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Conventions, confrontations, compatibilities and collusions

How can music therapy research be compatible with practice in contemporary UK?

Pavlicevic, Mercédès; Carr, Catherine; Moss, Hilary ; O'Kelly, Julian; Procter, Simon ; Quin, Alexia

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Counterpoints:

Music Therapy Practice in the 21st Century

First BAMT Conference

21-23 February 2014

Birmingham Conservatoire

Birmingham

United Kingdom

Book of Abstracts

Edited by Giorgos Tsiris, Catherine Warner and Grace Watts

Sponsors:



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CHROMA



Jessica Kingsley
Publishers



The first BAMT conference. Counterpoints: Music therapy practice in the 21st century
Edited by Giorgos Tsiris, Catherine Warner and Grace Watts

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BCU Catering, Birmingham Centre for Arts Therapies, Birmingham Conservatoire, Birmingham Music Service, Birmingham University, CBSO Youth Brass, Copthorne Hotel, The Music Therapy Charity, Music Therapy Works, Titan Film and Events

Usha Aravinth, Alison Barrington, Sophie Bolt, Polly Bowler, Jeremy Clarke, John Clemson, Jim Cooper, Richard Cornock, Claire Dobson, Ben Doyle, Pauline Etkin, Kate Fawcett, Neil Gilmore, Sarah Gummatt-Hart, Libby Hall, Andrew Kirkman, Jane Lings, Stephen Maddock, Lisa McGinlay, Sarah Peacock, Martin Perkins, Eleanor Richards, James Robertson, Ellie Ruddock, David Saint, Kay Sobey, Talvi Viikna

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Friday 21st February 2014

	Foyer	Adrian Boult Hall	Recital Hall	
16.00-18.30	Registration for the Conference (22-23 Feb)			
18.30-19.30	Reception with wine			
19.30-19.45				Welcome & Fanfare, in memory of Tony Wigram
19.45-21.00				<p><u>The Tony Wigram MTC Research Fellow Lecture</u></p> <p>How can you mend a broken heart? Music therapy and cardiac disease: An exploration of medical and psychological phenomena -- Dileo</p>

Saturday 22nd February 2014

	Foyer	Adrian Boult Hall	Recital Hall	New Lecture Theatre	Arena Foyer	Lecture Room	
08.30-09.30	Registration						
09.30-09.45							Welcome
09.45-10.30							<p><u>Keynote 1</u></p> <p>Music therapy in the UK: collaboration for the future -- Maratos</p>
10.30-10.45							Respondent: Clarke
10.45-11.00							Discussion
					<p><u>Workshop</u></p> <p>Using the East Kent Outcomes System (EKOS) in music therapy -- Saville</p>		

Saturday (cont.)	Foyer	Adrian Boult Hall	Recital Hall	New Lecture Theatre	Arena Foyer	Lecture Room
11.00-11.15 11.15-11.30	Coffee break					
11.30-11.45		<u>Panel discussion 1</u> <u>Service development and delivery</u> The commissioning of music therapy in all sectors: how do music therapy posts grow? -- Odell-Miller (Chair), Sandford, Hughes, Hung Hsu, Williams & Read	From pre-intentional to intentional communication: exploring speech and language therapy concepts and assessments for music therapy with children with severe, profound and multiple learning disabilities -- North	Rising to the challenge: a flexible approach to working in mainstream schools -- Sampathianaki	From 'can't' to 'can': an exploration of the experience of improvisation with a client with Motor Neurone Disease -- Lings	<u>Workshop</u> How to evaluate music therapy services: a 'hands-on' workshop -- Farrant, Tsiris & Pavlicevic
11.45-12.15			What do we do? Music therapy and assessment: explanations for 21st century practice -- Churchill	Group work in special schools: a look at the benefits of two contrasting forms of group work in a school for children and young people with SLD and ASD -- Warnock	Approaches to music therapy in working with men with Duchenne Muscular Dystrophy -- McPhail	
12.15-12.45			Evaluating groups for people with dementia -- Melhuish & Tadokoro	Scapegoating in a music therapy group for adolescents with social communication difficulties and/or ASD -- Annesley	A critical review of the usage and impact on wellbeing of Soundbeam 5 with physically restricted adults -- Johnson & Bullock	
12.45-13.00				Promoting mental wellbeing in children in primary education -- Lenton-Smith		
13.00-13.15 13.15-13.45 13.45-14.00	Lunch & Poster presentations				Poster presentations	
14.00-14.15		<u>Panel discussion 2</u> <u>Evidence and evaluation</u> Conventions, confrontations, compatibilities and collusions: how can music therapy research be compatible with practice in contemporary UK? -- Pavlicevic (Chair), Carr, Moss, O'Kelly, Procter & Quin	Do music therapists have a role to play in acute learning disability liaison services? Refining or redefining 21st century music therapy practice? -- Hooper	<u>Workshop</u> Introducing a community singing group for adults with acquired brain injury -- Bickley & Bennett	Where is the value? Exploring the worth of long term music therapy with an adult with cerebral palsy and significant cognitive, communication and behavioural difficulties -- Burns	<u>Workshop</u> Spirituality in music therapy: dilemmas, problems and actions -- Tsiris
14.15-14.30			Being a maternity cover music therapist - meaning, experience and process -- Watts			
14.30-14.45			Music therapy and music therapists in palliative and bereavement care -- Smith		<u>Roundtable</u> Facing the damage together: innovative work with carers in music therapy services for people with learning disabilities? -- Lovell, Goodridge, Harman & Watson	
14.45-15.15 15.15-15.30						

Saturday (cont.)	Foyer	Adrian Boult Hall	Recital Hall	New Lecture Theatre	Arena Foyer	Lecture Room	
15.30-15.45 15.45-16.00	Coffee break						
16.00-16.15		'Do you hear the people sing?' A research project investigating the responses from patients and staff in a medium secure forensic unit following their participation in a series of choral experiences -- Robertson	Researching the Chelsea Community Music Therapy Project: key findings -- Wilson & Ansdell	The musical expression of physical and emotional pain in acquired brain injury -- Watkins	Is clinical improvisation a distinct form of music making and can it be performed? -- Darnley-Smith	<u>Workshop</u> Calling all orchestral music therapists... an exploration of how music therapists use their own instruments in their clinical practice -- Loombe & Oldfield	
16.15-16.30			Lest we believe the stories we tell: insights from ethnographic examination of music therapy practice -- Procter	Identifying the value of music therapy within interdisciplinary assessment; A research project -- O'Connor & Gray			
16.30-16.45			Music as a health promotion agent in palliative care: the St Christopher's community choir -- Dives, Tsisiris & Prince	'This is where the magic happens': The evolution of a unique music therapy group which celebrates diversity, togetherness and the value of shared music-making -- McHale & Foster	Using music to improve executive function in a patient with acquired brain injury -- Furlepa		<u>Roundtable</u> Free improvisation in training and CPD -- Annesley, Brand, Maguire & Nockolds
16.45-17.00							
17.00-17.15			'Voices across cultures' Exploring with classroom practitioners the potential of the voice in developing a holding environment and playfulness in music therapy-based work with children with complex needs in Belarus -- Margetts				
17.15-17.30							
17.30-18.00			Closing session				
18.00-19.00	Book launches & Wine reception						
19.00-23.00	Conference meal [COPTHORNE HOTEL]						

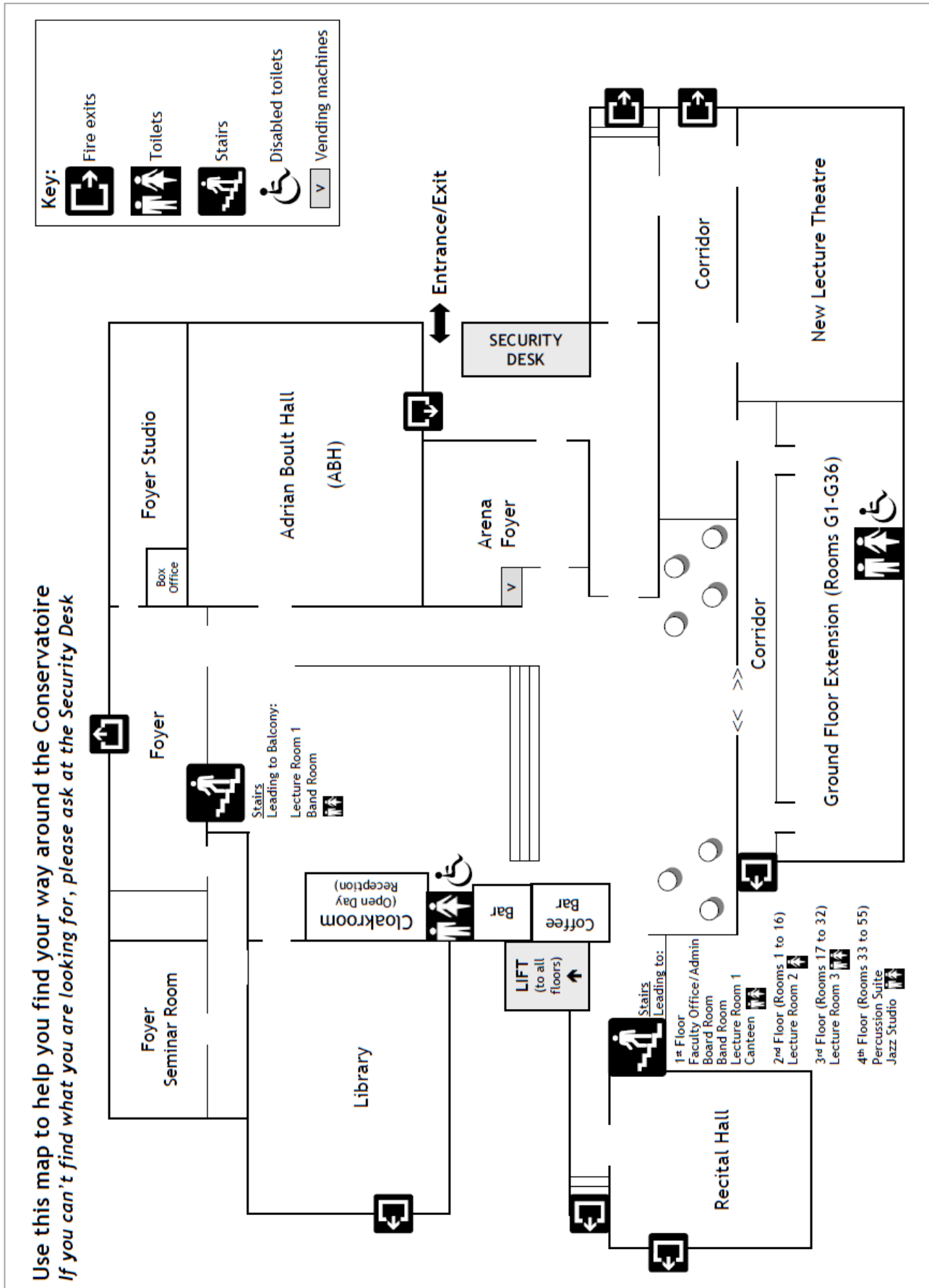
Sunday 23rd February 2014

	Foyer	Adrian Boult Hall	Recital Hall	New Lecture Theatre	Arena Foyer	Lecture Room
08.30-09.00	Registration			<u>Workshop</u> Experiential group -- Sloboda & Larkin	<u>Workshop</u> Vocal workshop -- Cave	
09.00-09.15						
09.15-09.30		Welcome				
09.30-09.45		<u>Keynote 2</u> Embedding innovation into the counterpoint of music therapy practice today -- Quin				
09.45-10.00						
10.00-10.15						
10.15-10.30			Respondent: Derrington			
10.30-10.45			Discussion			
10.45-11.00	Coffee break					
11.00-11.15			Music therapy, marginality and mainstreaming: Problems with getting the evidence -- Porter	Learning from experience: the use of musical role play in developing music therapy skills -- Wetherick	Exploring the experiences of music therapists who have worked without harmonic instruments in an UK adult mental health setting -- Smith	
11.15-11.30		<u>Panel discussion 3</u> <u>Music, community and wellbeing</u> Community music and music therapy perspectives -- Higgins (Chair), Ansdell, Deane, Cave & Warnock				<u>Workshop</u> 'Songs from a window' Innovation in therapeutic songwriting -- Heath & Lings
11.30-11.45			'Where was the music?' Music therapy practice with people living with HIV/AIDS in Rwanda -- Nicholson	Thinking in training supervision: where might the potential for transformation be located? -- Warner		
11.45-12.00					<u>Roundtable</u> Diverse city: crisis intervention and short term work in Birmingham and the West Midlands. creating and delivering a music therapy service around priority need -- a team viewpoint -- Tingle, Stain, Wilson, Bramhall, Douglas, Chater, Bennett, O'Keeffe, Swingler, Melhuish & Fawcett	
12.00-12.15			Levels of engagement: a model for clinical practice -- Papadopoulou	Ideas of temporality in psychoanalysis and music therapy -- John		
12.15-12.30						
12.30-12.45						

{ Timetable }

Sunday (cont.)	Foyer	Adrian Boult Hall	Recital Hall	New Lecture Theatre	Arena Foyer	Lecture Room				
12.45-13.30	Lunch & Poster presentations				Poster presentations					
13.30-13.45					What does the past tell us? A content analysis of the first quarter century of the British Journal of Music Therapy -- Spiro, Tsisis and Pavlicevic					
13.45-14.00	<u>Panel discussion 4</u> Training and education How we learn, how we teach: do music therapy training courses provide the skills required for the 21st century working environment? -- Watson (Chair), Bunt, Coombes, Hung Hsu, Lindeck, Loth, Procter, Twomey & Vaz		'What's this in my hand?': instruments' sensory properties for late-stage dementia -- Freeman	'Upbeats' – meeting children's needs and managing parents' expectations in a group for young children with ASD -- O'Neill & Atkinson		<u>Workshop</u> Exploring ambivalence in music and movement -- Whelan & Butté				
14.00-14.15			Two case studies of music therapy for adults with late stage dementia -- Burton	When love is not enough; music therapy with adoptions in crisis -- Gravestock						
14.15-14.30							<u>Roundtable</u>			
14.30-14.45										The many roles of assistants in music therapy -- Strange, Fenwick, Hayata, Melhuish & Munro
14.45-15.00										
15.00-15.15										
15.15-15.45										

MAP OF THE CONFERENCE VENUE



CONFERENCE PERFORMANCES & EVENTS

Friday 21st February 2014

Reception entertainments

**Welcomes & 'Fanfare and Fantasia for Brass Ensemble,
in memory of Tony'**

Saturday 22nd February 2014

Lunchtime entertainments

Conference dinner entertainments

Book launches

Friday 21st February 2014

Reception entertainments (6.30pm-7.30pm, Foyer)

Heartistes is a group of musicians that use Birmingham Centre for Arts Therapies services. Some of the group will be providing us with entertainment during the conference reception on Friday evening.



Welcomes & 'Fanfare and Fantasia for Brass Ensemble, in memory of Tony' (7.30pm-7.45pm, Recital Hall)

Welcomes from Donald Wetherick (Chair, BAMT), David Saint (Principal, Birmingham Conservatoire), Stephen Maddock (CEO City of Birmingham Symphony Orchestra) and Helen Odell-Miller (Music Therapy Charity)

Gordon Thornett, music therapist and composer has written a number of pieces for chorus and orchestra, which have featured in Christmas concerts in the UK and elsewhere. Recently he was commissioned by the CBSO to write an overture, *The Joy of Christmas*. His fanfare for the opening of the conference is a tribute to his former music therapy supervisor, the late Tony Wigram.

The Birmingham Conservatoire Brass Dectet are very kindly performing Gordon Thornett's fanfare and Christopher Houlding is the conductor. They include members of the CBSO Youth Orchestra. *Trumpets*: Eric Brookes, Matthew Hampton, Harry Jepson, Rob Spalton. *Horn*: Sian Collins. *Trombones*: James Blake, James Hall, Joshua Large, Joseph Starbuck. *Tuba*: Owen Wallage. *Timpani*: Luke Taylor.

"It was a great honour for me to be asked to write a piece to open this conference, and as a tribute to Tony Wigram. It has also presented me with something of a challenge, for although wanting to make it celebratory, I also tried to reflect in it various aspects of Tony's life and work. As a first step, I made contact with his family, from whom I discovered some pieces of music that held special significance for him, and I've tried to incorporate most of these into my composition. This hasn't always been easy, as the musical quotes are disparate, ranging from the Saint-Saëns Organ Symphony to Monty Python – and also making reference to his beloved dogs, Misty and Schubert! There's certainly an element of humour in the piece, which is intended to mirror Tony's cheerful disposition as a husband and father, as well as a music therapist. I'm grateful to Jenny Wigram for tracking down a Danish folksong that Tony was particularly fond of – which brings to mind his great contribution to music therapy research and practice in Aalborg and internationally. Listen for this plaintive song, 'Heart, be still, the sun goes down', a little way into the piece, introduced by four trombones. It seemed appropriate to include some music therapy references, but since most of Tony's music would have been improvisatory and client related, I've taken the liberty of hinting at a couple of Nordoff-Robbins tunes, with which some of this audience may be familiar. And remembering Tony's other role as for many years was a church organist, it seemed fitting to end the piece, after a short fugal section, with a rousing hymn-tune, 'Nun danket alle Gott', 'Now thank we all our God', which he would doubtless have played many times!"



Gordon Thornett

Saturday 22nd February 2014

Lunchtime entertainments (1pm-2pm, Foyer)



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Azaad Dhol Group have performed all over the Midlands and in many venues nationally showcasing the colours and sounds of Bhangra Beats. They performed in front of 20,000 people in the Vaisakhi Mela this year in West Park. They perform regularly in the community promoting Birmingham Music Service and Dhol Group.

Conference dinner entertainments (7pm-11pm, Copthorne Hotel)

Kyle Coleman is a 25 year old man who is on the autistic spectrum. Although virtually mute in childhood he discovered, through music therapy, an innate talent for singing. He now performs in many locations in the South West and beyond. His first album, *Therefore I Am*, came out in 2012 and another one is in production.

