Music Therapy Teaming and Learning:
How Transdisciplinary Experience Shapes Practice in an Autism Specialist School

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Abstract

Music therapists are increasingly working in teams alongside professionals from other disciplines, in multidisciplinary, interdisciplinary and transdisciplinary frameworks. However, in recent decades, discipline-specific teams of music therapists are also appearing as part of larger health care and special education organisations. Whilst research literature on collaboration between music therapists and other professions is growing, there is a lack of understanding around how the experience of transdisciplinarity may shape music therapy practice over time. There is also a lack of literature around the experience of teams of music therapists working together, and how their practice is impacted by collaboration within, and across disciplines.

This study is set at Giant Steps Sydney, a transdisciplinary, specialist school for students with Autism Spectrum Disorder (ASD). In this setting, five music therapists integrate their practice across all programs, teaching and learning across multiple layers of teaming. To explore the lived experience of this music therapy team and the factors informing their practice, a qualitative, phenomenological approach was taken, with data collected through semi-structured interviews. Throughout the study, a range of reflexive strategies were drawn upon, as the researcher navigated the roles of team leader, clinician and researcher.

Results of the individual and group data analyses revealed that the layers of teaming in a transdisciplinary environment provide a rich source of learning, support and satisfaction for the music therapist. Group Themes voiced a number of considerations for leading music therapy teams, including the music therapists’ preferred styles of professional learning, the value of diversity and creativity in team collaboration, and the importance of peer support in building resilience. Three professional issues for the music therapist in transdisciplinary
schools were uncovered, including the benefits and challenges of working with individuals and groups with self-regulation challenges, working across the school day in non-music therapy programs, and building trusting relationships with support staff in music therapy sessions.

When viewed through the lenses of systems theory and transdisciplinarity, the experiences of the music therapists, the team leader and the school leadership team formed interactive layers within the school system. Each layer was articulated as a practice cycle, involving a range of professional responsibilities to ensure best practice and a healthy team culture. A reflexive analysis highlighted a number of implications for the music therapy team leader, including the need to create a collaborative, creative space where diversity is welcomed, and to provide a bridge between the music therapy team and the school executive.

The findings of this study begin to illuminate the experience of music therapists working simultaneously in teams of music therapists, and within a transdisciplinary school model. An understanding of system leadership is paramount to the growing number of creative arts therapy teams around the world.
Declaration

This is to certify that:

- The thesis comprises only my original work
- Due acknowledgement has been made in the text to all other material used
- The thesis is less than 40,000 words in length, exclusive of tables, references and appendices

Signed:

[Signature]

Bronte Arns
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# Table of Contents

Abstract iii

Declaration ................................................................. v

Acknowledgements ....................................................... vi

Table of Contents ........................................................ viii

List of Tables ................................................................... xvi

Table of Figures ............................................................. xx

Chapter 1 Introduction ..................................................... 1

  Background ..................................................................... 1

  The Motivation for this Project ......................................... 2

  The Need for this Project ............................................... 3

  The Setting for this Project ............................................ 5

  The Application of Phenomenology in this Study ................. 7

  Overview of the Thesis ................................................ 7

Chapter 2 Literature Review .............................................. 9

  Introduction ............................................................... 9

  Music Therapy and Autism Spectrum Disorder ................. 9

    Defining music therapy .............................................. 10

    Autism Spectrum Disorder (ASD) ................................. 11

    ASD learning frameworks that have influenced Giant Steps 12

    Music therapists working within ASD learning frameworks 14

    Applications of music therapy methods at Giant Steps ........ 17

    The link between research and practice .......................... 18

  Music Therapy Professional Development ........................ 19

    Forming a professional identity as a music therapist .......... 19
Selecting a sample in descriptive phenomenology .................. 45

Participants .............................................................................. 46

Ethics and informed consent ................................................. 46

Recruitment to the project ...................................................... 46

The participants ...................................................................... 47

Procedure .............................................................................. 47

Phenomenological interviews .............................................. 47

The interviews with the music therapists ............................... 52

Data collection ........................................................................ 53

Data Analysis .......................................................................... 54

Step 1. Seeing afresh and transcribing the interview .............. 55

Step 2. Dwelling with the data and identifying key statements .. 56

Step 3. Creating Structural Meaning Units (SMUs) ............... 57

Step 4. Creating Experienced Meaning Units (EMUs) .......... 59

Step 5. Languaging the Individual Distilled Essence .......... 61

Step 6. Explicating the whole through identifying Group Themes .. 61

Step 7. Language the Global Meaning Units (GMUs) and the Final

      Distilled Essence .............................................................. 64

