by parents to be traumatic and severely stressful. The stressors experienced can have a profound impact upon the parent-infant bonding process and subsequently the long-term infant neurodevelopment. When neonatal Hypoxic Ischaemic Encephalopathy (HIE) is suspected, bonding is challenged even further. Neonatal HIE is caused by inadequate blood flow and oxygen to the brain resulting in focal or diffuse brain injury. Therapeutic Hypothermia is the only recognised treatment when moderate or severe HIE is suspected. This involves the infant undergoing whole body cooling for 72 hrs before being rewarmed, resulting in increased medical interventions and parents being unable to hold their infant for the first 86 hours of life, likely causing emotional stress for parents. Additionally, parents are likely to have an increased awareness of the infant's proximity to death and the likelihood of long-term neurodevelopmental impairment. Parents have described their experience on the NNU as deeply negative.

This paper will discuss the potential benefits for Music Therapy interventions in reducing parent stress and anxiety, creating positive changes in parent interaction and supporting bonding through the use of techniques from Loewy's *First Sounds: Rhythm Breath Lullaby Techniques and Family-Integrated Music Therapy*. Additionally, the potential for improving infant's brain oxygen delivery and metabolism while inducing a relaxed physical state will be presented. The use of Near-Infrared Spectroscopy (NIRS) will be discussed as a means for proposed further future study by UCLH, England and UMC, Groningen.

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The music therapist as a health agent in the management of sound hygiene in socio-health and educational centres

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The work of the music therapist does not only consist of clinical practice, research or teaching, but also plays an important role in the management of the sound spaces in the centres in which we work. As professional music therapists, it is vitally important to be aware of the negative impact on people's health of prolonged exposure to the different parameters of sound (frequency, intensity and duration). There are several studies on the impact of sound and noise on people's health and its consequences on aspects such as sleep, work performance, mood, stress and burnout syndrome. The correct management of these sounds and sound environments by the music therapist will have positive consequences on health, both for the correct functioning of the centre itself, as well as for the users and therefore for the centre's workers. The poster will address the concepts of noise hygiene, pollution and sound pressure, occupational noise, environmental noise education, as well as sharing how the music therapist can contribute to improving noise hygiene through protocols for prior assessment, diagnosis, creation of an action plan, management, implementation, monitoring and continuous evaluation of noise hygiene plans for institutions. It should be noted that the above can be a new market niche for our therapeutic discipline and thus contribute to community health and to the prevention and improvement of the health of workers, users and families.

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The research network for music therapy in geriatric and dementia care

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The global and increasing prevalence of dementia is estimated between 43-46 million persons between 2015-2016. Psychosocial interventions including music therapy are suggested for managing the neuropsychiatric symptoms of dementia. There is a gap in current knowledge regarding specific music interventions but Germany is at the cutting edge of geriatric/dementia-focused music therapy intervention development, evaluation, calibration and implementation research. This presentation will dialogue a newly-formed network addressing these issues from various perspectives within Germany. The project "Music Therapy in Geriatric Care" replicates the project "Music Therapy 360°", funded by the German Federal Ministry of Education and Research 2015-2018, evaluates music therapy in the care provision of five geriatric facilities, supported by the Volker Homann Foundation (Freiburg), until December 2022. The study "Music Moves" investigates the effectiveness of individual audio and audio-tactile music therapy interventions in care home residents with dementia. The study is funded by the German Television Lottery and the Ettlingen Citizen Foundation until February 2023. In the home-based dementia care study (HOMESIDE) and the group music therapy in care homes study (MIDDEL), BPSD, quality of life and cost-effectiveness outcomes of music therapy will be assessed, funded by EU-JPND research until 2023. Given the pooled knowledge, expertise and competence, the network serves to streamline planning and conducting research projects as well as offering a stage for outcomes dissemination. The clinical applications of all research outcomes will be calibrated and their role in the network and future development of music therapy research and practice will be discussed.

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The role of musical and emotional attunement in improvisational music therapy with children with ASD: Parental and therapist's perspectives

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This qualitative study is part of a large mixed-method study that investigates music therapy outcomes for children with Autism Spectrum Disorder (ASD). Thirty children, aged two-three years old, participated in control and experimental groups over one year. The children in the control group continued standard care, and the experimental group children attended 48 weekly sessions of Improvisational Music Therapy (IMT). This study explores how parents and therapists of the children in the experimental group perceived the impact of IMT and whether outcomes of quantitative study such as ADOS, CARS, and fidelity check scores, are related to the results of the interviews. A face-to-face individual interview was conducted with 15 parents and four music therapists. Each interview lasted for about 1 hour, and the main questions were about any changes such as increased use of musical activities, improved relationships with family members at home, and any changes in parents' attitudes towards their children. The thematic analysis of the interview and further comparative analysis with the quantitative outcomes revealed that the parents whose children received IMT from the three therapists who have a high score of treatment fidelity reported higher satisfaction reporting language development and improved emotional and social skills etc. In contrast, the parents whose children received IMT from a therapist who had a low score of treatment fidelity reported little to no improvement. The qualities of the therapists who provided better emotional and musical attunement have been identified, which will be a useful training resource in the future clinical and research studies.

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The Swanick-Chroma Intervention: Using creative arts therapies with adoptive families

Rachel Swanick

Chroma, UK

Following on from the publication of “What are the factors of effective therapy?” (Swanick, 2021), this presentation aims to explore the use of the Swanick-Chroma Intervention (SCI) in order to support adoptive families. The SCI is used to support the family to reflect upon their relationship with their child in order to build reflective functioning and mentalisation skills, and therefore increase the chance of more positive interactions in the family unit. The intervention is unique - using techniques from creative arts therapies to build understanding and resilience in the adoptive family.

The intervention is six sessions and asks for the family to make creative responses using music, art and drama to those questions and themes. In each session, the family are encouraged to ‘talk, reflect, create, reflect’ so that they can start to mentalise the inner worlds of each other. This, in turn, creates positive attachment relationships and a higher sense of wellbeing within the family. There are few creative arts family interventions and as this is the key skill of our work at Chroma, it seems imperative that the intervention should take the ‘tried and tested’ elements of creative arts therapies in order to build emotional resilience and reflective functioning.

The presentation will use case studies to highlight the importance of working with the family as a whole and how the intervention has helped the family have a better daily experience of life together, emphasising the need for interventions and work to be created out of clinical need.

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‘We are all here today, we're going on a journey!’ Exploring ‘Lis’n tell’ as a collaborative story-making method

Carine Ries

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This paper presents an exploration into collaborative story making between a speech and language and music therapist and the potential benefits of using music to support story making within a ‘Lis’n Tell’ framework. ‘Lis’n Tell’ is a live and inclusive story telling method developed by speech and language therapist Louise Coigley. ‘Lis’n Tell’ is an approach to communication development that seeks to promote curiosity, encourage wonder, facilitate joy and invite responsibility – leading to ‘spontaneous intentional participation’ (Coigley, 2013). Key components of ‘Lis’n Tell’ include the use of iconic gesture and rhythm, chanting and poetic elements.

The work presented here took place at a special needs school for children with sensory and physical needs aged three to nineteen. The weekly sessions spanned over a period of two years and included a number of groups across different age ranges and a variety of sensory and physical difficulties. The collaboration allowed for extensive exploration of the benefits of using music to support the ‘Lis’n Tell’ method. Positive developments were observed in the areas of attention, memory and learning, signing skills, language skills, group engagement, and creative expression.

This presentation offers case examples as well as observations and reflections from speech and language and music therapy perspectives on the use of music in this story making context. Further thoughts on the benefits of working in a multidisciplinary way are shared.

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We're not magic! Inequity, labour, fear, and negative impacts in minoritised trainee experiences

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Drawing on our forthcoming article, this paper focuses on two of the themes identified: inequity and minoritised labour, and fear and negative impacts. We use these foci to discuss reasons why therapists and trainees from minority groups may not always speak up about their experiences, identifying the double-bind in which minoritised people are “damned if we do, and damned if we don’t”.

Our article came about after we met delivering training for a local university around inclusive healthcare practice, when we decided to write a reflective exploration of our experiences as minoritised trainees within music therapy training in the UK. In the research process we used a structured approach in order to weave our perspectives together, identifying points of convergence and divergence; we devised an interview schedule to facilitate a shared discussion, identified and collated themes arising, and present these as our results. The themes discussed are: self, self-experience and self-presentation; insider-outsider; inequity and minoritised labour; power and institutional culture; general observations; fear and negative impacts; communications and feedback; positive experiences; personal growth and reflexivity.

Originally from Hong Kong, Denise came to the UK a decade ago; she draws on experiences in navigating incidents of discrimination and micro-aggressions while studying and working in the UK. Francis brings experience of training influenced by their positioning as someone transgender (trans), queer, and disabled, and other aspects of their life history.

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What are UK-based musicians' perceptions of the training route to the music therapy profession in the UK?

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This poster presentation reports on a collaborative research project conducted by music therapy students and staff at the University of South Wales. The study was undertaken as part of a learning and teaching exercise in designing research projects by taking the active role of collaborative researchers (Healey, 2005). In response to the contemporary focus on diversity and accessibility in the music therapy profession (BAMT, 2021), we were eager to understand musicians' perceptions of the route to training as a music therapist. A small-scale online survey was devised and distributed through social media channels to collect data on this topic over a one-week period. A sample of 69 musicians was obtained, most of whom were within the researchers' networks. Thematic analysis of the data showed that respondents had a relatively accurate understanding of music therapy training; they understood it involved professional dimensions relating to both music and therapy and affective dimensions, relating to personal and interpersonal development. Perceived barriers to studying, for those who were interested in so doing, included age, disability, time, cost, qualifications and geographical access to courses. It would be valuable to diversify the sample in a future study to secure more representative and less biased views that could inform recruitment to the profession. What is clear, however, is that the findings demonstrate some misinterpretation of entry criteria to courses and misinformation about music therapy (Gooding and Springer, 2020) as well as accurately identified ableist practices that could be challenged to disrupt the current discourse in the profession.

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What can we learn from dialogues between South Africa and Scotland to unsettle music therapy education?

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The development of music therapy education in each country and setting is influenced by complex disciplinary and professional dynamics alongside wider sociocultural, historical, and political factors locally and globally. Aiming to foster a critical engagement with such dynamics and factors, this presentation offers a critical dialogue drawing on the example of two master's music therapy programmes: Queen Margaret University, Edinburgh (Scotland) and University of Pretoria (South Africa). We consider the unique trajectory and current positioning of each programme as well as the parallels and resonances between the two. This offers a platform for a timely exploration of issues around power and diversity, interdisciplinary working, community-oriented impact, person centredness, as well as critical and relational perspectives. Under the light of the emerging discourse around the decolonisation of the curriculum and while considering lessons learnt from Covid-19 so far, this presentation will question existing assumptions and bring to the fore questions about future music therapy education practices. Such dialogues between music therapy educators and universities foster collaboration, generative critique, and mutual educational thriving.

Spoken paper presentations

A double profession: The future of the interdisciplinary approach in music therapy

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Background: Practising music therapy as well as another therapeutic discipline provides an excellent opportunity for effective interdisciplinary combinations. However, apart from the numerous advantages, some limitations might impact the best performance. **Content:** This presentation aims to discuss possible interdisciplinary combinations with music therapy, the advantages of connecting the professions, and the way in which music therapy can support other disciplines. It will explore, through theoretical ideas and explanations, how music therapy can be supported by other professions, and what kind of influence these particular professions could have on music therapy. The presentation will be illustrated by clinical examples of two different approaches combining music therapy with physiotherapy and with speech and language therapy. The limitations of those combinations will also be emphasised. Limitations related to the health care system, settings, human factor, treatment determined by the therapist's first profession and reduction of musicality will be addressed. Future directions will be explored, including new spaces for music therapy in interdisciplinary approaches, with an emphasis on teamwork. **Conclusions:** The dual-qualified professional undoubtedly gives the therapist additional strength through broader knowledge and skills. Nevertheless, an awareness of potential disturbances, limitations and the ways to overcome them has to increase.

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A feasibility study of online singing groups for people with dementia: Findings and implications for future practice

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Due to the coronavirus pandemic, many people with dementia and their carers have experienced great disruption to their usual activities and support. Many activities, including singing groups, moved online as a way of maintaining connection and continuity during lockdown restrictions. In 2020, the research team involved in this project was about to commence a study of in-person singing groups when our plans were significantly disrupted by COVID-19. In order to adapt our research, we carried out a smaller version of our planned study online.

Participants with dementia and their care partners were invited to attend 10 weeks of online singing sessions, delivered by professional musicians using Zoom video conferencing software. The sessions were intended to be fun and informal, and contained a balance of chatting, warming up and singing. We collected data using questionnaires about mood and quality of life from the participants before they started singing sessions, and after they had been attending for 10 weeks. We also interviewed them about their experiences of the sessions.

This presentation will discuss the findings from the study, including the feasibility of delivering singing groups online, the accessibility of the sessions for the group members, and how the online experience compares to singing in person. It will consider some of the specific technical issues involved in online singing, and will conclude by exploring the implications of online singing for practice in the post-pandemic world.

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A music therapy perspective on the relevance of Beethoven's music in times of crisis

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This presentation will explore the relevance of Beethoven's music in times of crisis. Beethoven experienced a series of intense crises in his personal life (such as progressive deafness) and lived in a context of social and political disruptions and crisis (French Revolution). As the world is faced with a multitude of crises, from the Covid-19 pandemic, climate crisis to various political disruptions, is there anything of particular importance that Beethoven's music can offer us today? This presentation will explore how the confrontation with and growth through crisis appears to be woven into Beethoven's musical fabric. Live examples from Beethoven's piano sonatas will be examined from a music therapy perspective. The music will be considered in relation to biographical material related to points of crisis (such as the Heiligenstadt Testament). Can we find (musical) affordances (Ansdell 2014, De Nora 2014) in Beethoven's music which can be helpful in today's world as we live through times of crisis and disruption at individual, social and political levels? The presenter will draw from music therapy experiences in mental health services during the Covid-19 pandemic, as well as extensive experience of working with clients affected by psychosis. The hypothesis will be discussed whether Beethoven's music might be a particularly relevant resource for processing experiences of crisis and disruption and in response may help to mobilise inner, psychological resources and strengthen resilience in the face of adverse life circumstances.

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A new GIM program: Intimate Voices

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This is a sounding presentation of a new GIM program, including music excerpts from the program and a discussion of its musical affordances. The music chosen is by Nordic composers, and previously not used in GIM programs. All the pieces are also well suited as separate pieces to be used in supportive receptive music therapy outside of GIM. All music can be found on Spotify which was an intentional choice for accessibility.

In GIM, Guided Imagery and Music (Bonny Method), predesigned music programs are used, developed to support different types of experiences and therapeutic processes, such as affording safety and trust or dealing with grief, loss or anger - although, importantly, there is no simple cause and-effect in this process. Mainly, so called “classical music” is used. In later years, there has been an increasing awareness that some of the music used in GIM is too dramatic and challenging for more vulnerable clients, such as clients who have been exposed to trauma. There is a need for programs that can be experienced as safe and supporting. Therefore, the program Intimate Voices was developed with the aim to be safe, holding and gently exploring. The music is retrieved from Western art (“classical”) music, and the dramatic progression of the program follows the original ideas of Helen Bonny. In the presentation, the musical properties of the pieces in the program - such as tempo, sound and dynamics – will be discussed in relation to how they afford different kinds of moods and experiences.

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An online survey of music therapists in six countries: Personal choices and their implications to the future of our profession

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International surveys have become more prevalent among music therapists in the past decade or so. In a recent international online survey which we conducted, we received responses from 339 music therapists from six countries: Austria, Czech Republic, Germany, Israel, Spain, and Switzerland. Being music therapists, music therapy trainers and some of us, heads of music therapy programs in our countries, we felt that such a survey is required, to give us a direct report from our colleagues about their opinions and choices in different subjects and what these answers imply to the future development of our profession. Survey questions, some quantitative and some open-ended, focused on several issues such as what clientele one works with and why, satisfaction from different aspects in the profession, such as satisfaction from work, from the research in the field, and from the status of the profession in the country, prevalent techniques and instruments used in the room, and more. We will refer to some preliminary results from the survey, comparing between the surveyed countries. For instance, we found that respondents gave a variety of reasons for choosing to work with their clientele, some of which being more practical reasons, and others expressing their inner connection to that clientele. We found that respondents gave different answers depending on their country of origin and on their degree of experience as music therapists. We will discuss these results and address possible practical implications.

An outcome study revisited: Reflection by the treating music therapists on participatory research

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Introduction: In an efficacy study with 16 persons in low awareness states following vascular brain injury, the effects of a music therapy intervention were compared with those of the reading of newspaper texts. As collecting and interpreting data is particularly challenging with this population, the analysis was undertaken from two different perspectives, following the initiative of the treating music therapists. **Methods and results:** The statistical analysis of the average values of six vital parameters collected immediately before and after the sessions showed a significant change (reduction) only in muscle tone, in both the music therapy and the reading intervention; no significant differences were measured between the two forms of intervention. The data re-analyzed according to an alternative set of criteria confirmed the music therapists' hypothesis that the music therapy sessions lead to a greater range and stronger variations in vital parameters than the reading sessions. **Discussion:** The presentation critically reflects both the re-analysis of the data, as well as the ethically motivated decisions brought about by the treating music therapists, applying a theoretical framework (Benenzon, 2006, 2017; Weymann and Stegemann, 2019) throughout the intervention and the research process. It aims to show: a) how the treating music therapists' role in scientific studies should go beyond the clinical intervention in order to produce authentic research results that put realistic clinical situations to the test; and b) an example of participatory (Park, 1993; Stige, 2002) research where embracing clients', researchers' and treating therapists' spheres of action and knowledge across all project phases produced a different result compared to the standard statistical analysis.

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Anti-oppressive pedagogy as an opportunity for consciousness raising in the music therapy profession: A critical disability studies perspective

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In critical disability studies informed pedagogic literature, the academy has been widely cited as an ableist institution: the training ground for the professions of normalcy (Mitchell, 2016). Music therapy could readily be complicit in this normalising discourse with its potential to pathologise participants and to maintain a strict 'normative divide' between the professionals it trains and the participants who engage with its provision (Hadley, 2013). Activists, advocates and disabled therapists have posed a welcome challenge to this positioning in recent times, but pedagogical dimensions of music therapy training have received less attention.

This paper explores the potential for applying Kumashiro's (2000) typologies of anti-oppressive education in music therapy training. Kumashiro's (2000) four typologies (education for the other, education about the other, education that is critical of privileging and othering, and education that changes students and society) offer opportunities to problematise existing pedagogies and practices and to critically reflect upon the potential of a curriculum framed by social justice perspectives. These approaches have potential to centre and prioritise marginalised voices and acknowledge expertise in lived experience (Kapp, 2019), reframing Otherness in music therapy curricula.

Through critically considering the ontological and epistemological challenges of existing and future music therapy pedagogy, this paper invites reflection upon the paradigms of disability perpetuated in music therapy education which may contribute to discourses of either normalisation or maximisation. Consciousness raising in music therapy pedagogy and in the wider music therapy profession is advocated through engagement with critical disability studies theory and philosophy (Pickard, 2020).

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Are we feminist music therapists? A presentation exploring the influence of feminist thought on music therapy practice

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'Music Therapy is not an arena assured of political neutrality, not even from gender politics' (Rolvsjord, 2006, p. 312). Through feminism, gender has been brought into the consciousness to take its place alongside race, age, and social class as one of the organizing principles of social life and one of the central mechanisms by which power is distributed (Kimmel and Messner, 1995). In recent years, the profession of music therapy has become increasingly concerned with the role music therapists play within these power dynamics. By exploring performative models of gender (Butler, 1990), this presentation aims to provide opportunity for music therapists to reflect on their work through the lens of feminism. Do music therapists consider their gender or that of their clients in the musical judgements they make? If not, should we? Do music therapists consider certain genres or instruments to pertain to a particular gender? If gender can be performative and construed in relationship or context, how do we negotiate this within our musical interactions? Do we have a responsibility to embrace feminist music therapy? The ideas considered in this presentation will be explored in line music therapy work with adolescents in a mental health hospital, as well as feminist theory and existing research on feminist thought within the music therapy profession.

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Atmosphere oriented music therapy in open settings for people with dementia in nursing homes

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Based on qualitative research and many years of music therapy practice the atmosphere model as developed by the author (Sonntag, 2013, 2016, 2020) in affiliation with a broad network of music therapy colleagues conceptualises work for people with dementia living in nursing homes. The model presents an aesthetic understanding of music therapy which aims to create therapeutic atmospheres (TA) for people in middle to late stages of dementia in order to maintain and enhance quality of life. With respect to the typical complications and interruptions of the everyday routine, treatment is offered in open settings, i.e. in common rooms, hallways or in the garden grounds. Thus, the atmosphere model promotes, in theory and in practice, conscious consideration of both the physical and social environment. Within this perspective, inevitable disturbances are reframed as creative catalysts, as opportunities to enhance community and individual wellbeing. In my presentation, a brief introduction to the theoretical framework will be followed by methodological aspects and considerations as to how the creation of TA in open settings can be effectively facilitated. Case vignettes offer insight into atmosphere oriented music therapy practice in open settings.

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“Autism is a way of being”: An exploration of neurodivergent perspectives on music therapy and autism

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UK

Neurodiversity views autism (and related conditions such as ADHD and dyspraxia) as part of natural human diversity and personal identity (Singer, 1998), in contrast to the “pathology” / medical model of disability approach, exemplified in the DSM-5 of the American Psychiatric Association (2013). There has been little written within music therapy from a Neurodiversity perspective thus far (Pickard, 2019), yet music therapy has been criticised in the past by disability studies theorists for failing to engage with contemporary perspectives on disability, such as social and cultural models (Cameron, 2014). Music therapy as a discipline is beginning a process of engaging more fully with ideas around equality, diversity and inclusion: a significant step in the UK being a keynote presentation and panel discussion at the BAMT conference 2021 (Magee, 2021).

This presentation proposes that the time has come for a paradigm shift within music therapy, away from older “pathology”-based models of autism and towards a Neurodiversity model which seeks to value and embrace, rather than change or “cure”, the diverse perspectives, experiences and forms of creative expression of neurodivergent people. I will look at the concept of Neurodiversity in relation to music therapy from a variety of perspectives, including my personal experience as a neurodivergent / autistic music therapist, discourses from neurodivergent writers, views on music and neurodiversity from other disciplines such as ethnomusicology (Bakan, 2014) and an exploration (including case studies) of how a “neurodiversity approach” could be applied in order to influence and enrich clinical music therapy practice.

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Balancing power by including parents as co-researchers: Live parental singing, breastfeeding, skin-to-skin-contact as procedural support in Swedish neonatal pain care

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Frequent and inadequately treated pain combined with separation from the parent cause adverse interruptions to the parent-infant attachment process. The pain might harm the infant physically and psychologically including increasing the risk for abnormally heightened sensitivity to pain. Effective pain management strategies are needed and parent-delivered interventions such as infant-directed lullaby singing, breastfeeding and skin-to-skin contact where parents themselves mediate pain relief, is consistent with a modern understanding of pain and of family-integrated care. Important for translating research into practice is to involve healthcare professionals and parents as co-researchers. Neonatal pain research is an interdisciplinary field where music therapy has just started to publish results. The Nordic neonatal music therapy pain management strategy provides a theoretical and practical resource-oriented music therapy model of how parent-delivered infant-directed singing can be comprehensively used in interdisciplinary neonatal pain research. Parents as pain management in Swedish neonatal care (SWEpap), is a new cutting-edge interdisciplinary multi-centre clinical study with mixed methods. The collaborative participatory action research design for the qualitative part of the SWEpap study aims to democratise the research process involving both parents and health professionals in the knowledge-making. The second part of SWEpap is a randomised controlled trial informed by music therapy expertise and research using the Nordic neonatal music therapy pain management strategy as a theoretical framework for its design. The RCT will investigate the efficacy of combined pain management with live parental lullaby singing, breastfeeding and skin-to-skin contact compared with standard pain care during routine metabolic screening of newborn infants.

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Being disrupters: Negotiating boundaries during a home-based music therapy clinical trial

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Working on a clinical trial means that you in many ways have to disturb peoples' everyday life. This is certainly the case for the international randomised controlled trial HOMESIDE: Home-based caregiver-delivered music and reading interventions for people living with dementia (www.homesidestudy.eu). Disturbing "tasks" include knocking on stakeholders' doors to further recruitment, contacting potential participants, collecting data from enrolled participants, and ensuring the implementation of interventions. The research team's aim is of course to be a positive disruption. However, disruptions may also be experienced as something negative. Boundaries on how much disruption is acceptable, tolerable or desired may differ for each individual, whether one is a stakeholder, participant or researcher.

In this paper we discuss levels and types of disruptions present during a clinical trial like HOMESIDE, how boundaries and ethical considerations are negotiated, and how being "agents of disruption" affect the researchers themselves. The paper builds on experiences of the Norwegian HOMESIDE team. Data includes case narratives with empirical material comprised of qualitative field notes, journal entries, and interviews with the participants in HOMESIDE Norway. It also consists of focus group interviews with the Norwegian researchers, including recruiters, assessors, and interventionists. We will discuss both "positive" and "negative" disruptions and bring it together in a reflective synthesis. We argue that continuous reflection and negotiations of boundaries and levels of disruptions are necessary and vital, not only to ensure ethical research standards but also to maintain the researchers' own conscience, sensitivity and self-care.

But what if the drum is a house? Using other creative methods in music therapy with young children

Sarah Wiltshire

Place2Be, UK

What if the drum IS a house? Why do we feel threatened when children want to use non-musical objects, or musical objects non-musically, in therapy?

In my role as therapist, supervisor, and manager with Place2Be, I work in a team of therapists from diverse disciplines. Their playfulness, curiosity, and ability to integrate different art forms, without seeming to experience any identity crises, has further cemented my practice of embracing all forms of communication. To do otherwise, to bring a child back to the music and away from other objects, can be detrimental to the relationship and the therapeutic process. We need to work with the whole child including the verbal child, art child, play child, drama child and music child.