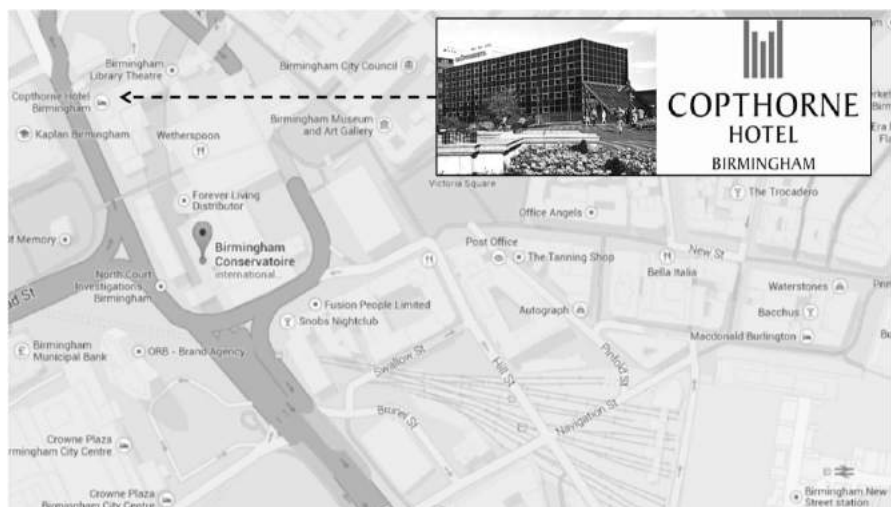


Oliver Moriarty is a pianist, singer and songwriter. He has worked with many well-known names, such as Jools Holland and Robbie Williams. He has become very much in demand for high end corporate events at venues such as The Ritz and Savoy.

Refuge are a band from Leicester whose songs reflect the struggles that people with mental illnesses can often face. They have been actively involved in many projects promoting Arts & Health, and run competitions for people to provide lyrics for their songs.

The conference meal will take place on Saturday evening at the Copthorne Hotel (3-minute walk from the Conservatoire through Paradise Place). The meal is not included in the registration fee but is charged separately. If you have paid to attend the meal you will receive your ticket upon registration at the conference.

The Copthorne Hotel Birmingham is located in the city centre of Birmingham, adjacent to the International Convention Centre and overlooking Centenary Square. The hotel has convenient access to the city centre shops, National Indoor Arena and National Exhibition Centre. Transport links nearby the hotel include Birmingham New Street railway station, which is five minutes away by car, and Birmingham International Airport, which is 20 minutes away.



The PA for the conference dinner is provided by **UVAudio**, run by Ben Doyle; a Leicester based company.

NEW SERIES FROM ASHGATE – SPECIAL LAUNCH DISCOUNT FOR BAMT CONFERENCE DELEGATES



MUSIC AND CHANGE: ECOLOGICAL PERSPECTIVES SERIES

Series Editors: Gary Ansdell, Nordoff Robbins Music Therapy, UK and Tia DeNora, University of Exeter, UK

Music and Change: Ecological Perspectives, is a cross-disciplinary, topic-led series for scholars and practitioners. Its aim is to explore the question of how, where and when music makes a difference. If music is a dynamic ingredient of change, what are the processes and mechanisms associated with music's powers, and how can ecological perspectives help us to understand music in action? Book proposals are welcome in any of the following areas: healthcare, social policy, political activism, psychiatry, embodiment, mind and consciousness, community relations, education and informal learning, management and organizational cultures, trauma, memory and commemoration, theories of action, self-help, conflict and conflict resolution, the life course, spirituality and religion, disability studies, palliative care, social criticism, governance, resistance, protest, and utopian communities.

NEW

How Music Helps in Music Therapy and Everyday Life

Gary Ansdell, Nordoff Robbins Music Therapy, UK

'How Music Helps represents a fascinating and thought-provoking investigation into the importance of music in the lives of people. With a philosophical orientation that will resonate with many of us who are advocates of the social-cultural impact of music and music making, Ansdell expertly weaves person-centered narratives and theoretical reflection. A first rate book from an author who is continuing the legacy of Nordoff and Robbins by always thinking musically within the music therapy context.'

Lee Higgins, Boston University, USA

How Music Helps is not just a book about music therapy. It has the more ambitious aim to promote (from a music therapist's perspective) a better understanding of 'music and change' in our personal and social life. Ansdell's theoretical synthesis links the tradition of Nordoff-Robbins music therapy and its recent developments in Community Music Therapy to contemporary music sociology and music studies. This book will be relevant to practitioners, academics and researchers looking for a broad-based theoretical perspective to guide further study and policy in music, well-being and health.

February 2014 376 pages Hardback 978-1-4094-3414-6 £55.00 **Special Launch Price £20.00**
www.ashgate.com/isbn/9781409434146

Music Asylums: Wellbeing Through Music in Everyday Life

Tia DeNora, University of Exeter, UK

'This is a beautifully written and important text. I enjoyed reading it immensely and will be recommending it to my students and colleagues. The examples are fascinating and resonate strongly with current health agendas that seek to complement conventional medical interventions with new innovative approaches that challenge existing hegemonies. There is no doubt that music has vast potential to produce significant benefits and this book will be essential reading for anyone interested in the relationship between music, health and wellbeing. It offers a wealth of new insights and is both accessible and meticulously thought out. I loved it!'

Raymond MacDonald, University of Edinburgh, UK

Taking a cue from Erving Goffman's classic work, *Asylums*, Tia DeNora develops a novel interdisciplinary framework for music, health and wellbeing. Adopting a holistic, interactionist focus, *Music Asylums* reconnects states of wellness and wellbeing to encounters with others and – critically – to opportunities for aesthetic experience. The book presents music as an active ingredient of action, identity, capacity and consciousness. Intended for scholars and practitioners in psychiatry and psychology, palliative care, socio-music studies, music psychology and the allied health professions, *Music Asylums* showcases music's role in the existential project of being and staying well, mentally and physically.

September 2013 178 pages Hardback 978-1-4094-3759-8 £55.00 **Special Launch Price £20.00**
www.ashgate.com/isbn/9781409437598

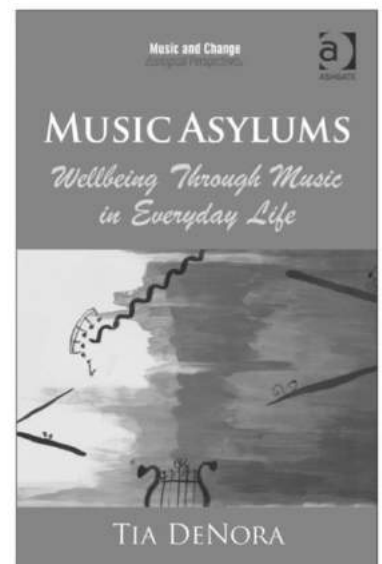
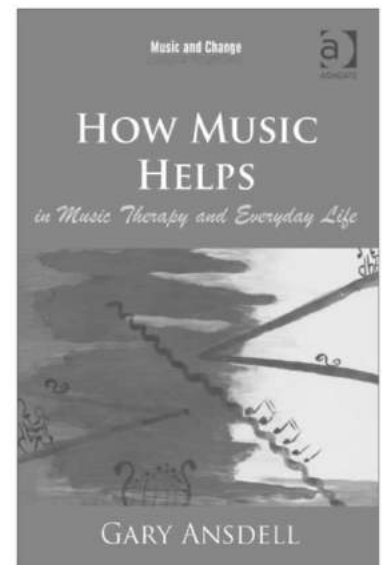
PUBLISHING IN 2015

Musical Pathways for Mental Health

Gary Ansdell and Tia DeNora, University of Exeter, UK

This book explores the experiences of people who took part in a vibrant musical community for people experiencing mental health difficulties. Ansdell and DeNora describe their long-term ethnographic work with this group, charting the creation and development of a unique music project. They track the 'musical pathways' of a series of key people within this community, focusing on changes in health and social status over time in relation to their musical activity.

August 2015 215 pages Hardback 978-1-4094-3416-0 £55.00



**THE FIRST TWO PUBLISHED TITLES IN THIS SERIES ARE AVAILABLE
AT THE SPECIAL LAUNCH PRICE OF £20 AT THE CONFERENCE
BOOK LAUNCH EVENT – SATURDAY 22ND FEBRUARY 2014, 6-7PM**

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Jessica Kingsley Publishers

First British Association for Music Therapy Conference 2014

Visit the JKP stand for 10% discount on all books

Music Technology in Therapeutic and Health Settings

Edited by Wendy L. Magee

2013 pb 400pp
9781849052733 £27.99

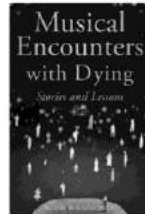
There is a developing area of music therapy practice that uses electronic music technologies in a range of therapeutic and clinical settings to help clients with complex needs. With contributions from leading experts in the field, this edited volume explains working with cutting edge technologies and how to apply these tools in practice.



Musical Encounters with Dying Stories and Lessons

Islene Runningdeer
2013 pb 160pp
9781849059367 £17.99

This book explores the supportive role music therapy can play in the end-of-life care. Through real-life accounts, it looks at how to create a therapeutic relationship, help patients to reach final goals, work within cultural contexts and deal with difficult emotions. It also considers how best to support the families of the dying.



A Guide to Research Ethics for Arts Therapists and Arts & Health

Camilla Farrant, Mercédès Pavlicevic and Giorgos Tsiris
Foreword by Gary Ansdell

Feb 2014 pb 160pp 9781849054195
£15.99

This guide draws from legislation and research ethics committee procedures, to provide guidance for practitioners who are considering undertaking research projects. Embedded in 'real-life' experiences, it aims to inspire practitioners to become ethically-aware researchers, evaluators and participants.



book launch Sat 22nd 6-7pm

A Guide to Evaluation for Arts Therapists and Arts & Health Practitioners

Giorgos Tsiris, Mercédès Pavlicevic and Camilla Farrant
Foreword by Mike White

Feb 2014 pb 176pp 9781849054188
£15.99

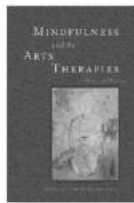
This guide provides foundational frameworks for designing and implementing bespoke evaluation protocols, based on the authors' substantial experience of designing and realising evaluation projects, and running training workshops for arts and health practitioners.

Mindfulness and the Arts Therapies Theory and Practice

Edited by Laury Rappaport, Ph.D
Foreword by Jakusho Kwong-roschi

2013 pb 352pp 9781849059091 £19.99

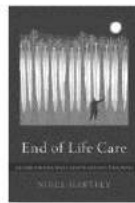
This ground-breaking book explores the theoretical, clinical and training application of integrating mindfulness with all of the arts therapies, and includes cutting-edge contributions from neuroscience, written by pioneers and leaders in their fields.



End of Life Care A Guide for Therapists, Artists and Arts Therapists

Nigel Hartley
Foreword by Dame Barbara Monroe
2013 pb 272pp 9781849051330 £25.00

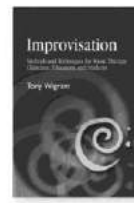
Written by an experienced music therapist, this comprehensive guide covers everything from the different roles in the multi-disciplinary care team, the stages that a patient at the end of their life experiences and the professional help needed at each stage.



BESTSELLER Improvisation Methods and Techniques for Music Therapy Clinicians, Educators, and Students

Tony Wigram
2004 pb 240pp 9781843100485 £19.99

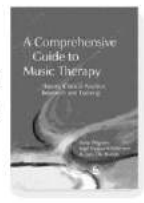
Wigram's practical, comprehensive guide will prove indispensable as a book of musical techniques and therapeutic methods. Notated examples allow readers to try out techniques as they read, with audio examples on the accompanying CD.



BESTSELLER A Comprehensive Guide to Music Therapy Theory, Clinical Practice, Research and Training

Tony Wigram, Inge Nygaard Pedersen and Lars Ole Bonde
2002 pb 384pp 9781843100836 £29.99

This book reflects the rich diversity and methods of music therapists, and is a comprehensive guide to accessing the ideas, theory, research results and clinical outcomes that are the foundations of this field.



COMING SOON

The Music in Music Therapy Psychodynamic Music Therapy in Europe: Clinical, Theoretical and Research Approaches

Edited by Jos De Backer and Julie Sutton

Foreword by Professor Paul Williams
May 2014 pb 384pp 9781849053532
£29.99

Presents a wide range of thinking from across Europe, stressing how essential the musician is within the identity of a music therapist. Includes examples and clinical case material from across Europe.



COMING SOON

Music Therapy Social Skills Assessment and Documentation Manual (MTSSA)

Clinical guidelines for group work with children and adolescents

Jenni Rook, Rebecca West, Jeffrey Wolfe, Pan Ho, Alana Dennis, Yayoi Nakai-Hosoe and Kimberly Peyton
June 2014 pb 224pp 9781849059855
£37.55

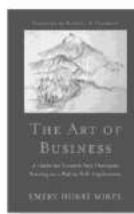
A comprehensive handbook of adaptable assessment and documentation processes for social skill development in music therapy group sessions for children with developmental disabilities. Includes a CD-ROM.



The Art of Business A Guide for Creative Arts Therapists Starting on a Path to Self-Employment

Emery Hurst Mikel
Foreword by Michael A. Franklin
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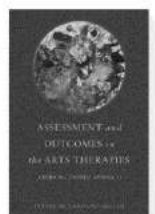
This practical guide to self-employment takes you through every step of the process, from coming up with the idea and marketing yourself, finding jobs, and interviewing, to what happens when you or your client want to end a job. It considers the likely obstacles you may face, and covers topics such as ethics and interns.



Assessment and Outcomes in the Arts Therapies

Edited by Caroline Miller
2013 pb 264pp
9781849054140
£22.99

There is increasing pressure on therapists to provide details of structured assessments and to report therapy outcomes. This edited volume provides a series of case studies, with varied client groups, giving arts therapists an accessible introduction to assessment and outcome measures that can be easily incorporated into their regular practice.



WELCOME NOTES



Birmingham Conservatoire is proud to welcome the British Association for Music Therapy for its first ever conference. Music has astonishing transformative powers and offers a communication platform for everyone from professional performers to those coping with physical or emotional difficulties. We recognise the part music therapy has to play in enriching lives and extend our best wishes for a successful and enjoyable weekend.

A handwritten signature in black ink that reads "David Saint".

Professor David Saint
Principal, Birmingham Conservatoire



In the heart of England, Birmingham Conservatoire is a place where talent develops, individual creativity flourishes and successful careers begin. We educate and train musicians to the highest professional standards in solo performance, composition, chamber music, orchestral playing and jazz.

The first UK music college to have an active research programme, established in 1993, Birmingham Conservatoire is now an internationally recognised centre for research into composition, performance with live electronics and musicology.



Welcome to 'Counterpoints', the first BAMT music therapy conference!

This conference is a first in many ways. It is the first conference organised by our new professional association, formed when the BSMT and APMT joined in 2011. It is also the first nationally organised music therapy conference since the BSMT conference of 2006, now some eight years ago. And with over 300 delegates, it is the first gathering of music therapists and researchers on such a scale in the UK since the World Congress in Oxford in 2002.

The vision for the conference is to represent our diversity as music therapists – it is about 'counterpoint' rather than harmony. Music therapy is simply too diverse a field to define simply and its richness comes from this overlap between music and the many different fields in which music therapists work. What unites us is precisely our concern with this overlap between 'music' and 'therapy', and all the various subtleties those two words contain.

It was also a deliberate choice to engage with aspects of the 'real world' in which music therapy lives, bringing new counterpoints to bear on our theme and including speakers from outside the music therapy field. This has come to life in the form of themed panel discussions on Service Delivery and Development, Evidence and Evaluation, Music, Community and Wellbeing, and Training and Education. I hope you will all attend at least one of these over the weekend and be challenged to broaden your understanding music therapy in its wider context.

You will see that the programme for the weekend is packed. This again was a choice: a festival of ideas rather than a summit meeting. There will no doubt be frustration at inevitable clashes between presentations and the shortness of both sessions and so-called 'free time'. As a seasoned festival goer, I urge you to 'ride the waves' and make your own 'free time' too – perhaps skip a session in order to continue a conversation with a new contact, or simply reflect on what you have heard. The success of the conference will be in the conversations and reflections it stimulates, not the number of presentations you attend.

There are many people to thank for making this event possible. It was at the BSMT conference in 2006 that the process of forming BAMT itself was begun, and in 2010 a small group began to plan for a national conference. These plans were the seed, and I would like to thank that committee for its work. Over the past year the BAMT conference and scientific committee and office staff have been hard at work developing these plans and bringing them to birth, and I would like to thank all those involved. I am also grateful for the help of staff at Birmingham Conservatoire and their caterers, the Copthorne Hotel, and the Music Therapy Charity for their generous help and advice in preparing for this conference.

And finally a thank you to all presenters and delegates. You are the substance and purpose of the conference. May you have a rich and challenging experience, and go home with many 'firsts' of your own to remember!

A handwritten signature in cursive script that reads "Donald Wetherick".

Donald Wetherick
BAMT Chair of Trustees & Chair of Organising Committee



I extend a very warm welcome to all delegates and presenters on behalf of the scientific committee. As you will see in this brochure, the challenge for participants is to choose which of the five concurrent events they would like to attend in any given session, such is the richness represented in the programme.

Selection of the programme content has been the task of the scientific committee, and this has been undertaken in a rigorous way, with all abstracts submitted blindly reviewed by all ten scientific committee members with a focus on quality and relevance to the conference themes. In keeping with the principle of inclusion mentioned by Donald, there are papers ranging from newly qualified music therapists to very experienced practitioners, researchers and educators, and include many examples of innovative development and new synergies, evidence and thinking. From the abstracts it is clear that there is a particularly strong focus on evaluation and collaborative practices across a wide spectrum.

The days begin with experiential workshops for early risers, and in addition to the inspiring keynote addresses and carefully structured Panel Discussions I would encourage you to participate in the various workshops and round tables, many of which will have number limits for participants.