Conclusion .............................................................................. 66

Chapter 4 Results .................................................................... 67

Introduction ............................................................................. 67

Participants ............................................................................. 68

Individual Analysis Process .................................................. 68

Experienced Meaning Units for Bella ................................. 69

Bella EMU1 ........................................................................... 69
Bella EMU2 ................................................................. 71
Bella EMU3 ................................................................. 71
Bella EMU4 ................................................................. 72
Bella EMU5 ................................................................. 73
Bella EMU6 ................................................................. 74
Bella EMU7 ................................................................. 75
Bella EMU8 ................................................................. 76
Bella EMU9 ................................................................. 77
Bella EMU10 ................................................................. 78
Bella EMU11 ................................................................. 79
Bella EMU12 ................................................................. 80

Individual Distilled Essence for Bella ........................................ 81

Experienced Meaning Units for Grizelda ................................. 83

Grizelda EMU1 .............................................................. 83
Grizelda EMU2 .............................................................. 84
Grizelda EMU3 .............................................................. 85
Grizelda EMU4 .............................................................. 86
Grizelda EMU5 .............................................................. 87
Grizelda EMU6 .............................................................. 88
Grizelda EMU7 .............................................................. 89
Grizelda EMU8 .............................................................. 90
Grizelda EMU9 .............................................................. 91
Grizelda EMU10 ............................................................. 92
Grizelda EMU11 ............................................................. 93
Grizelda EMU12 ............................................................. 94
Individual Distilled Essence for Grizelda ........................................ 94

Experienced Meaning Units for Louise ............................................. 96
  Louise EMU1 ................................................................. 96
  Louise EMU2 ................................................................. 97
  Louise EMU3 ................................................................. 98
  Louise EMU4 ................................................................. 99
  Louise EMU5 ................................................................. 100
  Louise EMU6 ................................................................. 101
  Louise EMU7 ................................................................. 101
  Louise EMU8 ................................................................. 102
  Louise EMU9 ................................................................. 103
  Louise EMU10 ................................................................. 104
  Louise EMU11 ................................................................. 104

Individual Distilled Essence for Louise ............................................ 106

Experienced Meaning Units for Sally .............................................. 108
  Sally EMU1 ................................................................. 108
  Sally EMU2 ................................................................. 109
  Sally EMU3 ................................................................. 110
  Sally EMU4 ................................................................. 111
  Sally EMU5 ................................................................. 112
  Sally EMU6 ................................................................. 113
  Sally EMU7 ................................................................. 114
  Sally EMU8 ................................................................. 115
  Sally EMU9 ................................................................. 116
  Sally EMU10 ................................................................. 117
Sally EMU11 ......................................................... 118
Sally EMU12 ......................................................... 118
Sally EMU13 ......................................................... 119
Sally EMU14 ......................................................... 120

Individual Distilled Essence for Sally ........................................ 121

Reflexive Review of Researcher Standpoint .............................. 122

Group Themes ..................................................................... 124
  Group Theme 1 ............................................................... 125
  Group Theme 2 ............................................................... 127
  Group Theme 3 ............................................................... 128
  Group Theme 4 ............................................................... 129
  Group Theme 5 ............................................................... 131
  Group Theme 6 ............................................................... 131
  Group Theme 7 ............................................................... 132
  Group Theme 8 ............................................................... 134
  Group Theme 9 ............................................................... 135
  Group Theme 10 ............................................................ 136
  Group Theme 11 ............................................................ 137
  Group Theme 12 ............................................................ 138
  Group Theme 13 ............................................................ 139

Global Meaning Units (GMUs) .............................................. 140
  GMU1 ................................................................. 141
  GMU2 ................................................................. 141
  GMU3 ................................................................. 142
  GMU4 ................................................................. 143
Chapter 5 Discussion .................................................................................................................. 147

Introduction ................................................................................................................................. 147

Key Focus Area 1: Considerations for Leading Music Therapy Teams in Transdisciplinary Schools .................................................................................................................. 148

Sub-Topic 1: Professional learning .......................................................................................... 149

  Interpersonal learning ............................................................................................................. 151

  Formal learning ....................................................................................................................... 155

  Self-directed learning ........................................................................................................... 156

  Teams as learning spaces ....................................................................................................... 159

Sub-Topic 2: Diversity and creativity within teams ................................................................. 160

Sub-Topic 3: Peer support and professional supervision ....................................................... 162