As music therapists there can be a reluctance to expand our therapeutic abilities out-with the medium of music. Why is this? We have become comfortable with integrating helpful theories from psychoanalysis and other therapeutic frameworks but putting our musicality to one side seems uncomfortable.

In this paper I will present and describe my framework for working in an integrative way with verbal children in mainstream primary school settings, with no diagnosis of additional support needs but experiencing difficulties relating to adverse childhood experiences. With music always an option, I will show how we can safely and robustly apply our skills and knowledge in a broader palette of the arts in therapy, and encourage you to start drawing if a child offers you a pencil!

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“Can I have one more dance?” Stories of love, loss, and reunion through music-making between couples living with dementia

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Living with dementia means living with multiple losses: cognitively, mentally, physically and emotionally. In married or co-habiting couples where one partner develops a dementia disease the experiences of loss can be overwhelming, and strategies to cope with loss can be challenging to undertake for both the partner with dementia, the healthy partner, and the couple as a “we”. Yet, adapting and adjusting to loss can be crucial in order to maintain a good relationship quality (Colquhoun et al., 2019).

Music therapy and music activities has been shown to enhance social well-being in persons with dementia living at home (Elliott and Gardner, 2018), and couples with dementia sharing music in the home have experienced beneficial influence on the relationship quality (Baker et al., 2012). In this paper, four case studies of couples living with dementia will be presented, offering insights of how being together in music can be a facilitator for couples to cope with losses and reunite emotionally as a couple. The stories of the four couples are presented through narratives and video samples of musical interaction, and discussed within the theoretical and philosophical frame of the concept “love” in couples living with dementia, as presented by Shavit, Ben-Ze'Ev, and Doron (2019).

The paper presents selected findings and discussions from the presenter’s PhD project, preliminary titled “Music, dementia, and life partner relationship quality”, which is a sub project of the international RCT Homeside (Baker et al., 2019).

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Caring with music: Creating a MOOC to enable caregivers to use music in their adult care work

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Nordoff Robbins, UK

In November 2020, Nordoff Robbins (the UK's largest music therapy charity) began a partnership with the online learning platform, Futurelearn, to create three online courses. One of these is a six-week course aimed at caregivers in adult care settings, entitled 'Caring with music: can music do more in your adult care setting... even if you don't think you're musical?'. This course, launched in June 2021, aims to widen access to the benefits of the sensitive use of musical interaction in adult care, and to increase awareness of music therapy.

The course covers a variety of techniques for embedding music into the daily life of care settings, inspired by ideas from music therapy. This includes adapting songs for flexible use, musical attunement and using musical instruments. It is adaptable for a variety of settings, including day centres, residential homes, hospitals and community settings. The course is open access and available internationally. No previous musical experience is required. The content is delivered via video, audio, and written content alongside practical tasks and reflective writing.

In this presentation, the two therapists who created the course content will reflect on their experience of developing the material. They will share feedback from the first year of the course run, and reflect on the impact the course has had on care settings, caregivers and service users. They will also discuss the impact of skill-sharing on the music therapy profession, and the responsibility and accountability of the trainers in offering a course of this nature so widely.

Challenges of psychodynamic music therapy with a patient in intensive care following a medically caused brain injury: Adaptation/awaking

Panagiota Kapnisi

Theotokos Foundation, Cyprus

This video presentation examines the process of psychodynamic music therapy with Mr Peter, age 65, who awoke from a coma, caused by an anoxia/anaesthesia accident which left him with multiple disabilities and severe brain damage.

Music therapy with Mr Peter lasted for two and half years until he died. The video-taped sessions reveal the multiple difficulties, the moments of success and failure in reaching out to someone who has suddenly lost all fundamental skills of communication and normal life within a hospital setting and the context of the family's intense anxiety. Pre-composed songs that the patient knew before the incident were initially used in order to bring back memories and open a channel of communication, apparent through his facial expressions and sighs. This gradually led to an interaction/communication through improvised music. Due to Mr Peter's minimal ways of communicating, my counter-transference was the predominant tool that guided my vocalisations in building up a repertoire of communication with him. The improvisational music allowed me to think how structured vocal improvisation could facilitate the interaction/communication and the quality of life of this patient. Boundaries and institutional dynamics as well as the family's continuous anxiety were part of the therapeutic process. For example, Mr Peter's relatives were often included in the sessions.

This presentation explores the difficulties of including the relatives in the sessions as well as managing the constant interruptions caused by the hospital setting. The relatives' presence was eventually turned into a meaningful cooperation, leading to moments of alert communication.

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Challenging dominant narratives in music therapy training: Working towards understanding and challenging the status quo in our teaching practice

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Nordoff Robbins, UK

In 2013, Susan Hadley published the article, “dominant narratives: complicity and the need for vigilance in the creative arts therapies”. This called practitioners to action in thinking about how we engage meaningfully with issues of diversity, equality and identity within our practice and teaching of music therapy. In 2020 the BAMT diversity report highlighted historic issues of discrimination and inequalities within the music therapy profession and training, stating that action was “long overdue” (2020, p.3). But, what does action look like going forward? How do we ensure that our curriculum and teaching of music therapy is not shaped by dominant narratives and how do we ensure that we are aware of our own attitudes, assumptions and biases as teachers?

With a focus on the music therapy training at Nordoff Robbins and on music-centred practice, this presentation aims to delve into the teaching of the craft of music therapy and how we encourage students to reflect and think about the work that they do, ensuring that they are more than just aware of dominant narratives, but critically examine their own assumptions, bias and prejudice. Within this, consideration will also be given to ourselves as teachers and how we remain attentive to the ways in which our own actions may contribute to oppressive narratives. Moreover, the presentation will advocate for learning from lived experience from the people we work with so that we can “truly honour the experiences of those who are not in the advantaged groups” (Hadley, 2013, p.380).

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Collaboration and celebration: Bringing a music therapist's perspective to facilitating online choirs in a Manchester care home

David Robinson

Nordoff Robbins, UK

Collaboration is essential between therapist and staff in any organisation where a therapist works as part of a multi-disciplinary team to create a positive framework within which therapist/client relationships can thrive. Over the last year, Covid-related restrictions on face-to-face contact with clients and partner organisations have tested the strength and flexibility of client/therapist collaborations, and my understanding of what collaboration can mean in these circumstances has been expanded through ongoing work with residents and staff in a Manchester care home.

This presentation will explore how the necessity of using technology to overcome the limitations imposed by Covid restrictions and create a residents/staff virtual choir led to the discovery of new ways to collaborate with staff/residents, and how this challenged my thinking about how to remain true to the therapeutic aims which underpin my on-site practice and understanding of my work in this place.

Key themes will include: how collaboration around an online musical project can strengthen, celebrate and acknowledge the essence of an organisation; the importance of using specific musical elements and principles within the implementation and structure of the project to ensure that the principles which underpin on-site work are maintained.

The presentation will explore these themes through two 'virtual choir' projects facilitated at the care home: one which took place during the Covid lockdown of late 2020, and a follow-up project which took place during the summer of 2021.

Connection in the field of music and resonance: A case example of a sounding relationship with an adolescent with autism

Elien De Schryver

UK

This presentation will explore an unusual case example of my work with Leo, an adolescent young man with autism, and describes my musical contact with Leo while supporting him as a personal carer. This case goes beyond the boundaries of a common music therapy setting as the work took place outside a typical clinical context. The activities with Leo consisted of travelling on public transport, walks in nature as well as visiting museums and farms.

As a music therapist, I felt strongly connected with Leo in the field of music and resonance during these activities. Examples will illustrate how I created a holding environment by using vocal reverie to attune to his presence and by applying 'motherese' to my speech to regulate sensorial arousal. I will also explore the experience of the consistent rhythmic cadence of moving trains and the development of Leo's experience of his surroundings through vocal expressions.

The case example is divided into three main phases. The first phase runs like a main theme through the following phases and describes moments of vocal attunement and sensorial regulation. The second phase focuses on moments of separation through a melodic exchange of onomatopoeia. The third and last phase describes how silence and musical form became perceptible throughout the activities.

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Community Music Therapy to manage undergraduate students' stress and anxiety concerns: Quasi-experimental pretest-posttest feasibility trial

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Background: Canadian undergraduate students experience a high level of anxiety concerns and existing wellness supports have several drawbacks. Music therapy interventions can effectively alleviate anxiety concerns; however, the undergraduate student population is underexplored. **Objective:** Evaluate the feasibility and effectiveness of a drop-in, in-person music therapy group and a drop-in online music therapy group, using a community music therapy approach to address the stress and anxiety concerns of undergraduate students. **Methods:** A quasi-experimental pretest-posttest feasibility trial with non-equivalent groups was conducted. Feasibility (primary outcome) was measured through total enrollment and the number of returning participants. Self-reported stress and anxiety (secondary outcomes) were measured through a Stress Rating Scale and the State-Trait Anxiety Inventory (state version). **Results:** A total of 25 students participated (music therapy group, n=12, standard of care group, n=13). Eight participants (32%) attended more than one session. Participating in either the music therapy group or the verbal therapy group significantly reduced self-reported stress, anxiety and clinically significant anxiety. Qualitative findings showed that participants perceived the music therapy groups to be fun, reduce stress and foster a sense of community. **Discussion:** This was the first study to deliver an online music therapy intervention to Canadian undergraduate students. The small sample size and lack of generalizability due to potential selection bias are the major limitations of this study. However, the findings show that there is high acceptability, feasibility and promising implications for offering group music therapy on university campuses. A follow-up randomised controlled trial with more robust methodology is currently underway.

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Contemporary approaches in music therapy with people with severe multiple disabilities (SMD)

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The aim of our presentation is to introduce our research on contemporary approaches in music therapy with people with severe multiple disabilities (SMD). More specifically, we want to fill the gap in investigating the effective interventions for working with people with SMD, focused on music therapy. Furthermore, our study explores intertwining of functional and psychotherapeutic approaches in music therapy with this clientele. The different areas of therapeutic impact are examined, from affect regulation (Reimer, 2016) to the development of interpersonal relations (Becker, 2002), social behaviour, integration and empowerment (Meyer, 2016; Watson, 2007) to the relaxation of muscle tone and the development of motor skills (Tauchner, 2012). The specific working challenges from the therapist's point of view will be exposed.

Mixed method research is going to be applied, combining qualitative and quantitative research methods. The research design includes three parts: an international survey among music therapists working with clients with SMD using an on-line questionnaire prepared for the purposes of our study, a facilitated group discussion of experts in this specific field (an interview in a focus group) and a multiperspective video analysis of concrete practice examples (multiple case-study). The research is still ongoing and is expected to be completed by the end of 2021. In addition, we will also address the question why people with severe multiple disabilities are a frequently represented clientele in music therapy practice, but are rarely given importance in scientific discourse and research.

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Co-production of the organisation: Developing democratic management practice in a music therapy project for and by trans and nonbinary communities

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Phoenix Song Project offers music therapy groups to members of trans and nonbinary communities on a lower-cost sliding scale. Founded in 2019, in 2020 we began our transformation into an organisation not only run by as well as for the community, but with a committee structure that brought community voices into management of the organisation. With this change we aimed to ensure democratic process and accountability to the community, and to inform practice that moves beyond individual insights and meets diversity. This practice of democratic community management disrupts the potential hierarchy of therapist-client, while finding harmony between the knowledge from lived experience held in the community and the specialised knowledge of music therapy practice. It also challenges medicalised understandings of what it means to be transgender, in particular those that pathologise our communities. Typically of periods of organisational growth, this process has come with challenges. This paper is presented jointly by the music-therapist founder, and a committee member from the project. We consider some of the strengths and pitfalls we have encountered in this way of working, the emotional landscape of organisational change, and the extent to which we have met and not met the aims behind the move from individual to democratic group structure.

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'Couplehood in dementia': Home-based music therapy for people with dementia and their spouses

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An increase in the numbers of people with dementia (PWD) and accordingly an increase in the prevalence of spouses who serve as primary caregivers (PCs) calls for intervention directed at PCs. They deal with the daily burden of care, loss of social support, stress, and physical as well as mental health difficulties. Music therapy has been found as an effective intervention for improving communication between PWD and their PCs, yet the implementation of musical strategies to improve daily care especially in the home environment, needs further exploration. Home-based music therapy (HBMT) takes advantage of the couple's familiar and safe environment in order to achieve maximum benefit from the use of music. It allows the music therapist to experience the difficulties and strengths in real time situations and it helps to provide the couple with suitable suggestions. As part of my PhD, I have been developing a HBMT model that addresses the needs of the couple. This model offers weekly joint music therapy sessions, and additional phone-counselling with the PC. It enabled to strengthen the couple's relationship and helped to facilitate the burden of care for the PC. In addition, it enabled implementation of the use of music into daily life independently of the music therapist. This model was used effectively throughout the critical time of crisis (Covid-19 pandemic) implying that it can be implemented under restrictive conditions.

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Creating a video library to support parents of hospitalised infants in a Greek NICU

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After the months-long obligatory pause of our NICU music therapy service due to the 2020- 2021 pandemic and after exploring other non-viable ideas of synchronous online communication, we decided to create a series of videos – accessible in an online video library- to support the parents of the hospitalised infants. This presentation, illustrated by video excerpts, will describe our multilevel and multidisciplinary creative process that included therapeutic, artistic, technological and educational considerations and involved different members of our team. Difficulties and challenges will be addressed as well as the music therapist's reflections on expanding the boundaries of what it means to practice music therapy.

“Dark sessions”: A music therapy clinical intervention for substance abuse rehabilitation

Andreas Asimakopoulos

Music Therapy Room, Greece

Music therapy is increasingly accepted as complementary therapeutic modality in substance use disorder (SUD) treatment programs. On the side, lighting conditions seem to affect the clients' mood, level of participation and session engagement. Light modulates brain function and cognition, while darkness is already being used as a tool to reduce anxiety and depression.

The clinical intervention of “dark sessions” is introduced. A “dark session” activity is a variation of the traditional drum-circle for SUD clients, which includes the improvisational use of voice in absence of room lights. The participant will be informed about a pilot intervention, which has been used clinically for clients with substance abuse disorder in the ARGO rehabilitation facility in Thessaloniki, Greece.

The approach consists of an unstructured improvisation in a drum-circle with the additional use of voice, but in dark conditions (full absence of light). The participants will be presented with a detailed description of the intervention, together with its background and results. Commented video material will also be presented and discussed.

The music therapy intervention of dark sessions is a clinical improvisation for SUD clients with promising pilot results. It boosts client creativity and vocal use, promotes group bonding and interaction, and improves mood in a playful, yet evocative way. Among other group activities, “dark sessions” is one of the most favourable with clients reporting relaxation and mood improvement.

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“Death and rebirth”: Elaborating psychological trauma of a pregnant woman with uterine leiomyosarcoma through Guided Imagery and Music

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Cancer patients often suffer from psychological distress and experience traumatic reactions. Among different cancerous tumours, uterine leiomyosarcoma (uLSM) during pregnancy is a very infrequent event and its impact on psychological wellbeing is hardly ever analysed within the literature. uLSM is a rare malignant tumour and type of sarcoma. When cancer is diagnosed during pregnancy, some women may be at particular risk of experiencing high levels of psychological distress, because of the emotional difficulty of integrating life expectancy and death anxiety. In addition, the surgical removal of the uterus compromises the ability to reproduce again. The Helen Bonny Method of Guided Imagery and Music can be a transformative agent accompanying a woman on her journey of oncological disease. There is a lack of evidence on the processing of psychological distress and its multidimensional facets in pregnant women with uLSM through the Helen Bonny Method of Music Guided Imagery (BMGIM). We report the clinical case of an outpatient who survived uLSM, diagnosed during pregnancy. The present study is focused on the therapeutic process and psychological elaboration of recursive dualism life/death through the re-constructive framework of BMGIM receptive music therapy integrated with psychotherapy. The process lasted two years and 25 sessions were developed. The data was collected at three points: at the beginning of the BMGIM treatment, after 12 sessions and at the end of the process. The following psychological questionnaires were administered: Post Traumatic Growth Inventory (PTGI), Emotion Thermometers (ET), Hospital Anxiety and Depression (HADS).

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Developing a music therapy group method for children with selective mutism based on stories and composing: “I want to speak – please disturb me with music!”

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A child with selective mutism speaks in some situations but is consistently unspoken in certain social situations. These children are also often socially sensitive, anxious, and withdrawn. A child can also be defiant, especially when loaded or trying to avoid situations that require speaking. Selective non-speaking is likely to be due to a multifactorial process influenced by hereditary factors, temperament traits, environmental factors, and developmental factors (Johnson & Wintgens, 2016).

A music therapy group was designed for a group of three children. As the Covid-19 situation prevented group activities the children were first met one by one. They kept in touch with each other with their self-invented musical works created with the Story-composing method – child perspective, songwriting, narrative, music in music therapy (Hakomäki, 2013). Works by others helped children make choices and decisions and speaking was easier when performing a work created by another child. The Story-composing method developed two new applications with this group – distant communication with the story-compositions and group story-composing via video connection.

Parents assessed children’s progress on speaking using the FSSM 12–18 scorecard (Gensthaler & Schwenck, 2019). In addition, children provided feedback using a Feedback Informed Treatment (FIT) (Miller & Duncan, 2000). Of course, progress was heard when the children began to speak. The children’s self-invented musical works, story-compositions, acted as anxiety relievers, helped the children to choose the words to say aloud and made the meetings motivating and fun. Music had many meanings. “I want to speak – please disturb me with music!”.

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Disability rights: Staying current across music therapy curricula

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Given the events of the summer of 2020 along with the 30th anniversary of the Americans with Disabilities Act and the 45th anniversary of the Individuals with Disabilities Education Act in the United States, there is a sparked renewal in conversations of social justice issues specific to those with disabilities within our culture. It is important for music therapy students to understand the history of disability rights in the U.S. and world-wide, shifts in terminology, current policy issues and social justice movements, and the impact and application of these topics in current music therapy practice. In addition, students need to see faculty model engaging in continuing education themselves, learning about current issues in disability rights and how they impact current music therapy clinical practice. Music therapy faculty may find it daunting to meaningfully address issues around disability rights in their courses. This session will explore ways for faculty to integrate these topics throughout the music therapy curriculum. We will discuss the importance of thoughtfully choosing classroom media throughout music therapy curricula as a way to spark these discussions with students and will give examples of assignments and specific media used across curricula. We will provide ideas for faculty, and in turn their students, about how to be an active ally for the disability community through consuming thoughtful media, amplifying disabled voices, and getting involved in local disability rights groups. Additional time will be spent discussing ways to help students transfer these ideas to their professional practice.

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Disrupting norms: How can philosophy underpinning person-centred practice challenge music therapy pedagogy, practice and research?

Clare Gillespie

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The question of what it means to be a person is central to the person-centred practice framework (McCormack and McCance, 2017) and has been a consistent thread of philosophical debate throughout the ages. 'Who am I as a person?' is a foundational question, which requires a deeper consideration of the core values and beliefs that we each hold. It is these values and beliefs that shape and influence how we think about ourselves as persons in relation to other persons and how we relate to the world around us. The assumption that all persons are automatically bestowed the status of personhood continues to be challenged in postmodern thinking (Torchia, 2008). Kittay (2002) argues that traditional conceptions of moral personhood are limited to those possessing intrinsic psychological capacities and presume the 'norm'. As a consequence, many persons who do not 'fit' within this normative framework can experience exclusion and marginalisation.

For music therapists, a deeper understanding of the philosophy underpinning personhood can therefore help us to question how person-centred we are in our teaching, practice and research, as well as providing vital opportunities for us to challenge and disrupt normative frameworks. In this presentation, I will expand these ideas, drawing on aspects of my doctoral research, which is examining how music therapy can help to evolve person-centred cultures within health and social care.

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Disrupting notions of a traditional “authentic” face-to-face placement: Pedagogical considerations for online music therapy placements.

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The structure of the music therapy clinical training program at the University of Melbourne has involved traditional face-to-face placements since its inception over forty years ago. However, in response to restrictions imposed during by the COVID-19 pandemic, we rapidly redesigned the clinical training program to create alternative online placement experiences for students. With little previous literature to draw upon, we took the opportunity to gather data to explore experiences of online placements. As the need for ongoing online music therapy and university education provision continued to become apparent, we expanded our aim towards developing understandings of the pedagogical considerations needed to plan for future quality online music therapy placements.

We collected quantitative data via the Satisfaction with Simulation Experience Scale (SSES) and qualitative data via open-ended surveys and semi-structured interviews with participants about their experiences of online placements. Thematic analysis was used to analyse qualitative data and we reflexively interrogated findings in response to our own experience as educators.

This presentation will highlight information gleaned about a range of benefits and drawbacks of online placement experiences. We will also discuss the resources needed to further develop the quality of these experiences. Participants did not always understand online placements to provide “authentic music therapy” experiences. However, as educators, we argue for a disruption to this perspective given the potential ongoing need for online music therapy service provision and student music therapy training into the future. Suggestions for supplementing online placements are offered drawing upon theoretical concepts from community music therapy practice.

Disturbing issues! How to respond to ethical dilemmas in music therapy?

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Ethical questions related to diversity, social oppression, and other socio-political issues impact music therapy. Reflecting on personal biases is essential for anyone working in the field. Also, music therapists, even more so since the pandemic, face decisions in their everyday work that raise ethical questions. These may result from current medical advancements relating to existential issues regarding the beginning, the end, and the meaning of life, e.g., in neonatology, mental health, neurology, or palliative care. Ethical questions include conflicts of interest regarding emotional, economic, and legal issues or questions concerning clients' autonomy. However, the use of music per se within therapy settings might bring up ethical questions. How can we – as music therapists – respond to these dilemmas?

After a brief introduction to ethical thinking in music therapy, we will discuss how to identify ethical issues, address ethical questions, and respond to ethical dilemmas by applying a four-step decision-making model to case vignettes from music therapy practice.

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Disturbing music therapy practice with groups of young people: Engaging with chaos as a resource

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Many music therapists have anecdotally reported that group work with young people can feel chaotic. In contrast, chaotic experiences such as group disintegration or destructiveness are underreported in literature describing this work. Some authors who mention chaos have suggested that this needs to be minimised or resolved. In my work with groups of young South Africans, resolving chaos sometimes felt impossible or inappropriate for supporting young people to cope within chaotic contexts beyond the group.

This presentation aims to disturb common preconceptions through demonstrating how music therapists might accompany young people in groups to engage with chaos as a resource. I will introduce a paradoxical approach developed through my doctoral research and practice with music therapy groups with young South Africans who have committed offences. Chaos is considered as a critical resource enabling the transformation of groups alongside ordered experiences that support group formation. I will present a group matrix I constructed to illustrate my research findings. The matrix shows how chaos can free and pressure young people to engage with musicking, the group activity, and relationships through active or observational, integrative or disintegrative styles. Each participation style can support, challenge or hinder young people in different ways. As music therapists, we can track and accompany young people's movement through a landscape of possibilities presented through the matrix, enabling them to consider alternative ways of coping within and outside the group. This frees us from prescribing goals that might limit what young people can gain from music therapy groups.

Disturbing our perceptions on 'parent-therapy': The musical journey of parents to reveal their parenthood identity

Tali Gottfried

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The approach to therapeutic work with parents in music therapy has been described in the literature in many ways but is not well defined. Mainly, these approaches are directed to families of children with special needs and developmental challenges, and parents are encouraged to be involved in their child's therapeutic process. Those approaches, important and effective as they are, seem to not deal with the parents as the main issue, and do not place enough attention on parenthood. This presentation offers an approach referred to here as Music-Oriented Parent Support (MOPS), which includes musical presentations as a way of forming and sharing parenting identity. MOPS is a dynamic therapeutic intervention with parents, based on working on certain aspects of their parenthood: internalisation, unconscious feelings, and parental identity. Musical presentation is a therapeutic tool aiming to increase clients' knowledge of self and others via presenting their music. Used within the MOPS, it is a collection of various musical compositions that are chosen by the parents according to the stages in their parenthood, to be played during parent sessions, and serves as the basis for therapeutic discussion with the music therapist. By choosing and preparing specific musical pieces in a specific order, each of the parents creates a personal and meaningful musical collage, which enables them to share their personal and musical identity, and achieve meaningful therapeutic results. An example of Dafna and David, parents of three children, accompanies this presentation to illustrate the use of this approach.

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Disturbing the norms: Using music as a tool for creating societal change, challenging norms, and promoting agency and self-efficacy

Ingrid Dyrnes Svendsen

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This presentation will address a music project - directed at girls, trans, and non-binary youth - called *LOUD! Band Camp*. I explore how music can be used as a tool for creating societal change, challenging norms, and promoting agency and self-efficacy. The research project explored how 11 participants experienced and described participating in the project. Additionally, investigating whether there was any change in the participants' perception of themselves.

The research methods included a modified version of the Session Rating Scale and a semi-structured group interview. The results fell into four categories, 1) the participants' self-efficacy increased through participating in the project, 2) the social aspect / connection to peers was an essential factor for a positive experience, 3) the participants became aware of gender norms that girls and boys traditionally are expected to follow, and 4) the connection between expectation and reality was significant for participants to describe their experience as positive.

The presentation will discuss and illustrate practical methods and general principles to support a positive outcome of the band-playing at the camp. Photos and comments by the adolescents are presented. The presentation will be of specific interest to people working with adolescents to broaden the perspective of challenging existing gender norms directed at girls, trans, and non-binary youth in clinical practice.