Oral presentations are relatively succinct at 20 minutes, allowing 5 minutes of discussion before turnaround: this will mean that the chairing of the sessions will be tight and we ask for your co-operation in facilitating this so that everyone has a fair turn to present. There will be plenty of opportunities to extend your dialogue beyond the session times in a number of ways. All delegates will have Wi-Fi access and there will be opportunities to respond to debates via live Twitter feed.

During the lunchtime the poster presentations will be available for exploration; many of them are interactive with presenters on hand to answer questions.

Finally I would like to thank all members of the scientific committee who have provided expertise and thoughtfulness on a voluntary basis in order to make this conference coherent and varied. All UK training courses in music therapy were represented on the committee and although there were some quite challenging decisions to make, we also had some fun engaging with the process. It has been some time since we had a national music therapy conference of this scale and you are all vital to make this a very exciting event.

Cathy Warner

**Dr Catherine Warner
Chair of Scientific Committee**

KEYNOTES & RESPONDENTS



THE
MUSIC
THERAPY
CHARITY

*Supporting high quality research into
the impact of music therapy and
music therapy services in the UK.*

The Governors of the Music Therapy Charity (MTC) are delighted that acclaimed music therapist and researcher Professor Cheryl Dileo, the Tony Wigram MTC Research Fellow for 2014, is to open this first Conference of the British Association for Music Therapy (BAMT). We wish the BAMT Board and members every success in the future.

The Music Therapy Charity was founded in 1969 and since then has played a significant role in the development of the music therapy profession. The work of the MTC Research Fellows in particular has raised the profile of music therapy, contributed to new trainings and attracted national and international recognition.

The charity is a grant making body, funded exclusively by donations.

Vision: for music therapy in the UK to be underpinned by a robust and credible body of evidence for its effective use in healthcare, social care and education.

Mission: to support music therapy training, practice and research at the highest level in order to achieve this vision.

Activities are to:

1. Distribute grants:
 - a) to support postgraduate study
 - b) to contribute to clinical practice, e.g. pilot studies (small grants scheme)
 - c) to fund large scale research projects in specific areas of practice
2. Publish and make available research findings
3. Support an annual Visiting Research Fellow (in memory of Professor Tony Wigram)
4. Organise a programme of musical events to celebrate excellence, attract donors and raise awareness of the beneficial effects of music therapy
5. Develop the charity's profile and fundraising potential through an attractive, dynamic website, newsletters and the use of social media

To find out more about the history of the Music Therapy Charity, the achievements of the MTC Research Fellows and how to apply for the current grant programmes, do visit our new website www.musictherapy.org.uk

The MTC is Registered Charity No. 259077 and Company No. 00955930

The Tony Wigram MTC Research Fellow Lecture



How can you mend a broken heart? Music therapy and cardiac disease: an exploration of medical and psychological phenomena

Cheryl Dileo
Temple University

ABSTRACT

Heart disease is the number one cause of death internationally, yet there is little research or clinical practice in the field of music therapy focused on the prevention or treatment of this illness. The presenter will summarise the latest research findings from the field of psycho-cardiology regarding the relationship between psychological and social phenomena and heart disease. In addition, she will discuss her own research and clinical practice with case vignettes to emphasise the unique role and enormous potential of music therapy at various stages in the continuum of care for cardiac patients.

Tony Wigram (1953-2011) was Professor and Head of PhD Studies in Music Therapy at the University of Aalborg, and a Professor of Music Therapy at Anglia Ruskin University. He was a major contributor to the development of music therapy clinical work, research and professional practice in the UK and abroad. He held several honorary positions in universities all over the world, and published books and articles widely. He was a pioneer and leader in the music therapy field, and as a Governor of The Music Therapy Charity in the UK he contributed to the development of research funding opportunities for those undertaking PhD's in music therapy. He cared deeply about the profession, and was a passionate musician and therapist. It is fitting that one of his long standing colleagues and friend, Professor Cheryl Dileo is this year's Music Therapy Charity Visiting Fellow.



The Tony Wigram MTC Research Fellow Lecture is sponsored by the Music Therapy Charity (MTC) in association with the British Association for Music Therapy (BAMT).

Keynote 1



Music therapy in the UK: collaboration for the future

Anna Maratos
CNWL NHS Foundation Trust

Respondent: Jeremy Clarke CBE
New Savoy Partnership

ABSTRACT

On the face of it, music therapy in the UK is thriving: we have a unified professional body (which is even in credit!), large numbers being trained, increased national recognition, recommendations in national guidance and new posts being set up across the country. This is against a backdrop of a shrinking health economy and the widespread promotion of short-term symptom-focused therapies over person-oriented therapies by health researchers and commissioners (McWilliams, 2011).

This talk looks at how far we have come as a small profession which punches above its weight and at the likely challenges ahead. Are we prepared for the impact of increased transparency of the therapy room and for a different level of empowerment of our patients and their carers? How do our diverse political and philosophical persuasions affect our strategic focus as a group? This paper puts the case for extending intra-professional openness and profession-wide 'live edges' (Ansdell & Pavlicevic, 2008) to improve cohesion and help us use the threats and opportunities around us as springboards for the development of music therapy in the UK. I will also argue that our expertise in engaging and sustaining involvement with complex and chaotic patients can sometimes give us the edge politically too.

KEYWORDS

evidence; clinical models; strategy; collaboration; openness

REFERENCES

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Keynote 2



Embedding innovation into the counterpoint of music therapy practice today

Alexia Quin
Music as Therapy International

Respondent: Philippa Derrington
Queen Margaret University

ABSTRACT

When Alexia founded *Music as Therapy International*, the music therapy profession felt very different to how it feels now. Who has changed? The author or the profession? Or both? The author will discuss her experiences of being a threat, a novelty and now a welcome contributor to practice, and consider the changing professional context against which (and within which) her work has unfolded.

The presentation will trace the development of *Music as Therapy International's* work in Romania, as the country's care system has progressed through dramatic reforms following the crisis in care revealed after the fall of Communism in 1989. The author will explore how the consequent portfolio of activities devised by the charity has since proven relevant in other countries and has become increasingly influential in the UK. Specific relevant projects will be presented, including our six-week introductory training project model (international), our Distance Learning Programme (Romania), our training DVD (Rwanda), our UK CPD Seminars and Interactive Music-Making (a University credit-rated course for UK practitioners working with Under 5s). The presentation will also refer to responses to these projects from the profession and the relevant practice of others over the years.

KEYWORDS

innovation; international; training models

REFERENCES

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- Quin, A. (Ed.). (2008). *New Ways of Serving Communities at Home & Abroad: A Resource Pack*. London: Music as Therapy International.

PANEL DISCUSSIONS

Panel discussion 1

Service delivery and development



The commissioning of music therapy in all sectors: how do music therapy posts grow?

Chair:

Helen Odell-Miller
Anglia Ruskin University

Panel members:

Stephen Sandford¹, Lisa Hughes², Ming Hung Hsu^{3,4}, Frankie Williams^{4,5} & Beccy Read⁶

¹ Chelsea and Westminster Hospital NHS Foundation Trust, ² Health Education England, ³ Methodist Homes (MHA), ⁴ Anglia Ruskin University, ⁵ Arts Council England, ⁶ Key Changes

ABSTRACT

This session will address how music therapy posts can grow and how services can be accessed by people who need music therapy. There will be a celebration of how far music therapy has developed in post war Britain, and a challenge to the private and public sector as to how this growth can be sustained. For this to be understood, an introduction of the different ways music therapy posts arise will be given, the current state of play in the UK will be summarised, and then some questions about the future posed. For example, how can growth be sustained? What are the barriers to this? What effect has HCPC registration had upon the growth of music therapy? What is the role of statutory bodies such as in health and education in this process? What are the responsibilities of statutory bodies to provide services and should this depend upon evidence, latest research or NICE guidelines? What is the real situation and how have services of music therapy been set up and developed? Issues will be addressed such as funding, policies, lack of structured mechanisms for growth and the development of the private sector and entrepreneurship in music therapy charities and the voluntary sector.

Panel discussion 2

Evidence and evaluation



Conventions, confrontations, compatibilities and collusions: how can music therapy research be compatible with practice in contemporary UK?

Chair:

Mercédès Pavlicevic
Nordoff Robbins Music Therapy

Panel members:

Catherine Carr¹, Hilary Moss^{2,3}, Julian O’Kelly⁴, Simon Procter⁵ & Alexia Quin⁶

¹ Queen Mary University of London, ² National Centre for Arts and Health, Tallaght Hospital, ³ School of Medicine, Trinity College Dublin, ⁴ Royal Hospital for Neuro-disability (RHN), ⁵ Nordoff Robbins Music Therapy, ⁶ Music as Therapy International

ABSTRACT

Research is generally considered an essential aspect of professional development. Research helps to develop practices relevant to contemporary society: seeking to test and develop methods of practice; to ensure that reported outcomes and claims have robust evidence bases; testing that music therapy is worth the resources expended on its provisions; and hopefully making the world a better place.

At what cost, to whom?

This panel addresses the dilemmas about the nature of the link between practice and research, through questions that include: What kinds of ‘real world’ questions would help inform music therapy research? What kind of research might best serve funders, commissioners and sceptical managers? How representative of practice are large studies that are considered ‘gold standard’ by funders and the scientific community? How can practices best be served by research conventions that isolate and reduce the complexity of music therapy to outcome measures – that may be imported from other fields of practice? What kind of violence do research and practice do to one another? (When and how do research (methodological) imperatives compromise practice?) How might clients’ wellbeing best be enhanced through research? Since no research approach can serve multiple purposes, what kind of focussed approaches should we be considering for what purposes?

Panel discussion 3

Music, community and wellbeing



Community music and music therapy perspectives

Chair:

Lee Higgins
Boston University

Panel members:

Gary Ansdell¹, Kathryn Deane², Phoene Cave³ & Tina Warnock^{4,5,6}

¹ Nordoff Robbins Music Therapy, ² Sound Sense, ³ Freelance Music Therapist,
⁴ Belltree Music Therapy Centre, ⁵ Roehampton University, ⁶ Chelsea and Westminster Hospital

ABSTRACT

This session will explore the notion of what wellbeing might mean through the work of the community musician and the music therapist. Initially community music and music therapy will be dealt with as distinct practices, the differences, similarities, and misconceptions will be outlined and discussed. The panel will then move to suggest that as professional fields there is much to share. Through appropriate collaborative partnerships community musicians and music therapist would do well to share insights, know-how, and practice and would ultimately be in the best interest of people and places who need music's help.

There are, however, many questions and challenges and these include: How can we address and think about both 'limits of practice' without reducing the potential scope of the various practices and confining possible collaboration? How common and/or different are the underlying anchors of theoretical knowledge behind the various practices? Are current modes of education, training and regulation and curating, or limiting future creative growth of each field?

Kathryn Deane and Gary Ansdell will provide the professional overview from which Phoene Cave, Tina Warnock, and Lee Higgins will illustrate with examples from the UK and beyond. The panel will then describe why they think it is time to collaborate and encourage an open discussion with the audience. The overall aim of this session is to have a lively and informative debate on the issues of music, community and wellbeing from the perspective of community music and music therapy. Who knows, the session might act as a catalyst for some future collaborative work.

Panel discussion 4

Training and education



How we learn, how we teach: do music therapy training courses provide the skills required for the 21st century working environment?

Chair:

Tessa Watson
University of Roehampton

Panel members:

Leslie Bunt¹, Liz Coombes², Ming Hung Hsu³, Jackie Lindeck⁴, Helen Loth⁵, Simon Procter⁶, Tim Twomey⁷ & Anita Vaz⁸

¹ University of the West of England, ² University of South Wales,
³ Methodist Homes, ⁴ Coram, ⁵ Anglia Ruskin University, ⁶ Nordoff Robbins Music Therapy,
⁷ The Children's Trust, ⁸ Freelance Music Therapist

ABSTRACT

This session will consider the development of music therapy training in the UK, and whether it is meeting the needs of both students and the changing working environment of the 21st century. Therapy services in general are increasingly moving from statutory providers to charitable and other third sector organisations. At the same time, the Arts for Health agenda is challenging therapists to deliver their services and skills in different and innovative ways. The Training and Education committee is keen to hear the views of all music therapists, trainers and employers on what needs to be changed, adapted and added to music therapy core training. In order to do this, the history and development of music therapy training to date will first be presented followed by brief presentations from two trainers who recently started or redesigned music therapy training course. Two recent graduates will then present their experience of beginning work, how prepared they found themselves, and what if any other subjects would have been useful on their training course. The presentations will conclude with two employers giving their views on the skills needed now by therapists in the workplace, and whether they find that graduates have been taught them. A full discussion with trainers and audience members will be encouraged to explore these issues in depth.

ROUNDTABLES

[in alphabetical order]

Free improvisation – its role in training and continuing professional development

Luke Annesley¹, Gail Brand², Alex Maguire³ & Judith Nockolds¹

¹ Oxleas Music Therapy Service, ² Guildhall School of Music and Drama, ³ Broadmoor Hospital

ABSTRACT

'Free' improvisation is not easy to define, but is something we often ask of, or at least suggest to, our clients. Four music therapists who work in a range of clinical settings will explore their personal perspectives on free improvisation before opening the discussion to the floor. The members of the panel bring diverse musical experience including professional performing, composing within free jazz improvisation, idiomatic jazz, classical music and song writing. The range of training affiliations includes Roehampton University, Guildhall School of Music and Drama, Nordoff Robbins Music Therapy and City University.

What role does free improvisation play in our development and practice as music therapists? Indeed can improvisation (clinical or other) ever be 'free'? And where in the music is this freedom located?

Free improvisation (as opposed to idiomatic improvisation) is a relatively recent concept which parallels chronologically the history of music therapy itself. It has connections to jazz innovations and political movements of the 1950s and 60s, and can also be linked with other artistic and theoretical developments (aleatoric music, surrealism, free association in psycho-analysis). Does freedom exclude idiom? How might our confidence and competency as improvisers be influenced by our awareness of these or other traditions? What is the significance of the psychological blocks that can hamper our musical freedom of expression?

Part of the basis for this round table will be reflections on our pre-recorded informal conversation and improvisation; thus there will be improvised elements within a discussion on the subject of improvisation.

KEYWORDS

free improvisation; culture; jazz; training

REFERENCES

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Nachmanovitch, S. (1990). *Improvisation in Life and Art*. New York: Putnam.

Facing the damage together: innovative work with carers in music therapy services for people with learning disabilities?

Emma Lovell¹, Ellie Goodridge², Minna Harman³ & Tessa Watson⁴

¹ Hertfordshire Partnership University NHS Foundation Trust, ² Freelance Music Therapist,

³ Ealing Community Team for People with Learning Disabilities, Community Services, Ealing Hospital Trust, ⁴ Roehampton University

ABSTRACT

Facing the damage together: innovative work with carers in music therapy services for people with learning disabilities? 'If there is such a thing as a self, it is not just interior to the individual but rather also at the intersection of the individual as he or she transacts with others' (Rochat, 2009, p.9). This roundtable will describe and explore innovative ways of using music therapy theory and practice to work with families and carers of people with learning disabilities.

Emma Lovell will describe how she has supported staff, drawing from her experience of studying the recovery approach in mental health (Rapp & Goscha, 2006). She will discuss how sharing skills can support the recovery journey.

Elly Goodridge will talk about her experiences whilst working with the charity Music as Therapy International, of supervising and training care staff working in a Romanian day centre to use music as a therapeutic intervention. Her discussion will look at the parallel processes occurring in the clinical work and in the supervisory/ training relationship, and will draw upon ideas of containment.

Minna Harman will explain work with carers in a Music Therapy and Sensory Interaction group. Music therapy, intensive interaction and other sensory approaches are used. Over time this therapeutic environment has developed to provide not only a rich environment for communication, expression and relational exchange, but also a learning environment for staff.

Tessa Watson will talk about the process of containment that can be offered for staff. Through workshops, consultation and direct involvement in sessions, staff difficulties and anxiety about being with people with disabilities can be contained, and transference can also be processed to help staff develop their 'internal holding capacity' (Waddell, 2002, p.36).

KEYWORDS

learning disability; working with carers; staff development; containment

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- Waddell, M. (2002). *Inside Lives, Psychoanalysis and the Growth of the Personality*. London: Karnac Books.

The many roles of assistants in music therapy

John Strange¹, Angela Fenwick², Motoko Hayata³,
Ruth Melhuish⁴ & Hannah Munro⁵

¹ Anglia Ruskin University, ² Birmingham Centre for Arts Therapies (BCAT), ³ Newham Council
⁴ Camden & Islington Foundation Trust, ⁵ Nordoff-Robbins Music Therapy in Scotland

ABSTRACT

The use of staff helpers to assist in music therapy work with various client groups has been shown to be widespread, but very little has been written on the subject. Assistants may play a key role in therapy so it is important to understand the range of ways in which they can make a positive contribution to music therapy and the factors which help or hinder their effectiveness. Roundtable members will describe aspects of work involving assistants with various client populations, including people with dementia and primary and secondary age pupils with profound learning disability. Some recent research findings will be summarised and discussed. Contributions from the floor will be welcomed and possible future lines of investigation considered.

KEYWORDS

music therapy; assistants; co-working

Diverse city: crisis intervention and short term work in Birmingham and the West Midlands. Creating and delivering a music therapy service around priority need – a team viewpoint

Eleanor Tingle, Abby Stain, Davina Wilson, Dan Bramhall,
Alison Douglas, Sarah Chater, Katy Bennett, Leanne O'Keeffe,
Val Swingler, Ruth Melhuish & Kate Fawcett

Music Therapy Works (MTW)

ABSTRACT

This roundtable will include three brief case studies of young people deemed to be 'in crisis' in very different ways. Drawn from work undertaken by the team of Music Therapy Works, illustrations are from a preschool environment, a mainstream school and a specialist educational centre. We will illustrate how MTW came to deliver 'crisis intervention' work; what we mean by this term and what it is that purchasers and referrers request when given the opportunity to receive free music therapy intervention. Work with newly arrived families and emerging communities will also be considered. All presenters are members of one team and the strength of a collaborative approach is highlighted. Discussion will include the nature and value of short term work; what constitutes a 'crisis'; evaluating short term music therapy input; the place of music therapy in child services; and a client-centred response to the real demands of the marketplace.