Key Focus Area 2: Professional Issues for the Music Therapist in a Transdisciplinary School ................................................................................................................................. 163

Sub-Topic 1: Working with individuals and groups ................................................................. 164

Sub-Topic 2: Working across the day in non-music therapy programs ............................. 166

Sub-Topic 3: Collaborating with music therapy support staff ............................................. 168

The Transdisciplinary Music Therapist as viewed through Systems Theory ............... 171

Practice Cycle of the Music Therapist ..................................................................................... 173

Practice Cycle of the School Leadership Team ..................................................................... 175

Practice Cycle of the Music Therapy Team Leader ............................................................... 176

School System Practice Cycle ................................................................................................. 179

System Leadership in Music Therapy Teams ........................................................................ 180
Recommendations for Future Research .................................................. 182
Conclusion ............................................................................................. 183
References ............................................................................................. 185
Appendix A: Epoché .............................................................................. 210
Appendix B: Review of Researcher Standpoint ........................................ 213
Appendix C: Plain Language Statement .................................................. 214
Appendix D: Consent Form ..................................................................... 217
Appendix E: Introductory Statement for Interviews ................................. 219
Appendix F: Structured Meaning Units (SMUs) for Bella ......................... 220
Appendix G: Structured Meaning Units (SMUs) for Grizelda ................... 231
Appendix H: Structured Meaning Units (SMUs) for Louise ...................... 240
Appendix I: Structured Meaning Units (SMUs) for Sally ......................... 246
Appendix J: Full Interview Transcript for Bella ....................................... 256
# List of Tables