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Disturbing the status quo: Towards inclusion and access for music therapy within the mental health sector in South Africa

Carol Lotter, Karen de Kock

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This presentation is based on a study exploring the impact of music therapy on mental health users (MHUs) at a private mental health hospital in South Africa. One hundred thirty-five MHUs voluntarily and anonymously completed a questionnaire investigating their experience of music therapy during the prescribed 21-day hospital stay. Group music therapy takes place once daily and comprises four foci: Three sessions are themed guided visualisation and singing interventions and the fourth comprises a drumming session called 'Destress Drumming' which includes improvisation and singing. Aspects of these interventions will be demonstrated practically during the presentation. Over time, the hospital's medical team has provided feedback regarding perceived benefits of music therapy for MHUs but it was deemed essential to formally document feedback from the direct perspective of the MHU. In South Africa music therapy is not considered a prescribed minimum benefit, which implies that music therapy is not funded for all MHUs. Only MHUs who are members of medical insurance companies that fund music therapy can attend sessions without any financial implications. MHUs such as police personnel and public sector teachers, in which high levels of trauma and burnout are experienced, are excluded from financial benefit and required to pay privately to attend sessions. This exclusion places financial constraints on MHUs and ethical and financial challenges for the therapist. In articulating the benefits of music therapy, the findings of this study will contribute to advocacy for access to music therapy for all MHUs within the South African mental health sector.

"Do you know how hard it is being trapped in here?" Group songwriting to elicit service-user voice with CAMHS inpatients

Kate Fawcett

University of Wolverhampton, UK

This paper describes an intensive intervention commissioned by the NHS, devised in response to their desire to explore service-user experience of a CAMHS Tier 4 service. Patients had previously proved reluctant to cooperate with traditional evaluation methods, leading to a relative paucity of meaningful feedback. Our hypothesis was that the process of harvesting qualitative data might be embodied in a therapeutic protocol which was valid in its own right. The very concept of a predetermined agenda could be construed as being fundamentally in conflict with a person-centred ethos, yet the particular demands of this brief required clear scaffolding. Group therapeutic songwriting was selected as the best fit, in terms of practicalities of delivery, likelihood of client engagement and tangibility of outcome data. Our premise was that proposing the “container” (Wigram, 2005, p. 264) of a song with a general theme would allow the intervention to remain congruent with therapeutically robust parameters, whilst creating favourable conditions for yielding coherent results within a tight timeframe. We hoped that a body of new songs would be created, constituting an authentic source of patient voice. Participants would be invited to engage with thematic songwriting processes, as a means of articulating their views regarding their care, with contingent benefits including social cohesion and collaborative creative ownership. Anticipated outcomes were a greater understanding of the realities of service-user experience, and an enhanced awareness for both patients and staff of the intrinsic value of therapeutic arts interventions – expanding perceptions of what both evaluation and therapeutic processes can look like.

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Dying to sing: Last resort or first response?

Anna Ludwig

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As an introduction to this presentation, the author will encourage some gentle body shoogling and voice work to bring the attendees together and to set the scene for their presentation theme. The presentation will then examine the use of the voice as a rehabilitation tool in palliative care. Drawing on the author's experience of using music to help strengthen voices and improve breathing (including sessions with patients recovering from Long Covid), they will question why many referrals are made to them at the latter stages of a person's illness, when in fact, it may be too late to be beneficial. They will explore how we can encourage health professionals in the fields of illnesses such as Parkinson's Disease, Chronic Obstructive Pulmonary Disease and Lung Cancer to think of music therapy intervention as a first point of call, not as a last resort. The author will also examine the detrimental effect on an individual of being told not to sing, or that they can't sing during childhood, can have on confidence in later life and how this can be a barrier to people accepting support. How can the music therapist encourage patients to continue on their own with voice strengthening exercises, which have clearly been beneficial during the clinical session, when the patient is too embarrassed to sing at home in case someone hears them?

Early thematic analysis of the therapist and participant experiences of music therapy where music technology is the primary instrument

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Utilising music production technology in music therapy provides music therapists with an opportunity to engage participants in propositional music therapy interventions “where the participant can become a composer [or music producer], rather than ‘only’ a patient” (Werger, Groothuis and Jaschke, 2020). Further to this, music production technologies affords participants with an opportunity to explore new worlds of sound and expression that are at once new and unheard (Werger, Groothuis and Jaschke, 2020), and traditional and ‘culturally relevant’ (Street, 2014). In addition, music production technology has the potential to serve a central role in the online delivery of music therapy, enabling music therapists to connect with service users who, through reasons of health or geographical isolation, would otherwise be excluded.

Understanding both the challenges and benefits of utilising music production technology, from the perspective of the therapist and participant is required, if we as music therapists are to make full use of technology as it evolves (Magee, 2014). This presentation presents early findings from the thematic analysis (Braun and Clarke, 2006) of both the therapist's journal and participant's feedback questionnaire, completed following music therapy sessions where music production technology is the primary music making tool, and provides insight of the challenges and benefits in utilising music production technology.

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Effects of music therapy during skin-to-skin care for preterm infants and their parents in the neonatal intensive care unit

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Background: Unbuffered stress levels may negatively influence preterm-infants' autonomic nervous system maturation, thus affecting neurobehaviour and psycho-emotional development. Music therapy (MT) is an evidence-based treatment modality in neonatal care. When coupled with skin-to-skin care (SSC) it may reduce stress responses in both preterm infants and their parents and enhance family-centred care. **Methods:** This single-centre, cluster-randomised trial with two parallel arms was designed with an intention-to-treat basis, using linear mixed-effects models. Ten, two-month time-clusters, each with five to eight participating families, were randomised to either combined MT and SSC or SSC alone. Families of preterm infants were offered two sessions of the allocated condition in the NICU, and a three-month follow up session at home. The primary outcome variable was stabilisation of the autonomic nervous system, defined by change in the high frequency (HF) power of heart rate variability (HRV) during the second session. Secondary outcomes included other HRV measures, parent-infant attachment, and parental anxiety at each session. **Results:** The trial included 68 families. Music therapy combined with SSC improved infants' autonomic nervous system stability, as indicated by a greater increase in HF power (mean difference $5.19\text{m}^2/\text{Hz}$, $\text{SE}=1.27$, $p < 0.001$) (95% confidence interval 0.87 to 2.05) during MT compared to SSC alone. Most secondary outcomes were not significantly different between the study groups. **Conclusions:** MT contributes to preterm-infants' autonomic stability and stress reduction, thus laying an important foundation for neuro-behavioural and psycho-emotional development. Studies evaluating longer-term effects of MT on preterm infants' development are warranted.

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Effects of music therapy in pre-meal anxiety reduction in day-hospital patients suffering from anorexia nervosa

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Background: Literature seems to underline that music therapy could offer empowerment, feelings of renewed self-confidence, distraction from negative thoughts and also redevelop or rediscover identity in patients suffering from anorexia nervosa. **Aim:** The purpose of this study is to investigate whether music therapy proposed before dinner can decrease pre-meal anxiety and, consequently, improve the diet itself in a day-hospital treatment program for young women with anorexia nervosa at the Hospital of Vicenza (Italy). **Method:** From January 2021 to June 2021, 22 patients voluntarily participated at weekly sessions of group music therapy conducted by a qualified music therapist. Before dinner on Monday, Tuesday and Wednesday, pre-meal anxiety was measured using a self-report scale that measures anxiety. Music Therapy group took place every Wednesday before dinner. Both active, in which members were asked to play, sing and write songs, and listening activities were used. **Results:** Pre-dinner anxiety was significantly lower on Wednesday, after the music therapy group, compared to Monday and Tuesday. **Conclusions:** Group music therapy reducing pre-meal anxiety and consequently promoting better adherence to meals, can significantly contribute to the treatment of patients with anorexia in a day-hospital treatment program.

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Empathy in knowledge translation: Re-contextualising the role of music therapy in palliative care through an arts literature lens

Matt Lewin

Australia

Music therapy is an allied healthcare profession which uses music to address the therapeutic needs of a range of clinical populations. Rigorous scientific research has been required to establish the field's place within health systems. As a result, the communication of the profession's value is limited to field specific journals. Conversely, when music therapy is rarely presented in the mainstream media, it is often reduced to a short snippet "feel good" story, overlooking the depth and efficacy of the field.

This presentation describes a successful approach to addressing the challenges of translating knowledge and communicating the value of a psychotherapeutic field to the general public. The experience of the music therapist working in palliative care is contextualised through an arts literature lens to develop a personal memoir published in *Meanjin Quarterly*. As a result the field of music therapy begins to become an accessible part of the Australian literary and cultural landscape.

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Evaluating the impact of music therapy with people with dementia experiencing high levels of disturbance in acute NHS settings

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This presentation will present findings on the perceived benefits of music therapy on acute wards for people with dementia (PwD) and suggestions for future research. Dementia has been acknowledged as a global health crisis with numbers of people diagnosed with the condition growing (Wittenburg et al., 2019). As such, it is likely that the numbers of people with advanced dementia who are too 'disturbed' to be cared for in community or residential settings will also grow. Typically, in the UK, the most unwell are cared for in specialist psychiatric wards within the NHS. While some research conducted in residential care settings has found music therapy to be effective in alleviating the behavioural and psychological symptoms of dementia (Hsu et al., 2015; Ridder et al., 2013), research exploring the effectiveness of music therapy for PwD in acute settings is lacking.

The Cambridge Institute for Music Therapy Research at Anglia Ruskin University was approached by an NHS Foundation Trust with a proposal to explore how music therapy could support best care for the most disturbed PwD in their care. A six-month evaluation project was established to look at the benefits of music therapy for PwD, family caregivers and staff through retrospectively gathering routinely collected data on the wards and conducting interviews with music therapists and staff. A survey of all music therapists working in acute NHS settings with PwD was distributed through the British Association for Music Therapy to establish trends in practice and responses to COVID-19 within the UK

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Expanding the gamut music therapy as flexible assertive community mental health care

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There has been a gradual shift in the provision of treatment and care internationally for people with severe mental illness, from institutional treatment to community-based services. Various approaches to community based outreach services have been developed in order to ensure continuity of care, to prevent admissions to psychiatric hospitals and to stimulate social inclusion. Two of the most common team-models are Assertive Community Treatment (ACT) and the flexible variant FACT. As far as the research literature reveals, music therapy has to a very limited degree been implemented in such interdisciplinary teams. This paper will present preliminary findings from an ongoing postdoctoral research study named MusTCare. The objective of the study was to gain knowledge about how music therapy best can be implemented in assertive mental health services in order to maximise support for recovery for service users. An action research methodology was applied to study the implementation of music therapy in a FACT-team in eastern Norway over a period of two years. Data was collected through qualitative interviews, participatory observation and recording of musical interaction. The presentation will address the huge gamut of various approaches that were applied in music therapy in order to meet the patients' personal and social needs - from home visits to concert performances. Short case examples will be presented and the findings will be illuminated by theory on personal, social and clinical recovery.

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Exploring and expanding music therapy practices for people with multi-sensory impairment

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Greece

Music therapy with people with multi-sensory impairment can promote the reconsideration of music therapy practice, challenging and expanding the existing knowledge in the music therapy field. How can music therapists create a therapeutic space for people with deafblindness? This paper presentation is an initial attempt to fill a remarkable gap within music therapy literature with regards to working with individuals with deafblindness. Despite the wide range of research conducted in music therapy and disability, music therapy techniques for individuals with deafblindness and multiple disabilities is a field to be further explored and developed. This paper presentation aims to reflect on existing knowledge and practices as well as opening new conversations and directions about music therapy practice and research for people with multisensory impairments. It is based on the author's personal and professional journey and reflections with regards to exploring alternative ways of perceiving connectedness during music therapy sessions with multiply disabled clients with deafblindness. Drawing from her clinical work with three individuals in an educational context for multiply disabled visually impaired children and adults in Greece, the author shares a reflective account of both challenges and new possibilities on how music therapy can be inclusive and therapeutic for people with multi-sensory impairments. Examples will be provided from practice and recommendations for future ideas in terms of theory, research and practice.

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Exploring the discomfort and potential when skill-sharing is truly reciprocal

Alexia Quin, Nina Cherla, Hazel Child

Music as Therapy International, UK and India

Music as Therapy International places great emphasis on listening to our project partners, whether working in the UK or overseas. This is integral to our "skill-sharing" approach: A reciprocal process where the project partners' existing skills and knowledge are recognised and capability can be strengthened. We seek to learn from our partners' expertise, local experience and insight to determine what aspects of therapeutic music-making are locally relevant and how best to explore them together.

A partnership approach requires an open mind. It isn't always a straightforward journey! What happens when you really ask what people want from you? And what happens if the answer isn't what you expect?

This presentation will describe two recent projects, one responding to a request for music training for caregivers of people living with dementia in India and one responding to a request from the Carers Trust, supporting unpaid carers across the UK. In both instances when we really explored what the project partners wanted, we discovered it was not something we had provided before. The consequent diverse projects led lead music therapists Hazel Childs and Nina Cherla way out of their comfort zones and to reconsidering our more traditional project models to extend our portfolio of activities in totally new directions.

The presenters will explore how we sought to hear our partners' views, how we felt when we heard them and where this led us, referring to how we thought about co-creation, neocolonialism and, our ultimate aim, achieving a sustainable impact.

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Finding an authentic voice in a tragic case of mistaken identity: Reformulation, remorse and repair in cognitive analytic music therapy

Stella Compton Dickinson

UK

It is not easy to think about why human beings kill others. This paper describes how music therapy played a central part in unlocking what had gone wrong in the life of a man who was suffering with paranoid schizophrenia. In the United Kingdom in 1954 a new sentence was introduced called manslaughter on grounds of diminished responsibility due to mental illness. This recognises that in a compassionate society an offence may not be premeditated if the perpetrator was suffering from mental illness at the time, and that subsequently they may have the hope of recovery. Economic hardship, racist and discriminatory attitudes, a sense of exclusion, neglect, social and emotional deprivation, domestic violence and substance misuse as well as genetic factors all contribute to the development of this illness. People with schizophrenia may suffer distressing symptoms and phenomena. Hearing voices can be confusing or good company. This paper explains the musical therapeutic process and formative life events and losses that were explored which preceded this man's offence: how it helped him to understand why and how he had made the most dreadful mistake, leading to an epiphany in recognising the enormity of what he had done and the desire to make amends. This new paper is in press for *The Practical Handbook of Hearing Voices* (edited by Austin and Hopfenbeck. PCCS Books <https://www.mindmatters.store/hearing.php>).

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From diagnosis to end of life: Providing interventions for those with chronic obstructive pulmonary disease

Leanne Wade

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Smoking is a major cause of Chronic Obstructive Pulmonary Disease (COPD), which includes emphysema and chronic bronchitis. The standard diagnostic feature of COPD is shortness of breath. This is a slow-developing illness that may cause high levels of anxiety in those who suffer from it. This presentation will include the presenter's pilot study working with twelve individuals who are smokers and in the early stages of COPD. The study examined if a 5-minute intervention of pursed-lip breathing, singing, or playing kazoo affected lung functioning. Participants reported which interventions they found to be most helpful for breathing and whether they would choose to participate in those interventions alone or with a music therapist. Lung function was assessed using a spirometer before and after each intervention.

Millions of people are diagnosed with COPD, which increases the chances of a music therapist treating these patients during inpatient and outpatient settings. Music therapy interventions need to change as the individual progresses through the illness and dyspnea increases. This presentation will discuss interventions for COPD based on experience working in the medical setting and the severity of the disease from the beginning stages through the end of life.

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From TikTok to gameplay: Adolescents' online realities in the music therapy room

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In an era of accelerating digitalisation, adolescents' use of social media and technology has become a dominant topic in mainstream media and the public discourse, characterised by a one-sided focus on the negative impacts on mental health and neurodevelopment. Within the scientific community, however, a more polarised landscape is emerging as researchers begin to highlight the potential benefits of digital technology use, as well as challenge the association to adolescents' ill mental health.

Nevertheless, social media and the internet come hand in hand with, and most often as digital devices physically in the hands of the young people coming to our music therapy rooms, bringing on new challenges, as well as opportunities for deeper therapeutic processing. The virtual world is being recognised by clinicians as a potential space in which teenagers can explore an inner world of conflicts and desires without acting them out, however, there seems to be a gap in the literature and a culture of uncertainty as to how to approach the digital material brought by adolescents into the sessions. Similarly, although social media plays a fundamental role in how young people engage and experience music, there is little research which examines the interplay between music, adolescent development and social media.

This paper presentation will explore the speaker's experiences of navigating and embracing teenagers' online realities and how they permeate the therapy session. The speaker will use case vignettes to present thoughts and questions relating to the countertransference in the musical and therapeutic relationship with the adolescent client.

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From Zoom to the therapy room: Transitioning from online delivery to in-person work with an adult learning disability group

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This case study presentation describes the impact of transitioning from online music therapy sessions to in-person delivery for a group of three young adults with learning disabilities. This group were new to music therapy, beginning sessions via Zoom video calls during the COVID-19 pandemic. The group members initially attended from their day centre, each supported individually by a care worker in separate rooms, while the therapist joined the video call from home. All three clients seemed to respond positively to the online format.

Once restrictions eased after six months of working online, therapy was able to move into face-to-face delivery at the day centre. The parameters of the therapeutic relationship, and content of the sessions changed drastically as a result. Furthermore, the caregiver ratio decreased due to the group members no longer needing 1:1 support to access sessions, which also impacted the group dynamic. Although initially challenging to reconcile the virtual group with the reality in the room, the clients also seemed to respond positively to the in-person group, albeit in a different way to the online format.

Video extracts will be shared from both the online and the in-person periods of therapy. The experience of the clients, therapist and support staff will be discussed, with particular focus on how the therapeutic approach was adapted to meet the changing conditions. The work will be described in the context of group dynamics and the literature around music therapy with adults with learning disabilities (Pavlicevic, 2003, Richards, 2002, Tuckman, 1965, Watson, 2007).

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Furthering the scope of music therapy practice in end-of-life care

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Since the late 1970s, music therapy has been an established healthcare discipline in palliative care (Munro & Mount, 1978). Internationally, palliative care perspectives and practices are evolving, and music therapy is continually gaining recognition as an official treatment for individuals who are dying. Early descriptive writing and research emerged in the 1980s presenting strong evidence to support music therapy's efficacy towards goal acquisition in multiple domains including physical, cognitive, psychosocial, and spiritual etc. A more recent Cochrane review of music interventions for improving physical and psychological outcomes of individuals with cancer confirmed benefits for reducing anxiety, pain and fatigue and enhancing quality of life (Bradt et al., 2016), and approximately 34% of individuals receiving palliative care are diagnosed with cancer (WHO, 2020).

As music therapists continue to work in a variety of palliative care settings including specialised in-patient hospital units, hospice, individual homes, and the community, the scope of their roles is expanding. This presentation will focus on the emergent themes of music therapy practice at end-of-life, and discuss next steps and future research. A special area of concentration will be on new clinical guidelines for relationship completion and the role of music therapy in procedures surrounding physician assisted suicide or Medical Assistance in Dying (MAiD). The inclusion of an integrative eclectic music therapy approach will be presented as a way to provide a holistic and comprehensive approach to the care of the dying.

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Group music therapy for enhancing resilience of refugee unaccompanied minors in transit camps

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The present paper explores group music therapy as a tool for enhancing resilience of unaccompanied refugee minors living in a transit camp. All refugees upon arrival on Chios Island are obligated to reside at the Registration and Identification Center until their asylum papers are processed. Unaccompanied teenagers face an array of adversities and stressors while living within the designated area of the transit camp, called a “safe zone”. Focusing on resilience rather than vulnerability, bi-weekly group music therapy sessions were offered for a period of two and a half months within the “safe zone”. Twelve unaccompanied refugee minors from eight different countries participated in a total of 10 sessions. During the sessions the multi-cultural group collectively created five songs and at the completion of this pilot study, a focus group took place where all participants shared their views and thoughts on their music therapy experience. Following a descriptive phenomenological psychological methodology (Giorgi, 2012) the lyrics of the five songs as well as the focus group interview were analysed. With resilience as the focal point, the themes that emerged included fostering self-identity, emotional support, group identity and community building. Viewing resilience both as an individual capacity (Masten, 2014) and as a social ecological construct (Ungar, 2012), a strengths-based group music therapy intervention that focuses on competencies can prove to be an effective tool for promoting resilience of refugee teenagers who travel alone, reside in transit camps and await for their asylum application.

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Hip Hop Project In: Hip Hop-based music therapy to address trauma in asylum seeker and unaccompanied minor migrant youth

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This paper presents the prevailing situation of the asylum seeker and unaccompanied migrant minors population in and out of Spain by a review of most recent reports in the literature; investigates the psychological vulnerabilities of the young asylum seeker population and unaccompanied migrant minors through the previous literature and observes PTSD as the most common disorder that affects this population. Furthermore, the paper demonstrates the results of an up-to-date literature review to find out the effective intervention models to address the PTSD symptoms of adolescent asylum seekers. A seven-month-long music therapy intervention experience was applied to the related population, and the article demonstrates its relation with the previous literature. The study identifies one of the most effective intervention tools as Hip Hop Therapy-related interventions and presents a new intervention model. Today there are numerous young asylum seekers around the globe. Many of those struggle with posttraumatic stress disorder and show resilience in their daily lives while learning, discovering, and surviving. Accordingly, the interventions directed to them must be trauma-informed, phased, engaging, empowering, and impactful to support the needs of these young people. The integral Hip Hop methodology presented in this paper is a nominee for that type of intervention model and must be examined with the research presented. This paper demonstrates the expected results and the importance of the intervention models to be engaging and considerate to the necessities and preferences of the addressed population.

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“I say things to you because I trust you”: Building relationships in music therapy with adolescents with complex trauma history

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Many children and adolescents in child welfare have histories of traumatising experiences (Kayed et.al., 2015). Combined with a lack of regulation support from caregivers, these experiences may result in complex trauma often referred to as developmental trauma (Nordanger & Baarud, 2017) or complex posttraumatic stress disorder (CPTSD) (Munro, 2011). The traumatic history may result in severe physical, and psychological challenges and/or disorders (Kayed et.al., 2015; Felitti & Anda, 2010). The perspective referred to as trauma informed care, has been applied as a holistic approach in child welfare services the last decades in Norway (Krüger et. al., 2018). A trauma informed approach in music therapy involves facilitating experiences of safety, mastery and emotional regulation (Bath, 2015). Evidence based research shows that music therapy also facilitates safe therapeutic relationships and trust (Gold et.al., 2018). Music activities like improvisation, song writing, playing in a band, and performance, may support adolescents expressing and regulating emotions, and create new possibilities for participation (Krüger, 2020). The current paper is based on a study that explores the potential of a trauma informed approach in music therapy. This paper will present qualitative findings, describe examples from practice, and will discuss the potential benefits and risks in applying a trauma informed approach in music therapy.

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“I’ll text you later”: Asynchronous online music therapy as a tool to promote post-traumatic growth in teenage clients

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Online music therapy can be provided in either a synchronous or asynchronous way. The latter option allows less spontaneous interactions, which might be considered a disadvantage in music therapy context. However, it has benefits and might sometimes be the only possibility to provide services. This article will include considerations regarding time, space, safety, process and relationship within asynchronous music therapy with teenagers with attachment trauma, staying in the foster care institution.

Messaging applications, using text, audio recordings, photos and videos, combined with rare face-to-face sessions were used to facilitate building resilience and promoting post-traumatic growth. A case study of a 14 year old girl who experienced physical and sexual abuse will be included as an illustration of the process.

Although an asynchronous format was chosen due to trivial limitations, such as lack of efficient internet connection and suitable space in the institution, the process and its outcomes provided interesting insights into practice with this teenage population. It revealed benefits, such as ongoing engagement in the therapeutic process throughout everyday activities, and broader use of spatial, visual and textual resources.

For young people who have experienced trauma, for whom trust, safety and attachment might be areas of difficulty, and for whom communicating via applications is very natural, asynchronous music therapy might have potential worth considering not only during pandemic times. The characteristics of non-face-to-face and non-strictly time-structured interaction appeared to be beneficial, enriching the music therapy process.

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ICF? What does that have to do with music therapy?

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Music therapy provides many possibilities for supporting persons of all ages with developmental disorders and acquired disabilities. These disorders and problems are complex and affect not only the person with the disorder but also his or her family and social environment. Additionally, they generally remain across the lifespan of the client and usually affect more than one area of development.

Indications, objectives and goals for music therapy are formulated using background information from medical and psychological diagnostics. The information is extremely important for planning the support of the client in his/her development, no matter what his/her age. But do music therapists take the client's every-day life and what he/she needs in order to participate in society into account when formulating goals and objectives and when planning therapy?

The International Classification of Functioning, Disability and Health (ICF) was developed by the WHO in 2001 as an attempt to provide a possibility for describing the bio-psycho-social factors that can influence a person's development. At the same time, it does not negate the medical condition of the client. It can be used to help determine the needs a client may have for participating in society.

This paper will briefly explore the basic principles of the ICF and the possibilities it may offer music therapists for determining client needs when planning therapy. Using case examples, ways in which client-centred objectives for music therapy can be formulated based on the bio-psycho-social profiles of the client will be considered.

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Implementation and evaluation of a music therapy practice guideline for geriatric care

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Music therapy care for the elderly is becoming increasingly important in Germany (Wormit et al., 2020). The music therapy practical guide developed as part of the "Music Therapy 360°" project funded by the German Federal Ministry of Education and Research (BMBF) will be implemented in the standard care of the elderly in five care homes for the elderly in the Heidelberg area from July 2020 to December 2022.

For the evaluation of the music therapy practical guide, the project includes a mixed-methods design in which data from caregivers, nursing home residents, and their relatives were collected via qualitative interviews as well as self-report questionnaires reflecting criteria of subjective well-being, care-related quality of life, and workloads of caregivers. In addition, all participants in each music therapy intervention during implementations 1 and 2 are asked to rate the service on a visual analogue scale.

In addition to introducing the music therapy practical guide and research design, this paper primarily presents the evaluation results from implementation one (project year 2021). Finally, web-based adaptations of the music therapy practice guideline are discussed, which have led to valuable experiences and additions due to the Corona-19-pandemic (Wormit et al., 2021).