KEYWORDS

Birmingham; crisis intervention; short-term intervention; team; marketplace

REFERENCES

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- Sutton, J. (Ed.). (2002). *Music, Music Therapy and Trauma: International Perspectives*. London: Jessica Kingsley.

ORAL PRESENTATIONS

[in alphabetical order]

Scapegoating in a music therapy group for adolescents with social communication difficulties and/or ASD

Luke Annesley

Oxleas Music Therapy Service

ABSTRACT

Drawing on the concept of the scapegoat as described in analytic psychology (Perera, 1986) and in a more general context, this presentation will describe my work with a group of adolescent boys in a mainstream secondary school in which one member became identified by the other group members as 'the problem'. Some members had a diagnosis of ASD and he became a convenient recipient for projections of both their autism and feelings of sibling rivalry. In one key moment, when he had left the room, someone else said "I'm autistic, but I'm not as autistic as him". Careful work in consultation with the head of the DSP (designated special provision) helped to build up a sense of identity and autonomy for the scapegoated group member as well as addressing the needs of the group as a whole. I will examine my own potential identification with the scapegoat, and show through audio examples how music has been used as a medium for both splitting and integration. I will discuss the scapegoat's part in identifying with others' projections, but also how he has demonstrated resilience and made positive decisions with regard to his place in the group.

KEYWORDS

scapegoat; autism; adolescence; groups

REFERENCES

- Perera, S. B. (1986). *The Scapegoat Complex: Toward a Mythology of Shadow and Guilt*. Toronto: Inner City Books.
- Quarmby, K. (2013). *Scapegoat: Why We Are Failing Disabled People*. London: Portobello Books.
- Yalom, I. (2008). *Theory and Practice of Group Psychotherapy (5th Edition)*. New York: Basic Books.

Where is the value? Exploring the worth of long term music therapy with an adult with cerebral palsy and significant cognitive, communication and behavioural difficulties

Laura Burns

Nordoff-Robbins Music Therapy in Scotland

ABSTRACT

This oral presentation will present a case study from a piece of on-going clinical work which began in January 2010 with a non-verbal adult male with cerebral palsy and significant cognitive, communication and behavioural difficulties.

Requiring high levels of physical, personal and emotional support, and exhibiting challenging and self-harming behaviour, Robert was referred for music therapy to offer him an alternative outlet and to help him to develop his methods of communication. Over a period of three years Robert's weekly individual sessions allowed us to foster an established therapeutic relationship, within which a subtle, yet unique musical and social dialogue developed. Simultaneously apparent changes in Robert's outward persona took place in his sessions, which were indicative of considerable developments in his self-confidence, self-belief and self-worth.

Using video excerpts, key moments of connection and of therapeutic and musical development that occurred within the work will be shared. These will be discussed in relation to the clinical evaluation and feedback with his support team, which allowed the work to continue. It will explore the genuine value of working for extended periods of time with individuals who have such profound difficulties. In addition the presentation will consider an evocative counterpoint: the subjective concepts of worth and of clinical outcomes in music therapy practice.

KEYWORDS

music therapy; clinical practice; cerebral palsy; adults; value

REFERENCES

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Two case studies of music therapy for adults with late stage dementia

Melanie Burton

Freelance Music Therapist

ABSTRACT

The presentation will discuss the findings of this project which formed part of the speaker's dissertation, completed in May 2012. The project investigated the responses of adults with late stage dementia to music therapy. An intervention of eight individual music therapy sessions were indexed and rated to observe changes in alertness, body movements and vocalisations. The sessions consisted of three individual clients participating in music therapy with a staff member present. The staff member was interviewed at the end of the intervention to gain a picture of the client's quality of life. By combining the results of observations from indexing and rating with the results of the interviews, a view of the client's quality of life can be assimilated. The music therapy predominantly consisted of improvisation using the voice, accompanied with keyboard or guitar. As loss of identity is a major symptom of dementia, it was necessary to facilitate a means of portraying the self through music. This presentation will exemplify the findings of this project through video clips. The following benefits will be discussed; increased socialisation, reality orientation, reduction in PRN anti-psychotic medication, self-expression, relaxation, and memory recall.

KEYWORDS

late stage dementia; music therapy; students and practice

What do we do? Music therapy and assessment: explanations for 21st century practice

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ABSTRACT

Whilst a considerable quantity of music therapy literature has been published, little focuses specifically on the theory, practice, and research of assessment (also noted by Sabbatella, 2004). Rather, information is fragmented (Sabbatella, 2004), and inconsistent. Particularly, there is no established definition of or distinction between 'assessment' and 'evaluation', both terms used interchangeably to describe a number of processes with numerous approaches according to geographical, historical, treatment, and philosophical contexts.

Based on research and reflection, the presenter offers an overview of documented concepts and deduced definitions and distinctions between assessment and evaluation in the unique context of music therapy. Further points include: differentiating music therapy assessment and assessment in music therapy; influences on assessment and evaluative procedures according to context (practical, and individual, including RMTs); and finally, tool creation, with positive and negative implications for generalisation and standardisation in our profession.

The aim of this presentation is to further knowledge relating to general music therapy assessment by offering new considerations and perspectives most relevant to 21st century practice. Ideas and related research were initially developed in the process of the presenter's Master's thesis, under supervision of renowned RMT, researcher, and publisher Dr Katrina McFerran.

KEYWORDS

music therapy; assessment

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Is clinical improvisation a distinct form of music making and can it be performed?

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ABSTRACT

Improvisation is a widespread musical technique for music therapy, and during the 1970s in the UK, the term 'clinical improvisation' came into usage to specify some distinct approaches to therapeutic music-making. However, with the recent emergence of notions of health musicing, the nature of this distinction between clinical and non-clinical music making is not always clear. For example, as Brown and Pavlicevic have proposed, it is not always apparent whether a clinical musical relationship is being formed between therapist and client or a purely musical one, if indeed such a distinction can be said to exist at all. This can lead to an ambiguity regarding what music therapists are claiming to offer as distinct from the workshop based practices of community musicians.

In this paper I will demonstrate how this dilemma raises a question of comparative musical ontology. I pose the question is it meaningful to perform clinical improvisation outside of the therapy setting? I describe some of the theoretical rationale for the recent revival of performance practices in therapy. This is illustrated by an account of a music therapy project whereby there is a single understanding of improvisation from the private music therapy session to public performance. Finally, I will provide a contrasting account proposing how the improvised music of the private therapy session is like 'site specific' art and therefore to be distinguished from the improvised music of a public performance.

KEYWORD

improvisation; performance; ontology

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Music as a health promotion agent in palliative care: the St Christopher's community choir

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¹ St Christopher's Hospice, ² Nordoff Robbins Music Therapy

ABSTRACT

Traditionally, health promotion has focused on illness prevention, and is addressed to people who are 'fit' and 'well'. In recent years however, there has been an increased interest in health promotion's relevance within the palliative care field. Although death cannot be prevented, health promotion initiatives can provide education and social support regarding death and dying, and help change death-denying health policies and attitudes (Kellehear, 1999). These initiatives gradually become a key aspect of hospices' work, and a new emerging area for music therapy practitioners.

Drawing from the example of St Christopher's Community Choir (and its Band), this presentation explores music's role as a health promotion agent in palliative and bereavement care. Run by two music therapists, the choir was founded in 2011 as part of St Christopher's wider death education and social initiatives (Hartley, 2011; Tsiris et al., 2011); today it has more than 80 members including people from the local community, patients, families, bereaved people, staff and volunteers. Through audio-visual illustrations, different people's pathways and social stories within and through the choir are presented. Reflecting also on the possibilities and challenges of running the choir, new potential prospects for music therapists working in such settings are outlined.

This presentation shows how music's power to narrate people's stories and build community can become key elements within health promotion initiatives in palliative care. The implicit 'social activism' of these initiatives and their impact on music therapy's professionalisation will be discussed.

KEYWORDS

health promotion; palliative care; community choir; band; music therapy

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Befriending through music: investigating music therapy experiences and triadic relationships

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ABSTRACT

Befriending is a form of social support involving the development of a facilitated, boundaried friendship. Though the befriending relationship differs from a therapeutic relationship, it can share several characteristics and face similar challenges. Befriending has previously been used as a control treatment in large-scale RCT studies. However this preliminary study is the first to examine the use of a psychological therapy within the befriending relationship.

This pilot research project was developed during MSc training at QMU, Edinburgh. Three pairs of 'befriendees', namely socially isolated physically disabled adults, and volunteer 'befrienders' received short-term music therapy. Semi-structured interviews of participants were analysed using the phenomenological method of Hycner (1985).

Firstly, client experiences are examined. Seven themes common to two or more participants are revealed in respect of their views on the impacts of music therapy, including intra- and inter-personal insights and increases in confidence. Notably, the perceived effects of music therapy on the befriending relationship are presented.

Secondly, triadic relationship patterns are highlighted. The views of befrienders, befriendees and the author herself on the nature of relating within sessions are compared and contrasted. The change in the author's perception of her role in this three-way dynamic, and her recognition of the relevance of the constructivist paradigm to the outcomes of the study are elaborated. The paper concludes with an overview of the limitations of the study and a presentation of the author's recommendations for further, longer-term music therapy work not only with befriending pairs but with pairs of clients from other populations.

KEYWORDS

befriending; triadic interactions; physical disability

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‘What’s this in my hand?’ Instruments’ sensory properties for late-stage dementia

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ABSTRACT

This paper will consider visual and tactile properties of instruments as used in one-to-one music therapy sessions for people in the very late stages of dementia. Effectiveness of sensory approaches for this client group, such as aromatherapy and ‘Snoezelen’ (Kitwood, 1997), together with the multiple challenges of engaging conventionally, led to my experimentation with alternative approaches within music therapy. This work took place in the context of a continuing care ward, which operates as part of a Mental Health NHS Trust.

As dementia causes increasing isolation and dependency, the need for connection becomes stronger yet more difficult to achieve (Simpson, 2000). Here, the aesthetic and stimulating aspects of instruments can assist by non-verbally promoting engagement and reducing isolation. The offering of a musical instrument represents a completely different experience for the client to that of being given food or personal care (both of which are regularly and essentially provided for people experiencing late dementia). Music offers tangible beauty in an immediately accessible form, involving much more than aural sensation alone. Without access to language, one’s senses provide a strong alternative vehicle for communication. Reading a person’s non-verbal responses (Pavlicevic, 1999), however small such responses may be, is vital in informing the therapist as to how to proceed. Such considerations, assisted by clinical examples, lead this paper to conclude that *the means by which music is made* is therapeutically significant for this client group, with the *making of the music* being as valuable and stimulating as the actual music itself.

KEYWORDS

sensory stimulation; dementia; connection; aesthetics

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Using music to improve executive function in a patient with acquired brain injury

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ABSTRACT

Background and aims

The study illustrates the way music can be used to achieve functional goals. The aim was to move the patient on to the next stage of rehabilitation and enable him to function more independently. Currently, the patient could not live independently because of poor executive function skills. The aim for the therapy employed was for the patient to gain relevant skills and to realise that he was able to organise himself.

Method

A Neurologic Music Therapy technique called Musical Executive Function Training (MEFT) was employed with one patient. This includes improvisation and composition exercises to practice executive function skills such as organizing, problem solving, decision making and reasoning. Through the use of graphic scores, composition became accessible and recordable, this then allowed the patient to rehearse, conduct and perform his own music.

Results

By working through the process of composition, rehearsal and performance the patient demonstrated many skills which are needed in everyday life. He had to plan and organise all areas of the composed music. In the next stage, he had to improve his communication skills, and problem solve. This transferred to life outside the therapy room by improved overall executive function skills.

Conclusions

Using music to work in a very functional way has strong implications for the future of music therapy which traditionally has focused on emotional needs. This approach further integrates music therapists into the multidisciplinary team and allows us to reach to patients using a multifaceted approach.

KEYWORDS

Neurologic Music Therapy; acquired brain injury; executive function

When love is not enough; music therapy with adoptions in crisis

Joy Gravestock

Freelance Music Therapist

ABSTRACT

Descriptions of individual and parent/child dyad and family music therapy casework with children/young people placed for adoption prior to age four years following significant trauma in their families of origin. Adoptive families are referred at a point of crisis when an adoptee faces the prospect of returning into the care system because of adoption breakdown. Adoptees often accrue a diagnosis of attachment disorder and adoptive parents struggle additionally with their own trauma such as infertility or death of a birth child. The realities of working as part of a “team around the child” with families surviving multiple stresses, and impacted by secondary traumatisation, will be discussed. In addition, new insights arising from research into the neurobiology of attachment will be included with consideration of the particular relevance of musical elements to reparative relating. The often negative impact of the interactive space between the internal worlds of *both* the adoptee *and* adopter will be thought about. This paper will consider the contemporary practises of adoption in the UK, and also the significance for scientific developments with neuroscience, which impact therapists.

KEYWORDS

adoption; neurobiology; attachment; internal working models

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Do music therapists have a role to play in acute learning disability liaison services? Refining or redefining 21st century music therapy practice?

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ABSTRACT

In the United Kingdom, *Death by Indifference* (Mencap, 2007), a report by the leading charity for people with learning disability, highlighted that mainstream healthcare for people with learning disability was unsatisfactory. People with learning disabilities had died unnecessarily because they appeared to have received worse healthcare than people without learning disabilities (Pugh, 2012). The report prompted the establishment of learning disability acute liaison teams. These teams improved the standard of acute primary care by providing advice on all aspects of the care of adults with a learning disability who were accessing a general hospital for an elective or emergency admission, or as an out-patient.

When Hilary Moss (2008) explored the relationship between music therapy and arts and health practice in healthcare settings she questioned the limitations music therapists placed on their role. She wondered whether music therapists “could be overall advisers recommending the best musical intervention for a particular healthcare environment but also being open to whether music modalities other than music therapy might be most effective in a particular setting” (Moss, 2008, p.86).

Moss (2008) encouraged this presenter to examine his role as a music therapist working within the adult learning population and to consider the part he might play within an acute learning disability liaison service. This paper traces the development of acute disability liaison services, before using the receptive and community music therapy traditions as contexts for considering a music therapist’s potential role within an acute learning disability liaison service.

KEYWORDS

learning disability; practice development

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To see is to believe? Developing a psychophysiologicaly informed method of video analysis

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ABSTRACT

Introduction

Video analysis has enhanced music therapists' qualitative exploration of phenomena within sessions. However, can subjective interpretation of video recordings provide reliable evidence of clients' internal experience, particularly when conditions such as dementia can prevent clients' articulating their feelings? The paper presents a systematic method of video analysis, developed in a PhD project investigating music therapy's impact on symptoms of dementia. The concept relates to James-Lange and Neo-Jamesian theories (James, 1884; Lange, 1885; MacLean, 1952) which propose that bodily sensations transmitted to the brain, generate emotional experiences. In addition to visual checking, the analysis presses the value of quantitative physiological measurements.

Aims

Drawing from affective neuroscience, the analysis transcribes subjective (visual observation) and objective (physiological data) measurements (Gardhouse & Anderson, 2013). The aims are: (1) To identify client's responses to sensory stimuli presented by the music therapist; (2) To identify which stimuli induce changes in client's psycho-physiological state; (3) To establish which altered psycho-physiological states indicate improved emotional wellbeing.

Methods

The analysis reduces a session to four defined constituents (verbal, musical, non-verbal and mixed expressions) of both client and therapist. These are visually identified and colour-coded in real time using Microsoft Excel, with heart rate and skin temperature superimposed onto the coloured codes along the timeline.

Results

The analysis has been able to visually pinpoint four client expressions in relation to therapist's sensory cues. The physiological data supports phenomenological interpretations, revealing modulation in emotional arousal. This enables identification of sensory cues that could effectively reduce symptoms of dementia.

KEYWORDS

music therapy; psychophysiology; dementia; video analysis

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Ideas of temporality in psychoanalysis and music therapy

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ABSTRACT

Time has changed. Since Freud invented the therapeutic setting in the form of psychoanalysis developments in theory and practice have led to new conceptualisations of how the past and the present are given value in therapy. To Freud the emphasis was on understanding the dream from the previous night, since Bion and Winnicott the emphasis has been on the therapeutic relationship as an agent in promoting the dreaming function of the patient's mind. This paper explores the deployment and development in psychoanalytic thinking of notions of time and considers Music Therapy to be one of the most potent ways of stimulating the dreaming function of the patient. The use and function of the present tense in a therapeutic relationship is also considered in relation to processes of receptivity. Temporal themes in Freud's ideas of Transference, Bion's concept of Reverie and Winnicott's concept of Holding will be reviewed in the light of contemporary Music Therapy Practice in work with Adults in a Mental Health Setting.

KEYWORDS

transference; reverie; holding; receptivity; dreaming

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A critical review of the usage and impact on wellbeing of Soundbeam 5 with physically restricted adults

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ABSTRACT

In this paper we present findings resulting from a study conducted in collaboration between staff at Birmingham Conservatoire (Birmingham City University), Soundbeam Project Ltd., clinical, therapeutic and administrative staff at Heartlands Hospital, Birmingham, and with therapeutic staff at Moor Green Brain Injury Specialist Clinic (BISC). The study assesses the use of Soundbeam 5 in terms of its impact on individuals with severe physical restrictions. We begin with a survey of research and practice by both music therapists and music in health practitioners in the UK. Qualitative results are then presented including analysis of extensive interviews with adult users with physical restrictions. Based on findings arising from these interviews, conclusions are drawn about the use of Soundbeam 5 in enhancing wellbeing with physically restricted adults. The implications for practitioners in the fields of music therapy, community music and arts in health are considered, leading to a discussion of the wider implications for society and how it provides opportunities for disabled people to realise their full potential and have access to creativity and self-expression. Finally, we contextualise our findings within the wider discourse of arts-led wellbeing, music therapy and musical practice and present avenues for future work.

