

Introduction to Music Therapy

Information Pack



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Who is Musicatwork?

Musicatwork was formed in 2005 by music therapist Daniel Thomas. Musicatwork works with statutory bodies, private organisations, charities and individuals developing and delivering music therapy services for children and adults with a range of conditions, such as Dementia, Palliative Care, Autism/ASD, SEBD, Challenging Behaviours, PMLD or Cerebral Palsy in a wide range of care and educational settings.

Musicatwork is run by music therapists for the benefit of music therapists and their clients across the UK.

Further information about Musicatwork can be found via our website www.musicatwork.co.uk



What Is Music Therapy?

Music Therapy is the clinical and evidence-based use of music interventions to accomplish personalised goals within a therapeutic relationship by a state-registered professional who has completed an approved music therapy training course. All UK music therapists are state registered and licensed by the HPC (Health Professions Council). Currently all approved UK music therapy courses are at Masters (MA) level.



Music therapy interventions can be designed to promote wellness, manage stress, alleviate pain, enhance memory, improve communication, and provide unique opportunities for interaction. Research in music therapy supports the effectiveness of interventions in many areas such as facilitating movement and overall physical rehabilitation, increasing motivation to engage in treatment, providing emotional support for clients and their families, and creating an outlet for expression of feelings. Because music therapy is a powerful and non-threatening medium, unique outcomes are possible. Music therapists work closely with a range of other health care professionals such as nurses, physiotherapists, occupational therapists, speech and language therapists, and psychologists.

**"When words fail,
music speaks"**
**Hans Christian
Andersen**

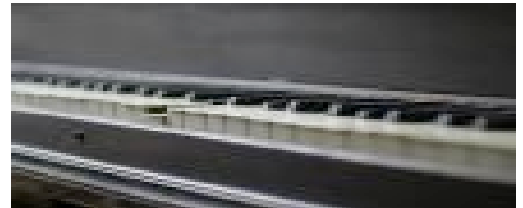
Music therapists do not teach music. They encourage clients to try different instruments and use their own voices to explore sound and create their own method of communication through music. The type of music depends on the needs and interests of the client, and is spontaneously produced by the client and therapist. Therapy can take place in a group and on a one-to-one basis.

How Does It Work?

Music Therapy is practiced in many different locations including:

- Special and mainstream schools
- Pupil referral units
- Nursing and residential care homes
- Palliative care homes
- Prisons and juvenile detention units
- Hospitals
- Mental health day centres
- Addiction clinics
- Bereavement support centres

The way music therapy works in each setting can be different and is always client focused. In a special school a music therapist may work with students to strengthen non-musical areas such as communication skills, physical coordination skills and emotional literacy skills. These skills are important for daily life and can positively impact students' academic success.



In a mental health day centre the needs of clients can be different from those in an education setting. Feelings of isolation or separateness due to a condition such as Schizophrenia can be common when working in the mental health field. A music therapist can help patients to explore and share personal feelings, facilitate positive changes in mood and emotional states, gain a sense of control over life through successful experiences and resolve conflicts leading to stronger family and peer relationships. As in the education setting developing non-musical skills in these areas can have a profound impact on the quality of a person's life.

Different Theoretical Approaches

There are currently seven different recognised music therapy training courses in the UK. These courses each use a different theoretical model, such as the Humanistic approach or the Psychodynamic approach. Most UK music therapy training courses can be done full or part time. All current courses are set at MA (Masters) level. Only courses recognised by the Health Professions Council lead to a legal and professional music therapist qualification.

Who regulates music therapists?

Music therapy in the UK is regulated by a number of different organisations each with a specific role:



- **Association of Professional Music Therapists**

All UK-based music therapists should be members of the APMT (Association of Professional Music Therapists) and follow its Code of Ethics at all times. The APMT along with the HPC accredits all UK music therapy training courses. The APMT gives guidance of a number of areas includes fees/wages/salary scales, clinical supervision, professional malpractice insurance and collates a monthly list of new job opportunities. Their web address is: www.apmt.org

- **Health Professions Council**

The HPC (Health Professions Council) is a statutory, independent UK-wide regulator that is responsible, with the APMT, for accrediting music therapy training courses in the UK. It grants music therapists and successful music therapy students a license to practice music therapy in the UK on a two-yearly basis. All music therapists in the UK must be registered with HPC in order to practice. It is illegal to call yourself a music therapist if you are not registered with the HPC. They also operate a website to check if someone is registered as a music therapist. The address is: www.hpcheck.org

Who Comes To Music Therapy?