3.1 Participant Details ................................................................................. 47
3.2 Interview Guide ....................................................................................... 49
3.3 Key statements under Bella SMU8 .......................................................... 58
3.4 Key statements under Grizelda EMU6 ..................................................... 60
3.5 EMUs contributing to Group Theme 1 .................................................... 62
3.6 Group Themes contributing to GMU2 ..................................................... 64
3.7 Reflections on Group Themes contributing to GMU2 ............................. 65
4.1 Summary of participant details ............................................................... 68
4.2 Bella EMU1 Title and Exemplary Key Statements ................................ 70
4.3 Bella EMU2 Title and Exemplary Key Statements ................................ 71
4.4 Bella EMU3 Title and Exemplary Key Statements ................................ 72
4.5 Bella EMU4 Title and Exemplary Key Statements ................................ 72
4.6 Bella EMU5 Title and Exemplary Key Statements ................................ 73
4.7 Bella EMU6 Title and Exemplary Key Statements ................................ 74
4.8 Bella EMU7 Title and Exemplary Key Statements ................................ 75
4.9 Bella EMU8 Title and Exemplary Key Statements ................................ 76
4.10 Bella EMU9 Title and Exemplary Key Statements ................................. 77
4.11 Bella EMU10 Title and Exemplary Key Statements ............................... 78
4.12 Bella EMU11 Title and Exemplary Key Statements ............................... 79
4.13 Bella EMU12 Title and Exemplary Key Statements ............................... 80
4.14 Grizelda EMU1 Title and Exemplary Key Statements ........................... 83
4.15 Grizelda EMU2 Title and Exemplary Key Statements ........................... 84
4.16 Grizelda EMU3 Title and Exemplary Key Statements ........................... 85
4.17 Grizelda EMU4 Title and Exemplary Key Statements ........................... 86
| 4.18 | Grizelda EMU5 Title and Exemplary Key Statements | 87 |
| 4.19 | Grizelda EMU6 Title and Exemplary Key Statements | 88 |
| 4.20 | Grizelda EMU7 Title and Exemplary Key Statements | 89 |
| 4.21 | Grizelda EMU8 Title and Exemplary Key Statements | 90 |
| 4.22 | Grizelda EMU9 Title and Exemplary Key Statements | 91 |
| 4.23 | Grizelda EMU10 Title and Exemplary Key Statements | 92 |
| 4.24 | Grizelda EMU11 Title and Exemplary Key Statements | 93 |
| 4.25 | Grizelda EMU12 Title and Exemplary Key Statements | 94 |
| 4.26 | Louise EMU1 Title and Exemplary Key Statements | 97 |
| 4.27 | Louise EMU2 Title and Exemplary Key Statements | 97 |
| 4.28 | Louise EMU3 Title and Exemplary Key Statements | 98 |
| 4.29 | Louise EMU4 Title and Exemplary Key Statements | 99 |
| 4.30 | Louise EMU5 Title and Exemplary Key Statements | 100 |
| 4.31 | Louise EMU6 Title and Exemplary Key Statements | 101 |
| 4.32 | Louise EMU7 Title and Exemplary Key Statements | 102 |
| 4.33 | Louise EMU8 Title and Exemplary Key Statements | 102 |
| 4.34 | Louise EMU9 Title and Exemplary Key Statements | 103 |
| 4.35 | Louise EMU10 Title and Exemplary Key Statements | 104 |
| 4.36 | Louise EMU11 Title and Exemplary Key Statements | 105 |
| 4.37 | Sally EMU1 Title and Exemplary Key Statements | 108 |
| 4.38 | Sally EMU2 Title and Exemplary Key Statements | 109 |
| 4.39 | Sally EMU3 Title and Exemplary Key Statements | 110 |
| 4.40 | Sally EMU4 Title and Exemplary Key Statements | 112 |
| 4.41 | Sally EMU5 Title and Exemplary Key Statements | 112 |
| 4.42 | Sally EMU6 Title and Exemplary Key Statements | 113 |
4.43 Sally EMU7 Title and Exemplary Key Statements ........................................ 114
4.44 Sally EMU8 Title and Exemplary Key Statements ........................................ 115
4.45 Sally EMU9 Title and Exemplary Key Statements ........................................ 116
4.46 Sally EMU10 Title and Exemplary Key Statements ...................................... 117
4.47 Sally EMU11 Title and Exemplary Key Statements ...................................... 118
4.48 Sally EMU12 Title and Exemplary Key Statements ...................................... 118
4.49 Sally EMU13 Title and Exemplary Key Statements ...................................... 119
4.50 Sally EMU14 Title and Exemplary Key Statements ...................................... 120
4.51 Group Theme 1 Title, EMUs and Exemplary Key Statements ...................... 125
4.52 Group Theme 2 Title, EMUs and Exemplary Key Statements ...................... 127
4.53 Group Theme 3 Title, EMUs and Exemplary Key Statements ...................... 128
4.54 Group Theme 4 Title, EMUs and Exemplary Key Statements ...................... 129
4.55 Group Theme 5 Title, EMUs and Exemplary Key Statements ...................... 131
4.56 Group Theme 6 Title, EMUs and Exemplary Key Statements ...................... 132
4.57 Group Theme 7 Title, EMUs and Exemplary Key Statements ...................... 133
4.58 Group Theme 8 Title, EMUs and Exemplary Key Statements ...................... 134
4.59 Group Theme 9 Title, EMUs and Exemplary Key Statements ...................... 135
4.60 Group Theme 10 Title, EMUs and Exemplary Key Statements .................... 136
4.61 Group Theme 11 Title, EMUs and Exemplary Key Statements .................... 137
4.62 Group Theme 12 Title, EMUs and Exemplary Key Statements .................... 139
4.63 Group Theme 13 Title, EMUs and Exemplary Key Statements .................... 140
4.64 GMU1 Title and Contributing Group Themes .......................................... 141
4.65 GMU2 Title and Contributing Group Themes .......................................... 142
4.66 GMU3 Title and Contributing Group Themes .......................................... 143
4.67 GMU4 Title and Contributing Group Themes .......................................... 143
4.68 GMU5 Title and Contributing Group Themes .............................................. 144
Table of Figures

1.1 Transdisciplinary teaming of the music therapist at Giant Steps ......................... 6
4.1 Process of individual analysis .............................................................................. 69
4.2 Process of group analysis .................................................................................. 124
5.1 Teams as learning spaces for the music therapist .............................................. 159
5.2 Practice cycle of the music therapist ................................................................. 174
5.3 Practice cycle of the school leadership team ...................................................... 176
5.4 Practice cycle of the music therapy team leader ................................................ 179
5.5 School system practice cycle ............................................................................. 180
Introduction

Background

My early years as a music therapist involved working in isolation, travelling between a range of jobs and workplaces. A few years later, this changed when I read a detailed position advertisement from Giant Steps Sydney, a school for children with Autism Spectrum Disorder (ASD). In contrast to the independent positions I had experienced, suddenly I found myself enveloped in a team of people from a range of professional backgrounds, working in creative and stimulating ways with each other and their students. Coupled with this, walking into a team space with a group of music therapists felt like a homecoming to me. Shortly afterwards, I stepped into the role of Director of Music Therapy, and from then on, my focus was on developing innovative and engaging music therapy programs for students, made possible by meeting the learning and support needs of the music therapy team.