KEYWORDS

Soundbeam; disability; wellbeing; technology

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Promoting mental wellbeing in children in primary education

Gemma Lenton-Smith

Ealing Music Therapy

ABSTRACT

The social and emotional wellbeing of children within the UK is a growing concern to the society we live in. The Government have commissioned a numbers of reports to address the importance of providing services to support good social, emotional and psychological health in our young with better defences to prevent emotional and behavioural difficulties later on. Current literature suggests that music therapy is an effective intervention in the mainstream school setting in supporting children with emotional difficulties. Working in primary schools in London, one is frequently required to reflect upon many different factors including, language, culture, ethnicity and socio-economic background to successfully support the child's social and emotional wellbeing. The children referred to the service are usually the most emotionally challenging pupils in the school. This paper will explore how music therapy interventions can help children to integrate and engage in the classroom setting. In parallel this paper will also reflect on how working practice is adapted to meet the individual's social and emotional needs supporting the UK government's initiatives.

KEYWORDS

mainstream; wellbeing; culture; ethnicity; NICE

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From 'can't' to 'can': an exploration of the experience of improvisation with a client with Motor Neurone Disease

Jane Lings

St Peter's Hospice

ABSTRACT

Motor Neurone Disease (MND) is a degenerative disorder that gradually takes away the possibility of movement. Harry, an African man and former guitarist, was in his 50s at the time of the research. He had assumed that MND meant he would never play music again. He described a 'turning point' occurring early in therapy when he discovered that he could play the metallophone. This act both convinced him of the benefits of music therapy and challenged his negative expectations about living with progressive disease, changing a 'can't' to a 'can'.

In the qualitative case-study research project undertaken with Harry an improvisation was recorded on video. From this data it was possible to discuss what we could see and hear happening. Recorded discussions with Harry revealed his detailed thinking process as he improvised. Harry also saw himself playing for the first time, showing him how much unconscious movement he was making as he played.

Findings included his concept of improvisation as a maeutic (mid-wife) enabling him to express himself; and improvisation as uniquely joining up his mind and body, making it possible to forget about the constraints of illness.

The presentation will include watching the improvisation alongside aspects of the analysis.

KEYWORDS

improvisation; motor neurone disease; case-study research

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‘Voices across cultures’

Exploring with classroom practitioners the potential of the voice in developing a holding environment and playfulness in music therapy-based work with children with complex needs in Belarus

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ABSTRACT

This PhD research has in common with music therapy-based skills sharing projects in both the UK and overseas the aim to support classroom practitioners in their own work by enhancing skills in building relationships with children with complex needs. The research responds to a request for further input following positive outcomes of introductory music therapy projects during 2009 at Novi Dom, a special school in Minsk, Belarus. Using a mixed methods design, the research will investigate whether, and, if so, in what ways, Winnicott's theories of the holding environment (1960) and play (1971), as understood and practised in psychodynamic music therapy, may provide an accessible, practical framework to support such development.

To enable exploration of these particular theories of parent-infant interaction, specifically formulated music therapy-based staff training programmes will be central to the project fieldwork. This paper will focus on one key programme area; the potential of the voice to support development of a holding environment and playfulness for children with complex needs (Warnock, 2011, p.36). Illustrated with video examples from the previous projects in Belarus in 2009, ways in which practitioners' connection with their own voices, creativity and playfulness might support relationships with children at Novi Dom will be considered. Simultaneously discussed will be socio-cultural factors which may impact on this process, including results-driven culture in post-communist special education (Thornton, 2002), silencing effects of transgenerational traumata (Timmerman, 2011), and radically different concepts of the self, with which the voice is inextricably bound (Warnock, 2011).

KEYWORDS

complex needs; voice; holding environment; playfulness; socio-cultural

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**‘This is where the magic happens’
The evolution of a unique music therapy group which
celebrates diversity, togetherness and the value of shared
music-making**

Lindsay McHale & Neil Foster

Nordoff Robbins Music Therapy

ABSTRACT

Music therapy groups have traditionally been formed according to ‘client groups’ of individuals with similar pathologies, such as ASD, SLD and so on.

This paper explores a different kind of music therapy group, informed and influenced by Community Music Therapy approaches (Stige et al., 2011). Members are diverse in age, culture and need. The group includes self-referred adults with anxiety and depression alongside people with profound physical disabilities and others with more debilitating mental health issues. This group aimed to offer an empowering and accessible music space for isolated people who would not otherwise have had the chance to make music together.

As the group evolved, it was evaluated through feedback from group members, analysis of recorded material, and through therapist reflection.

This work presented challenges to the two therapists, demanding a focus on their working relationship and raising questions about the aims of this group, the nature of the therapists’ role, and questions about inclusion and empowerment.

The group has evolved into a unique musical community, allowing people to learn from and support each other. Participants’ reported feeling valued and valuing each other; assumptions about impairment and disability became much more nuanced, as people experienced themselves and others differently in music.

KEYWORDS

music therapy; inclusion; diversity; challenges; open groups

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Stige, B., Ansdell, G., Elefant, C., & Pavlicevic, M. (2011). *Where Music Helps: Community Music therapy in Action and Reflection*. Farnham: Ashgate.

Approaches to music therapy in working with men with Duchenne Muscular Dystrophy

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Douglas House Hospice

ABSTRACT

Duchenne Muscular Dystrophy (DMD) is a life-limiting condition, affecting males, that is characterised by the progressive weakening of skeletal muscle. There is currently no cure for DMD and life expectancy in Britain is around 26 (with some men surviving into their 30s). Young men with DMD are confronted with major existential issues: the imminence of death, curtailment of freedom (reduction of agency), the experience of isolation and the problem of finding meaning in their situation. The case studies in this presentation reveal a range of stances clients may take with respect to these challenges.

A number of therapeutic techniques are examined here reflecting some of the range of concerns and capacities of clients with DMD – including, sometimes, the need to talk without necessarily ‘reaching music’.

- Songwriting can offer a vehicle for the expression of feelings and the addressing of concerns that may not easily find a voice in other ways. The form and style of a song may be of considerable cultural importance to the client.
- Improvisational approaches not only give a medium for the development of a creative/expressive relationship between client and therapist, they can also help the client regain some sense of agency (potency) – particularly through the use of tactile electronic instruments.
- In some cases clients requested that the music therapist simply play for them. ‘Receptive methods’ and, in particular, ‘empathic improvisation’ have potential for inducing relaxation and distraction from pain.

The presentation includes recordings of musical examples from sessions.

KEYWORDS

DMD; existential perspective; songwriting; electronic interface; speaking with clients

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‘Where was the music?’: music therapy practice with people living with HIV/AIDS in Rwanda

Christopher Nicholson

Musicians without Borders

ABSTRACT

“Where was the music?” the clinic’s pharmacist asked me.

I had led my new colleagues in instrumental improvisation and facilitated them in using a Boss RC-30 Loop Pedal to create a multi-layered group composition. We had passed a bodhrun drum around our circle to introduce ourselves.

It had felt like music to me.

From September 2012 I worked for 6 months on placement as a student music therapist at a clinic for people living with HIV/AIDS in Kigali, Rwanda. During my work I was asked such questions as “Where was the music?” and “Is this music?” These questions shaped my therapeutic thinking by challenging my preconceptions of music and illustrating the contextually-located nature of meaning. A model of practice was necessary that avoided predefinition and worked instead to allow meaning to emerge, thereby valuing the participants’ voices and situating music therapy in context.

The resultant model of practice was informed by two metaphors from Community Music Therapy thinking. Stige’s suggestion of music therapy as “attending to unheard voices” was powerful in working with a population that suffers social, economic and political marginalisation (Stige & Aarø, 2012). Pavlicevic’s consideration of music therapy occurring both “outside and inside” in her work in Thembaletu, South Africa, provided a conceptual framework where physical frameworks were fluid (Pavlicevic, 2004, p.42).

The presentation will explore this emerging area of music therapy practice, drawn from my past and on-going work with people living with HIV/AIDS in Rwanda.

KEYWORDS

Rwanda; HIV; AIDS; music therapy

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From pre-intentional to intentional communication: exploring speech and language therapy concepts and assessments for music therapy with children with severe, profound and multiple learning disabilities

Felicity North

Nordoff Robbins Music Therapy

ABSTRACT

The author's dual training in Music Therapy and, more recently, in speech and language therapy (SLT), led towards an inquiry into whether SLT theoretical models and assessments can offer something of value to the music therapy profession, particularly in terms of demonstrating parallels between music therapy work and education frameworks. The ensuing research project explored the usefulness of SLT concepts and assessments for music therapy with children with severe, profound and multiple learning disabilities whose communication development is progressing from the pre-intentional to intentional stage.

Music therapy work with two individuals was examined from the different perspectives of the music therapy and SLT disciplines, using music therapy micro-analytical techniques, the Nordoff-Robbins rating scales and three different SLT assessments. The potential contribution of SLT assessment and evaluation tools to music therapy practice is explored.

KEYWORDS

pre-intentional communication; profound and multiple learning disabilities; assessment; music therapy; speech and language therapy

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Identifying the value of music therapy within interdisciplinary assessment; a research project

Rebecca O'Connor & Dee Gray

National Rehabilitation Hospital (NRH)

ABSTRACT

This presentation will detail a two year music therapy research project that commenced in September 2013 at the National Rehabilitation Hospital (NRH) in Ireland with Disorder of Consciousness (DOC) patients and their families. The project has been funded by the NRH Foundation Trust to assess and identify the role of music therapy within interdisciplinary assessment.

The emphasis of this paper will be on the importance of interdisciplinary working and will be exploring the valuable role that music therapy can play when it is part of the interdisciplinary assessment process. The impact of working closely with family members in sessions with this patient population will also be discussed.

Research has identified that there is a need for a variety of different assessment tools to be used to encourage responses indicative of awareness in DOC patients (O'Kelly & Magee, 2013). The NRH research project uses the new Music Therapy Assessment Tool for Awareness in Disorders of Consciousness (MATADOC) and will be working towards identifying its benefits in enhancing the assessment of DOC adult and paediatric patients, assessing patients' levels of response, contributing to diagnosis and treatment as well as providing a response baseline and a means of monitoring change for DOC patients. The MATADOC is a scale that has been developed and validated at the Royal Hospital for Neuro-disability, London over a twenty-two year period. It is a rigorous assessment and evaluation system for qualified music therapists to use with people whose awareness is unknown due to profound brain damage.

Case studies and video examples will be used to illustrate the use of this tool in clinical practice and the role music therapy has in enhancing the interdisciplinary assessment process for the team, the patients and for patients' families.

KEYWORDS

music therapy assessment tools; acquired brain injuries; disorders of consciousness; families; interdisciplinary working

REFERENCES

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‘Upbeats’ – meeting children’s needs and managing parents’ expectations in a group for young children with ASD

Nicky O’Neill & Jessica Atkinson

Nordoff Robbins Music Therapy

ABSTRACT

A year ago two therapists at the Nordoff Robbins London Centre were challenged to provide music therapy on a Saturday to a sudden influx of young children with ASD. Having reflected on the potential benefits of different models of work – individual, group, pair, parents included, or not – they decided to create ‘Upbeats’, a structured group for parents and children together.

This presentation will explore the way in which parents and therapists worked together for the benefit of the children. The therapists conceived a clear structure for the work, presenting the group as a course. In the initial meeting, the parents were asked to share their hopes and aims for their children, and these thoughts informed the therapists’ thinking at every stage. At the same meeting, the therapists outlined the nature and scope of their work, and to what extent it might address the parents’ wishes. In this way, a clear foundation was laid for what the parents might expect from music therapy.

In addition to listening to parents, throughout the course, the therapists guided and at times taught the parents how to work with their children in the sessions, and at home, so as to support them as fully as possible. The sessions developed a clear pattern, including informal feedback being sought from parents in the waiting room and on the way into the therapy room. A communication booklet was kept by each parent with observations of the children’s musical lives during the week.

The presentation will include video extracts.

KEYWORDS

parents; ASD; transferable skills

Levels of engagement: a model for clinical practice

Pavlina Papadopoulou^{1,2}

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ABSTRACT

This presentation stems from clinical practice in low secure adult mental health rehabilitation wards. The focus is adults suffering from chronic mental ill health (such as schizophrenia) who are characterised as difficult to engage with health services. Engagement being key, clinicians have to employ a number of techniques and approaches for clients to engage.

With music playing an important part in most clients' life, the music therapist is in a unique position to offer opportunities for creative expression, communication, interaction and rebuilding interpersonal and social skills. However this is not always easy, as clients have often been debilitated by the chronic nature of their illness.

A model for clinical practice developed from this work (but also extending to other client groups with similar difficulties) will be outlined. The presentation will be enriched with examples from clinical work and practical suggestions will be offered to participants.

KEYWORDS

adult mental health rehabilitation; engagement

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Music therapy, marginality and mainstreaming: problems with getting the evidence

Sam Porter & Tracey McConnell

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ABSTRACT

With the ever growing dominance of evidence-based practice (EBP) approaches to healthcare, the contribution of allied health professions is increasingly judged by the evidentiary criteria adopted by EBP. The 'gold standard' criteria, according to this approach, are randomised controlled trials and systematic reviews of those trials. While there is a growing body of evidence attesting to the effectiveness of music therapy in relation to a whole range of health problems, the strength of that evidence, according to EBP criteria, remains weak in some areas. One of the effects of the resultant marginality of music therapy is that it is difficult to get gatekeeping clinicians to engage in research about it. This leads to the vicious cycle whereby efforts to develop a knowledge base to satisfy EBP criteria are hampered by problems of recruitment that result from clinicians' lack of engagement. In this paper, we describe the efforts of the team involved in the 'Music in Mind' (Porter et al., 2012) randomised controlled trial of music therapy for young people with behavioural and emotional problems to overcome this vicious cycle. We recount the strategies adopted to encourage child and adolescent mental health clinicians to become actively involved in music therapy research, and the recruitment rates that resulted from these strategies. It is hoped that the lessons learned by the team will be of use to those considering engaging in music therapy research.

KEYWORDS

evidence-based practice; Music in Mind; randomised controlled trial; research; recruitment

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Lest we believe the stories we tell: insights from ethnographic examination of music therapy practice

Simon Procter

Nordoff Robbins Music Therapy

ABSTRACT

Music therapy in the UK has developed a strong set of rhetorics, or stories, for public consumption, often claiming resemblance to more dominant professions. These stories can be important in building public awareness of music therapy, in making it more available and even in helping music therapists to have something coherent to say – and think – about what they do.

As a profession committed to reflective practice, however, we need to be wary of believing our own stories, particularly if this diverts our attention from the moment-by-moment realities of music-therapeutic practice.

One way of addressing this is to examine the effectiveness of practice using the RCT's focus on symptomological outcome: another, contrasting, approach is to make use of ethnography's unswerving examination of social reality in considering what really happens under the banner of 'music therapy'. In particular it offers an opportunity to consider how everyday life gets moulded by music therapy – and, crucially, vice versa – as well as learning about indigenous value systems which get applied to music therapy locally rather than top-down notions of 'evidence of effectiveness'. This demands a recognition of music therapy as situated social engagement and of 'clients' as our fellow actors: something that may sit uncomfortably with some of the medical-model assumptions of the HCPC and music therapy's claims to clinical orthodoxy.

The presentation will be illustrated with examples from a recent ethnographic investigation of music therapy in a community mental health setting.

KEYWORDS

ethnography; everyday life perspective; music sociology; music therapy research

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‘Do you hear the people sing?’

A research project investigating the responses from patients and staff in a medium secure forensic unit following their participation in a series of choral experiences

James Robertson

Queen Margaret University

ABSTRACT

Music therapy is well-established in this particular unit and referrals are made on a regular basis. Yet a dilemma would appear to exist; while this unit is considered to be a clinic, recent developments in music therapy suggest the need for a less clinical and more community-oriented approach to be adopted (Pavlicevic & Ansdell, 2004).

This presentation will consider the health benefits that may be perceived by patients within a medium secure forensic setting when singing in a choir alongside members of staff. The study will also explore how relationships between staff and patients might be enhanced through participation in choir rehearsals.

Within a broad framework of Community Music Therapy, the project seeks to encourage participants to take ownership of the choir in terms of repertoire and the format of rehearsals within a six-month period. The role of the researcher as music therapist is to sensitively administer this negotiation and to musically support the subsequent choices and decisions.

The design of the study comprises three distinct yet complementary methods: participatory action research (PAR), focus group discussion and a written sentence completion test. By adopting the stance of a participant observer or “data-gathering instrument” (Ansdell & Pavlicevic, 2001, p.136), the researcher has the opportunity to engage first-hand with the participants; requiring the researcher not only to *watch* but to *work with* the patients and staff in this setting.

The presentation will feature selected audio extracts.

KEYWORDS

forensic; choir; Community Music Therapy

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Rising to the challenge: a flexible approach to working in mainstream schools

Ergina Sampathianaki^{1,2}

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ABSTRACT

This presentation will explore setting up a music therapy service in both primary and secondary schools. The work was commissioned from the music therapy service, Oxleas NHS Foundation Trust. I will reflect on the journey towards forming and establishing a safe and consistent therapeutic space within the schools, whilst bearing in mind the particular needs of each setting.

Specifically, developing the music therapy service within a multi-cultural primary school that is experiencing many changes, will be compared to developing the music therapy service within a well-structured and academically focused Catholic secondary school for girls. Aspects such as the two age groups, clinical sensitivity, confidentiality and liaising with parents, members of staff and other professionals, will be discussed within the context of adapting an established model of service delivery, whilst keeping in mind the needs of the institution as well as the needs of the students.

The initial contract was for one year and included evaluation. At the end of the academic year the funding was renewed and the services were renewed for another year.

The presentation will include audio material from clinical work to enhance illustration and discussion.

KEYWORDS

mainstream; primary; secondary; multi-cultural; Catholic

REFERENCES

Tomlinson, J., Derrington, P., & Oldfield, A. (Eds.). (2011). *Music Therapy in Schools: Working with Children of All Ages in Mainstream and Special Education*. London: Jessica Kingsley.