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In defence of working with "patients" in music therapy

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How music therapists consider the people we work with and how people that come to therapy perceive themselves during sessions is of paramount importance and central to our work. How we refer to the people we work with is more than an argument about terminology or semantics. This paper will propose that the term used fundamentally affects how the therapeutic relationship is viewed, during and around music therapy, by both therapist and the person receiving therapy. This paper will argue that using the word "patient" to describe the person receiving therapy, regardless of clinical presentation, allows for a more honest appraisal of the therapeutic relationship than any other term. Rather than calling for a return to more traditional music therapy or advocating for one theory base over another, it will instead use the word "patient" and its meaning to answer more fully the question of how we work together in the room

It will discuss three statements:

- That the etymology of the word "patient" more honestly demonstrates the inevitable power dynamic in music therapy that should be named and discussed as part of the work
- That being able to work with this power dynamic is the key to the fullest exploration of the therapeutic relationship
- That research shows it is what patients prefer to be called.

Drawing on research from multiple music therapy theory bases, the paper will also use clinical vignettes from private practice to illustrate the arguments set out.

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Indirect music therapy in elderly care: Possibilities, boundaries and preliminary experiences from a Norwegian context

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Music therapy is a rapidly expanding profession in the elderly health field in Norway. Non-pharmacological therapeutic methods are favoured in the Norwegian National guidelines for dementia care, and interventions under supervision by a music therapist are recommended for meeting the needs of persons with dementia (Norwegian Directory of Health, 2017). This identifies a novel need for flexible music therapists in the field, with skills in traditional direct, clinical work, and in skill-sharing and mentoring of other health care workers, family caregivers and volunteers. The latter has recently been referred to as indirect music therapy (McDermott et al., 2018), and this paper explores this approach through two examples from music therapy practice.

Singing in elderly care is a national, Norwegian program with the aim of health promotion in elderly care through purposeful and therapeutic use of music. The program is developed and run by music therapists and gives courses and supervision for healthcare professionals. The program offers a music therapist-developed online music educational resource called “*Syng Sammen*” (trans: Singing Together). Results from a survey carried out amongst users of Syng Sammen will be presented and discussed. Further, indirect music therapy work with spousal caregivers of persons with dementia will be thematized, with perspectives from the ongoing PhD project «Music, dementia, and life partner relationship quality», a sub-study of the RCT Homeside (Baker et al, 2019). Preliminary experiences from the two practice examples will be discussed and reflected upon, with the work of McDermott et al. (2018) as a theoretical and methodological framework.

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Inside the improvisation: Process and purpose in the music-centred approach

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Improvisation lives at the heart of the Nordoff Robbins approach to music therapy, from its historic roots to current practices. Together Nordoff and Robbins worked to explore and refine the ways that their clients could co-create, inspire and take ownership of their shared music with creative and flexible improvisation. They recorded and studied their sessions thoroughly, continuously learning from every detail within these musical interactions.

This gently empirical, music-centred and client-led approach still thrives, serving ever widening and more diverse communities. The infinite flexibility of musical improvisation can invite our clients to share their true musical selves, allowing them to change us and our music in the process. We can listen and react with precision, becoming active musical partners for our clients and offering them opportunities to experience agency, explore their musical identities and to perform their health vibrantly and expressively.

This presentation will share several extracts of work with young people across a range of SEN and mental health settings, examining the details within improvised musical interactions and opening a discussion about the practical ways in which flexible improvisation can offer agency within music. I will engage with the wider discourse around why it matters that we embrace the tools and learning that we receive from our clients; inviting them to change us, disrupt our musical habits, challenge our musical skills, and ultimately lead us to become better music therapists.

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Interactive music therapy for chronic pain management in people with advanced cancer: A mechanistic study

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Chronic pain is one of the most feared symptoms in people with cancer, with 70% to 90% of people with advanced disease reporting pain. Although music therapy is frequently used for pain management in cancer care, there is a lack of knowledge related to therapeutic mechanisms (i.e. mediators) that lead to improvement. Yet, it is well accepted that knowledge of mediators as well as a validated theory of action (i.e., *how* the intervention activates the mediators) are needed to optimize psychosocial treatment interventions. Therefore, the purpose of this multi-site clinical trial was to examine mediators hypothesized to account for the pain-reducing effects of interactive music therapy (IMT) in people with advanced cancer who have chronic pain. This study used a mixed methods intervention design in which participants were randomized to 6 individual interactive music therapy (IMT) or 6 individual social attention control sessions. The mediators (anxiety, mood, pain-related self-efficacy and perceived support) and pain outcomes (pain intensity and pain interference) were measured at three time points using self-report measures as well as biomarkers. Follow-up interviews were conducted with a subsample to examine congruence between the hypothesized mediation model and participants' explanations of how IMT impacts chronic pain. We will present the findings of this 3-year study and the challenges of moving this study from a face-to-face to online delivery format due to the COVID-19 pandemic. In addition, this presentation will enhance understanding of how mixed methods research can strengthen mechanistic studies in music therapy.

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Is music therapy effective in the treatment of depression? Results from the music therapy for depression (MUSED) randomised controlled trial

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Background: Music therapy becomes increasingly important in the treatment of depression, however, there is a lack of randomised trials investigating its efficacy. Since depression is associated with alterations in the psychobiological stress systems, a multimodal evaluation could provide detailed information about the mechanisms through which music therapy unfolds its effects. With the MUSED study, we aim at investigating the effects of music therapy on 1) self- and observer-rated depression, 2) secondary self-rated outcomes including stress and emotion regulation, and 3) circadian biological rhythms (heart rate variability [HRV]; saliva cortisol) in daily life. **Methods:** 102 women with depression were eligible for participation. Participants were randomly assigned to either the intervention group (10 weeks outpatient group music therapy and treatment as usual, TAU) or the control group (TAU only). Self-report data were collected before (T0), immediately after (T1), and 10 weeks after the intervention completion (T2). Psychobiological data (HRV and 6 saliva samples for the analysis of cortisol, each on two consecutive days) and observer-ratings were ascertained at T0 and T1. Psychometric scales and ecological momentary assessments were used to assess the data. **Results:** At the present time, all 102 study participants have already been included. We expect to complete the data assessment in summer 2021 in order to present first results subsequently. **Discussion:** With the results of the MUSED study, we aim to contribute to the evidence-base of music therapy in the treatment of depression. Above, findings will help to understand how music therapy affects the circadian pattern of psychobiological stress systems in daily life.

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Leadership in progress: How to be successful in music therapy

Ray Travasso

Suffolk Music Therapy Services, UK

“If you want to go fast, go alone. If you want to go far, go together”. This presentation aims to share some of the key aspects required to set up a successful and thriving music therapy service.

Drawing on personal experiences, opportunities and challenges from over 20 years in the music therapy field, the presentation hopes to share some of the main aspects in creating a music therapy service from nothing to a successful team, employing 14 music therapists and working in over 60 organisations in the East Anglian region.

The paper will present an authentic model of leadership that draws on a range of skills, attitudes, approaches, beliefs and values that centre around the strength of a team, rather than an individual. Topics covered will include recruitment, dealing with challenging situations, conflict, finance, how to improve quality, support and care for everyone in the team and self-care.

The presentation will conclude by highlighting that real success in leadership requires humility, vulnerability, honesty and a deep sense of care and value for the team.

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Leading the way through COVID: Learning from care home residents during the pandemic

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The trauma and disruption of COVID have been felt nowhere more deeply than in our care homes. In this paper we reflect on the impact of the pandemic on music therapy work in care homes, as experienced through our supervisory relationship: the supervisee, who has been working for a large national care home provider since 2007, and the supervisor, who has practised for the last 30 years. Necessary changes to working patterns and practices implemented amidst a climate of fear, loss and grief, prompted us to consider how music therapy has weathered the storm.

Working throughout the pandemic, music therapists replaced weekly visits with extended placements in each of the homes on their patch. We will discuss the experience of this unexpected total immersion and describe the various changes which were explored in supervision. These include a deeper understanding of the ecology of each home and its complex interpersonal dynamics, developing a stronger voice in clinical decision-making and enjoying more trusting relationships with residents and staff. However, the biggest shift seems to have been in the residents, who are taking more ownership of their music therapy sessions, challenging the therapists to radically reappraise their ways of relating both musically and therapeutically.

We will ask whether these opportunities and adjustments born of necessity have created a 'ripple effect' within the homes. Does music therapy have the potential to challenge and disturb dementia care, by allowing the voices of residents to be better heard and understood?

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Listening and silence: Reflections and practice to understand and cultivate our listening strategies

Davide Woods

CSMA, Italy

Is there a common factor shared by the different theories, methods, techniques within music therapy?

Could listening be one of the elements which is common to different perspectives in music therapy? If so, how do we enhance, develop or evaluate our listening skills?

These preliminary questions are at the basis of a personal research conducted in a variety of clinical fields ranging from disability to mental health, oncology rehabilitation, and palliative care. The aim of the presentation is to offer a sort of “theoretic compass” which may be useful to music therapists seeking better understanding and awareness upon the listening process involving themselves, their client(s) and the shared musical experience.

In the presentation I will analyse differences and similarities between the listening process from different perspectives such as concrete music, soundscapes, psychodynamic music therapy, phenomenology and mindfulness.

In this perspective the processes and “forms” of listening are directly linked to the way we experience silence. For this reason the presentation includes a brief workshop upon silence and the ways we can experience and elaborate a deeper understanding on it.

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Malfunctions have priority: How disturbance turned to be welcomed in my music therapy work with children and youth

Gabriele Maria Ludescher

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When you are educated as a Music Therapist at Vienna's Music-University in the early 1990s, it is important to be a psychotherapy-orientated music-therapist with clear setting for good work. Starting work at a School für Inclusion, Diversity and Special-Needs Education in 1995, I was eager to build up such a setting to delimit from pedagogical aims and create a sense for reciprocal understanding and esteem.

Throughout a quarter century working at the same place a lot changed and developed in the schoolhouse, in society, in educational, psychotherapeutic and music therapeutic thinking and acting – experiences outside and inside myself opened new perspectives on disturbance and malfunctions in my work with children and youth as a music therapist. I will reflect on some of these and give insight about how handling and accepting real life and persons entering the “holy” music therapy room and disturb the “safe” relationship can become a win-win-situation for all involved.

Ruth Cohn's concept from TCI “malfunctions have priority” will be reflected on too. And in Antoine de Saint-Exupery's “The Little Prince” we find this wonderful phrase: You have to endure a few caterpillars if you want to see butterflies.

MATADOC-PB: A culturally sensitive and linguistically accurate translation of the MATADOC in Brazilian Portuguese

Wendy Magee¹, Camila Siqueira Gouvêa Acosta Gonçalves², Camila Pfeiffer³, Cléo Monteiro França Correia⁴, Claudia Regina de Oliveira Zanini⁵

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This project concerns developing robust and culturally sensitive translations of standardised clinical measures for music therapy. Measures for patients with profound brain damage are needed in the Brazilian-Portuguese language given that 0.6% of all hospital admissions each year in Brazil are due to traumatic brain injury. Brazil has a larger number of music therapists (n=3000) than Portugal, and so translation of relevant clinical measures into Brazilian Portuguese (rather than European Portuguese) is more pressing at the current time. The Music Therapy Assessment Tool for Awareness in Disorders of Consciousness (MATADOC) (Magee et al., 2014) is a standardised diagnostic music-based English language assessment for adults with prolonged disorders of consciousness (PDOC). We report on the process to begin the MATADOC's validation in Brazilian-Portuguese, following processes outlined by the International Test Commission (ITC, 2016). After a forward translation into Brazilian Portuguese, a panel of experts advised on the linguistic, cultural and psychological accuracy of the newly translated measure. Experts are required to have knowledge of local culture, language (Brazilian Portuguese) and an understanding of the clinical concepts of the measure (disorders of consciousness and music therapy). The purpose of this work was to refine a Brazilian Portuguese translation of the MATADOC-PB and advise on cultural sensitivity and linguistic accuracy prior to its use with clinical populations with PDOC in Brazil. We report on the challenges and decisions made to meet rigour, cultural sensitivity and clinical utility, in particular decisions on important clinical terms central to PDOC that differed between Brazilian Portuguese and European Portuguese.

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Micro-analysis of a musical improvisation in mental health: Relationship between music therapy, social cognition and neurocognition

Ivan Moriá, Renato Tocantins Sampaio

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Many studies that show benefits in communication and social interaction in music therapy for people with schizophrenia, such as those by Geretsegger et al (2017) and Silverman (2015) do not refer to the constructs of social cognition (SC), neurocognition (NC) and/or their subdomains, which are deficient in schizophrenia. Recently, the meta-analysis of Jochum van't Hooft et al (2021) identified that the processing of “theory of mind” (a subdomain of SC) and musical perception may share the same neurobiological circuits. However, interactive musical practice (IMP), much recurrent in music therapy sessions in Brazil, is not explored. This study aims to investigate musical traces related to the subdomains of SC and NC found in IMP. A music therapeutic analysis of a transcript of a song improvisation performed by a music therapist and a patient at a public centre of mental health was conducted, aiming to identify possible relationships between SC, NC and their subdomains with musical and para-musical aspects present in IMP. The subdomains of the SC “theory of mind” and “processing and perception of emotions” were related to harmony and vocal production. The NC subdomain “working memory” was related to the harmonic and rhythmic aspects. It was possible to establish some connections that may contribute to the future development of evaluation protocols in music therapy practice in mental health. More studies about the relationships between music therapy, social cognition and neurocognition are needed in order to obtain a more systematic result.

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Micro-interventions to strengthen music therapy's working mechanisms

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This paper will discuss the development and dissemination of micro-intervention formats in the music therapy profession. The music therapy profession is involved in a gradual professionalisation to an evidence-based vocation. The quality and quantity of music therapy research is increasing, as are the subsequent systematic reviews or meta-analyses. However, the latter define the effect of music therapy treatment often as inconclusive. Regularly this is due to a lack of clear description of the intervention or core function of music. These limitations in music therapy research are discussed in the light of the development of a format that allows the description of working mechanisms of music therapy intervention on micro-level, a micro-intervention format.

The micro-intervention format allows music therapists to describe music therapy interventions detailed on intervention and working mechanisms. It could function as a research-protocol that allows for investigation into the basic mechanisms of music therapy interventions. In the Netherlands, the first 10 micro-interventions have been consensus-based formulated. The presentation includes the micro-intervention 'Music therapeutic guidance to reduce agitation in dementia care using improvisation and familiar songs'. Dissemination of micro-interventions could lead to clearer research outcomes and improve the evidence-based foundation of the music therapy profession.

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Mirroring: Do the clients of white music therapists see white?

Rachel Darnley-Smith

UK

James Baldwin, in a famous speech given to the almost entirely white audience in the Cambridge University Union in 1965, said 'in the case of the American Negro, born in that glittering republic ... and in the moment you are born, since you don't know any better, every stick and stone and every face is white, and since you have not yet seen a mirror, you suppose that you are too.' The notion of mirroring is often referred to in accounts of improvisational music therapy as part of a 'family' of basic therapeutic techniques. Tony Wigram described mirroring as: '*Doing exactly what the client is doing musically, expressively and through body language at the same time as the client is doing it. The client will then see his or her own behaviour in the therapist's behaviour.*' One limitation in Wigram's explicitly practical account is that the possibility of mis-reading the client is not considered. In this paper, from a perspective of a white therapist I will revisit previous case material and following on from Helen Morgan, consider that misreadings may arise where the skin colour of the therapist and client is taken for granted, whether or not they are the same or different from each other. Taking as a starting point references to Winnicott, Morgan, and Baldwin, I will explore new meanings of the mirror in music therapy, as object, metaphor and experience.

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Mixing modalities: Combining music therapy and dance movement psychotherapy in acute wards for women

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Background: Music therapy and dance movement psychotherapy use different means of non-verbal communication and expression. Music therapy makes use of musical interventions, such as free improvisation, music making -using instruments, voices, or body percussion and listening to music. People may choose a specific song to sing or listen to that speaks to them or play an instrument with an expressive manner externalising their conscious or unconscious thoughts. Dance movement psychotherapy recognises body movement as an implicit instrument of communication and expression and engages people with creative use of the body movement and dance. Therefore, these clinical interventions are very effective for people who have difficulties communicating verbally. These types of arts therapies do not apply only to non-verbal clients, but also to those who may find it hard to express their life experiences and their emotional responses using words. **Content:** In this workshop we will demonstrate the activities we have been using in two different acute wards for women in an adult mental health hospital in London. The patients found a safe and non-judgmental environment to be creative and express their inner thoughts. For a period of five months, we were offering collaboratively separate music therapy groups and dance movement psychotherapy groups in each ward. Following a psychodynamic approach, we found ourselves initially introducing elements from each modality to both groups and eventually mixing our techniques congruently providing a space where individual intersection experiences could be met. **Aim:** Engaging more arts therapists into mixing modalities in clinical work.

Mobile thinking: Ways of knowing in music therapy

Jessica Atkinson

King's College London, UK

This presentation explores the knowing that occurs in music therapy. Drawing on her autoethnographic, arts-based PhD research, which has included glass fusing and mobile making, Jessica will explore 'mobile thinking'. This concept has emerged, in Jessica's research, in particular through her exploration of the 'unthought known' (Bollas, 1987) - a fundamental but often overlooked aspect of knowing in music therapy.

The unthought known is seen not only as a feature of musical interaction within the therapy room, but equally as a feature of the numerous and complex activities which make up the field of music therapy, from fundraising to singing, caring to policy making. The involuntary and unpredictable motion of mobile sculptures, and the pathway to their creation, can provoke unexpected insights into this knowing, its significance within music therapy and the relationships and activities that it sustains.

Jessica's own research was 'disturbed' by a/r/tographic methodology (Irwin et al., 2017), which seeks to create knowing, rather than produce knowledge and which led her to mobile making. For Jessica, rendering the unthought in solid form has created some humbling knowing, which is relevant to practitioners and people with supporting roles in music therapy, alike. In this presentation, principles from this methodology will be shared and those attending will be challenged to consider:

How can art-making unlock the knowing that is unthought in the broad and wide ranging, arts based field of music therapy?

In what ways could heightened awareness of this knowing 'disturb' the status quo in the field of music therapy today?

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Moments of interest in music therapy with patients after stroke

Astrid Heine¹, Gerhard Tucek¹, Jörg Fachner², Clemens Maidhof², Julia Vogl¹, Iris Zoderer¹

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The importance of interpersonal processes between people and its investigation on various levels has been discussed widely in music therapy. Clinical case reports include many descriptions of specific moments between therapists and patients, who may experience these as meaningful moments, as resonance or as pivotal moments that facilitate change. The qualitative and mostly phenomenological research of moments in music therapy highlighting inter- and intra-personal processes during music therapy concentrated mainly on the work with patients in mental health settings.

In contrast to this qualitative and psychosocial focus, music therapy in neurorehabilitation followed a rather functional approach over the last years. Inner processes of patients and the relational aspects of music therapy have hardly been discussed in this field.

In this study, we bridge this gap by investigating moments of interest in music therapy with patients after stroke. Central element is the perspective of participants collected in video ratings and qualitative interviews, which give a close insight into the subjective experience of patients and therapists and its meaning. Video analysis (Multimodal (Inter)action analysis) of patient and therapist selected moments of interest allowed us to examine interpersonal processes and (inter)actions during these selected moments. Findings of this PhD research offer important insights into meaningful moments in music therapy with stroke patients, which can be used to improve music therapy in neuro rehabilitation.

Multimodal music therapy assessment protocol: Contributions to individualised treatment plans for patients with Functional Neurological Disorder

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Functional Neurological Disorder (FND) is a neuropsychiatric condition caused by impairment of the functioning of the nervous system in which patients experience neurological symptoms that are clinically incompatible with pathophysiological explanations. Symptoms can include gait disturbances, tremor, seizures, chronic pain, limb weakness/numbness, or loss of consciousness. Though not a requirement for diagnosis, prevalent comorbid diagnoses/risk factors include anxiety and mood disorders, and history of trauma. The interdisciplinary overlap between neurology and psychiatry combined with patients' diverse experiences of their diagnosis and related symptoms makes it difficult for professionals to develop treatment plans catered to the unique needs of the individual.

This presentation focuses on the assessment protocol of a current study exploring the use of psychotherapeutically oriented vibroacoustic treatment and multimodal music therapy aiming to develop a clinical model for patients with FND. In this series of individual case studies, the researchers highlight the unique outcomes that a music therapy assessment can offer, which are then further conceptualised when combined with additional perspectives offered by more commonly used standardised psychological assessment inventories. This multimodal assessment protocol allows for multiple perspectives of each patient to formulate an integrated patient profile, thus contributing to a comprehensive and individualised treatment plan.

Preliminary findings following the implementation of the assessment protocol will be presented. Commonalities and differences among/between the music therapy assessment outcomes and the standardised inventory outcomes will be discussed, as well as any trends between the formulated patient profiles, treatment plans, and FND subtypes.

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Moving from goal-based to personalised measures in community arts therapies settings

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In patient-generated and goal-based measures service users are active in agreeing and rating goals or problems. They differ from patient-reported outcome measures in the flexibility for service users to generate the constructs to be measured. However, whilst more person-centred, the non-standardisation of such measures brings questions about psychometrics and generalisability. This has led, within psychotherapy, to favouring idiographic measures (derived from the Greek 'idio', which means 'distinct', 'of one' or 'own') for clinical utility, paired with nomothetic measures (the Greek, '*nomos*', meaning 'law') for more robust evidence. Arts Therapists continue to show preference for nomothetic measures with good psychometric properties or observational measures that allow the therapist to study micro-moments of attunement. This raises questions around power, with the service-user voice appearing to be absent in co-shaping what will be measured in both music therapy (Spiro et al., 2017) and art therapy (Miller 2014).

This paper will outline a framework for a personalised measure using principles outlining clearly 'what it is' and 'what it is not' (Rolvjord et al., 2005). It will share the process of developing and evaluating the framework with patient advisory groups and arts therapists. Building on the philosophy of the self as agent only in dynamic relation to others (MacMurray, 1961) and a transformative active stance to personhood (Stetsenko, 2012) it will outline a shift towards a critical paradigm and a transformational worldview. Here the therapist becomes a facilitator, creating the conditions for flourishing and the activation of resources as part of an ongoing co-measured journey.

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Music and imagery for chronic pain (MI Pain): Relationships, barriers, and improved access

K. Maya Story, Sheri L. Robb, Matthew J. Bair

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Chronic pain, a persistent problem for United States (US) military Veterans, has a reported prevalence as high as 65.5% and is associated with opioid dependence, anxiety and depression. The Veterans Administration (VA) recognizes chronic pain as a complex biopsychosocial condition and recommends an integrative approach to pain management. The VA has prioritised expansion of services delivered virtually (i.e., telehealth) in order to increase access to rural communities. The researcher will describe:

- The process of working with an interdisciplinary team and stakeholders to evaluate current practices of music therapy (MT) delivery across the largest integrated health care system in the US, serving over nine million Veterans.
- Phased research that involved various studies and methodologies including surveys, interviews, and clinical trials.
- Development and implementation of a resource-oriented music and imagery (MI) intervention delivered via Telehealth.

The presentation is structured to provide a general overview of the research and a more detailed focus on the bridges that are necessary to conduct interdisciplinary research on an innovative intervention with a complex clinical population. The aim is to highlight the relationships, barriers, and access themes and how they disrupt conventional ideas regarding research and delivery of music therapy interventions.

This presentation may hold interest for clinicians, researchers, or music therapy innovators/administrators implementing music therapy programs in large health care systems.

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Music at Rosie's Place: Partnering with a counselling centre to bring music therapy to victims of domestic abuse and trauma

Chanelle Henderson

Australia

Rosie's Place is a counselling and resource centre in a low socio-economic area of a major Australian city. They consist of a team of social workers and a counsellor, and serve victims of family violence, trauma and sexual abuse.

This paper details the professional relationship and transdisciplinary interactions between Rosie's Place and a music therapy clinic. This partnership has resulted in two successful music therapy programs running out of Rosie's Place, led by a music therapist.

Lullaby Group supports new or expectant mothers with a music group to learn how to use music at home and write an original lullaby for their newborn. Songwriting Group is for teenage and preteen girls referred by Rosie's Place to work on writing and recording an original song. Activities include lyric analysis and substitution, poetry and rap writing, musical composition, and group-based musical interaction.

This presentation aims to demonstrate the considerations of partnering with a counselling centre in this way. Considerations are made for the ethical approach to working with vulnerable populations, the use of music as a counselling tool in a group setting, and individual clients' relationships to music in the context of their traumatic experience and subsequent healing. The results from these two programs included increased attendance to counselling, improved sense of self and increase in confidence.

The music therapy partnership with Rosie's Place has been beneficial by supporting the social and counselling goals of the clients through music therapy groups focusing on composition.

Music for Autism (M4A): Binational randomised controlled trial investigating effects and working mechanisms of music therapy in children with autism

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Background: The notion of a connection between autism and music is as old as the first reported cases of autism, and music has been used as a therapeutic tool for many decades. Music therapy (MT) has shown promising results for children's social communication, parent-child relationships, and family quality of life. However, a better understanding of the working mechanisms of MT in children with autism is needed to predict outcomes more accurately. **Objective:** The ongoing M4A trial evaluates the neurobehavioral outcomes of a MT intervention, compared to a matched play-based non-music (NM) intervention, on social communication skills, brain connectivity and structural brain changes. **Methods:** In a binational, assessor-blinded, crossover randomised controlled trial (RCT), 80 children with autism across all levels of functioning, aged 6-12 years, undergo a baseline assessment, which includes social communication, participation, functional connectivity and voxel-based morphometry. Participants are then randomly allocated to a sequence of interventions (MT-NM or NM-MT) and assessments are taken before and after each intervention period. Both interventions will target common goals and follow the same structure, while at the same time allowing for flexibility in the therapists' approach. **Results and Discussion:** We will report on the baseline characteristics of the sample and clinical experience with the interventions and assessments to date. We expect to present demographic, behavioural, and neuroimaging data from about 50 children by the conference date. The unique combination of clinical and neuroscientific outcomes will provide important evidence of the effects and the mechanisms of MT interventions for children with autism.