There are a wide variety of people who attend music therapy sessions. Depending on the needs of the client the sessions may be run on an individual basis or be within a group setting. Music therapists often work with adults and children with some of the following conditions or illnesses:



- Abuse
- ADHD (Attention Deficit Hyperactivity Disorder)
- Addiction
- Autism/Aspergers
- Challenging Behaviours
- Cerebral Palsy
- Dementia
- Depression
- Eating Disorders
- Mental Health Conditions (Schizophrenia, Bi-polar)
- PMLD (Profound Multiple Learning Difficulty)
- Self-Esteem/Self-Confidence issues
- SEBD (Social, Emotional, Behavioural Difficulties)

Once a music therapist has begun working with a client an initial period of “clinical assessment” would begin. After this assessment period the music therapist would make recommendations as to the suitability of continued music therapy sessions for each referred person. Often the music therapist is part of a multi-disciplinary team and would attend and report to Care and Education meetings/reviews whenever possible. Specific aims and goals for therapy are set depending on the needs of each client.

Common Reasons For Referral

There are some general areas that music therapy can positively impact:

- Developing the ability to form and understand relationships
- Processing thoughts and feelings enhancing emotional literacy and communication of need
- Positive changes in mood and emotional states and self regulation of mood
- A sense of control over life through successful experiences
- Anxiety and stress reduction
- Enhancing range of physical movement through musical interactions/motivation
- Non-pharmacological management of pain and discomfort
- Stimulation that promotes interest even when no other approach is effective
- Structure which promotes the development of personal insight into behaviours/triggers
- Opportunities to interact creatively with others.

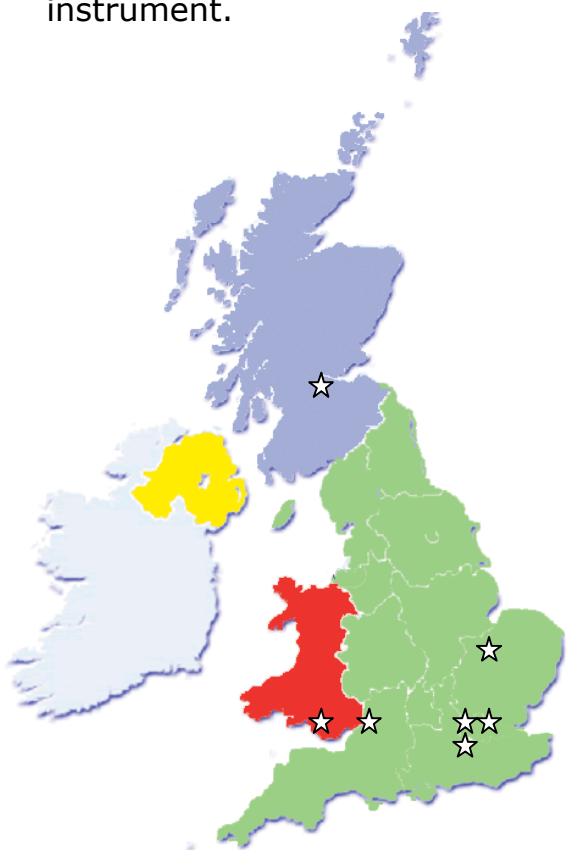
How Do I Become A Music Therapist?

There are seven different recognised training courses in the UK for people wanting to train to become a music therapist. The map and table on page 8 shows where each of the courses is and what the theoretical approach is.

To work as a music therapist you need to complete a postgraduate course accredited by the Association of Professional Music Therapists (APMT) and recognised by the Health Professions Council (HPC). Both organisations hold details of approved courses. The entry requirements for a Masters in Music Therapy will usually include three years of musical training leading to a diploma or graduateship from a college of

music, or a degree in music from a university. Occasionally graduates with a degree in a subject such as education or psychology, who also have a high standard of musical competence will be accepted on to an accredited postgraduate course.

To get onto a music degree course you will usually need five GCSEs (A-C)/S grades (1-3) plus two A levels/H grades including music; you will also need to pass an audition. You may also be expected to have at least grade 6 on your main instrument.