Exploring the experiences of music therapists who have worked without harmonic instruments in an UK adult mental health setting. How frequently does this occur and how is this thought about?

Cerrita Smith

Central and North West London NHS foundation Trust

ABSTRACT

Current trends in music therapy literature within adult mental health are based on identifying and evaluating outcome and effectiveness (Ansdell & Meehan, 2010; Daveson & Edwards, 2001; Gold et al., 2006; Maratos, 2009). However, within this setting there is a paucity of specific empirical studies considering the use of harmonic instruments by the therapist. This project sought to explore the experiences of UK based music therapists who have worked without a harmonic instrument in an adult mental health setting. It further considered the frequency of this experience and how it is thought about by therapists.

The research used a concurrent mixed methods design to explore this subject area. Quantitative methods involved a questionnaire to establish the frequency of the experience amongst UK based therapists. Qualitative methods involved semi-structured interviews with three music therapists to explore and gain an understanding of their experiences of working without a harmonic instrument within this setting.

The research found that music therapists across a range of mental health settings frequently had the experience of working without a harmonic instrument. It also explored therapists' diverse experiences and approaches to working without harmonic instruments. Themes were identified from interview which found that theoretical approaches, transference and countertransference dynamics were factors in the music therapists' understanding of the experience.

As this project was an initial exploration into the experiences of music therapists who had worked without a harmonic instrument in this setting, further research into this subject area would be needed.

KEYWORDS

music therapy; harmonic instruments; adult mental health; countertransference; transference

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Music therapy and music therapists in palliative and bereavement care

Hannah Smith

Music Therapy Lambeth

ABSTRACT

The use of music and therapy within Palliative and Bereavement Care (PBC) settings is increasing, though the roles of creativity and therapy through music can become blurred. The World Health Organisation's (WHO, 1990 cited in Aldridge, 2004, p.97) recommendations for cancer pain relief and palliative care can all be addressed by music therapy.

The research project establishes current working practice and professional identities of music therapists in PBC settings, what defines their work, and how their role is negotiated with other staff using music, and communicated to staff and service users. The researcher proposes that psychotherapeutic training is still relevant to working with service users in PBC, supporting the role of music therapists working in such settings.

The research used a multiple methods design with two stages. Stage 1 involved a questionnaire to establish demographic features of music therapists working in PBC settings and their professional identities. Stage 2 involved semi-structured phone interviews with music therapists and non-music therapists across three settings to gain further understanding of their current role and perceived role of other staff using music.

The paper concludes that psychotherapeutic training is still relevant for music therapists in PBC settings, and for the roles' existence within PBC, though their role encompasses numerous aspects beyond clinical sessions. Themes identified at interview define music therapy and support all the WHO recommendations, providing further evidence for the role of therapeutic practice in PBC settings.

KEYWORDS

palliative care; professional identity; audit

REFERENCES

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What does the past tell us? A content analysis of the first quarter century of the British Journal of Music Therapy

Neta Spiro¹, Giorgos Tsiris^{1,2} & Mercédès Pavlicevic¹

¹ Nordoff Robbins Music Therapy, ² St Christopher's Hospice

ABSTRACT

Professional journals have a legitimating and sanctioning role in the development of disciplinary knowledge, as well as professional practices and identities (Edwards, 2005; Schneider, 1968; Tsiris & Procter, 2009). The British Journal of Music Therapy (BJMT) – being the mouthpiece of the music therapy profession in the United Kingdom – has portrayed research, theory and accounts of practices, reflecting trends and developments in the field of music therapy since 1987.

Marking the 25th anniversary of the BJMT and looking towards its future development, this study aims to (i) trace trends and developments of music therapy praxes and professional identities through a contents analysis of the BJMT since its inception (1987-2011), and (ii) explore the BJMT's engagement with disciplinary and theoretical discourses and practices that are occurring alongside and beyond those of music therapy. A content analysis of the BJMT was conducted using thematic analysis and descriptive statistics.

The findings provide an overview of the BJMT in terms of paper types, authorship, practice / research sites, samples, formats of practices, as well as models and themes. This mapping of the BJMT helps to consider what the journal's past tells us. It also helps to consider how new practices and knowledge are refracted, embraced, restrained, and perhaps resisted, while it brings to the forefront some burning questions for the future development of music therapy as profession and discipline.

KEYWORDS

British Journal of Music Therapy; content analysis; peer-reviewed journal; profile

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Thinking in training supervision: where might the potential for transformation be located?

Catherine Warner

University of the West of England

ABSTRACT

Music therapy students, particularly when engaged early on in training placements, may experience particular concerns about both the nature of the musical connections and the modes of participation of the people they are working with as clients. This is particularly the case when the participation is experienced as extremely unconventional, resistant or non-existent.

With the help of some seemingly quite disparate thinking from anthropology and object relations theory the presenter shares and discusses an approach she is finding increasingly relevant. By asking the question 'where is the transformational potential located right now? Is it within the musical form, with the instrument as object, within the therapeutic alliance, the group itself or a synergy of some of these?' the student's strategies can become more focussed and their outlook more hopeful.

On one level this question is quite obvious and answering it with growing confidence can be helped by a number of approaches. In this particular discussion the first approach involves an exploration of the idea of transformational object (Bollas, 1979) and how it is understood in music therapy; and the second involves reflexively and critically engaging with notions of participation and transformation.

This question will be illuminated by brief examples (with permissions) from contemporary training supervision, and the presenter's shared clinical practice in community-based mental health groups and groups with people with profound learning disabilities.

KEYWORDS

training; supervision; transformational object; participation

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Group work in special schools: a look at the benefits of two contrasting forms of group work in a school for children and young people with severe learning disabilities and autism

Tina Warnock^{1,2,3}

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ABSTRACT

This paper will look at how a long and a short term music therapy group have contributed to a school's cultural experience. A long term group with young people on the autistic spectrum gave the members a unique platform for non-verbal self-expression and a musical 'thread' which fostered links between them over several years of their school life. A term-long group which rotated around the school provided each class group with an experience of music therapy, facilitated staff understanding of the music therapist's work and helped to identify potential referrals for 1:1 work.

The author will examine the quality of experience that these two groups provided in terms of the therapeutic processes for the children, relationships between children and staff and a sense of integration for the therapist into school life.

KEYWORDS

groupwork; severe learning disability; autism; music therapy; integration

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The musical expression of physical and emotional pain in acquired brain injury

Catherine Watkins

Freelance Music Therapist

ABSTRACT

This case study describes music therapy with a young woman with an acquired brain injury resulting from a road accident. Sarah was two years post-trauma experiencing dysarthria, severe short-term memory loss and frequent, acute, poorly controlled head pain in addition to the physical consequences of her accident. The clinical work was conducted at a private neuro-rehabilitation unit, over a period of twenty-four weeks, as part of a final year training placement.

Significant moments of expression of physical and emotional pain through improvised music and two contrasting therapeutic songwriting approaches are explored through humanistic and psychodynamically-informed perspectives. The role of music therapy in broadening the knowledge of the multi-disciplinary team and the resulting professional dilemmas are discussed.

The author provides both academic and personal reflections on the work, drawing on her previous background of quantitative clinical research in the pharmaceutical industry.

KEYWORDS

music therapy; brain injury; pain; songwriting

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Being a maternity cover music therapist: meaning, experience and process

Grace Watts

Grangewood School, Eden Academy

ABSTRACT

Although four in five of UK music therapists are women, little has been written about the role of the maternity cover music therapist. Given the young age profile of many music therapists, maternity cover posts are often one of the main routes that recently qualified trainees take to enter the profession. However, what are the specific challenges that face recently qualified music therapists when they take up maternity leave posts?

This presentation will draw upon the experiences of a relatively newly qualified therapist who has covered three maternity cover posts all within special educational needs schools. It will focus on the experience of that role for the client, therapist and the host institution; the particular dynamics that exist around the role; and how these experiences and clinical material can be thought about in the context of psychoanalytic / psychodynamic theory.

This presentation will explore possible reasons why the widespread presence of maternity cover in music therapy has yet to be studied. It will conclude by examining the importance of acknowledging and working with issues of gender, sexuality and cultural diversity within the context of a special school and learning disability more generally.

KEYWORDS

maternity cover; pregnancy; music therapy, learning disability; special needs education

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Learning from experience: the use of musical role play in developing music therapy skills

Donald Wetherick

Guildhall School of Music and Drama

ABSTRACT

The author's experience of teaching on music therapy trainings over more than 10 years suggests that musical role play can be an invaluable form of experiential learning (Kolb, 1984). It can also be unpredictable!

Role play is used in many fields of teaching and learning (van Ments, 1999), including music therapy (see e.g. Gardstrom, 2007; Wigram, 2004). However, there is little published discussion on managing the process of role play in music therapy training, or on the application of role play to specifically musical, or music-therapeutic, learning objectives.

This paper presents examples of role play exercises used in the author's teaching and reflects on these in relation to theory, practice and student feedback. It is argued that, when well managed, role plays can be a vital tool for teaching and learning in music therapy at preparatory, intermediate, and advanced levels of learning.

KEYWORDS

music therapy; training; experiential learning; role play

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Researching the Chelsea Community Music Therapy project: key findings

Sarah Wilson¹ & Gary Ansdell²

¹ SMART ² Nordoff Robbins Music Therapy

ABSTRACT

This presentation will report the key findings from a pioneering practical and research project that won the 2008 Arts & Health Award of the Royal Society for Public Health. The music project has been running since 2006 and aims to form a musical bridge between an NHS hospital facility and 'SMART' - an adjacent community centre for people living with mental health issues. The Project helps patients create 'musical pathways' between the hospital and SMART, providing an open music group in the SMART café, a singing group, and supporting the 'SMART Band'.

The research arm of the project is a longitudinal ethnographic study that has traced both the 'musical pathways' of the various groups and of particular individuals. This study is in association with Nordoff Robbins Research Department and Prof Tia DeNora of Exeter University. The results of the study will be published in the forthcoming volume *Musical Pathways for Mental Health* (Ansdell & DeNora, in preparation).

This work and study is one of the longest sustained practical and research projects of its kind. Its outcomes and lessons are congruent with the latest policy directions of UK mental health strategy in relation to supporting mental wellbeing and ensuring social and cultural engagement in mainstream society. Outcomes show how professional support from a music therapist working to a Community Music Therapy model can enable musical pathways to be laid and developed by individuals and musical groups in ways that prove beneficial towards both maintaining ongoing mental wellbeing and to fostering social pathways into the community.

KEYWORDS

Community Music Therapy; mental health; research; ethnographic longitudinal study

REFERENCES

Ansdell, G., & DeNora, T. (in preparation). *Musical Pathways for Mental Health*. Farnham: Ashgate.

WORKSHOPS

[in alphabetical order]

One Voice: introducing a community singing group for adults with acquired brain injury

Lorna Bickley, Katy Bennett & members of 'One Voice'

One Voice

ABSTRACT

One Voice is a user-led community singing group for adults with acquired brain injury based in Birmingham. All of the singers in One Voice have experienced either a stroke or a traumatic brain injury and have a range of symptoms, which include physical, cognitive, social or emotional difficulties, as well as problems with memory, concentration, fatigue, and speech and language. Our work builds on research that suggests singing has significant long-term benefits for adults with acquired brain injury, including decreased feelings of sadness, fear, confusion and fatigue (Baker & Wigram, 2004). Our work also reflects findings that singing can dramatically increase recall and pronunciation of words for adults with aphasia (Racette, Bard & Peretz, 2006). Self-report data has demonstrated that the impact on participants who have sung with the group for over a year was considerable, with reported benefits concurring with existing anecdotal and clinical evidence. One Voice singers report improvements in confidence, mood, movement, memory, breathing and speech.

The session will bring together our group leaders (community musician Lorna Bickley and music therapist Katy Bennett) and members of One Voice. The workshop will include a presentation of our findings, a participatory session that will demonstrate our methods, and contributions from members of the singing group. The session will conclude with an opportunity for delegates to pose questions and hear different perspectives from our community musician, music therapist and participants.

KEYWORDS

acquired brain injury; singing; community music

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Vocal workshop

Phoene Cave

Freelance Music Therapist

ABSTRACT

This workshop will be a practical, fast-paced and enjoyable forty-five minutes of activity to add to a vocal toolkit. There will also be time for relaxation and body awareness exercises, along with body percussion, group singing, vocal improvisation and q&a.

Using a unique combination of resources and experience drawn from fifteen years as a skilled contemporary vocal coach, music therapist and CNHC registered Shiatsu practitioner, the workshop leader will respond to the needs of the participants who attend regarding supporting their own voice use and that of their clients.

This might include questions regarding individual voice based therapy with an adult, small group work with children (mainstream and SEND) as well as 'crossover' work running larger groups and choirs in a Singing for Health setting.

The workshop leader was, until March 2013, the head of music services for London at Nordoff Robbins where she also ran vocal groups for MMT students and now continues to run the Nordoff Robbins Community Choir, as well as 'Singing for Breathing' groups for patients with chronic lung disease at the Royal Brompton and Whittington hospitals in London, numerous group, community choir, training and individual sessions with participants young and old from diverse walks of life, as well as ongoing Music and Wellbeing workshops at Imperial College, London for medical students, plus training for early years practitioners and primary school teachers in facilitating child led singing and music making. She also works one day a week as a music therapist in a high security female prison.

KEYWORDS

vocal health and wellbeing; improvisation; vocal qualities; body percussion; vocal games

How to evaluate music therapy services: a 'hands-on' workshop

Camilla Farrant¹, Giorgos Tsiris^{1,2} & Mercédès Pavlicevic¹

¹ Nordoff Robbins Music Therapy, ² St Christopher's Hospice

ABSTRACT

Evaluation is essential for the development and sustainability of music therapy services. The contemporary emphasis on proving 'efficacy' and 'evidence-based' practices, however, often imposes paradigms that do not fit the distinctive nature of arts therapy practices (DeNora, 2006; Raw, Lewis, Russell & Macnaughton, 2012; Wigram & Gold, 2012). Practitioners' proactive and critical engagement in evaluating their own services is crucial in order to develop evaluation projects that are appropriate for the intricacies of music therapy practice.

This 'hand-on' workshop will provide foundational frameworks for designing, planning and implementing bespoke evaluation protocols. Drawing from their substantial experience of running evaluation projects and their recent publication (Tsiris, Pavlicevic & Farrant, 2014), the presenters will share ideas with regard to how practitioners can integrate thorough monitoring and evaluation procedures as part of their everyday practice. A range of practical examples and suggestions will be offered for developing appropriate timelines and data collection tools; ensuring organisational diplomacy while considering the profile of workplaces, client groups, and sectors.

KEYWORDS

evaluation; monitoring; music therapy services; practitioner

REFERENCES

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- Raw, A., Lewis, S., Russell, A., & Macnaughton, J. (2012). A hole in the heart: Confronting the drive for evidence-based impact research in arts and health. *Arts & Health*, 4(2), 97-108.
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‘Songs from a window’ Innovation in therapeutic songwriting

Bob Heath¹ & Jane Lings²

¹ Sir Michael Sobell House, Churchill Hospital, ² St Peter’s Hospice

ABSTRACT

The use of creative songwriting can be a powerful therapeutic tool; enabling clients to engage with processes at a deeply reflective level while at the same time offering opportunities to examine experiences and feelings in new and often revealing ways.

This workshop explores a specific approach to therapeutic songwriting, which has been developed by the workshop leaders in their own practice and teaching over the last decade. It combines well-established music therapy techniques with a range of supplementary approaches drawn from areas such as creative writing to form a robust psychotherapeutic intervention.

‘Songs From A Window’ is an experiential workshop in which delegates will be given the opportunity to develop a range of skills that underpin a therapeutic approach which can be integrated into their own practice.

KEYWORDS

therapeutic songwriting; creative writing

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Calling all orchestral music therapists... An exploration of how music therapists use their own instruments in their clinical practice

Dawn Loombe¹ & Amelia Oldfield²

¹ Addenbrooke's Hospital, ² Anglia Ruskin University

ABSTRACT

Most music therapists in the UK predominantly use the keyboard, their voice (with or without guitar accompaniment) and percussion in their sessions. In this workshop we will explore how, why and when music therapists use other instruments they are proficient at, such as the accordion, the clarinet, the harp, the violin and the bassoon. We will invite up to fifteen active participants to bring their instrument to the workshop, and share and explore key moments when the timbre, physical shape and / or special characteristics of this instrument has played an important role in the therapeutic process. The workshop will also be open to other observing participants.

Accordionist, Dawn Loombe and Clarinetist, Amelia Oldfield are both enthusiastic about using their instruments in their music therapy practice and have been doing so for many years. They are currently editing a book with Jo Tomlinson on the use of orchestral instruments in music therapy, to be published by Jessica Kingsley.

KEYWORDS

orchestral instruments; accordion

Using the East Kent Outcomes System (EKOS) in music therapy

Rhian Saville

Nottinghamshire Healthcare NHS Trust

ABSTRACT

As clinicians there is an expectation that we provide good treatment and care, reflect on our work and demonstrate evidence based practice. We are under increasing pressure to 'perform', hit targets and prove that we are good value for money for managers and commissioners. We therefore need to be able to measure what we are achieving in our work through outcomes and communicate the results in clear, meaningful ways.

This workshop will introduce the East Kent Outcomes System (EKOS) tool as a means of measuring the clinical effectiveness of music therapy. Participants will have a chance to explore how therapeutic aims and objectives can be measured in assessment and treatment models of care. We will spend time together having a go at using the EKOS tool. Case studies will be based on examples from adults in Learning Disability services although the tool is transferrable across all client groups.

Numbers will be limited due to the interactive nature of the workshop.

KEYWORDS

outcome measures; service evaluation; clinical effectiveness; assessment and treatment

REFERENCES

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- Department of Health (2012). *The NHS Outcomes Framework 2012/13*. London: DOH.
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- National Institute for Mental Health in England (2008). *Mental Health Outcomes Compendium*. London: DOH.