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“Music has brought us together”... music therapy, co-creation and partnership with people living with dementia and their companions

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Together in Sound, a partnership project between the Cambridge Institute for Music Therapy Research (CIMTR) at Anglia Ruskin University and Saffron Hall Trust, an arts charity, offers music therapy for people living with dementia and their companions. Facilitated by a registered music therapist and music therapy trainees, with input from professional musicians, the music therapy approach draws on both psychodynamic and community music therapy influences. Group sessions take place within a closed confidential therapy space that opens its boundaries to include sharing events and collaboration with guest musicians. The sharing events are viewed as having a bridging function from the closed therapy space to the wider community, thus creating a circle of support for those living with dementia. An emphasis on building “cultures of connectedness” (Stige & Aarø, 2012, p.149) through the music therapy process enables us to attend to the need for dementia to be viewed as a community concern. Troubling the boundary in this way has enabled a community to flourish. In the words of a participant: ‘Music has brought us together, but it is so much more than this’.

This presentation will focus on aspects of the first author’s PhD research, a narrative inquiry with practice-based arts-informed responses, that highlight the value of a flexible approach to practice in which knowledge is co-created. Excerpts from a film and creative artefacts will be shared to elucidate the benefits to participants with the potential to generate insights that could be of use to similar initiatives.

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Music moves: Audio and audio-tactile music therapy for dementia in German residential care homes

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Introduction: Systematic reviews have shown the effectiveness of music in reducing the behavioural and psychological symptoms of dementia (BPSD). However, vibroacoustic therapy - as a receptive approach - is not often discussed within the music therapy literature, even in comparisons of receptive and active methods. Research into the effects of low frequency sound vibration show positive outcomes for persons with dementia but small sample sizes limit interpretability. **Methods:** Music moves is a three-armed pragmatic randomised controlled trial currently ongoing in two residential care homes in Germany. Residents (N=75) are randomly assigned to either (1) active music therapy plus standard care, (2) vibroacoustic therapy plus standard care, or (3) standard care alone. In the intervention arms, residents receive two individual 30-min sessions per week for 6 weeks. The nursing home version of the Neuropsychiatric Inventory (NPI-NH) is used to assess BPSD with secondary outcomes including depression (MADRS), quality of life (QoL-AD), activities of daily living (Barthel-Index), medication intake, doctor visits and hospital stays and musical engagement (Music Therapy Engagement in Dementia). MMSE is used as a screening measure. All questionnaires are completed pre-, post- and follow-up. **Results and discussion:** A description of the interventions and preliminary outcomes will be presented, framed by the impact of the COVID-19 pandemic on the residents' responses to the interventions, conducting the study, and current knowledge on the use of music therapy in dementia care in residential facilities for the elderly.

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Music therapists' experiences with empathy: A heuristics study

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The music therapy literature is sparse in its description of empathy in clinical practice, even though it has been noted that empathy is a key attribute of being a successful music therapist (AMTA, 2020; Borczon, 2004). Music therapists have discussed the role of empathy with regard to improvisation techniques (McFerran, 2001; Wigram, 2004) and in empathy development in their clients (dos Santos, 2019; Rickson & Watkins, 2003). Empathy has been mentioned only briefly in the musical development of clinicians (Harrison, 2016) although it has been extensively researched within music and psychology (Clarke et al., 2015; Vuoskoski and Eerola, 2012). If empathy is indeed a key component to being an effective music therapist, then it seems necessary to find out how music therapists describe this complex phenomenon. We utilised a heuristics approach (Moustakas, 2015) to be fully immersed in the concept and kept our research questions broad: 1) How do music therapists describe and use empathy? 2) What conditions are needed for empathy to be activated? 3) What is the role of music in the experience of empathy? We interviewed diverse music therapists practising throughout the United States about their experiences with empathy and found nine themes: attributes of empathy, empathy in clinical training, knowledge of self, personal vs. professional empathy, interpersonal, experiences of empathy, challenges to empathy, societal influence, and music and empathy. We included a songwriting component as a part of our analysis and will discuss the implications of our findings for music therapy practice and training.

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Music therapy and technology for improving arm movement in stroke patients

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Stroke patients who suffer from hemiparesis often reduce the use of the affected extremity, consequently leading to the further deterioration of the related motor function. We believe that by using music as a rehabilitation tool, we can significantly increase the use of the affected extremity, and promote long-term motor improvements. We have conducted a randomised, double-blind, controlled, longitudinal clinical study with 26 chronic stroke patients. Patients in the control group (N=13) received 60 minutes of traditional physiotherapy, while for patients in the experimental group (N=13), 10 of these 60 minutes were replaced by our music-based motor therapy. All patients received 25 therapy sessions during six weeks. Patients were blindly evaluated at the beginning of the treatment and at the end of the treatment by applying the Fugl-Meyer Assessment for the upper extremities (UE-FM) as a primary outcome measurement of motor recovery. We applied machine learning techniques to train a computational model to predict the effects of the music therapy on the recovery after stroke. While both groups showed significant motor gains at 25 sessions post-treatment in wrist and hand movement, only the experimental group showed significant improvement ($p=0.002$) in shoulder, elbow and forearm as evaluated by the FuglMeyer Assessment. It is worth noting that shoulder, elbow and forearm were precisely the parts targeted by our music-based intervention. These results indicate that the proposed music-based intervention is beneficial for improving recovery in chronic stroke patients.

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Music, therapy and the change process: Historical and contemporary perspectives in Finnish adult psychiatry

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Deinstitutionalization in Finland has totally changed the practice of psychiatric music therapy. If music therapists recognize the signs of change in institution, they can react to them faster. The purpose of this Ph.D. thesis was to collect information on the change process of adult music therapy in Finnish psychiatric hospitals. The data sources comprised hospital histories and annual reports from 31 psychiatric hospitals in Finland, as well as music therapy literature. Pioneers, Experienced music therapists and Experienced experts were also interviewed. The data were analyzed using qualitative content analysis and the hermeneutic circle. The theoretical section explores psychiatric music therapy and cultural history. The results suggest that music has been utilized in hospitals in multiple ways. Adult music therapy has been an established practice in many psychiatric hospitals as part of the overall treatment. Constant organizational changes and negative attitudes, however, have lessened music therapists' motivation and commitment. The findings indicate that in some areas music therapy has disappeared, while in others there is a lot of variation in implementation. Some areas have worked to better connect the treatment in the hospital context and in the out-patient setting. Right now the future of music therapy practice lacks concrete plans. Outpatient setting, third sector and wellbeing are part of modern psychiatry. Psychiatric music therapy needs to be redefined. This Ph.D. study aims to stimulate discussion on the future of music therapy.

Music therapy for social connectedness in adults with addictions:

Research and applications

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Considered a core human need, social connectedness (SC) refers to feeling valued, close to, and cared for by others. Although SC has not represented a traditional endpoint in research for adults with substance use disorders (SUD), SC can impact addiction as it may provide healthy (non-substance) reinforcers that compete with substance rewards (Heilig et al., 2016). Moreover, substance use can result in social exclusion that promotes continued use. As substance use escalates, people experience further loss of SC that leads to social marginalisation and exacerbates substance use (Brownwell et al., 1986).

Researchers have found that social exclusion activates neural networks that increase the intensity of craving for addictive substances (Garavan, 2010, Heilig et al., 2016). Social integration restores endogenous opioid systems and thereby may decrease the need to activate these systems through substance use (Heilig et al., 2018, Inagaki, 2018). As such, improving the SC of people with SUD can represent a neurobiological pathway to recovery.

There is a lack of research investigating SC in adult addiction settings (Neale et al., 2018). Using the Social Capital construct within Recovery Capital (Cloud and Granfield, 2008, Granfield and Cloud, 1999, Granfield and Cloud, 2001, White and Cloud, 2008) as a theoretical framework, the presenter will:

- Summarise SC and addiction literature;
- Present a neurological rationale for music therapy to address SC in adults with SUD;
- Present original results of interpretivist and objectivist music therapy research studies investigating SC in adult addiction treatment; and
- Provide attendees with practical methods to integrate SC into their clinical work

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Music therapy group for patients with acquired brain injuries

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Background: Patients with Acquired Brain Injury (ABI) cope with a variety of impairments which make it difficult for them to return to the mainstream of life after being released from hospital. **Aim:** In order to enhance social engagement, functional communication, emotional processing as well as providing senso-motor and cognitive stimulation, we have established a music therapy group for ABI patients at the outpatient unit of a Rehabilitation Hospital. This music therapy group is co-conducted by a music therapist and an occupational therapist. This interdisciplinary framework creates a unique space in which both emotional processes of each group member, as well as functional abilities are focused upon. **Intervention:** An ongoing closed group, with 6-8 post hospitalisation patients with ABI, meets for weekly 45-minute sessions. Each patient participates in the group for an average of 3 months. Its activities include improvisations, singing, music listening, verbal discussions and others. Activities are not pre-planned and vary according to group dynamics in each session. **Discussion:** Case vignettes will be presented demonstrating how music therapy group sessions promote various functions of each group member. The concept of this music therapy group, as a 'self-help group', will also be discussed. **Conclusion:** The music therapy group provides a supportive environment for expanding the range of behaviours and emotions of the individual within the group. It provides each patient with the opportunity to practice and improve ways of coping. It serves as a "bridge" for patients towards a return to functioning in their daily routine outside of the hospital.

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Music therapy with patients during the process of disconnection from mechanical ventilation in intensive care unit: Tuning sounds and silences

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The Intensive Care Unit (ICU) is a specific context that worsens a critical medical situation in a hostile environment: constant tests, invasive interventions and noise cause altered states of consciousness, isolation, communication difficulties and other physiosocial-emotional reactions (Chlan et al., 2013). In addition, mechanical ventilation (MV) adds greater discomfort, lack of control and pain (Bradt and Dileo, 2014). The process of achieving the extubation from MV is called weaning. To improve its conditions (duration, pain, delirium, sedation, agitation...) is the main challenge faced by patients and medical staff, even more in Covid context.

The purpose of this presentation is to expose the clinical practice that music therapists from MAP Institute is carrying out at the University Hospital of VitoriaGasteiz (Spain), from October 2020, in the framework of a RCT Study that includes 90 patients during weaning (on average six per month).

Starting from the idea that in therapy "we are called to create a field of possibilities" (Fiorini, 2007) and from a humanistic approach "that is not giving power to the person because it never takes away from them" (Rogers, 2006), music therapy can improve breathing process, promote sensorial stimulation to enhance the recovery of consciousness, offer communication possibilities and emotional expression and support in order to reduce agitation, anxiety states and/or perceived pain, develop coping, etc. through active and/or receptive music therapy techniques; the therapeutic bond and the process developed through them; the patient as active health agent (Pereiro and del Campo, 2020).

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Music therapy through the screen: Reflections on the limitations and possibilities of online work

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This presentation will offer reflections on changes in the relational dimension within music therapy following the COVID-19 crisis. The conditions imposed by the pandemic have fostered innovative and original ways of working, opening up new scenarios and raising many questions. We will reflect on ways of working online in the field of dynamic improvisational music therapy, and the consequences of this shift to remote work on the involvement and role of the family in therapy sessions, and the phenomena of pulsation, post-resonance, transitions and silence. Each of these themes will be supported by clinical examples taken from online music therapy.

The discussion will highlight elements of continuity and the substantial differences between in-person and online music therapy sessions. We will examine external and internal changes to the therapeutic setting and the effects on its spatial, temporal and relational aspects. We will address the limitations and the resources activated by this new state of affairs, resources which are potentially present in every situation of crisis and transformation.

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Music therapy to support coping and resilience: Challenges and possibilities in an Italian paediatric oncology and haematology hospital ward

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Researching the efficacy of the music therapy process in a clinical context can prove a significant challenge. This presentation will explore the complexity of undertaking such a task in paediatric oncology (Tamino project, Mozart14, Bologna), while respecting the ethical and practical limits of patient-centred practice. Emotional support for child patients and family members is an essential aspect of paediatric oncology and music therapy is increasingly used as a complementary non-pharmacological approach, to support and care for patients within multidisciplinary teams. Literature highlights positive effects concerning aspects related to anxiety, stress, mood, isolation and perceived quality of life. Our aim was to evaluate the acceptance and appreciation of music therapy together with the evolution of certain parameters during sessions: behavioural (arousal, choices, eye contact, facial expression), sound-musical (relationship with objects, instruments, musical parameters), interactive (relationship with music therapists and with group). In addition to questionnaire feedback, two observational scales (AQR; mYPAS) were adapted specifically to the music therapy context of the Italian hospital. Two independent observers were trained until inter-reliability was significantly high. They then undertook an observational evaluation of weekly music therapy sessions carried out by music therapy professionals, for a period of three months. The results showed a qualitative increase in the patient's use of music within the therapeutic relationship during music therapy sessions. They also demonstrated a correlated increase in adaptive behavioural strategies and in the quality of the intersubjective relationship, items that in literature correspond to positive coping and resilience.

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Musical dialogue groups during COVID19: Mission possible?

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The school of musical dialogue started three years ago with the goal of training music therapists to lead musical dialogue groups with people from conflicting cultures (e.g., Arabs and Jews, religious and non-religious people, mothers and their adolescent daughters), and in the beginning of 2020, its graduates were involved in planning and conducting several such groups. However, with the outburst of COVID19, conditions in Israel were becoming less and less possible for conducting such face-to-face groups, and a full lockdown during March and April threatened to cut off even those groups that were on the verge of beginning.

In this presentation, we describe the musical dialogue groups that were eventually conducted in May 2020, and onwards, despite the conditions that COVID19 forced upon us. Our deep feeling that the crisis was stirring even greater social tensions, led us to understand that musical dialogue groups were more necessary than ever, and to find ways to conduct them no matter what. We report four such groups that took place with different conflicting groups – all through zoom. We share the adjustments we made, the differences between such groups and face-to-face ones, what we lost from this imposed social distancing, but more importantly – what we gained. One such gain was the ability to overcome geographical constraints which led to the opening of our first international musical dialogue group for music therapists that were interested in implementing the concept in their countries.

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Music-centred in relationship: Challenging old dichotomies and opening new spaces

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Music-centred scholarship and practice in music therapy focuses upon the primacy of music in influencing the therapeutic process, thereby commonly placing less importance upon the role of the therapeutic relationship (Aigen, 2014; Lee, 2004). That music is a social practice, however, is a notion supported by ethnomusicological research regarding musical engagement from cultures across the globe (Cross, 2014). Music is a relational medium.

Humanistic theory from psychology imbues many approaches within music therapy, including music-centred ones (Lee, 2004; Nordoff & Robbins, 2007). Humanism however, like much of Western psychology, has traditionally valorised the independent and self-made man—yes, man—and dismissed relationality as a pathological sign of dependence and weakness. Feminist psychology is one counter-perspective that exposes as problematic humanism's individualistic perspective upon human development and wellbeing (Robb, 2006). We are a relational species.

This paper asserts that the only way to be truly music-centred is to simultaneously be grounded in relationship; music and relationship are entirely interconnected. In turn, as we consider the relational nature of our medium—music—we are ethically obliged as music therapists to consider carefully the sort of relationships we are creating through our music making. Through exposing the patriarchal, ethnocentric, and ableist assumptions at the heart of Western psychology, this paper validates our relationality as a species and presents a perspective on music therapy theory and practice that is anti-oppressive, inclusive, and yet still, entirely centred in music.

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“My favourite song”: A preventive online music therapy pilot project to activate personal resources in times of social isolation

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Many people have a “soundtrack of their life”, i.e. music they associate with significant moments and memories. To activate these resources and prevent mental-health problems resulting from social isolation due to the COVID-19 pandemic, the preventive online music therapy pilot project ‘*lieblingslied.at*’ [Lieblingslied = favourite song] was initiated in Austria in March 2020.

Music therapists and music therapy students responded to song requests by performing them live via (video-)phone and provided an opportunity to talk about personal meanings attached to the chosen song, and about personal resources. Additionally, research data was generated by a multi-perspective approach. Out of 53 song requests, 46 sessions were held and subsequently documented and evaluated by the performing therapist or student. The participants’ socio-demographic data was collected in an optional survey. Furthermore, 19 participants voluntarily attended a qualitative interview with a music sociologist to talk about the background of their song request, their musical socialisation and the meaning of music in times of crisis and in their life in general.

Analysis of the therapists’ notes and the interviews showed a positive effect on the participants’ mood and a (re-)activation of their musical resources. Further evaluations and outcomes will be presented at the conference. The project was initiated as a reaction to the extensive changes in society following the first lockdown in March 2020. During implementation, experiences of advantages and limitations of online music therapy were documented. These offer valuable findings for developing and implementing further online music therapy projects.

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Navigating a whirlwind: Reflections on short-term schoolwork during the COVID-19 pandemic

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During the COVID-19 pandemic, music therapy charity Nordoff Robbins offered free pilot projects to organisations whose service users were being adversely affected. Edinburgh City Council were keen to take up this offer, requesting short-term pilot projects in sixteen of their primary and secondary schools within ASN units, with the possibility of beginning a full service in the next school year. The work was set up quickly in order to get started in the current school term. Delivery began in November 2020 with five-to-six-week blocks in each school, continuing until the end of the summer term in 2021.

At times the pace and culmination of these projects seemed like a whirlwind, without time for therapists to acclimatise in each school before moving on. Adjusting to both online and onsite work, within the ever-changing world of the pandemic, added an additional challenge for the therapists involved. Despite the disturbance to usual practice, the overall experience was a positive one, offering support for students and staff during a time of turmoil and change. After a year of cancellations due to the Covid-19 pandemic, these pilot projects said 'yes' to the pupils and staff and offered them a taster of how music therapy could best work with them.

In this poster presentation, four music therapists share their experiences of delivering therapy in this fast-paced, short-term format. They share reflections and case studies from their work and consider implications for developing music therapy practice to meet the needs of children in the post-pandemic world.

Neural dynamics of moments of interest in the therapeutic process: EEG-hyperscanning during music therapy

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Although there has been an increase in neuroscientific studies investigating effects and neuroplastic changes underlying music therapy (e.g. Fachner et al., 2013, Sharda et al., 2018), research into the neural correlates of music therapy as an interpersonal process within a social and affective neuroscience framework is still scarce. In this talk, we present our approach to investigating the neural dynamics of music therapy and first findings. We recorded dual-EEG and video from therapists and clients (in stroke rehabilitation and persons with Dementia) during real-world music therapy sessions. In video-supported interviews after the sessions, clients and therapists identified Moments of Interest, and provided first-person descriptions of their experiences. A well-known marker of central emotional processing – the frontal alpha asymmetry (FAA, Allen et al., 2018) was extracted from the EEG. Based on a micro-analytic framework, the FAA time course was analysed in light of the situational-behavioural-musical context and therapeutic interaction during these moments. Additionally, we explored brain-to-brain coupling (i.e., synchronised brain activity) within the client-therapist-dyads, which has been shown to underlie many forms of social interactive processes (Redcay and Schilbach, 2019). First preliminary results indicated partial correspondences between experiences and interactions of the dyads with neural markers of emotional processing. Furthermore, initial brain-to-brain coupling results suggested stronger coupling during Moments of Interest compared to moments that were rated as less interesting, perhaps reflecting a different degree of dyadic engagement. We will give an outlook into how social neuroscience might help to better understand mechanisms of change and therapy processes in the future.

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Neurochemistry of psychodynamic music psychotherapy

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The recent development in neurobiological research of brains, music, and psychoanalysis has provided a new point of view to the clinical theory of psychodynamic music psychotherapy. The different brain areas and their relationships and functions relating to musical and psychotherapeutic experiences of trauma, attachment, affective attunement, mirroring, mentalizing, and language seem to have correspondence for their meaning in the brains. Human brains seem to attune for the sake of the other people's gazes and voices. Music and arts, as the cultural forms, symbolise other people and activities such as listening to music and singing songs may strengthen the feeling of belonging to the tribe in the brain. It may prevent the traumatising effects of isolation as music decreases anxiety and the amount of ACTH that produces stress in the system. This relates to the attachment and the holding environment that music generates as the symbol of mother, which may have corrective effects for the traumatised clients in music psychotherapy as their endorphin production increases. Music may also mirror and synchronise neural responses in the clinical improvisations with a music therapist in addition to the verbal processing in the brain and the declarative memory. Music enables transformations and connections within the deeper emotional areas of the brain and the procedural memory in the psychotherapeutic working through. Thus, music may benefit clients, like children suffering from socioemotional and neuropsychiatric disorders, with difficulties in their language and communication skills, as well as other clients in encountering their emotional and unconscious experiences in psychotherapy.

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Neurophysiological activity during music therapy with individuals with dementia: Insights for research and practice

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Music therapy is becoming widely recognised as an effective non-pharmacological therapeutic modality in dementia care, offering psychological, social, and physical benefits. However, little is known about the neurophysiological activity during active and receptive music therapy methods for persons with dementia. This may shed light on client experiences, particularly those with limited external responses. In this pre-experimental exploratory Masters research, a group of healthy older adults (n=5) and persons with mild-moderate (n=8) and severe dementia (n=5) received once-off individual music therapy sessions during which heart rate (HR), respiration rate (RR), and electroencephalogram (EEG) responses were recorded.

There was a general increase in HR from baseline resting measures and nonparametric tests showed significant changes during singing a familiar song ($p=0.044$) and drumming ($p=0.019$). An increase was also observed during vocal improvisation. RR was highly variable as it was influenced by singing. The largest increase occurred during drumming. The autonomic data suggest that active music therapy techniques may induce greater physiological arousal than receptive techniques. but this requires further investigation. No changes were found in the EEG responses; however, there were significant limitations in the acquisition and analysis of this data. Whilst the findings are modest, this research offers insight into the challenges and limitations of experimental research in music therapy and dementia. This paper reflects on the limitations of neurophysiological investigations of active music-making and the challenges of the dual researcher-therapist role. It critiques the ecological validity of protocolised music therapy and the use of purely quantitative methodology in music therapy research.

New ways with artful musicking: The role of music therapy in global partnerships for reconnection and hopeful ecological flourishing

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Global school-based partnerships that facilitate restorative ecological and musical experiences can promote social, emotional and mental health and wellbeing. This presentation argues this case, emphasizing the innovative role that music therapists can play in supporting young participants' reconnections with nature. In the dawning era of sustainable development goals now represented publicly by UNESCO, David Orr wrote, "the form and structure of any conversation with the natural world is that of the discipline of ecology as a restorative process and a healing art" (Orr, 1992, p. 90)

The evolving inter-professional work of Trees of Hope (www.treesofhopezim.com) in partnered UK schools promotes such experiences through sharing the actions of community members in Domboshawa, Zimbabwe within a small scale reforestation project. The authors report on the following linked processes. The musical traditions, movement and storytelling associated with the mbiras of the Shona speaking people in Zimbabwe have evoked reconnections with community and the natural world. A community musician and dancer have stimulated new feelings and understandings in schools about ecological actions for change, encouraging further responses / participation across the partnership. A music therapist is sustaining this ecological engagement and healing through structuring opportunities for reciprocal musical dialoguing and artful musicking that draw on the traditions of community music therapy practice. A teacher educator is enabling participants to explore how these cross cutting professional competences can promote young people's hopefulness and resilience in the troubling times of the COVID-19 pandemic, climate change and ecological crisis.

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‘No entry!’: A consideration of strategies adopted when the COVID-19 pandemic rendered conventional therapy impossible

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This paper will consider abrupt changes to practice necessitated by the Covid-19 pandemic, as experienced in the context of an NHS in-patient mental health service for older people with functional illness/dementia. The onset of the pandemic brought major disruption to wards. Staff sickness was at an unprecedented level. Regular workspaces became unavailable overnight and conventional modes of therapy input were largely inaccessible. Service users were rapidly moved between wards according to COVID status and it was often difficult to find out where they were or indeed if they were still alive. Ways of connecting and relating had to be reinvented rapidly. BAMT’s online Covid-19 Directory, commenced in 2020 (Cousins-Booth, 2020, Rizkallah, 2020/ 2021) was highly apposite. This paper will reflect on the immediate impact of emergency measures and explore adapted approaches to therapy that emerged. These included the rapid switching back and forth between in-person and remote input as appropriate together with alternatives to standard/conventional reports written on ending of the work. Consideration will also be given to a marked change observed in practice: service users often declined active music making, instead engaging more with receptive techniques. Pre-composed receptive music seemed preferable to improvised material, with the latter referred to by a service user as ‘Music from Nowhere’. Identifiable ‘Songs from Somewhere’ possibly connect with a need for familiarity and comfort in the face of the enormous uncertainty and distress generated by the pandemic. The paper will close by identifying measures that can usefully continue to be adopted and implemented post-pandemic.

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Out of therapy: The role of the music therapist for promoting health in non-therapeutic contexts

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This paper presents the music therapist as a promoter of healthy experiences in non-therapeutic contexts. In this society in which music, arts and culture are valued more and more for their capacity to enhance wellbeing (Fancourt and Finn, 2019) and the medical world is opening to other ways of care, therapeutic context can open as well to offer new paths of being and relating with others through music.

Music therapists often work in contexts where defining a music therapy intervention is difficult. Sometimes, they create transition spaces, between education and therapy, between therapy and community work, where musicking (Small, 1998) becomes a meaningful and transforming experience for participants. Community music therapy offers a framework of action and interaction in context (Stige, 2017) that embraces some of these spaces, but creating healthy citizens is a challenge that goes beyond therapy.

Sensitive actors are needed for creating healthy environments. The music therapist has an important role to play in that, because they allow the person to explore their self, extracting their potentiality, creating new feelings and communicative messages, integrating different ways of expressing (Del Campo, 1997). They have the skills to create safe spaces within music, in which people can move about experiences of listening and feeling.

In this presentation reflections are, illustrated with some examples of interventions in educational and social frameworks with children and adolescents, which show how the music therapist uses musicking to enhance connection, extrapolating therapeutic experiences to more open spaces, and enriching other social areas.

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Oxymusic: Creative Music Therapy's effect on brain activity in preterm infants' auditory and frontal cortex using functional near-infrared spectroscopy

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Newborns born preterm represent a growing population in health care who often suffer from neurological impairment. Creative Music Therapy (CMT) provides meaningful, nurturing auditory stimulation by infant-directed singing in lullaby-style that is continually tailored to the infants' and parents' rhythms and needs. In a previous randomised controlled resting-state fMRI study, we showed that CMT has a beneficial effect on functional brain connectivity concerning the induction of (i) a lower thalamocortical processing delay, (ii) stronger functional networks, and (iii) higher functional integration in predominantly left prefrontal, supplementary motor and inferior temporal brain regions. However, CMT's immediate effect on brain activity in infants in real time has not been conducted yet.