Institution of Delivery	Mode of Study	Title of Programme	Theoretical Model/Approach
Anglia Ruskin University	Full/Part Time	MA Music Therapy	Psychoanalytic
Guildhall School of Music and Drama	Full/Part Time	MA Music Therapy	Psychodynamic
Nordoff Robbins Music Therapy Centre	Full/Part Time	MA Music Therapy	Nordoff Robbins
Queen Margaret University College	Full/Part Time	MSc Music Therapy (Nordoff Robbins)	Nordoff Robbins
Roehampton University	Full/Part Time	MA Music Therapy	Psychodynamic
Royal Welsh College of Music & Drama	Full/Part Time	MA Music Therapy	Psychodynamic
University of the West of England, Bristol	Part Time	MA Music Therapy	Humanistic

How Can I Get Music Therapy In My Organisation?

The easiest way to start music therapy sessions in your organisation, whether that is a special school, hospital, prison or day centre is to contact Musicatwork who have a list of music therapists across the UK who are available to start work in your organisation right now. Further information can be found at: www.musicatwork.co.uk or by emailing info@musicatwork.co.uk

Research Into Music Therapy and its benefits

Each year the amount and breadth of research into music therapy and its benefits increases. The below list highlights a few of the research articles that have been written.

- De Silva, C (2009). Music Therapy with Children with Social Emotional or Behavioural Difficulties, www.musicatwork.co.uk and follow links to the music therapy page
- Swanson, M (2010). Music Therapy with Children with Autism, www.musicatwork.co.uk and follow links to the music therapy page
- Gold, C., Haldal, T.O., Dahle, T., Wigram, T. (2005). Music Therapy for Schizophrenia or Schizophrenia-like Illnesses. The Cochrane Database of Systematic Reviews, 3. Accession: 00075320-100000000-03007 PMID: 15846692
- Tang W, Yao X, Zheng Z. Rehabilitative effect of music therapy for residual schizophrenia: A one-month randomised controlled trial in Shanghai. British Journal of Psychiatry 1994;165(suppl. 24):38-44. PMID: 7946230
- Silverman, M.J. The Influence of Music on the Symptoms of Psychosis: A Meta-Analysis. Journal of Music Therapy 2003; XL(1) 27-40.
- Field, T., Martinez, A., Nawrocki, T., Pickens, J., Fox N.A., & Schanberg, S. (1998). Music shifts frontal EEG in depressed adolescents. Adolescence, 33(129),109-116.
- Montello, L.M., & Coons, E.E. (1998). Effect of active versus passive group music therapy on preadolescents with emotional, learning, and behavioral disorders. Journal of Music Therapy, 35, 49-67.
- Music Therapy reduces pain. Colwell, C. (1997). Music as distraction and relaxation to reduce chronic pain and narcotic ingestion: A case study. Music Therapy Perspectives, 15, 24-31.
- Edwards, J. (1998). Music therapy for children with severe burn injury. Music Therapy Perspectives, 16, 21-26.

- Listening to music alleviates pain, fatigue, and anxiety of hospice cancer patients. Longfield, V. (1995). The effects of music therapy on pain and mood in hospice patients. Unpublished master's thesis: Saint Louis University, USA.
- Music therapy research regarding Dementia and Alzheimer's patients. Brotons, M. & Kroger, S.M. (2000). The impact of music therapy on language functioning in dementia. *Journal of Music Therapy*, 37(3), 183-95.
- Brotons M. & Marti, P. (2003). Music therapy with Alzheimer's patients and their family caregivers: a pilot project. *Journal of Music Therapy* 40(2), 138-150.
- Cevasco, A.M. & Grant, R.E. (2003). Comparison of different methods for eliciting exercise-to-music for clients with Alzheimer's Disease. *Journal of Music Therapy* 40(1), 41-56.
- Clair, A.A. (1996). The effect of singing on alert responses in persons with late stage dementia. *Journal of Music Therapy*, 33(4), 234-247.
- Gerdner, L.A. (2000). Effects of individualized versus classical "relaxation" music on the frequency of agitation in elderly persons with Alzheimer's disease and related disorders. *International Psychogeriatrics*, 12(1), 49-65.
- Hanser, S.B., & Thompson, L.W. (1994). Effects of a music therapy strategy on depressed older adults. *Journal of Gerontology*, 49(6), P265-9.