Experiential group

Ann Sloboda & Jean-Christophe Larkin

Guildhall School of Music and Drama

ABSTRACT

This one-hour session offers a space where primarily people can come to play music in a group, providing a balance to the clinical, professional and social discussion taking place during the weekend. It also offers a space for each individual to reflect on their experience at the conference as a gathering of music therapists, their place in the group, and the wider group of conference participants, and the profession.

The session will be open to up to twenty-five participants. This will of course be much larger than the average music therapy group.

In order to help facilitate the group in playing together the session will begin with a couple of structured workshop-type musical activities, followed by a period of free improvisation generated by the group members. This will be followed by a period of 'improvised' discussion, and potentially further musical activity.

The discussion will provide an opportunity to think about musical improvisation and how that might relate to verbal communication: for example, what themes emerge from a free floating discussion that may mirror aspects of the musical activity. A range of instruments will be available but people are warmly encouraged to bring their own instruments if they can.

KEYWORDS

group; workshop; discussion

Spirituality in music therapy: dilemmas, problems and actions

Giorgos Tsiris^{1,2}

¹ Nordoff Robbins Music Therapy, ² St Christopher's Hospice

ABSTRACT

Spirituality is often perceived as a taboo and controversial subject which interferes with music therapy's recognition as an evidence-based profession. Only a limited number of empirical studies on spirituality and music therapy have been published to date (e.g. Elwafi, 2011; Magill, 2007; Marom, 2004; Potvin, 2013), while music therapists have limited training opportunities and forums regarding the role of spirituality in their practice.

Structured in two parts, this workshop explores spirituality's (ir)relevance to music therapy with emphasis on professionalisation issues. The findings of a recent international survey (Tsiris, 2013) will be outlined in the first part of the workshop. Drawing from the responses of 358 qualified and student music therapists (22.4% British), various problems, dilemmas and suggestions for action emerge in relation to spirituality and professionalisation, including issues with regard to training, supervision, ethics and research in music therapy.

Based on these emerging problems, dilemmas and suggestions for action, the second part of the workshop will offer opportunities for small and large group discussions. Opening up the dialogue about spirituality in music therapy, workshop participants will be invited to reflect on the relevance of the survey's findings (Tsiris, 2013) to their own professional experiences, and share other dilemmas or problems they may face. Also, participants will be invited to identify suggestions for action which may inform future professional, educational and research initiatives in relation to spirituality's role in music therapy as a modern healthcare profession and discipline.

KEYWORDS

spirituality; music therapy; professionalisation; problems; actions

REFERENCES

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Coming and going: exploring ambivalence through music and movement

Diana Whelan^{1,2,3} & Céline Butté^{1,4}

¹ London Borough of Merton, ² Roehampton University,
³ Surrey and Borders Partnership NHS Foundation Trust, ⁴ Goldsmiths University

ABSTRACT

This workshop is based on a piece of collaborative group work and research project undertaken by a music therapist and a dance movement psychotherapist and three volunteers with differing experiences of arts therapies practice.

The workshop will explore aspects of the collaborative process which used music and movement to enter into experiences of 'coming and going' with adults across the learning disabilities spectrum who have shown ambivalence towards engaging in and sustaining relationships. Themes of 'counterpoint' and 'counterbalance' emerged prominently in this work, as the therapy team sought to engage with the dynamics of ambivalence and explore and extend musical and embodied ways of being and relating. The workshop will also make use of a debriefing model introduced to reflect on the clinical process and draw out perceptions of significant events within the work.

The workshop will start with a brief description of aspects of the clinical work and of the ongoing research component which aims to investigate how we as practitioners from differing backgrounds identify both individually and collectively what we consider to be significant or meaningful within these clinical encounters. Participants will then be invited to explore perspectives on ambivalence through their own music and movement process followed by engaging in a debriefing process similar to that used in the project.

KEYWORDS

collaboration; music therapy; dance movement psychotherapy; ambivalence; learning disabilities

POSTERS

[in alphabetical order]

The evolution of an evaluation: from fulfilling funding criteria to revealing a clearer vision for music therapy in a special needs school

Claire Cartwright

Nordoff-Robbins Music Therapy in Scotland

ABSTRACT

Music therapy in the 21st century continues to grow and prosper. However, funding is as ever an integral factor in the establishment and continuation of music therapy services. This presentation will address how the music therapist sought to address two aspects funders increasingly seek: (1) evidence of the quality of the service, and (2) fulfilling their funding criteria.

This presentation will detail an evaluation of the music therapy service in a school for children with sensory impairments and complex needs. The aim of the evaluation was to assess the impact of music therapy for the pupils and the school as a whole and to ensure the quality of the service. The presentation will outline the evaluation process and detail the findings using data collected from staff and parent questionnaires with the support of video clips.

In addition, the process of meeting the criteria for funding will also be discussed. The presentation will conclude with how the positive findings of the evaluation and the consideration of how the service fits funding criteria, culminated in a clearer vision of the role of music therapy in the school. It also outlines the resulting concept of a continuum of music provision, enabling the full potential of the music therapy service and of the pupils to be achieved.

KEYWORDS

music therapy; evaluation; funding; sensory impairment; complex needs

‘Soundtracks’; a song-writing project for teenagers, patients and carers at St Christopher’s Hospice

Tamsin Dives¹, Gerry Prince^{1,2}, Marion Tasker¹ & Giorgos Tsiris^{1,2}

¹ St Christopher’s Hospice, ² Nordoff Robbins Music Therapy

ABSTRACT

St Christopher’s Hospice takes seriously its responsibility for public death education and health promotion. It encourages community groups into the hospice building with the aim of working alongside service-users to promote healthier responses to death and dying (Hartley, 2011; Tsiris et al., 2011). Music is a valuable way of managing this. One dynamic example is ‘Soundtracks’; a song-writing project facilitated by a music therapist onsite.

A group of teenagers from the Brit School for Performing Arts and Technology visit the hospice for an eight-week period on a yearly basis. Students form partnerships with service-users and they write, perform and record songs together. The project ends with a public celebration. The songs are performed to family and friends, and recordings are made for everyone involved.

This experience is valuable for both patients and students. For the students, it brings them into a palliative care environment in a non-threatening way, offering them opportunities to work alongside and connect with people who have terminal illnesses. It stretches them creatively and develops their emotional literacy, encouraging them to work with powerful feelings and mould them into different musical genres in new ways. Many patients and carers become socially and emotionally isolated through dealing with terminal illness. They often relish the chance to engage with younger people, to tell their story, to have it witnessed and captured.

This presentation explores how this process can be managed and enhanced by the music therapist illustrated with some powerful and courageous examples of the work produced.

KEYWORDS

song-writing; death education; health promotion; St Christopher’s Hospice

REFERENCES

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The 'Music and Ability' project – the story so far...

Kate Fawcett^{1,2,3} & Claire Marshall^{3,4}

¹ UWE Bristol, ² BCU Birmingham Conservatoire, ³ CBSO, ⁴ Changing Cultures

ABSTRACT

In early 2013, the City of Birmingham Symphony Orchestra piloted a new approach to its longstanding outreach work in schools for children with special educational needs. A movement/theatre practitioner specialising in Learning Disability work and a music therapy trainee formed a project team with two CBSO players, encouraging a more reflective and reflexive practice. Informed in part by insights drawn from music therapy, the underlying aim was to explore ways of generating a genuinely participant-led, organic musical experience for the teenagers involved, all of whom had profound and multiple learning disabilities. One of the core issues to emerge in this work was the inherent tension between process and product and the influence this can have on the shape and momentum of a short-term creative intervention. This project is now being extended and expanded; we are keen to share our journey as we look towards the future of 'Music and Ability'.

KEYWORDS

City of Birmingham Symphony Orchestra; profound and multiple learning disabilities; movement/theatre; music therapy; reflexive practice

Music as Therapy International in Rwanda

Nicky Haire

Music as Therapy International

ABSTRACT

A skill-sharing project with local care staff in rural south-west Rwanda was run in 2010 through Music as Therapy International with further support visits in 2011 and 2013. Music as Therapy International is a UK based charity which specialises in making some of the benefits of music therapy available in places where it is not an established form of intervention. They focus on sharing skills with local staff and empowering them sufficiently to run their own music programmes in the long term, with sustainability being a key factor.

This poster presents an overview of the work initiated by Helen Leith, the founder of this project, and the charity's vision for the future of the Rwanda Project.

KEYWORDS

Music as Therapy International; Rwanda; skill-sharing; sustainability; vision

The World Federation of Music Therapy (WFMT)

Angela Harrison^{1,2}

¹ North Yorkshire Music Therapy Centre, ² WFMT Council

ABSTRACT

Since the formation of the World Federation of Music Therapy (WFMT) in 1985, UK music therapists have played a key role in its activities and development. Starting with a small nucleus of Council members, the organisation has grown and now has an international team of Officers, Commissioners and Regional Liaisons working to further the profession.

Currently in the process of producing a Strategic Plan, the WFMT is active in engaging the membership in dialogue to find out what music therapists need from, and can contribute to this international organisation. Music Therapy is well established in some countries and yet remains without government recognition in others. The WFMT aims to bring together experience and expertise to ensure that around the world, people in need can gain access to music therapy services.

The World Congress of Music Therapy, held every three years is an excellent opportunity to meet up with students and practitioners from around the world and to hear about innovative developments in practice, training and research. The next World Congress is in July 2014 in Vienna/Krems, Austria.

Members of BAMT may be unaware of their membership of the WFMT, as well as of the European Music Therapy Confederation. This poster will bring to their attention the numerous strands of work being undertaken by the WFMT Council, the resources available through the WFMT website (www.wfmt.info) and the opportunities for UK therapists to become actively involved.

KEYWORDS

international connections; music therapy promotion

REFERENCES

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Dyadic pitch relationship – a hidden bond: a quantitative study of the pitch gap between therapist and client in co-improvisation, with thoughts on its relevance to the implicit change process as manifested in the music, and to psychodynamic factors in the relationship

Deborah Henderson

Guidepost's Trust

ABSTRACT

This study looks at how the pitch relationship between client and therapist may be analysed in fine detail. Working from a single brief recorded extract from a co-created improvisation, a method is developed for tracking this relationship.

This method involves quantitative analysis of the pitch gaps, based on measuring these at five-second intervals using pitch-class. The result is plotted onto a graphic scale.

The results highlight interesting possibilities for 'hidden' relationships in the music. These include a possible regular cyclical ebb and flow in the absolute pitch gap between the two participants; features of the wave contours from peak to trough which emerge; and a look back at how other musical features may relate to these.

Consideration is given as to whether and how the patterns emerging from this analysis might be related to possible psychodynamic factors, to mother-infant interaction patterns and to Stern's present moment and vitality contours.

KEYWORDS

music analysis; pitch relation

REFERENCES

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More from music: developing music rehabilitation resources for cochlear implant users

Sarah Hodkinson

University of Southampton

ABSTRACT

An interface between music therapy and music in health, this research involves a music therapist, contributing towards the development of music rehabilitation workshops and software for adult cochlear implant (CI) users.

Once an individual is implanted with a CI, the process of (re)habilitation is comprehensive, involving a wide team of professionals inputting at various stages. Music can often be a stumbling block. A CI processes sounds and stimulates auditory nerve fibres directly by producing pulses of electrical current from a very small number of electrodes. CI users typically experience difficulty with aspects of music such as: pitch recognition; following melodic contour; dynamic range.

However CI users express a desire to hear music again and there is a growing acknowledgement of the significance of music for wellbeing and quality of life. The few studies that have investigated the therapeutic value of music listening exercises, suggest that training is beneficial in helping CI users to perceive and enjoy music. Yet resources are limited.

In this participatory design research, CI users were consulted through a series of focus groups and music workshops, evaluated using quantitative and qualitative methods (Oliver et al., 2012; van Besouw et al., 2013). Twenty-one adult CI users were subsequently recruited to take part in a 24-week randomised controlled crossover trial to evaluate prototype software. This presentation looks at interactive music activities used in workshops and software, that CI users have reported to find valuable and therapeutic.

Acknowledgements: Supported by AHRC grants AH/H039392/1 and AH/K002880/1.

KEYWORDS

cochlear; implant; rehabilitation

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Sharing music therapy skills and knowledge with other professionals

Jasenka Horvat

Nordoff Robbins Music Therapy

ABSTRACT

A couple of years ago I was invited to deliver a three-day introductory seminar on music therapy to a group of seventy-five music teachers in Croatia. The purpose of this seminar was to give the teachers a general introduction to music therapy, both theoretically and experientially, with a view to them possibly being able to incorporate some of the insights they gained into their own practice.

This was a very valuable experience for me and made me think more about our role in disseminating the principles of music therapy to other professionals, the way we do this and our unique skills that are useful and potentially transferable to other professionals. In this presentation I wish to address these questions through exploring the theoretical and experiential content of this seminar in some detail and reflecting on what I have learned from my experience in Croatia. This presentation will also offer some practical suggestions for organising and delivering similar cross-professional seminars.

KEYWORDS

music therapy training; cross-professional skills sharing

‘S wonderful! ‘S marvellous! You should care for me’: music therapy’s impact on caring for people with symptoms of dementia

Ming Hung Hsu^{1,2}, Rosamund Pendry¹ & Helen Odell-Miller²

¹ Methodist Homes (MHA), ² Anglia Ruskin University

ABSTRACT

Introduction: BPSD (Behavioural and Psychological Symptoms of Dementia) have been reported to affect approximately 80% of people with dementia living in care homes (Zuidema et al., 2007). This compromises care home residents’ quality of life and increases carers’ stress in daily practice. Previous research has indicated music therapy supports the reduction of BPSD (Livingston et al., 2005); however, little knowledge has been generated into how sessions work (McDermott et al., 2012), and their impact on carers’ practice.

Aims: This PhD study seeks to investigate: (1) the effectiveness of active individual music therapy in minimising residents’ BPSD; (2) the key elements of music therapy that reduce BPSD; (3) whether the music therapy programme promotes carers’ attentiveness to residents’ needs and abilities in managing residents’ BPSD.

Methods: The study is a cluster randomised controlled trial conducted by Methodist Homes, a national care service provider. Participants comprised sixteen residents and ten staff across two dementia care homes, randomised to the control (standard care) or intervention group. The intervention group received weekly individual music therapy for five months, and staff participants received weekly presentations using video-clips, to demonstrate how symptoms are reduced. Quantitative data was collected using Dementia Care Mapping, Neuropsychiatric Inventory and psycho-physiological data. Qualitative data was collected using semi-structured interviews with staff, and video analysis of sessions.

Results: Initial analysis has indicated a reduction in residents’ BPSD due to changes in arousal, and an increase in staff’s effectiveness in managing residents’ symptoms.

KEYWORDS

music therapy; dementia; BPSD

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What can I do in a community? Exploring 'continuity' in community-based work with children and their families

Okiko Ishihara-Yamaguchi

Little Friends, A Community Group

ABSTRACT

This presentation focuses on ways to foster 'continuity' in community-based work through music-making with children between five and eighteen years old having learning disabilities. When working with children as a music therapist, the fundamentally important context is their family and their carers.

This background of a music group was set up in sequences of a holiday in a small community for children and their parents. This community is one that parents themselves have built up for their children. The community becomes their own place and is considered a safe environment for them. This is sometimes very important for getting information on caring children and for connecting with others, and could be a major support for both children and their parents. My question is "what can I do in this context?"

This work is 'back to basics' (Drake, 2008), which involves secure attachment and framework, and is focused on musical interaction and expression in improvisation, and engagement with the family. This would be influential to the dynamics of this community. Here, I would like to explore ways to ensure stable continuation and a trusting relationship that could make a safe environment, presenting an analysis of interviews from mothers and a case of an autistic boy. Thinking of these may also be evaluated to understanding significance of continuation of a music therapy.

KEYWORDS

music therapy; children and family; community; continuation

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Evaluating groups for people with dementia

Ruth Melhuish & Sachiko Tadokoro

Camden and Islington NHS Foundation Trust and East London NHS Foundation Trust

ABSTRACT

This paper will present an approach to evaluating music therapy groups piloted on an NHS assessment ward for people with dementia, and will illustrate its further application in reporting on outcomes of a pilot project in two dementia care settings in Tower Hamlets. This project was designed to support the development of the evidence base for music therapy as a non-pharmacological intervention in care homes and day centres, with a particular focus on managing behavioural symptoms for those with dementia and on increasing staff knowledge and skills in supporting music therapy interventions. Challenges encountered and potential for further development of the evaluation method will also be discussed.

KEYWORDS

evaluation; dementia; non-pharmacological interventions; NHS

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Music as Therapy International: introducing music therapy to new communities

Alexia Quin

Music as Therapy International

ABSTRACT

Music as Therapy International's over-arching aim is to make some of the benefits of music therapy available to disabled and disadvantaged children and adults around the world, by training local people to use basic techniques. We have a reputation for innovative, high-impact projects all of which are carefully tailored to ensure they are locally sustainable.

Our roots lie in the orphanages of Romania but, since establishing in 1995, we have extended our work from Romania to the Occupied Palestinian Territories, Rwanda, Georgia, Myanmar, Peru and even back to British soil. We always seek to work in places where music therapy would not otherwise be available, but we do not parachute in to perform short-term miracles. Our projects provide local care workers with the skills, musical instruments, experience and confidence for them to run therapeutic music programmes themselves long-term. We then follow this with long-term professional and moral support, CPD opportunities etc. We use a range of innovative models to structure our training (or skill-sharing) and our work has had a tangible impact on UK music therapy practice.

Music as Therapy International does not and cannot work in isolation. This Poster Presentation is an opportunity to promote the work of our Local Partners around the world and facilitate links with music therapists with relevant clinical or geographical interest. It is also an opportunity for therapists to discuss with us communities where our input might be helpful.