The present study explores how CMT regulates brain activity in the auditory and frontal cortex of prematurely born infants. In 20 clinically stable preterm infants (born after the 30th week of gestation), measurements of changes in cerebral oxygenation and perfusion are performed using functional near-infrared spectroscopy (fNIRS) (OxyPrem®). Each measurement lasts 55 minutes and is conducted in a separate quiet room, consisting of five minutes baseline, five minutes touch, ten minutes touch combined with individually tailored humming (improvised with the same lullaby theme), five minutes touch, and then repeating all sequences once again.

We will present our neuroimaging results and discuss them with the audience in the light of possible stimulating and regulating effects and their meaning for the field of music therapy, preterm infants, and their caregivers.

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Patient perspectives from intercultural music therapy research

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In the music therapy profession in the UK and worldwide there is increasing recognition of the need to understand how white privilege impacts upon people from minority backgrounds. It is clear that racial bias exists in the structures within which music therapists train and work, and affects both therapists and patients

There is a growing body of literature examining culture in music therapy; cultural difference, musics and instruments and their links to particular cultures, cultural interpretations of health, disability, therapy, boundaries (Hadley, 2013, Kim and Elefant, 2016, Schwantes, 2011). As music therapists seek to better understand the experiences of our patients from minority groups, we must include these voices in our professional arenas.

Drawing on my research with children and their families from minority groups, this presentation will share the thoughts of parents on their experiences of observing music therapy sessions, including perspectives from their particular cultural lens. Semi-structured interviews provided themes for consideration such as communication barriers, the parent's role as expert and advocate, music in religion and culture, and the music therapy approach. Important points that emerged were parent's wishes to not have assumptions made about them based on their culture, but also its great value to them.

I will share my reflections as a researcher on the challenges I faced: from the use of interpreters to confronting my own cultural biases, and carrying out research in a rapidly evolving field.

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Patients' experiences of listening to their own clinical improvisations at home

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There is evidence in cognitive and behavioural therapy literature that homework in between therapy sessions might positively contribute towards the reduction of depression symptoms by fostering emotional and cognitive processing. In the current research we asked 34 adults with depression to listen to their own improvisations during the course of 12 individual integrative improvisational music therapy sessions. Participants had access to their own improvisations through a secure link on their home computer and were able to listen to their own improvisations as many times as they wanted, at any time of day. Participants were also given access to a personal online diary, where they could write down any thoughts, emotions, memories, bodily sensations. Surprisingly, engagement in the homework task was very low among the participants. Although very few participants found it beneficial, those who did provided a lot of interesting data about their experiences. Content analysis revealed the main categories that emerged whilst listening, highlighting the potential as well as the challenges in carrying out a homework task during the therapeutic process. Findings and suggestions for future research and clinical practice will be discussed.

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Peri-operative creative music therapy with critically ill infants and their parents: A mixed-methods case-study

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Background: Generally, music therapy with new-borns is indicated when infants are medically stable. Most of the infants referred to creative music therapy (CMT) on the cardiac intensive care unit, however, have complex congenital heart defects, undergoing open-heart surgery in the first days or weeks of life. They may be sedated post-operatively for several days, remaining in an unstable condition for longer periods. It is a challenge for parents to relate to their infant who is unresponsive and on various levels of life-support. The question arises: does music therapy disturb or support in this critical phase? **Hypothesis:** The study hypothesises that critically ill new-borns respond to CMT even under sedation in the perioperative period and that CMT supports parents in interaction with their baby and reduces their stress levels. **Methods and results:** The single case study presented is part of a PhD mixed-methods multiple-case study. The qualitative video analysis of CMT with the infant and parents will gain in-depth insights into a possible impact on the sedated infant and on parent-infant interaction. Qualitative data is triangulated with quantitative monitor data, the parents' perspective is investigated using questionnaires and semi-structured interviews. **Discussion:** We will discuss our results with the audience in the light of possible parental empowerment mechanisms of CMT and positive disturbances in the cardiac intensive care unit.

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Playing with music and ethics

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Have you noticed too? The wave of ethics?

You open a website of interest and find you must first click “I agree” before you can read any more. It’s about privacy. The huge GDPR (General Data Protection Regulation) affects us all personally, institutional, and socially. It strongly influences our music therapy *practice* and *research*. And for example, there is currently an appeal to the medical humanities to rethink the concept of “evidence” in health care. Thus, ethics includes *theory* as well.

This presentation addresses a rainbow of music and ethics. It exemplifies music therapy as a profound human practice: an aesthetic health resource linked to an ethical commitment. Such an ethical engagement – where music therapy practice relates to theory and *philosophy* and vice versa – opens for exploring crossroads between music and ethics at an existential level.

As music therapists, we are called to seize a musical life through participation and responsibility at many levels. On this basis, we might argue that music therapy is ‘infected’ with ethics and should be founded on ethics. Linking music therapy and ethics are associated with roles, arenas, contexts, powers, and the profession’s self-understanding. Music therapy as a profession with practical actions concerns trust, social mission, legitimacy, and health performance in a broad sense.

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Playing with expectations: A conversation between a music therapist and a clown

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A clown working in a healthcare setting approaches their practice with seriousness, and generally the same could be said of a music therapist. Whilst a clown may intentionally play a role however, perhaps adopting a different name and dressing up in order to create potential shared space for play, a music therapist begins with their own name and does not, as a rule, begin by dressing up and playing a different character.

Yet, music therapists do play a role, which affords particular status within established models of health and care and the settings they inhabit. A music therapist may (albeit implicitly) consider themselves an expert in relationships, health, music and/or sound, whereas a clown working with persons in a hospital begins from an un-expert position; a “low” status in order to invite persons into play and “play along” with them.

Recent research (Haire, 2021) exploring humour in music therapy revealed a cautious stance from music therapists around humour in practice with links to a fragile professional identity. Yet, for persons engaging in music therapy, shared musicking was voiced as a way to get to humour.

What can music therapists learn from healthcare clowns, and how does a practice of clowning in healthcare settings disrupt assumptions about the seriousness of music therapy? This paper invites a conversation between a music therapist and a clown about disruption on three levels; disruption of a serious music therapy culture; disruption of the body through laughter, and disruption of form through improvisation.

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Please disturb and play nice: Discussing politeness, prigs, and problems in peer-review processes

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We want to focus on how we review and disturb each other in academic activities. How do we ensure a critical and productive experience for all involved and what underlying explicit and implicit mechanisms are active? In regular journal review processes, there is a difference between being an expert within a specific field or method as a researcher or clinician and being an expert in giving critical and productive feedback as a peer-reviewer (Haffar et al., 2019). Who has responsibility to ensure that disturbing reviews run ethically in such a small field as music therapy? There are obvious benefits in having blinded reviews but are we conscious about the less obvious disadvantages such as experiencing reviewers as having dictating immunity (Clements, 2020). Similarly, are we conscious about the obvious benefits of open peer-review and should we take the leap? What narratives are we creating and leaning into as authors and reviewers in relation to the review process? During the pandemic and increasing use of SoMe in general, it seems digital dialogues can dehumanise communication which call for an even greater explicit focus on ethical peer review processes (Cheng et al., 2017). Within the field of music therapy, research on peer-review processes is sparse but as the small field has many areas of expertise, the need is perhaps even greater. The presentation will discuss all these aspects by including engaging examples of review processes described and analysed from different perspectives with the aim to increase awareness about how we disturb each other in academic review processes.

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Positioning music therapy as a core service in hospice and palliative care

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Over the past decade, the clinical and scholarly knowledge base for music therapy in hospice and palliative care has been rapidly expanding. Despite these advancements, music therapy has yet to be broadly established as an essential and routine aspect of end-of-life care, instead frequently relegated to a secondary status in the interdisciplinary treatment team through labels such as “alternative” or “complementary” care. These labels result in poor clarity about the music therapist’s role on the treatment team which, in turn, creates job insecurity, disrupts referral networks, and limits clinical time with patients and caregivers. Music therapists, subsequently, often have to allocate resources towards maintaining employment before developing their practice, conducting research, and expanding clinical services.

Positioning music therapy as a core service in hospice and palliative care would more securely situate music therapists in the hospice culture and provide improved opportunities for service delivery. Integrative care provides a pragmatic and theoretical foundation for this shift by promoting a collaborative service delivery among treatment team members to address ecological, whole-person health needs through the dying process. Within the integrative care model, music therapists ethically and effectively co-treat with nurses, social workers, and chaplains as egalitarian stakeholders, ultimately helping patients move towards a “good death” by addressing emotional, spiritual, and interpersonal harmony alongside physical comfort.

This presentation will introduce an argument for music therapy as a core service; explore integrative care as a guiding clinical framework; and draw upon the extant literature and related case vignettes to illustrate clinical music therapy processes.

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Possibilities and challenges in the start-up phase of a music therapeutic initiative at a newly started child welfare institution

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This paper focuses towards a study on the theme; the starting-phase of a music therapy measure, conducted at a particular child welfare institution (Krüger, Torstuen & Høisteh, in press). The aim of the study has been to investigate possibilities and challenges in the startup phase, aimed particularly for young people living at the institution. This has been done using a qualitative research design, inspired by a participatory action research approach (Healy, 2001; Eder and Fingerson, 2002). Findings in the study show that there are many hinderers and potential problems when starting a new music therapy initiative. By this presentation, I want to highlight some of these findings and discuss dilemmas and paradoxes occurring. I will argue that music therapy is not always successful, and we as music therapists might as well do things worse than better for our participants. I will argue that an important premise for our practice is our ability and capacity to be reflective and critical on how we plan and evaluate practice. In doing this, aspects such as inviting young people and staff people in the initial planning phase, in order to give them an important role as decision-makers and stakeholders (pointing towards concepts such as ownership, empowerment and participation), can be of great significance.

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Possibilities of online Receptive Music Therapy (RMT) for coping with stress for mothers raising children with developmental disorders

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The lack of specialist assistance and services in Lithuania is identified in many studies as one of the most stressful factors for parents of children with disabilities. Examples of RMT research on coping with stress suggested that targeted listening to music could be an effective tool for reducing the daily experienced stress. The aim of the presentation is to reveal possibilities of remote application of online RMT for mother raising children with developmental disorders. It is the first scientific attempt in the following field in Lithuania. Tasks: 1) to present the results of research on the effect of RMT on stress reduction; 2) to examine the possibilities of online RMT for coping with stress.

The mixed data collection methodology was chosen: 1) in-depth, semi-structured interviews; 2) Perceived Stress Scale; 3) Musical Life Panorama; 4) audio recordings of music therapy sessions; 5) Music Listening Diary. Four participants were selected on a voluntary participatory basis by forming a homogenous group according to a similar experience of raising children with disabilities.

The research revealed that remote application of online RMT improved participants' ability to better recognize stressful situations, feelings and reactions arising during them. The clients learned to apply the therapeutic instrument to relieve a stressful situation, adverse reactions, or the emerging emotions. With the formation of the habit of listening to music more often, not only was the ability to relax, not get upset, and calm down strengthened, but tension decreased and the general emotional background in the family improved.

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Projective play objects and life story narratives in music therapy

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Storytelling and its uses as a clinical tool for exploring attachment relationships and the unconscious, has been widely recognised in the field of Clinical Psychology and Play Therapy. This has been explored to a lesser extent in Music Therapy practice, though there has been some increase in the literature around improvised storytelling in recent years.

The facilitator will explore how she has developed this approach in the form of musical storytelling as a useful way to safely access the sub and unconscious in Music Therapy within a contained framework. She will explore the links between the music as a narrator in the storytelling process, akin to in film, and the use of puppets as commentators. This will be considered in a theoretical framework which integrates mentalisation based therapy and British psychoanalytic schools of thinking.

The presentation will explore these as clinical tools with a specific focus on clinical work with adopted children and their families. The writer will also give an account of how this work has developed over the last six years in her clinical practice.

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RadioMe: Real-time radio remixing for people with mild to moderate dementia who live alone, incorporating agitation reduction, and reminders

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This presentation reports on an initiative that combines Music Therapy, Broadcasting, Dementia Research, Audio & Music Technology, HCI and Artificial Intelligence/Machine Learning, for the development of a new assistive system for people with dementia. Music listening has been found to help reduce agitation in elderly people (Remington, 2002) and this symptom is the biggest cause of care home admission (Hsu et al., 2015). RadioMe will capitalise on the popularity of radio among the age group most likely to be living with dementia, developing a way to seamlessly ‘remix’ live digital broadcast so that listeners will receive personalised reminders (Venkatesh et al., 2021) and preferred relaxing music. RadioMe aims to increase the period of independent living with the best possible quality of life (Miranda et al., 2018). Music is triggered when biomarker and step detection data sent from a Smartwatch to the system indicates onset of agitation (Shakeri et al., 2021). We have codesigned, with carers and people with dementia, a process of establishing the music most likely to relax each participant, which will be tested. We will use computer-based observation tools to analyse responses to participants’ music listening programmes, delivered live and pre-recorded (original versions), to help predict responses based on musical features and related preferences. We discuss the challenges encountered due to Covid-19, co-design progress with patient, carer and public involvement, key literature and technological developments, arousal adjustment through music listening for people with dementia, as well as for their carers.

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Reaching more families: How online working during Covid-19 created opportunities for growth within a children's hospice music therapy service

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This presentation will focus on a music therapy partnership between Nordoff Robbins and CHAS (Children's Hospices Across Scotland). It will describe how collaboration, openness and creativity enabled the music therapy service to firstly survive - and subsequently thrive - during the Covid-19 pandemic. It will show how growth in this music therapy service has established a new model of delivery for the future, to help meet the needs of children living with a life-limiting illness across Scotland. Nordoff Robbins has provided one day per week of on-site music therapy at CHAS since 2012. During the pandemic, music therapy sessions were offered to children and families via Zoom in their homes, in hospitals and in the hospice. This presentation will show how three times the number of children supported by CHAS are now having music therapy. It will discuss how this was achieved, including through wider charity engagement and by raising public awareness. The ways in which the music therapy approach has been adapted for online delivery will also be described and will be illustrated through video examples. It will propose a mixed-model for the future of music therapy within CHAS which could be considered as a model for the growth, sustainability and accessibility of music therapy services within other contexts. It may be relevant to music therapists seeking to develop and adapt their practice in innovative ways, in response to both increasing client need and an economically challenging time for those who commission music therapy.

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Real-time measuring music therapist's and stroke patient's engagement and patient's hand movement during music therapeutic interaction: A pilot study

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This pilot study is the first stage of a larger PhD study at the University of Haifa, Israel. Significant hand functional impairments are common among stroke patients. Their engagement, their therapist's engagement, and the patient-therapist interaction during therapy contribute significantly towards the patient achieving better outcomes in rehabilitation. Music therapeutic interaction between patient and music therapist, which involves active music making, enhances stroke patient's engagement and improves the affected hand's movement

This study's objectives are: (a) To find correlations between music therapist's engagement level, the patient's engagement level and patient's real-time hand movement scores, during music therapeutic interaction versus verbal interaction, (b) To perform an initial assessment of the study measurement tools, to examine the study protocol and to determine the sample size and effect size for a larger study.

This study, conducted in a Rehabilitation Hospital, will include 10 right-handed stroke patients, with right sided hemiparesis, one to six months following stroke. It will be a within-subject design, providing each participant with two treatment conditions, wherein, each participant will perform with the affected hand, three musical exercises on an electric piano in a fixed order. In condition A, participants will perform these exercises alone while the therapist is only interacting with him verbally. In condition B, participants will perform exercises while the therapist is interacting with him musically. Measurement tools: EEG marker-the Cognitive Effort Index (CEI) for real-time measuring patient's and music therapist's engagement's levels, and the HandTutorTM for measuring real-time changes in patient's hand movement. Pilot results will be presented.

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Reducing behavioural disturbances for people living with dementia: Music therapy research showing links between music therapy techniques and reduction moments

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We present a mixed methods data analysis to investigate the role of music therapy in dementia care used by the first author in his PhD study at Anglia Ruskin University (Cambridge -UK). Behavioural and Psychological Symptoms of Dementia (BPSD) describe how dementia can disturb a person's behaviour and are grouped into syndromes: aggression, depression, apathy and hyperactivity. Music therapy can reduce these symptoms but how exactly it does so is still being discovered. This study investigated the internal mechanisms of music therapy at Moments of BPSD Reduction (MBR) using a mixed methods approach. Quantitative, including an Artificial Neural Network, and qualitative data analyses were used successively to identify the occurrence of BPSD reduction in small-group active music therapy sessions and then to aggregate, by syndrome, the most significant "ingredients" of these moments. The study identified 32 Moments of BPSD Reduction. The study also identified the use of 23 music therapy techniques and 20 categories of qualitative themes which together described these special session's moments. A further aggregation step, using an Artificial Neural Network, identified a pool of descriptors which characterised the reduction of the symptoms of each of the four BPSD syndrome (aggression, depression, apathy and hyperactivity). The analysis revealed two types of pool ingredients, type 1: with the function of implementing conditions for the moments of BPSD reduction; type 2: with the function of promoting alternative behaviours to facilitate moments of BPSD reduction.

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Refashioned music making: Assistive technology in music therapy

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Making the music therapy space accessible and equitable takes knowledge of tools and applications that persons with specific challenges may need. Assistive technology is any object, software program, or equipment that increases independence in functioning. In the music therapy space, assistive technology may be used to help one make and respond to music. Physical equipment to assist in grasping or manipulating instruments or music making tools may be needed. Materials and strategies for executive functioning, communication input and output programs and devices, and more, are often needed for singing or contributing to discussion and songwriting. Adaptive means to access computers, tablets, and other devices for music making, mixing, recording, or editing are also beneficial.

The presenter will introduce current technology and accessible tools to make the music therapy space one in which one can function as independently as possible. Music therapists can create more accessible spaces for equitable engagement.

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Relational needs in music therapy with people coping with trauma: Perspectives of music therapists

Moshe Bensimon

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Introduction: Many studies have examined relational needs (RNs) of trauma victims in psychotherapy. However, this topic has received little attention in music therapy research. The current study is the first to focus on what music therapists working with trauma victims perceive as their clients' main RNs and how those RNs are musically addressed to enhance the therapeutic process. **Methods:** This study used a constructivist grounded theory approach. Analysis of semi-structured interviews with 41 experienced music therapists working with trauma victims was conducted to identify themes in their perceptions of the main RNs of clients and how they address them musically. **Findings:** Analysis of the interviews revealed seven RNs of trauma victims, which according to the music therapists, were addressed during therapy: need for recognition, acceptance, emotional witnessing, emotional responsiveness, safety, trust, and the need for someone to reach out. **Discussion:** Several significant concepts emerged in the process of addressing RNs of trauma victims. Musical validation highlights the ability of music to validate feelings aroused by traumatic memories and the clients' sense of presence and being. Emotional witnessing through music stresses the important holding role of music and its ability to organise traumatic experiences as meaningful and coherent narratives. Musical witnessing as a self-object is a process whereby the client becomes both the participant and observer in a two-part process of expression and reflection. Finally, attuned musical involvement is a process in which the therapist becomes musically attuned with the client, thus strengthening therapist-client relationship and facilitating the therapeutic process.

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Relational qualities of dialogue in dyadic improvisations: Results from an exploratory feasibility study

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Objective: Dialogue is one of the core qualities of a relationship as described by humanistic and/or psychodynamic music therapy approaches. Assuming that dialogue is a highly individual but at the same time intersubjective process between therapist and client, when self-awareness and self-other distinction have been achieved, it can emerge from compliance/dissonance, synchrony/difference, empathy/misunderstanding. **Methods:** In a feasibility study with healthy adults (n=9) and music therapists (n=8), data from 17 experiments were collected. Free piano partner play improvisations were recorded (video, audio, MIDI) and evaluated in questionnaires and debriefing interviews. In a grounded theory approach, a qualitative framework covering the evidence of intersubjectivity and the quality of meanings regarding relational, self-centred, or intra-interpersonal phenomena, was developed. The qualitative results were then compared to quantitative analyses of musical parameters that indicate musical togetherness and also to relevant physiological data (HR/HRV, EDA). **Results:** Results show that dialogue has an impact on the quality of a therapeutic relationship with respect to e.g., improved awareness of self/other, closeness/separation, autonomy/reciprocity, and is often linked to the experience of attunement, well-being, safety, security, space, and change. Intersubjectivity co-occurred with periods of strengthened musical coordination, which was sometimes convergent (e.g., players increasing loudness together) and sometimes divergent (e.g., players changing loudness in opposite directions). Similar results also were observed from the physiological data, where e.g. heart rates adjusted to one another or moved in opposite directions. **Conclusion:** The complex mixed methods design proves to be feasible and can be transferred to clinical settings in the future.

Remote premature family music therapy intervention (R-PFMI) during Coronavirus pandemic (COVID-19) in Italian neonatal intensive care unit

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The birth of a premature baby is usually a critical event in a family's life and has a significant emotional, social, health and economic impact on new-borns and their parents. Let us try to imagine this premature birth during a pandemic lockdown, and how many additional difficulties this brings. During the COVID-19 pandemic in Italy at the Filippo del Ponte Hospital NICU in Varese, the music therapist needed to structure a new integrated Italian psychological and music therapeutic protocol. This used remote and online techniques, since she had to support families remotely, not being able to attend the hospital in person. This music therapy protocol was designed to stabilise the physiological states of premature babies, improve caregiver well-being, and support the relationship between children and parents. The Music Therapist is in contact with parents in isolation through electronic devices (tablet or mobile phone) and applications such as "WhatsApp" or "Skype". With this protocol, the new remote techniques will be investigated to apply the music therapy project to the premature new-born and his family, with the aim of supporting the trauma and stress of the premature birth. The remote music therapy accompanies the new-born and his parents during and after (follow-up) hospitalisation and focuses his attention on emotional-relational care, based on the different needs of babies and parents, which will evolve over time.

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Searching for serenity of mind: Reflections on one woman's music therapy journey; perspectives from narcissism and its relationship with trauma

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This presentation describes long term individual music therapy with a woman with mild learning disabilities, mental health issues and a history of complex trauma. This work takes place in the context of a Community Learning Disability Service within the NHS, England.

Sarah lives on her own, receiving a few care hours each week. On the surface she gives the impression of being contained and in control however her internal fragility often spills out in ways that she cannot heal by herself, crushing her weak and fluctuating sense of self.

Neville Symington (2019) in his book 'Narcissism A New Theory' offers the reader a fresh look into this subject, developing his own thoughts from understanding that narcissistic people were people who had been traumatised at a very early age to considering it is the importance of the individual's response to the trauma itself where we should focus our thoughts.

This paper will draw on the theory of narcissism (Winnicott, 1960; Kohut, 1971; Kerberg, 1984; Symington, 2019) and its relationship to trauma to illuminate and explore the clinical issues for Sarah: the impact of considerable trauma; the pursuit of protective self-sufficiency; and deep generalised anxiety. Particular attention will be paid to the relationship between Sarah and the therapist and the role of pre-composed songs. In doing so, the author will examine the importance of the need for transformation of feeling in the quest for a greater level of self acceptance.

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So far, so near: Online receptive music therapy in times of pandemic; an experience with hospice health workers in Italy

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The presentation will illustrate an online receptive music therapy intervention carried out from November 2020 to April 2021, to support hospice health workers during the second pandemic wave. Four music therapists from the GIM MusicSpace Italy Professional Group carried out the work involving 100 participants from three hospices in central and northern Italy. We will discuss the complexity of different choices, techniques and strategies that quickly became necessary in order to respond to the urgent request for support at a time of great tension and stress, increasing fatigue, worry and fear experienced by all participants on a professional and personal level. We encountered methodological and ethical challenges in the necessary redefinition of our established music therapy approach. This led us to structure the work in online weekly group sessions and in regular mailings of music pieces so that participants could listen to them at the most suitable moments of their days and then share their feedback. At the end of the process, an evaluation was carried out through specific questionnaires and 20 semi-structured interviews. Results showed positive responses from the participants and an effective and beneficial use of the proposed new working method. The interviews highlighted a significant influence of music therapy on the quality of human contact and sharing in the professional relationship. Many participants looked forward to music listening experiencing release of tension, feeling of inner peace and lightness, recovery of vitality in a safe place, where it was possible, even in that condition, to fulfil their need for closeness and presence.

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Shape Shifters: A music therapy-informed project with unemployed youth

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South Africa's official unemployment rate is higher than 30%, while the expanded definition, which also includes discouraged jobseekers, has risen to more than 43%. In Eersterust, 17 youth who were not in employment, education or training (NEET) participated voluntarily in an eight-week project. Eersterust is located about 15 km east of the Pretoria city centre and was created by the Apartheid government, which allocated and relocated people classified as “Coloured” to this area. Inadequate health facilities, crime, youth unemployment, and substance abuse have been raised as chief concerns of Eersterust’s residents. Through arts processes, including musical improvisation, song writing, body sculptures, role-play, and image making, participants in the Shape Shifters project were invited to identify challenges and resources in their community, to creatively develop on solutions and examining what could be required to sustain engagement in these solutions. All the sessions were video recorded and analysed thematically. Members of the group were able to build both a safe and a brave space within which to critically examine social issues that directly impact their lives, celebrate community strengths, grow social capital, develop prospects for entrepreneurial endeavours, critique social norms related to their experiences of being sabotaged by other members of the community when finding success, and affirm self-confidence and belief in their own leadership capacities. Going forward, the “Shape Shifters” have decided to continue the programme by providing a similar space for others in their community.