Giant Steps Sydney has a unique and inspiring story, in that it was established by a group of parents in 1995, due to dissatisfaction with the lack of schooling services available for their children with ASD at the time (Giant Steps, 2017a). As formidable advocates, they gained premises on the historic Gladesville Hospital site, consulted with schools and special education leaders around the world, and worked to create a school that was both built on current best practice, and an aesthetically beautiful and welcoming place for students, families and staff. It is an unusual Australian case, in that music therapy has been part of the service model from the beginning, with a music therapist from the U.S., Darlene Berringer (Principal of Giant Steps, Montreal at the time), invited to consult on the set up of the school. Whilst so many schools in Australia fight to keep their music programs funded and included, the Giant Steps music therapists are fortunate to have been spared that battle, enabling them
to creatively integrate their work into the full school program without the requirement to defend it on an ongoing basis.

The students enrolled at Giant Steps all have a diagnosis of moderate to severe ASD and moderate to severe intellectual disability (ID). This has meant that the provision of a high number and high caliber of staffing is prioritized in human resource planning and professional development. It is difficult for me to imagine the Giant Steps music therapists engaging so effectively with their students, without the quantity and quality of staff that support them. It is work that I have found richly rewarding, highly challenging at times, and it inspires the need for me to engage in continual professional learning.

In this chapter, I will describe the need and motivation for this project, as well as the context of Giant Steps. The reasoning for engaging a phenomenological attitude and method to explore the research questions will also be explained. Finally, a summary of thesis chapters will be provided to guide the reader through this study.

**The Motivation for this Project**

My decision to embark on a Masters project as a clinician-researcher came from moments of reflection, where I questioned the nature of the music therapist’s experience at Giant Steps, and the nature of my own leadership role. During music therapy team meetings, all the music therapists would meet to discuss the challenges and successes of our work, and I was often inspired to hear of their persistent positivity in the face of sometimes significant difficulties. This made me curious to know more about their experiences of practicing music therapy with students presenting significant learning needs. I wanted to know how they sustained the high level of energy required for the work, and what motivated them to stay for the long term. When sharing the learning from books, journal articles, websites and outside training in music therapy team meetings, the question of relevance and usefulness was often raised. It was becoming clear that whilst I knew the school provided comprehensive
professional learning on autism-specific topics, I was unsure of where the music therapists were sourcing information that was shaping their music therapy practice. Additionally, in the process of opening a second campus in Melbourne, leadership focus was drawn towards defining the Giant Steps model of practice, with the intention of recreating that model in a different state. These discussions prompted me to consider the nature of, and factors informing our music therapy practice within the transdisciplinary Giant Steps model. To explore these questions, I would need to consult the music therapy team for descriptions of their lived experiences, and the factors shaping their practice. Whilst a survey or discussion consisting of explicit questions may also have revealed some of this information, I wanted to use a process that would enable me to draw more detailed descriptions and reflections from the music therapists through open-ended questioning. In summary, my motivation was to gain a deep understanding of the music therapist’s practice experience at Giant Steps, and to use these descriptions to guide professional learning and support for their continuing professional growth.

**The Need for this Project**

In Australia, a high percentage of music therapists work with people with ASD, with people with ID and in schools (Jack et al., 2016). At music therapy conferences, I find myself regularly involved in conversations with other music therapists about how they are navigating work within the school culture of curriculum and assessment, and within teams of multiple disciplines. Giant Steps is a school known to many in the Australian music therapy profession, and I am often asked about our model of practice, and what it is like to be part of a large music therapy team. Therefore, I hope that the subject of this thesis will be of interest to other music therapists in reflecting on their own work settings and team practice.

A growing body of research literature supports the inclusion of music therapy in programs to address the needs of people with ASD and ID (De Vries, Beck, Stacey, Winslow,
There are also a number of studies describing how clients experience the music therapy process themselves (Bibb, Castle, & Newton, 2016; McCaffrey, 2013; Thompson, Grocke, & Dileo, 2017). However, there are relatively few studies that examine how music therapists experience their own practice (Comeau, 2004; Lee, 2014; Lee, Davidson, & McFerran, 2016; Muller, 2008).

Whilst looking to studies of music therapist experience provided insight into the work of others, they could not tell me whether the practice of the Giant Steps music therapy team was shaped by similar influences.

To understand the experience of the Giant Steps music therapy team, is also to understand the culture in which they work. Although some Australian music therapists work in isolation and without working connections with other music therapists or professionals from other disciplines, it seems that many do work in teams. Out of 353 respondents in the 2016 Australian Music Therapy Association (AMTA) workforce census (Jack et al., 2016) who answered questions about teamwork, 127 indicated that they work in multi, inter or transdisciplinary teams, with a further 48 working around other professions but without a formal team structure.