KEYWORDS

music therapy; international; skill-sharing

Evidence gathering in freelance practice: a short evaluation tool to communicate the value of music therapy for clinical work in schools

Cathy Rowland

Freelance Music Therapist

ABSTRACT

A short, effective evaluation tool is presented for use in schools. This tool was created following the presenter's previous experience implementing an evaluated project in a mental health setting through Key Changes Music Therapy. This six-month project (Rowland & Read, 2011) had involved evidence gathering using patient/staff questionnaires and numerical scoring. Using this short evaluation tool, a distillation from the previous evaluation methods, evidence is shown which is gathered from clinical work from one generic special needs school during the years 2012–2013. The presenter, who has a varied freelance practice and who works for this school for one morning a week, shows how quite specific information about the value of music therapy can be obtained through a simple questionnaire presented to teachers at the end of a period of therapy. The questionnaire seeks both quantitative and qualitative information from the teacher relating to their observations about how they believe the child has benefitted from music therapy. Specific observations (qualitative evidence) from teachers are presented, which amplify the picture indicated by the numerical scores (quantitative evidence). The presenter suggests that such evidence can be used to supplement therapists' standard clinical reports (e.g. for annual reviews) and may possibly in some instances indicate specific benefits outside of the therapy room. The presenter suggests that such evidence may be presented to a head teacher each year and if necessary be used to argue the case for continued or enhanced funding.

KEYWORDS

evaluation; evidence; quantitative; qualitative; value

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Evaluating short term paediatric music therapy; a consideration of aims, outcomes and the use of feedback questionnaires and comments books

Andy Stevens^{1,2}

¹ Thomas's Fund, ² Rosie's Rainbow Fund

ABSTRACT

Music Therapy on paediatric wards often involves one off or irregular sessions. The therapist needs to consider carefully the aims and outcomes for these sessions and effective methods for evaluation. Simple questionnaires have been designed and used to gain some feedback from patients and their parents, carers or nurses. Two variations of the questionnaire have been used in work carried out on behalf of Rosie's Rainbow Fund and Thomas's Fund. The results are discussed and compared in the context of prevailing aims and outcomes for hospital based Music Therapy. Key themes that emerge include the value and benefits of 'enjoyment' and the empowerment of patients who are subject to medical procedures and reduced freedom. The advantages and limitations of the feedback forms and alternative methods are considered in the light of the results.

KEYWORDS

paediatric; short term; joy; empowerment

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The economics of therapy

Daniel Thomas¹ & Vicky Abad^{2,3}

¹ Chroma, ² University of Queensland, ³ Boppin' Babies

ABSTRACT

It is widely recognised that health benefits can arise from connection to, or interaction with music. Music therapy is a profession well positioned to provide such health benefits, and one that is constantly gaining recognition for its ability to deliver positive health outcomes. Financial health is necessary for music therapy as a profession to thrive, and for music therapists as practitioners to survive. This paper draws together current research across disciplines exploring how the state of our financial health as music therapists individually and professionally has the potential to impact the work we do and therefore the health and wellbeing outcomes available to clients.

Music therapists have a range of skills including attunement, improvisation, resilience and listening that have been learnt for and honed in the clinical space. If these core therapeutic skills are transferred and applied within the sphere of the larger business world, their importance and value when developing successful music therapy businesses and partnerships will be seen and understood. Clients, therapists and partner organisations alike benefit from clear financial contexts and boundaries as they allow ethical and appropriate music therapy to take place and put all aspects of our work on sustainable and equitable financial foundations.

Placing money and therapy together raises important ethical dilemmas. Interactions between financial profit and social disadvantage create challenging and uncomfortable debates. Without funding we can offer nothing. Without financial health, we cannot provide the clinical work that is paramount to the greater health and wellbeing of our clients and our communities.

KEYWORDS

economics; therapy; ethics; business; health

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‘A day in the life’

Melanie Thomas & Vicky Gray

Alder Hey Children’s NHS Foundation Trust

ABSTRACT

The work of a music therapist in a Tertiary Paediatric Hospital is a naturally varied role. Clinical music therapy work at Alder Hey includes a wide range of patients from only a few days old up to 20 years of age, with a wide range of diagnoses. At present, the music therapist works with patients under the following medical teams: neuro-rehabilitation, neuromuscular, general neurological (including degenerative and neuro-palliative), oncology, cranio-facial, renal dialysis, long term ventilation, palliative care, and cardiac. The clinical work of the music therapist aligns with psychological services, and often incorporates working alongside psychologists, speech and language therapists, physiotherapists, occupational therapists and play specialists. Alongside clinical music therapy practice, the music therapist supports Arts for Health projects across the hospital (including an imminent project on the Neonatal Surgical Unit), attends multi-disciplinary meetings, and provides staff education and music workshops as part of the Arts for Health team at Alder Hey, including a current project with play specialists. All of these elements combine to form a complex counterpoint in the day to day life of the music therapist.

This personal exploration, ‘*A day in the life*’, is a detailed reflection of one day in the life of the music therapist at Alder Hey Children’s Hospital. The music therapist is supported by Dr Vicky Gray, Consultant Clinical Psychologist at Alder Hey, whose insight gives another dimension to these reflections and who is the primary clinical supervisor of the music therapist.

KEYWORDS

paediatric; hospital; music therapy; health

Team and variations: a timeline of one music therapy team working to develop a service in Birmingham and the Midlands

Eleanor Tingle, Abby Stain, Davina Wilson, Dan Bramhall, Alison Douglas, Sarah Chater, Katy Bennett, Leanne O'Keeffe, Ruth Melhuish & Val Swingler

Music Therapy Works

ABSTRACT

This poster presentation will describe and reflect on the experiences of one team of music therapists as they seek to provide a music therapy service dedicated to interventions sought in Birmingham and Midlands. The changing type of provision over the twelve-year life of the team, including long and short-term work, developmental and crisis intervention will be illustrated in pictures, text and video. The developing use of technology within music therapy sessions will also feature with screenshots illustrating a variety of techniques and apps used in our work. The music of music therapy clients recorded in a local recording studio may feature.

KEYWORDS

timeline; developing music therapy service; technology; responding to marketplace

BIOGRAPHIES OF PRESENTERS

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Luke Annesley has worked for Greenwich Music Therapy Service since qualifying from the Guildhall School of Music and Drama in 2008. He is also a lecturer in music therapy at City University and a freelance performer. luke.annesley@ntlworld.com

Gary Ansdell is a music therapist, trainer and researcher – currently Director of Education for Nordoff Robbins. He has published widely in the fields of music, music therapy and music & health/wellbeing. His latest book, *How Music Helps: In Music Therapy & Everyday Life* was published by Ashgate early in 2014. Ansdell and the music sociologist Tia DeNora are the editors of the new Ashgate Series *Music and Change*, which launches with a triptych of books by them on music, health and wellbeing. gary.ansdell@nordoff-robbins.org.uk

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Katy Bennett qualified from Bristol UWE in 2012. A member of the Music Therapy Works team, Katy currently provides music therapy in schools with pupils having autism and/or social, emotional and behavioural difficulties. She comes from a songwriting and community music background and still runs two singing groups in Birmingham. mtwchiefexec@gmail.com

Lorna Bickley is a community musician and teacher. She set up One Voice in 2008 and has also worked with the Moor Green Singers, a clinical rehabilitation group for adults with acquired brain injury. lorna.bickley@gmail.com

Dan Bramhall qualified from the Royal Welsh College of Music and Drama in 2003 and since then has been practising in diverse areas of work across the West Midlands, both for Music Therapy Works and in private practice. His practice is strongly informed by his musical background in rock and pop. mtwchiefexec@gmail.com

Gail Brand has been a clinician since 2001, working in special needs education and adult LD services. Gail is a lecturer in improvisation at the Guildhall School of Music and Drama, jazz/improv trombonist, composer and broadcaster. gailsarahbrand@gmail.com

James Bullock is co-founder of Integra Lab, a music technology research centre based at Birmingham Conservatoire. He has experience in composition and performance with live electronics, music informatics and user-centred software development. jamie.bullock@bcu.ac.uk

Leslie Bunt, MBE trained with Juliette Alvin (1976-1977), and taught on the Guildhall (1980-1993) and Southlands (1981-1983) courses. He set up the first part-time course (Bristol, 1992) now based at the University of the West of England, Bristol where Leslie is Professor in Music Therapy. He is music therapist at the Penny Brohn Cancer Care, and is a primary trainer and practitioner in the Bonny Method of Guided Imagery and Music. Leslie.Bunt@uwe.ac.uk

Laura Burns has been a music therapist with Nordoff-Robbins Music Therapy in Scotland since 2010. She works in and around Glasgow with children and adults in a variety of clinical areas. lauraburns@nrscot.org.uk

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Céline Butté is a dance movement psychotherapist working with people with learning disabilities and in private practice specialising in trauma work. She is also a qualified supervisor and lecturer. c.butte@gold.ac.uk

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Claire Cartwright qualified as a music therapist in 2011. She has worked with both children and adults with various needs including autism, learning disabilities, PMLD, mental health issues and sensory impairments. clairecartwright@nrscot.org.uk

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Sarah Chater qualified from Nordoff Robbins and has enjoyed a wide experience working in both NHS and educational settings with individuals and groups. A member of the team of Music Therapy Works, Sarah's current practice in schools focuses on the use of sounds and music to create a resonance through which aspects of the client's identity can be explored. mtwchiefexec@gmail.com

Victoria Churchill recently completed her Masters of Music Therapy, part of her thesis focusing on assessment. Since working, she has decided to return to further her previous research through PhD studies. victoriachurchill@gmail.com

Jeremy Clarke CBE is the founding Chair of the New Savoy Partnership, Clinical Lead for the National Audit for Psychological Therapies and National Adviser for Improving Access to Psychological Therapies. He has been highly influential in the UK in bringing to national consciousness the need for evidence-based psychological therapies to be taken seriously, in terms of funding and accessibility for all. therapy@practice.demon.co.uk

Liz Coombes: Programme Leader, MA Music Therapy, University of South Wales. She has worked for many years in in-patient CAMHS, and now is the music therapist for Barnardos in Cardiff, specialising in working with asylum seeker families. She also provides regular training and advice on working therapeutically with music to organisations in Palestine. Some of the latter work is undertaken with Music as Therapy International. Elizabeth.coombes@southwales.ac.uk

Rachel Darnley-Smith is a music therapist working with older people and a lecturer on the Roehampton programme. She has been distracted by philosophical questions in music therapy for many years. r.darnley-smith@roehampton.ac.uk

Kathryn Deane runs Sound Sense, the UK association for community musicians. She is involved in workforce development, evaluating community music practice, and editing the UK journal of community music, *Sounding Board*. Kathryn.Deane@soundsense.org

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Tamsin Dives is a music therapist at St Christopher's Hospice. Before qualifying as a music therapist, she had a successful career as an opera singer for twenty-two years. t.dives@stchristophers.org.uk

Alison Douglas qualified in 1987 and established an NHS music therapy service for adults with learning disability in Nottingham. She joined the Music Therapy Works team in 2003. mtwchiefexec@gmail.com

Camilla Farrant works as a research assistant at Nordoff Robbins and is the founder of Music Therapy Tree; an organisation that delivers music therapy to children in mainstream primary schools. camilla.farrant@nordoff-robbins.org.uk

Kate Fawcett spent ten years as a freelance performer, educator and arts administrator before turning to music therapy. Now in her final year of training at UWE (Bristol), she also teaches at Birmingham Conservatoire and is heavily involved with SEN projects for the CBSO as well as continuing to perform. She is MTW's newest recruit, currently working in an autism centre for out-of-school children. toomanykates@hotmail.com

Angela Fenwick works with clients of a wide range of ages /disabilities. She has lectured worldwide, was the first Chair of APMT and since 1993 has been Founder/Director of BCAT. angelafenwick67@hotmail.com

Adrienne Freeman leads the music therapy team for the Older Adults service in the Enfield sector of Barnet, Enfield and Haringey Mental Health NHS Trust. She is an experienced supervisor, examiner and presenter, for music therapy training and practice. freeman7hr@yahoo.co.uk

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Gráinne Foster holds an MSc in Music Therapy (2013) and an MPhil in Music and Media Technologies (2007). Clinical experience includes work with learning disability, autism, physical disability and mental health. grainnefoster@gmail.com

Neil Foster: Since qualifying from Nordoff Robbins in 2006, he has worked with a wide range of client groups for Nordoff Robbins, recently specialising in adult cancer care. neil.foster@nordoff-robbins.org.uk

Elly Goodridge has had over ten years' experience of working in a range of mental health settings, including West London Mental Health Trust Forensic services and Central North West London NHS Trust Older Adult services. She is now practising as a freelance music therapist and is exploring her interest in working with children with learning disabilities. ellygoodridge@hotmail.com

Joy Gravestock is a therapist working with adoptive families in the East Midlands. She has developed an interest in the impact of findings from neurobiology on adult verbal psychotherapy and is interested in how attachments may be enhanced by a music therapy relationship. joyfaith@home.gb.com

Dee Gray qualified as a music therapist in 2011 and has established a music therapy service at Lauralynn, Ireland's first children's hospice. She has extensive experience working with adults and children who have acquired brain injuries, in disability services and in mental health settings. Dee is currently the music therapy researcher at the N.R.H., Dublin. deegrays2004@gmail.com

Vicky Gray is a Consultant Clinical Psychologist and joint head of the Psychological Services Department at Alder Hey. Vicky has special interests in epilepsy surgery and neuro-rehabilitation. Victoria.gray@alderhey.nhs.uk

Nicky Haire is a member of Music as Therapy International's advisory panel and currently works as a music therapist in special schools and with the elderly in care homes. nickyhaire@yahoo.com

Minna Harman has extensive experience working with people with challenging behaviour and profound and multiple learning disabilities, and an interest in intensive interaction. Her clinical work is with children and adults with learning disabilities. minnaharman@nhs.net

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Motoko Hayata has worked with children and adults with a variety of needs for the last fourteen years and until recently directed Soundscape music therapy service, Newham Music Trust. mo.hayata@gmail.com

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Gemma Lenton-Smith qualified in 2005 from Anglia Ruskin University and completed her MA in Research in 2007 from Roehampton University. Gemma currently works for Ealing Music Therapy. gals81@yahoo.com

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Jane Lings is music therapist at St Peter's Hospice, Bristol and is a former senior lecturer in music therapy at the University of the West of England. jane@lings.me.uk

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Helen Loth is course leader of the MA in Music Therapy, Anglia Ruskin University and manages its Music Therapy Centre, incorporating a music therapy clinic, developing partnerships with local statutory and charitable services. Helen.Loth@anglia.ac.uk

Emma Lovell has worked as a music therapist within the field of learning disabilities for over ten years. She continues to value the work of support staff and recognises her role in supporting them. emma.lovell@hpft.nhs.uk

Anna Maratos is Head of Profession for music, art, dance movement and drama therapists within a large London mental health Trust. She has a particular interest in outcome research and has collaborated on three randomised controlled trials and a Cochrane review of music therapy for depression. Her clinical music therapy has mostly been in the field of mental health where she has worked in various settings across the age range. She has an MSc in psychotherapy for psychosis and sat on the guideline development group for the updated NICE guideline on schizophrenia in 2008. She has also conducted research in organisational dynamics and in 2012 she led a randomised trial of inpatient reflective practice and a conference at BMA House entitled, '*Keeping Your Head (While All Around are Losing Theirs...)*'. anna.maratos@nhs.net

Alex Maguire qualified in 1996 and works in the field of forensic psychiatry. He is also active as a performer of improvised and composed jazz and rock music. alex_maguire2001@yahoo.co.uk

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Pete McPhail: A performer and composer, he has worked with children and adults with learning disabilities and mental health issues for twenty years (including in prisons). MA in music therapy from UWE. pete@petemcphail.com

Ruth Melhuish has worked as a music therapist in adult and older people's mental health since 1991. She has a particular interest in the role of music therapy in dementia care. She has her own practice and is a member of the Music Therapy Works team. ruth.melhuish@btinternet.com

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Hilary Moss established the National Centre for Arts and Health at Tallaght Hospital, Dublin in 2003, and is a music therapist working predominantly in mental health services and with older people. Hilary has an MBA in Health Services Management and is completing a PhD on the role of aesthetics and culture in hospital within the School of Medicine, Trinity College Dublin. hilary.moss@amnch.ie

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Judith Nockolds has been practicing for twenty-three years working as a clinician, supervisor, examiner, trainer and performer with a background in classical music and training within the Nordoff-Robbins model. judynockolds@hotmail.com

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Rebecca O'Connor has twenty-three years music therapy experience in health and education, she was Lead music therapist at Chelsea and Westminster Hospital and a senior lecturer and course tutor on the music therapy training course at Roehampton University. She established the music therapy service at the N.R.H., Dublin and has a Masters in research methodologies. Rebecca is a course tutor on the drama therapy programme at NUI Maynooth and is a guest lecturer on the music therapy training programme in University of Limerick. Rebecca is also the Chairperson of the Irish Association of Creative Arts Therapists (IACAT). beckysocconnor@gmail.com

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Published twice a year, the *British Journal of Music Therapy* (BJMT) is a peer-reviewed journal for music therapists and other professionals interested in all aspects of music therapy.

BJMT publishes original articles or essays that have direct relevance to the field of music therapy. We are interested in a variety of perspectives and approaches, such as research studies, theoretical/philosophical papers, assessment and treatment programmes, case studies, including work with colleagues/others, professional issues and historical reviews. We consider full length (3500-6000 words) and short miscellaneous pieces, responses, letters and obituaries. Do contact us if you have a submission or have questions about a submission. We also welcome reviews of books, CDs and videos, and are pleased to include Textwatch compiled by John Strange. John would welcome hearing from you of any literature you feel should be included.

In 2013, a new permanent Editorial team was appointed (consisting of Tessa Watson, Kay Sobey and Alison Barrington). The team will take forward the work of Julie Sutton who contributed much to the development of the journal in recent years. Thanks are also due to Rachel Darnley-Smith who was part of the interim Editorial Team in 2013.

The process of considering and editing articles for each edition is given serious discussion and editorial time. In addition, as part of the ongoing work of the new Editorial Team, we are planning a review meeting in 2014, and hope to begin considering the process of moving to an online presence. We encourage new writers as well as established authors and look forward to working with more of you in workshops and seminars as we did in 2013.

Do contact the Editorial team if you would like to make a submission or have any questions. We can be reached at BJMTEds@bamt.org.

Tessa Watson, Kay Sobey and Alison Barrington

BJMT Editorial team

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