Sounding Lego: An enactive account of music therapy with autistic children; findings from an international multi-perspective focus-group research

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Background: Music therapy has a longstanding tradition in the field of autism, often presenting approaches that follow medical and functional accounts resulting in the treatment of deficits in social interaction and communication of autistic persons. However, such accounts solely pinpoint difficulties on the autistic person, reinforcing neurotypical normalcy and standardised definition of successful interaction and attunement. In this paper, we *disturb* such unilateral, deficit-laden perspectives by looking at *how* the social interaction itself is situated and takes place. **Material and method:** A video-vignette from music therapy with Aram, an autistic boy who explores the sound of Lego, and his music therapist Iris, formed the point of departure for our research. Iris described her efforts to attune with Aram as unsuccessful and failed. Based on the vignette, we conducted one focus group with parents of autistic children and one with an international group of colleagues, including a psychologist, a philosopher, a choreograph/movement director, and an autistic music therapist, to further explore and understand processes of attunement. We conducted a hermeneutic embodied analysis of the data material. **Results and discussion:** Drawing from our research, music therapy has the potential to foster an understanding of social interaction that is mutually co-constituted and enactive, and that contradicts the pathologization of autistic social skills. Rather, attunement is shaped in relationality, formed by a dynamic network of persons, spaces, expectations and materials that listen to, communicate, act and counteract with each other, and hinder or facilitate attunement processes in music therapy.

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Ten years on as a music therapist, why do I still feel like I haven't "arrived" yet? In search of the distinct value in our professional role

Maybelle Swaney

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In this paper, I draw on my experiences of music therapy clinical practice since qualifying in 2011. The hopes and ambitions I initially held upon entering the music therapy profession over a decade ago have, more recently, been disrupted by a growing awareness of my limitations as a music therapist. In this space of 'Am I good enough?' the therapist's willingness to 'go there' presents opportunities for self-challenge, learning, and growth. This paper is a reflective piece opening the door to my world of private experiences and thoughts in my role as a music therapist. This is the space where we do not want to be disturbed, the parts of self most hidden from others that we take home with us at the end of the day, when we leave our practice settings. This paper considers how the process of disrupting one's internal dialogue may promote our professional identity and, perhaps, help us feel more at ease with the 'grey areas' of music therapy practice. By presenting on the music therapist-self in progress, I hope to contribute to the dialogue on transparency as clinicians in the helping profession. If we can participate in the process of 'going there' with each other, where difficult or unsayable questions are not out of bounds, music therapists may be more prepared to offer that space in our therapeutic encounters and, I believe in doing so, become more effective clinicians in our daily work.

The challenges and joys of moving an established music therapy service online

Mary Veal, Janet Halton

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This presentation will explore, through clinical extracts, what happened when a music therapy service transitioned to an online service during the COVID crisis. This school-based music therapy service continued to offer sessions to pupils aged from 5- 17 across a range of settings, including individual, pair and group sessions. Amidst the constant challenges posed by the technology, questions arose for the therapists as to whether they could continue to offer an input that would be useful, valued and stimulating. Maintaining a music-centred approach to the work offered both security and frustrations to the therapists. Could that sense of spontaneity remain even when the therapist and client were not in the same room? This presentation will show, through video extracts that within many of the technical challenges, additional opportunities for growth presented themselves. Therapist creativity was expanded, school-based staff developed in confidence and clients often showed incredible resilience, not only managing this online input but benefitting from it.

The happiness industry: Disturbing music therapy

June Boyce-Tillman

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This paper will review the themes found in the Greek and medieval literature on eudaimonia – ethics, meaning, autonomy, contemplation, ancestors and spiritual beings, respect (Boyce-Tillman 2020). It will use these to critique various events online during the pandemic, such as the Embodiment conference, the SHIFT conference and the ZOOM peace choir. These will be critiqued and compared with music therapy. They often involve a search for the spiritual, usually outside of established religions; so spirituality is frequently found in the claims for wellness in many of the internet courses (Puna & Tiatia-Seath, 2017), but definitions of the term vary. What is on offer range from simple techniques such as reengaging with biophony and geophony (Krause, 2013, Whidden and Shore, 2018) to courses lasting from months with a range of charges.

The Happiness/Wellness project (Davies, 2015, Seligman, 2011) moved some way from Aristotle's eudaimonia, based in virtuous living and action, towards the pursuit of pleasure for its own sake and situated in a market economy. Cederström and Spicer described the emergence of The Happiness Doctrine (Cederström & Spicer, 2015, pp. 62-91) The individualised heroic journey became a justified choice (Boyce-Tillman, 2000), drawing on neurophysiology. Justice for societal well-being - associated with political action - is lost in favour of an oppressive 'biomorality' (Cederström & Spicer, 2015, p. 8). It will ask questions about where music therapy constructed itself in relation to eudaimonia and how the development of music within the Happiness Industry may challenge or disturb the traditions of music therapy.

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The phenomenon of attunement in music therapy and in the classroom of general education school

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Attunement is one of the basic concepts in music therapy, which has been described less in the context of teaching and the classroom. The purpose of the current study was to find out how Estonian music therapists and general education school teachers understand and use the phenomenon of attunement in their daily work. The qualitative study included 10 music therapists and 10 school teachers. Individual semi-structured interviews were conducted with both groups of experts, during which qualitative data on the nature, meaning, benefit and use of attunement in music therapy and in the school classroom were collected. The results of the content analyses confirmed that attunement is an universal phenomenon and there were many similarities in how music therapists and teachers understand and interpret this phenomenon and what tuning techniques they use for it. Experts in both fields understood attunement as achieving a presence in the room. In therapy, we see a client-centred attunement to establish contact, create a safe atmosphere and a trusting therapeutic relationship between the therapist and the patient. Attunement in the classroom means focusing on the upcoming learning activities. Both therapists and teachers use listening to music (including drawing), singing, mindfulness techniques and verbal methods to tune in. Both groups used musical instruments, but in the school context the teacher him/herself was predominantly an instrument player. Teachers pointed out the benefits of musical tuning and expressed the need to complete their toolbox with music therapy techniques to use music more consciously and purposefully in teaching.

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The practical scheme of music therapy on-line sessions for young children

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COVID-19 pandemic demanded that music therapists around the world adapt to a new reality and sometimes move beyond their comfort zones. The session plans that worked well in face-to-face sessions, as well as many activities, were insufficient. The author has been working with children up to the age of five with autism, cochlear implants or Down syndrome, and struggled with this problem. This age group might be particularly difficult to work with online. After a few months of experience the author came up with the scheme of music therapy on-line sessions, which organised the process and seemed to work well in an online format. Her observations influenced the shaping of the on-line sessions plans. The scheme allows for successful session execution with the youngest, using adequate modifications of the activities. The author shares her remarks regarding technical work – she shows ideas on how to use limited screen space as a benefit rather than limitation. This presentation aims to show the possibilities of music therapy work with the youngest clients, based on a remote music therapy scheme, which might help to facilitate the process of on-line music therapy.

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The semiotic music therapy song analysis protocol

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Songs are commonly used in music therapy practice within a wide range of health conditions and with a profusion of theoretical approaches and clinical methodologies. Nevertheless, it is not uncommon to find studies in which there are only lyrics analysis, ignoring both the musical and the music therapist - client relational aspects of the song's composition, improvisation, listening and/or recreation. Based on the Semiotics of Discourse, by Lithuanian-French linguist and semiotician Algirdas J. Greimas and the Semiotic Song Analysis by Brazilian linguist and composer Luiz Tatit, Brazilian music therapist Renato Tocantins Sampaio developed The Semiotic Music Therapy Song Analysis Protocol (Sampaio, 2018), within a humanistic existential paradigm. This paper will introduce the protocol, originally developed in Portuguese, for an English speakers' audience. A case vignette of a music therapy process with a homeless woman will be presented as a music therapy process evaluation. The Semiotic Music Therapy Song Analysis may be considered a useful tool to understand the stage of the music therapy process that is being experienced and to provide possible pathways for clinical intervention.

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The Song Collective: Building sustainable online music communities to support the well-being and social connectedness of older adults

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Social isolation and loneliness are anticipated to become the biggest public health threat of our age, especially for populations where socially isolating preconditions, environmental barriers or lack of resources may impact community participation, such as for older adults (Holt-Lundstad et al., 2015, Stensaeth, 2018). With COVID-19, and the associated social restrictions and public ageist discourses seen in response to the pandemic, the situation has intensified for many older adults (Brooke and Jackson, 2020).

Music participation as a public health means has received increasing attention (Stensaeth 2018, Stige, 2018). Early notions of ecological practices in music therapy, focusing on health promotion and music as a social resource to form, build or sustain communities (Bruscia, 1998), have also been expanded through collaborative, participatory and strengths-based practices of community music therapy (Ansdell, 2002, Stige and Aarø, 2012) and resource-oriented music therapy (Rolvjord, 2010). Responding to the shifting needs we are faced with on a societal level, and within our profession, The Song Collective is a novel program aiming to address the need to explore new and sustainable ways of offering music therapy informed co-created spaces where people are supported to explore how they can use music as a social and health resource. This paper will present the findings from a cross-cultural (Norway and Australia) feasibility and acceptability study, and explore how music communities can be built in an online 'arena' in the context of COVID-19 to support older adults to have and maintain a sense of communality and belonging.

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The treasure hunt: Uncovering clues to tailor music therapy for people living with advanced dementia

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Dementia leads to chronic decline in cognitive functions, which impacts on the person's ability to function (Taylor & Close, 2018). The cognitive decline is associated with other significant alterations in mood and behaviour, which can lead to disintegration of personality and social isolation. This presentation will explore the power of human connection by looking at different clinical cases of people living with advanced dementia in a care home setting, within a well-established music therapy service. "Treasure hunt" is a metaphor which I use for describing a therapeutic process that aims to disturb the negative aspects of dementia by looking at the positive aspects of the patient, through a therapeutic relationship beyond the walls of the disease process. A person-centred approach, with a focus on the singular self, and the patient's present personality and needs; sets off the journey. Observation, patience, and persistence; alongside genuine communication; form the road map that guides towards the hidden clues, such as the patient's needs and abilities. These can help tailor the therapeutic process. Finally, a meaningful, creative and personalised music intervention marks the spot: through shared music making the patient can "gain access to an experience of themselves via another and, most importantly, the experience of being and heard" (Darnley-Smith, 2020, p. 153). Emotions in the patient or the sense of being understood during the *treasured* moment can produce integration (Garner 2020). In the journey with dementia, various losses come. However, when the *treasures* are found, dementia can be forgotten for a while.

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The way we were: A multi-method approach to music therapy to support an adult with learning disability through bereavement

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Music & Imagery Therapy (MIT), is a short-term goal based method, created by Professor Lisa Summer (Summer, 2015). Supportive Music and Imagery therapy (SMI), focuses on building ego-strength, self-worth, and supportive inner resources. Sessions utilise music-listening and imagery, as well as verbal psychotherapeutic interactions linking a client's experience in sessions with their everyday life (Paik-Maier, 2010).

This case-study describes work in which Music & Imagery Therapy and shared improvisation came together to allow a client with a learning disability to explore the importance of holding on to significant relationships and memories following the death of his father. Previously unable to express his feelings freely, this presentation outlines the way in which a multi-method approach provided a 'bridge' allowing the client to increase confidence and self-worth, such that he could express, explore, and process difficult feelings of grief through music-making and imagery.

The therapy process will be illustrated by audio clips of music created in sessions, slides showing the resulting imagery produced, and quotes documenting his own thoughts as the work unfolded. From tentative beginnings through to the release and acceptance of challenging feelings, the presentation will describe how sessions supported emotional expression, personal independence, and decision-making; culminating in a 'Memory Book' and accompanying CD dedicated to the client's father.

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Three ways in which adolescents and music therapists differ in their understanding of music therapy in the child welfare services

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The findings presented in this paper are from a Ph.D.-project on relationships between adolescents and music therapists in the Norwegian child welfare services. Six pairs of adolescents and music therapists who had worked together for at least one year were interviewed about how their relationship had developed as part of music therapy. The interviews were analysed with phenomenological and discourse analytical approaches, with the aim of understanding how adolescents and music therapists *experience* and *talk about* their relationship.

Both analyses revealed that the adolescents and music therapists differ in their understanding of central aspects of music therapy, in the sense that they emphasise different feelings and interactions, and interpret and use certain terms differently. For this paper, I focus on three topics that highlight the differences between the viewpoints of the adolescents and music therapists:

1. how they describe music therapists (and other therapists) as part of the child welfare services
2. how they understand the term 'therapy' and its relation to music therapy practice
3. how they experience the musical interactions of the music therapy sessions

The paper ends with a discussion on how the adolescents' perspectives on music therapy challenge conventional ideas on music therapy with adolescents, and the potential consequences of the client and the music therapist understanding aspects of their practice differently.

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Tin soldiers: Boundaries in music therapy during a global pandemic and beyond

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The music therapy profession has been challenged to reconsider clinical practice during the global pandemic; fundamentally how to build or maintain therapeutic relationships from behind a screen or a mask. This has provided both challenges and benefits for the profession and has the potential to change the landscape of music therapy particularly regarding accessibility for both clients and therapists.

This presentation will explore music therapy and boundaries in the global pandemic and beyond through a case study with a five-year-old girl diagnosed with FOP, a rare condition which leads to bone formation outside the skeleton. A parallel will be considered between the restriction of movement in this little girl, her courage, determination and creativity in response and our response as a profession to the global pandemic and how this can inform the future directions of music therapy.

The profession has been challenged during the pandemic but from challenge can come creativity, innovation and new direction; this presentation will explore whether we are now finally ready to 'break the rules' (Pavlicevic, 1997) and recreate therapeutic boundaries which place individual need and context central to the work.

Whatever and however as music therapists we conceptualise therapeutic boundaries, and spaces, it seems to be that these need to be fluid and courageous. Our minds as Music Therapists need to dare to break the rules if we are to come anywhere near truly 'being with' the client (Pavlicevic, 1997).

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To look from outside the box: What does psychosocial prevention and health care need from music therapy?

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This paper describes the specific potential of music therapeutic approaches to prevention and resilience promotion for psychosocial health care as a common societal challenge. Based on a general scientific framework of primary prevention, basic features for successful prevention are presented and distinguished from unfavourable approaches.

In the following, based on the author's research on the prevention of violence through music, music therapy approaches are described that meet these features and have additional favourable qualities due to the music therapy approach. As an example, these potential effects are shown on the basis of a current comparative study on the effect of the violence prevention project method DrumPower. Finally, necessary conclusions for the implementation of music therapy approaches in general psychosocial health care are presented and illustrated using the development of the DrumPower program as an example.

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Training manual for music therapists when guiding caregivers to integrate person attuned musical interactions (PAMI) in dementia care

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Background: Musical elements, such as tone of voice, tempo, and volume are important components in communication, especially when interacting with persons with moderate/severe dementia with limited communication skills. Although benefits of music on the well-being of people with dementia are widely acknowledged, the importance of paying attention to musical elements in daily care has not been formally investigated. To further develop the person-centred approach in dementia care, there was a need for music therapists to skill-share therapeutic and observation skills and support caregivers through training. **Methods:** The Person Attuned Musical Interactions (PAMI) research group was formed to develop and evaluate a training package for professional caregivers. Insights from literature reviews, interviews with music therapists specialising in dementia care, action research workshops, and theory development contributed to the production of the first version of the PAMI manual. The PAMI manual and training package was field tested in Danish nursing homes. The original manual in Danish is currently being translated into English for wider dissemination. **Results:** The PAMI manual presents comprehensive teaching material based on situated and experiential learning: (1) Booklet for caregivers with key points, exercises and tools. (2) Theory book explaining PAMI. (3) PowerPoints for four modules. (4) Training manual for music therapists with exercises and instructions. **Conclusion:** Once finalised, music therapists will be able to use this comprehensive training package to skillshare key communicative components to enhance reciprocal interactions between caregivers and persons with dementia.

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Transcription and analysis in music therapy research: An interdisciplinary approach to developing a methodology

Tara Roman

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The purpose of this presentation is to explore the process of developing a methodology in a doctoral study where the supervisory team comprises of a music therapist and two research psychologists. In particular the influence of Conversation Analysis will be considered. Conversation Analysis (CA) uses transcription and analysis to study social interactions. This presentation will suggest that ideas from CA can enrich the transcription and analysis of musical and non-musical interactions in music therapy research. The presentation will examine questions which emerged in response to using CA to examine interactions in music therapy, and describe how these questions were explored and developed further taking an interdisciplinary approach. The presentation will explore CA in the context of other forms of microanalysis in music therapy and discuss literature from related disciplines to examine using transcription and analysis in research. I consider in epistemological terms a framework of possible sources of knowledge and justification, based on the work of the philosopher Robert Audi, to explore what can be known, and how we can know it, when using CA to transcribe and analyse interactions in music therapy. Using examples of a transcription and microanalysis of a single interaction in music therapy, I will propose how CA transcription techniques can provide a constructive method for the detailed examination of complex, and multi-modal interactions, and explore how the analysis of transcriptions provides an insight into the experience of interaction through language, and interaction through music, within a music therapy session.

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Twenty-five minutes to uncolonise Guided Imagery and Music for good

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The Bonny method of guided imagery and music (GIM) centres the use of western art music, composed by white, European, men, regardless of the listener's race, ethnicity, culture or gender. Helen Bonny's more diverse musical beginnings as well as attempts within the GIM community to include music of non-European cultures in contemporary GIM music programmes are clearly not enough. The presenter invites a long-overdue dialogue around what it means to be anti-oppressive in GIM, in an attempt to redress the unequal opportunities for experiences of healing and transformation perpetuated by a method that still promotes one particular genre of music as most transformative for all persons. Although a presentation of this length can barely scratch the surface regarding anti-oppressive work, the presenter will pose some uncolonising questions and introduce a model of music and imagery that privileges collaborative decision-making and centres using a person's own music.

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Vocal music therapy improvisation among community-dwelling older adults: Group intervention aiming at improving subjective wellbeing

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Background: This study examined the utility of a vocal improvisation group intervention designed for community-dwelling older adults, aged 60 years and above, with no music education. Specifically, we studied the effect of this intervention on psychological weaknesses and strengths of the studied population, which had no medical/psychiatric morbidity. **Methods:** We delivered questionnaires which measured psychological wellbeing, age, and ageing perceptions, to the intervention group and the wait-list control group on five different occasions. 54 participants comprised the intervention group (8-10 participants in each group, M=71.7) and 54 participants' – the wait-list control group (M=69.52). The study included a 12-meeting three months intervention. Each group was led by two music therapists, lasted for 3 months, and took place every week. The intervention included voice improvisation techniques and concluding performances. **Results:** Multi-level and repeated measures anova and pre-post intervention comparisons in between the two groups revealed that the intervention group gained significant improvement in the areas of self-esteem, belonging, life satisfaction, self-efficacy, future time perspective and younger subjective age, and a significant decline in mental distress, depression, and somatization symptoms. These effects were not apparent among the wait-list control group' participants. **Conclusions:** Vocal improvisation group intervention was experienced as beneficial for 'healthy' community-dwelling older adults to enhance their psychological well-being.

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“We have music, why would we need visuals in music therapy?”

Overview of the Music Therapy Visual Schedule Approach (MT-ViSA)

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Scant literature exists on the use of visual supports within music therapy practice, and some may question if these tools are even necessary. Drawing from practice experience, existing literature and research data, this presentation explains the development of the Music Therapy Visual Schedule Approach (MT- ViSA). This approach provides knowledge about practical visual design and production considerations for music therapists utilising a visual schedule within their work, addressing detailed questions related to the four components of assessing, planning, delivering and evaluating. In developing this model, the presenter outlines their professional journey in using visual schedules, starting with initially rejecting their use within their practice, to eventually researching these tools at doctoral level. Results of the research study incorporate participant perspectives gained from two focus group meetings (n=12) across both face-to-face and telehealth settings further informing the use of visual schedules in music therapy practice. This presentation expands the evidence-base via cross-modality practices and supports music therapists in using visual schedules within multiple areas of music therapy service delivery.

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What attending a classical music performance can teach us about being disabled

David Limmer

Royal National Institute of Blind People, UK

This presentation will describe a trip to a classical music performance that was organised for a group of adults with visual impairment, profound and multiple learning disabilities, and complex additional needs. Although the outing was initially organised to offer some of the customers from the RNIB (Royal National Institute of Blind people) a fun opportunity to experience something new, and to take part in something going on in their own community, it began to reveal aspects of the lived experiences of disability, which can sometimes create obstacles and challenges that often go undiscussed. Through the dual lens of a music therapist and a disabled person, the presenter will explore the social expectations placed upon us all, as well as the effort and courage it can take for those with a disability to disturb these social expectations when trying new things, and visiting new places. Most importantly, this paper will consider the value of disturbing the status quo, and the value in what the disabled experience can teach us.

What influence do our perspectives on disability have on our clients and clinical work? An opportunity for reflection

Hilary Davies

UK

Music therapy has been described by scholars from Disability Studies as still largely operating from the perspective of the “medical model” of disability (Cameron, 2014), which is considered to have been superseded by the Social Model of Disability, first proposed in 1976 by the Union of the Physically Impaired Against Segregation (UPIAS, 1976). Since then, the Social Model and various other models of disability such as the Cultural Model, Affirmative Model, and Neurodiversity Model, have been adopted by disciplines such as Disability Arts and Disability Studies. These more recent models of disability are exemplified by the work and research of organisations such as Drake Music (Watts and Ridley 2006); however, little has been written about these approaches in the music therapy literature so far (Pickard, 2020).

This presentation will explore which models of disability may be consciously or unconsciously followed in various kinds of music therapy clinical work, and what impact this might have on the clients we work with, and others around us such as other employees or therapists with disabilities. Practical examples (including my own experience as a disabled person, and invented / anonymised examples of clinical work) will be used to illustrate and explore various aspects of the different models of disability and how these might be applied in practice. This is an opportunity to reflect deeply on our perceptions of disability and how we can best support clients with disabilities through the ideas around disability we hold and exemplify in our clinical work.

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What is the client's experience? Workshopping as a key strategy for new insight development in music therapy supervision

Oksana Zharinova-Sanderson

Nordoff Robbins, UK

As the music therapy profession develops its reputation across the UK, music therapists face a range of challenges presented by work delivered in diverse contexts, with diverse clients and in multitude of formats including online. Music therapy supervisors are challenged to support the therapists in ways that reflect this diversity. As supervision 'does not seek to provide quick solutions' but looks to provide 'opportunities for new insights' which 'generate new options' for practice (Hawkins and Shohet, 2000), this presentation will consider how practical workshopping of musical interaction provides a useful strategy for generation of new insights for the work in any clinical context.

The presentation will explore how the Nordoff Robbins approach, with its focus on the meaning of musical interaction, can inform the music therapy supervision process (Ansdell and Verney 2010). In the same way that 'musical process is personal process' within Nordoff Robbins music therapy (Aigen, 2005), within supervision the musical process of workshopping enables change in the therapist's understanding of the client's experience, in turn enabling a shift in their music-therapeutic craft. Examples from supervision practice with music therapists and trainees will be used to discuss different ways in which workshopping can be delivered. The importance of openness to the unknown and courage on the part of both supervisor and supervisee within this collaborative musical exploration will be highlighted.

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When it's just too long to wait; a patient-led approach to improving the experience of waiting for music therapy

Emma Bailey, Juliet Wood

Chelsea & Westminster Hospital NHS Foundation Trust, UK

This presentation describes the development of a music therapy workshop for parents and carers of children with significant developmental needs. The music therapy service at Chelsea & Westminster Hospital NHS Foundation Trust offers music therapy to young children and parents and has a long history of working alongside families (Fearn and O'Connor 2003; Flower 2019; Wood, Sandford and Bailey 2016). Over recent years, the number of children referred to music therapy has increased but not been matched with an increase in staff hours, resulting in increased waiting times following referral.

In keeping with the service's ethos of listening to and collaborating with families as a key part of service development, parents and carers were offered the opportunity to share their experiences of waiting for music therapy. Parents were invited to complete a brief interview; their responses and feedback formed the basis for a pilot workshop format, which was offered to parents prior to their child attending a music therapy assessment. With the continued input of parents and carers, the pilot workshops continued and evolved both pre and through covid, coming to form a regular part of the music therapy clinical offer.

This presentation will describe the implementation and evolution of the workshops, through the lens of a collaborative approach to service development, and how this process disturbed the standard music therapy pathway, creating new ways to support families outside the music therapy room.

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When technology wasn't the answer: Keeping 'Come Singing' alive during a pandemic

Heather Edwards

Norfolk & Suffolk NHS Foundation Trust, UK

Singing groups are a lifeline for many people who live with dementia, offering joy and stimulation, an opportunity for social contact and freedom from the daily routines and frustrations of an isolating condition. Networks of friendship and trust are built, and the sense of group identity extends far beyond the duration of the sessions.

Coronavirus and successive lockdowns in 2020 and 2021 brought a brutal end to this. Come Singing, a small Norfolk voluntary organisation, was forced to reimagine its services to more than eighty of its previous attendees who live in their own homes. Some families did not engage with technology and others found Skype or Zoom complicated, confusing or 'cold' as a group musical experience. Instead, co-produced newsletters with links to music, one-to-one telephone singing, on-demand videos hosted by the library service, Skype music sessions with groups in care homes and most recently group singing by telephone have all helped to keep the music and hope alive and to preserve a joyfully anarchic sense of community identity.

This presentation shares lessons learned. The pandemic challenged us to the limit but fresh thinking has been invaluable and whatever the future holds, we will certainly continue with some of the new ways. And we are still singing together!

When therapies collide: Music therapy with an autistic child receiving ABA

Holly Robinson, Elizabeth Coombes

University of South Wales, UK

This presentation considers what music therapy offers autistic children who are being exposed to intensive functional and behavioural interventions. Applied Behaviour Analysis (ABA) is increasingly being used as an approach with autistic children and adults across the UK (ABA Access4All, 2021), yet critics argue this focus on the science of behaviour often fails to consider the emotional inner world and needs of the child (Lynch, 2019). Specific issues identified with ABA approaches include the effects of intensive rote learning, “the focus on behaviour at the detriment of subjective understanding” (Milton, 2018, p.5), and the reduction of opportunities for “natural curiosity and exploration” (p.5). Examining student case work with an 11-year-old autistic boy, the presentation considers some of the challenges faced when working with a child undergoing intensive interventions and subsequent attempts to bypass a conditioned facade to promote autonomy. It is hoped that the topics explored here will enable ABA work to be reframed in its connections with music therapy, offering a disturbance to current narratives which may be perceived as ‘either/or’ approaches. Factors affecting the therapeutic relationship and musical interaction included an automatic imitation response that hampered free play and self-expression and an expectation of a tangible or edible reward for any contribution or action performed. This work looks at how concepts such as reverie (Lawes, 2020) and the use of assistive alternative communication were used to develop a connection and bridge to the creative potential within in the hope of promoting development of sense of self (Whelan, 2019).

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Who do you think I am? Music therapy group relationships through the lens of intersectionality

Eleni Tsolka

Greece

Professional music therapists are trained to attentively listen attentively to their clients' sounds and music on a deeper level. Music consists of and incorporates various components that intersect and interconnect to create a whole piece. Music therapists are able to analyse these components and thus gain a better understanding of not only their clients' music but also their psyche and identity. On the other hand, one's personality combines different and intersecting aspects and features, as music does. Recently, discussions about intersecting identities as well as the different levels of power, privilege and oppression between therapists and clients have begun between mental health professionals (Riggs and Das Nair, 2012). Intersectionality explaining how different aspects of one's identity influence the way a person is perceived by other people (Crenshaw, 1989) constitutes an essential term that can be incorporated in Music Therapists' reflexive thinking. Considering this concept requires therapists to explore their own intersecting identities in-depth and also to "acknowledge histories of oppression and be accountable for legacies and privilege within local and global contexts" (Hernandez and McDowell, 2010, p.29).

This paper uses the lens of intersectionality to focus on the way the dynamics of power, privilege and oppression impacted the therapeutic relationship between the therapist and the members of a music therapy group with social workers in West Bank, Palestine. Intersecting 'axis' including language, gender, ethnicity and social class, which actively shaped the therapeutic landscape, will be presented through a psychodynamic but also a cultural and social point of view.

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Who needs a music therapist? Collaborative music practice for health

Paul Jackson, Claire Molyneux, Helen Odell-Miller

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There is often confusion, and even disturbance, about the understanding of different roles of professional musicians working in health and care settings, and music therapists working in the same fields. Growth and sustainability of music therapy depends upon collaboration and partnerships between people, but also between disciplines such as training, clinical work, community work, professional musicians, and researchers.

This paper presents the findings of the 2021 delivery of the Collaborative Music Practice for Health continuing professional development short course, the first of its kind in the UK, run by the Cambridge Institute for Music Therapy Research at Anglia Ruskin University, Cambridge, UK. The course brought together qualified UK music therapists and professional performers in an exploration of collaborative working within a variety of health and care settings, with a focus on working with those living with dementia. The qualitative research data drawn from the course provided material to explore and analyse the perceived benefits of collaborative work for the therapists and performers, for the client groups, and for those involved in supporting people living with dementia. Key questions posed were: To what extent does collaborative work provide new benefits for the application of music in health and care settings? To what extent does the experience of the training inform the working practices of therapists and performers? To what extent does the involvement of both therapists and musicians increase access to music for health opportunities within different communities?

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Women who hold each other up: NRMT approach in work with women who lost children to adoption and foster care

Afra Jurkiewicz

UK

Music therapists often work with children who have been adopted or are in foster care, but we rarely hear voices of women who lost their children as a result of the intersection of challenging life circumstances, ill mental health, intimate partner abuse and addiction. With the effects of stigma associated with losing children; the complex, unresolved grief and loss and limited systems of support in place, women struggle to live fulfilled and meaningful lives.

In this presentation I discuss the potential of improvisation and song writing within the Nordoff Robbins approach, linked with feminist perspectives in music therapy. Improvisation has been an important tool in making musical experiences accessible. As these women are very used to 'failing', music therapy has been a safe space for discovery, curiosity and creativity. Song writing, on the other hand, has been a powerful tool for sharing stories, resourcefulness, agency and building meaningful connections. The feminist lens allows to think about the work from the perspective of social inequality and structural oppression.

I will include extracts of work and direct accounts of women telling stories about their experiences in music therapy and their activist work within the organisation and beyond.

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Films and exhibitions

Giocosità: The inside out playfulness exhibition

Becky White

The University of Derby, UK

A pop-up visual/musical exhibition will be created in order to present research findings from the PhD study, 'Learning to Improvise: The Lived Experience of Music and Music Therapy Students', an arts based performative social science and phenomenological study (White, 2021; Kip and Leavy, 2014; Smith et al., 2009). The exhibition will present findings from interviews and improvisations with participants on experiences of training and developing improvisation skills. This will be achieved through a clothesline exhibition style, on which will be hung, using plastic colourful pegs, thirty images (various sizes- A4 and A3) of hand-drawn graphic scores and quotes from participants. Accompanying the images and quotes will be audio recordings of improvisations created through the research process, this will require an mp3 player and speakers. Ideally the exhibition should take place in a corridor in which people pass through and can linger if they wish – this will enhance a sense of improvisational engagement with the exhibition. A short paper detailing the research project giving explanation of the exhibition will also be provided. Delegate response opportunities will be created through an invitation to write or draw on experiences of learning to improvise using blank postcards, which can then be added to the clothesline. Requirements: space for exhibition – such as a long corridor, plastic coloured clothesline, coloured plastic pegs, small table, mp3 player and speakers, blank postcards, felt-tip pens.

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Music is Life: Grounding musical engagement in relational caring philosophy

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In this session we will screen a 50-minute research-based documentary, *Music Is Life*, and open dialogue about new possibilities for musical engagement for persons labelled as different. Based on research conducted as an interdisciplinary team, including 30 video-recorded interviews with diverse participants, *Music Is Life* follows people living with dementia and Grammy Award winner, Simon Law, as they compose a song about the meaning of music in their lives. Inspired by ‘liberation arts’ (i.e., arts for social justice), it explores how music can support creative self-expression, relational citizenship, and decrease social isolation when it is intentionally grounded in relational caring philosophy that prioritises opportunities for compassionate relationships and human flourishing. As such, the film is a powerful response to global calls to decrease stigma and create dementia-inclusive communities. It has enormous implications for broadening and enriching music therapy by conveying the power of music for life enrichment, building relationships, and nurturing community.

Music Is Life was virtually launched on World Alzheimer’s Day in 2020, with over 744 views. Since then, the film has had 1,400+ views. In this presentation we will explore our preliminary research on the impacts of the film, which capture its effectiveness as a catalyst for culture change. As one music therapist highlighted: “As someone who thought they were using compassionate support, this documentary completely changed how I practice as a music therapist ... This film is essential and must be used as an example of how we can make things better for people living with dementia.”

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Turn The Tables: A DJing project in Scotland

Ryan¹, Robbie Tolson¹, Philippa Derrington²

¹*Turn The Tables, Edinburgh, UK*, ²*Queen Margaret University, UK*

A Social Bite Village, an innovative homelessness accommodation initiative in Edinburgh, Scotland, supports those who have experienced homelessness by delivering workshops that build mental health resilience through a holistic approach to wellbeing.

Turn The Tables are DJ workshops run by local professional DJ Robbie Tolson, as part of the village's health and wellbeing programme. Over the last two years the workshops have grown in popularity with many of the participants picking up skills relatively quickly. Some suggested playing a live gig and Robbie made this happen, DJ-ing back-to-back and alongside project participants at large corporate gigs. These performances inspired Robbie to turn the workshops into the social enterprise it has become today.

This is a screening of "Heart. Beats" a short documentary following Ryan's story, which took him from homelessness to the main stage. It highlights the impact that learning to DJ and performing live performances had on Ryan's road to overcoming his complex situation and improving his quality of life.

Other presentation types

A provocation for music therapists and performers: Disturbing professional borders through performance and conversation

Helen Brew¹, Claire Flower²

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There is significant interest in the use of music as a means of promoting health and wellbeing. Music therapists may consider this their terrain, but they are certainly not the only music practitioners in a landscape which might also include community musicians, music educators, and professional performers.

While there are many examples of collaborative interdisciplinary practice across these groups, it seems that sharing knowledge, skills, and platforms, can expose tensions. Questions of status, funding, and professional legitimacy can impede the potential for creative, helpful work. The wish to cultivate good musical practices can easily become mired in professional defensiveness. To move through this, towards the 'New Paradigm' that Moss (2016) proposes demands curiosity, openness, and a willingness to disrupt existing professional boundaries.

This presentation, best described as a musico-autobiographical performance, tackles these issues through the prism of experience. The presenters met as music students over forty years ago, before pursuing respective careers as an orchestral musician and music therapist. In this performance, which takes the form of an open conversation, they draw on their own professional lives, weaving live music and words together with questions: how does music help, how can we think about performance, accompanying, and vulnerability, and what happens as we disturb conventional professional borders. Inviting the audience to participate with their own music and words will broaden the conversation further, creatively provoking us all to challenge the ways music in health and wellbeing is practised, taught, and conceptualised.

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Crossing borders: Exploring the margins between music therapy, supervision and other creative modalities, in education and other settings

Aisling Vorster^{1,2}, Sarah McColl-Wiltshire³, Beth Reid⁴

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As music therapists, arts therapists and allied health professionals we are each experts in our chosen art forms, theoretical approaches and profession. But how does music therapy interact with other modalities and associated disciplines? And, given the choice, how might our clients and supervisees wish to express themselves?

While verbal therapies are widely recommended in supporting emotional wellbeing, creative therapies remain under-recognised and our extensive skills and training undervalued. For example, a recent Scottish Government initiative to fund much-needed counselling in schools explicitly stated that while counsellors may use music, art and drama as tools, creative therapies would not be funded as “stand-alone approaches”.

If we, as therapists, align ourselves by our ‘stand-alone’ modalities, and our boundaries are further defined by external bodies, can we really meet the needs of our clients and stakeholders? Or, do we open our borders to ‘freedom of movement and trade’? Can our ‘core’ modality co-exist alongside art materials, spoken word, movement and sensory experiences, allowing music therapy to resonate with other therapeutic modalities? Rooted in robust training, professional experience and standards, and accountable through clinical supervision, is our service truly person-centred therapy, where ‘all of me’ meets ‘all of you’?

Creative therapists present this series of lightning talks, illustrating aspects of their work beyond their art form, the therapy room and direct work. We invite our European colleagues to join us in a cultural exchange, exploring one of our lightning talks in more depth, contributing their own creative approaches, stimulating discussion and identifying issues for further exploration and debate.

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Displacement and belonging: A social dreaming matrix

Catherine Warner¹, Hayley Berman^{2,3}, Alphonso Archer¹, Denise Wong⁴

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Social dreaming is a 'practice of sharing and working with dreams in a social space' (Lawrence, 2005). It provides opportunities for uncovering hidden emotions and thoughts among the participants, and can constitute action research (Balogh, 2015). A psychosocial dreaming matrix is inherently creative and lends itself to exploration incorporating music as part of the process (Manley, 2020). Participants are encouraged to share dreams, but it is not the individual dream that is the focus, rather the collective. Dreams are seen as objects in their own right. This social dreaming matrix will explore notions of belonging, and how identities can be affected by intergenerational displacement and trauma. It may be of particular interest to those working with displaced people (Bermudez, 2018; Karolia, 2020).

Method: Two hosts, an art therapist and music therapist, explain the social dreaming process and set boundaries. As an exposition, two music therapists will share lived experience of their own displacement and questions of identity. Then participants, including hosts, find a place in the seating arrangement. A 'snowflake' chair arrangement enables all participants to avoid gaze and concentrate on their dreams. Participants describe dreams as and when they are recalled. A scribe documents the dream sequence. Participants then realign align chairs and move together to explore links. The aim is not to interpret dreams or the analyse the dreamer, rather to make connections and discover new thoughts in an open-ended way. The process will move into music improvisation and art-making and conclude with verbal reflection.

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Does music therapy belong in educational settings?

Anne-Katrin Jordan¹, Philippa Derrington², Karin Holzwarth³, Sandra Lutz-Hochreutener⁴, Paola Esperson Pecoraro⁵, Jiri Kantor⁶, Dominique Praquin⁷, Marijke Groothuis⁸, Krzysztof Stachyra⁹, Melissa Mercadal-Brotons¹⁰, Catherine Clancy¹⁰, Ingeborg Nebelung¹¹, Efrat Roginsky¹², Johanna Zachhuber¹³, Aisling Vorster¹⁴, Rachel Sweet¹⁵, Cordula Reiner-Wormit¹⁶

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Music therapists working in nursery schools, special schools, mainstream schools and music schools, will lead this fishbowl and they welcome others to join them. Does music therapy have a place in educational settings?

‘Lessons from each other’ was the theme of a pre-conference seminar at emtc2022 for teachers and music therapists. The facilitators of this fishbowl will begin by highlighting themes that emerged from those dialogues and draw on their work in different countries, including music therapy supporting inclusion in mainstream schools (Italy), music therapy techniques in teacher training (Poland), using music technology in special needs education (Netherlands), and music therapy fostering inclusion for children and adults in a music school (France).

In this lively open fishbowl discussion any member of the audience can, and is invited to, occupy the empty chair and interrupt! It is hoped that such conversations will help identify specific chances and challenges of music therapy in educational settings and countries, stretching ideas for music therapy practice and identifying paths for research.

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“Hello, I’m a music therapist, how can I help you?” Listening, responding, and growing in covid: An audio-visual, interactive experience

Emma Bailey, Louise Brown, Crystal Luk-Worrall, Juliet Wood

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When the effects of the covid pandemic began to reach the UK in March 2020, like services across Europe, in-person music therapy at Chelsea & Westminster Hospital was suddenly suspended.

Whilst recognising a professional instinct to “help” and be active in supporting children referred to music therapy, the service drew on its long history of listening to families in making a response. By doing so, and through careful conversations, a more varied way of being a music therapist outside the music therapy room emerged.

When first contacting families following the announcement of the first lockdown in the UK, conversations with parents often began “how can I help you?” and even “can I help you at this time?” Being unable to work directly with children and families ‘disturbed’ established ways of working, causing diversions of energy and creativity into new, unfamiliar, and, at times, uncomfortable areas of practice. Therapeutic boundaries were challenged, and the roles of music therapists and parents in therapy evolved, creating alternative ways of working and supporting children during this difficult time.

Through a selection of short audio-visual extracts, stories of listening, responding, and growing will be illustrated, incorporating perspectives from within and beyond the music therapy team, including those of parents, children and colleagues. The presentation will be interactive, with an emphasis on open discussion in response to the extracts. The presentation will finish with a reflection on how these ways of working might continue to shape the clinical offer and approach, now and in the future.

Masterclass: Developing assessment tools in music therapy

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Rationale: Assessment practices in music therapy involve 1) preparing, 2) gathering information, 3) analysing, interpreting and concluding, and 4) documenting and communicating information about the music therapy process. One of the primary resources in the assessment practice is the use of assessment tools. These tools could be formal or informal tools, depending on how and why they were created.

Objective: This masterclass intends to teach music therapists and music therapy students on how to create assessment tools in music therapy (formal and informal tools). **Masterclass approach and**

theoretical background: The masterclass is organised in three parts: 1) theoretical considerations on music therapy assessment and how to develop an assessment tool, 2) practical experience of creating an assessment tool in music therapy, and 3) time for questions and take-home messages for the participants. These steps are based mainly on the Standards for Education and Psychological Testing (2014), on the Revised European Federation of Psychologist's Associations (EFPA) Review Model for the Description and Evaluation of Psychological and Educational Tests, and also on the presenter experience of developing assessment tools in music therapy. **Conclusions:** The main take-home message for the participants is: creating and adapting assessment tools is part of the everyday practice in music therapy and is not something exclusive to the research context.

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Morning music imaging and expressive arts

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At the beginning of each conference day, these experiential sessions are intended to provide a nurturing, grounding and reviving music and imagery experience for conference delegates. The sessions will involve music listening, guided visualisation and other expressive arts, inspired by Helen Bonny's work in the early years of the development of Guided Imagery and Music (GIM). After the initial music listening and guided visualisation there will be different options, including drawing or moving/dancing whilst listening to the music a second time. Following this, delegates will have the option to pair up and share their experience with someone else.

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Music therapy family reunion: Be our guest!

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"Music therapy with families" is an area of practice that has grown significantly in recent years. When viewed across the whole life span, music therapy with families includes working with parents as well as therapy settings that involve caregivers, relatives, caring professionals or even a whole family system. With this innovative format of a "Family Reunion" we would like to address colleagues who are working in this wide and exciting field. Different generations with different experiences and diverse cultural backgrounds are invited to share insights, expertise and music. Everyone who resonates with this idea is invited to bring something to the table to share: an idea, a question, a song or even a musical instrument.

With this "Family Reunion" we want to enjoy and celebrate the fact that it is finally possible to meet face to face, discuss, make music or metaphorically 'share food' and nourishment together again. The 'menu' will include appetisers (presentation of main ideas), main course (choice of options to discuss in small groups), followed by sweets (sharing of music and looking towards the future). The 'menu' will represent the cultural diversity that lies within different perceptions of the 'family' concept, served by the organising committee of the 'Music Therapy with Families' Symposium, scheduled for 2022 in Vienna. Families – in a broader sense – can also be an important resource for coping with challenges, especially in stressful times. Therefore, we are happy to invite the Music Therapy Family to reunite and share together at this conference.

Navigating trauma-related pain with music therapy entrainment

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Chronic pain is the result of various combinations of multiple events (Mills et al., 2019). Results from a recent systematic review (Fishbain et al., 2019) provide consistent evidence for the association between chronic pain and PTSD. Recent evidence suggests the general effectiveness of music therapy for pain management (e.g., Lee, 2015); however, more research is needed on music therapy's effects on chronic pain. Based on the involvement of PTSD in the aetiology of chronic pain, multidimensional approaches are needed for the effective music therapy treatment of chronic pain. This presentation will describe a levels-based, conceptual model of music therapy for pain management that describes how music therapy approaches are used with those experiencing pain. A focus will be placed on the music therapy process of entrainment (Dileo and Bradt, 1999), a video resp. audio example of a case study, its theory (Metzner, 2012), its application in clinical practice, its research evidence, its potential mechanisms for reducing chronic pain and also for providing access to suppressed issues related to trauma. Entrainment involves specialised advanced training, and details of this training in the U.S. and Germany will be described. Potential areas for future practice and research will be discussed, including the potential uses of entrainment for working with trauma. Questions and answers will follow the presentation.

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Opening up dialogue for reimagined liberatory praxis in music therapy

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The medicalisation of the arts, specifically music therapy, has been critiqued by scholars for its alignment with the medical model (Fortune and Dupuis, 2018, Jonas-Simpson et al., n.d., Kontos et al., 2018). The medical model places focus on symptoms and deficits and, when used inappropriately, serves to stigmatise and objectify persons living with disabilities or illness and produces and reproduces defective identities. Further, reducing music therapy to the confines of the medical model perpetuates hierarchies within the therapeutic relationship and is counterproductive to creating meaningful relationships (Aigen, 2015). Although taken up in music therapy to promote medical, health, functional, and adaptational outcomes and to gain legitimacy in the healthcare sector by imitating medicine, health and wellness are far more complex and entangled with historical, social, environmental, and political contexts and power complexities that shape realities and inequities (Arai et al., 2015). In this presentation we provide a critical self-reflection on how we the presenters have perpetuated medical ideologies in our own music therapy practices. We then call for more sophisticated philosophical and theoretical reflections and applications informed by liberatory arts, and critical and post-structural theories to broaden the scope of music therapy, considering the ways music can be used to deconstruct acts of discrimination oppression, violence, inequity and marginalization (Arai et al., 2015). Our hope is to ignite further critical reflections and dialogues about the taken for granted ways we practise and imagine new possibilities for music therapy praxis for personal transformation, social change, and social justice.

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Outdoor Music Therapy (OdMT): How about taking music therapy outside into natural spaces?

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Introduction: Research has led to a growing evidence base that points towards the curative and preventive potentials of nature (surroundings) concerning human health and well-being. These days, an increasing number of therapists conduct therapy outside while walking with their clients. Up to now, nature and music therapy and their interrelationship have been rarely discussed topics in music therapy practice, research, and literature. In light of a therapeutic community that is rediscovering nature as a supportive component in healthcare, OdMT adds valuable perspectives to this development. Workshop participants will be introduced to basic principles and interventions of OdMT and music therapy practice in outdoor settings. **Methods:** The workshop includes a mix of practical exercises, learning-by-doing elements, theoretical inputs, and joint discussions. If possible, the workshop will be held outdoors and/or in diverse settings available at the conference venue. Theoretical and practical foundations of OdMT are drawn from a series of empirical studies, extensive literature surveys, and evaluated applications in various clinical contexts. **Aims:** At the end of the workshop, the participants will be familiar with the main functions and potentials of nature in outdoor and indoor music therapy settings. The participants will know about specific interventions and theoretical foundations of OdMT and nature-assisted approaches in music therapy. **Discussion:** Moving music therapy outdoors and using natural spaces for music therapy expands the music therapist's reach. In times of spatial restrictions – for example, due to crises such as the corona pandemic –, OdMT proves to be an invaluable alternative in (non-) clinical healthcare.

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Shout, shout, let it all out: Breaking new ground in music therapy with trans and non-binary adults

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This presentation is a combined paper, workshop and sound installation, showcasing methods and outcomes from a six-month pilot project of music therapy with a group of trans and non-binary adults. The workshop will give attendees the opportunity to explore their own relationship to their voice, allowing them to experience a portion of what gender non-conforming people go through in our journey to find our identity.

Music therapy with LGBTQ+ people is a singularly underdeveloped area in the UK. Transgender and non-binary adults in particular are often overlooked for access to therapies and creative outlets when they are needed most, and this has especially been the case during the recent pandemic. Music therapy offers a unique way for them to explore their identity in a safe environment.

This innovative pilot project established a weekly music therapy group with several trans and non-binary adults, exploring the concepts of voice, self, identity, and belonging. Through a combination of voicework exercises, multi-arts activities, and music technology, the group delved into their individual relationships with their voices, and the idea of a group identity versus that of the self. The group recorded themselves speaking or singing each week to create a cumulative soundscape showing how their voices and attitudes to their identities changed and developed, which has been transformed into a sound installation for this new showcase.

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Silent clients: A challenge for music therapists

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In clinical experience and many psychosomatic or psychiatric settings, we see clients who are withdrawn and silent. When asked they can hardly describe inner states, emotions, or feelings, although we cannot assess cognitive deficits nor autism. The clients seem to have no awareness of their inner world. Often they are referred for music therapy, but they participate in a low-key way and seem to benefit little from music therapy.

In a psychodynamic understanding these clients can be described as “low-structured”. The concept of “structure-related psychotherapy” by Rudolf (2006) as well as Stern’s concept of the development of the self (2018) can serve as basic theories for music therapy treatment.

This workshop gives an insight into treatment steps for these clients, based on the two mentioned models. Starting from listening and experiencing, we go step by step towards mirroring, regulation, up to expression, and relatedness. Together we will execute and discuss music therapy interventions based on this treatment model.

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The role of improvisation in music therapy groups with children

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Introducing the unexpected or disturbing expectations can be the “key-moment” when a child may make a new connection or take a step forward. This is often the case when improvising with children in music therapy groups.

Drawing on 40 years of experience of running music therapy groups with a wide range of primary aged children, the author will think about the different ways in which musical improvisation can be helpful to groups of children.

Examples will be drawn from three different music therapy groups:

- a group of nine preschool children, three of which had special needs, seen in a nursery setting
- a group of three children aged eight, with severe and profound difficulties, seen with their parents in a special school
- a group of five children aged nine to twelve, with emotional difficulties, seen in a residential child and family psychiatric unit.

Short video excerpts of music therapy groups with children will be included.

After the presentation, participants will be invited to play their instruments to try out some of the improvisation ideas explored in the presentation. For example: ways in which children’s spontaneous musical sounds can be validated, varied and expanded; and ways in which the music therapist can change the mood, energy and character of group-playing through her improvised piano accompaniment. These core music therapy improvisational skills are considered to be essential, unique and transformational, with the potential to disturb, and promote therapeutic change.

Walk and talk: Investigating boundary-breaking music therapy education

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From in-person to online education, the COVID-19 global pandemic changed the trajectory of music therapy education and clinical training worldwide. Discover students' perception, their wants and barriers, and how to make an impact on their learning. Instead of sticking to the grid, take the opportunity to envision a new educational landscape for music therapy. In this presentation, the presenters take you on an inspiring walk around campus. Wander and receive insights from a survey study while processing your experiences in small walking groups. Guided questions streaming from the research data will stimulate you to brainstorm solutions discussed at four campus destinations. Break rules and make an impact on educating the next generation of music therapists. Walk the Talk!

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When Things Fall Together: The integral role of music in performance for healing in a time of catastrophe

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Faced with indescribable and unspeakable collective grief, *When Things Fall Together* (WTFT) attempts to map a performance journey that invites the audience member to remember, reflect and re-establish their relationship with themselves, community and the natural world through performance in nature. WTFT is a site-specific performance ritual, a poetic invitation to breathe in a time of collective, disenfranchised grief emanating from the global intersection of ecocide, pandemic and socio-political oppression. "I cannot breathe" speaks at once to the horror of Covid-19, the terror of George Floyd's murder in public, and a planet, our planet, the only known living world struggling to survive profound abuse at the hands of humans. WTFT locates itself within an African concept of art. It is an integrated spiral of arts that sees a fluid relationship and intersection between music, drama, dance, image and storytelling.

This presentation addresses the role that music played within the intricate web of performance. It tells the story of how a group of performers, including singers and music makers, worked together with Music Therapists' conscious presence and experience - not as outsiders, but rather as integral players in the ensemble, bringing to life the stages of grief. The role of collaboration, ensemble and humanity elucidates the power of music as an integral part of the performance.

Presenters use story, performance text, songs, photographs and video, to journey the conference participants through the heartbeat of WTFT, giving a glimpse into the experiential performance and the role music played in healing.

music therapy in progress