Literature around music therapists working in teams is still focused predominantly on multidisciplinary and interdisciplinary models (Ayson, 2011; Guerrero, Turry, Geller, & Raghavan, 2014; Magee, 2014; Spring, 2010), whereas research and writing on transdisciplinarity from the perspective of the music therapist is still less common (O'Hagan et al., 2004; Twyford & Watson 2008). A shift to team-based service delivery is a current trend in early intervention (King et al., 2009; Luscombe & Dibley, 2014), schools (Cross, 2007; Savage & Drake, 2016; Zaretsky, 2007), and the National Disability Insurance Scheme.
(NDIS) in Australia (NDIS, 2014). Therefore, it was important for me to understand how the music therapist could operate and thrive within a transdisciplinary framework.

The Setting for this Project

This study is set within Giant Steps Sydney, an independent, transdisciplinary school for children with ASD. The core values for the school include:

- maintaining a culture of best practice service to individuals with ASD;
- remaining open to the acceptance of new ideas and approaches;
- seeking continuous improvement in all that we do;
- recognising the skills of our staff;
- encouraging commitment and dedication from a team of quality people;
- strengthening professional relationships within and outside Giant Steps;
- adopting collaborative approaches to challenge
- promoting constructive reciprocal involvement with the community; and
- celebrating achievements (Giant Steps, 2017a).

The team of professionals at Giant Steps includes music therapists, occupational therapists, speech therapists, teachers, educator support staff and a psychologist. The school provides programs for early intervention (0-3 years), preschool children (3-6 years), primary students (6-12 years) and secondary students (12-18 years). Some students also go on to access the Giant Steps Community College. School classes consist of 2-9 students, grouped according to compatibility, pace of learning, sensory need and level of support required. Each class has a professional team attached, consisting of a teacher, music therapist, occupational therapist, speech therapist and 1-3 educator support staff. All therapists, including the music therapists, work across classes and programs, and are fully integrated into supporting students across the whole school day.
Students attending Giant Steps are those whose significant learning needs cannot be met in a mainstream or supported mainstream schooling environment. Due to difficulties with communication, emotional regulation and mental health concerns, a high number of students also express their anxiety and frustration through physically challenging behaviour. For many families, Giant Steps has been the only schooling option for their child, and music has often been the connection point for potential students during their orientation visit. During these visits, it is often the music therapist who is called to come and meet them, using music to facilitate a positive first experience at the school.

The Giant Steps music therapists navigate a large number of professional relationships within and across teams, and they are expected to be open to both learning from other disciplines, and sharing the knowledge specific to their own discipline. Figure 1.1 shows the many layers of teaming for the music therapist in this context.

*Figure 1.1. Transdisciplinary teaming of the music therapist at Giant Steps.*
Over the years, the delivery of education and therapy has shifted from a multidisciplinary model, where students were withdrawn from the classroom to attend therapy programs, to a transdisciplinary model, where therapy is integrated into the class program. In this transdisciplinary model, music therapists use specialist knowledge to facilitate programs, and to coach other staff in how to consistently maintain interventions when they are not in the classroom. The constant movement across different spaces, teams and roles in the school, mean that every day, and indeed every hour, are different for the music therapist.

The Application of Phenomenology in this Study

As the music therapy team leader, it has been important for me to acknowledge my own position within this study, and to be open to listening to the music therapists’ descriptions of experience as distinct from my own. It was this need to “see afresh” (Finlay, 2014, p. 122) and to gather deep descriptions that led me to be guided by a phenomenological approach.

Researchers may engage a phenomenological attitude to describe lived experiences, as phenomenology is understood to be a “process of retaining a wonder and openness to the world while reflexively restraining pre-understandings” (Finlay, 2008, p. 1). As I needed to attend both to the phenomenon being described and to the subjective connections between myself and the team (Finlay, 2009), this affirmed my decision to be guided by phenomenological methods for this study. In addition, a phenomenological approach would allow me to garner rich descriptions of meaningful moments, and a deep understanding of music therapy practice experience within a transdisciplinary school.

Overview of the Thesis

In Chapter 2, I will review the relevant literature concerning the role of music therapy in working with individuals with ASD, in specialist schools, and alongside established ASD
learning frameworks. A look into studies on the professional journey of the music therapist will be explored, including the forming of professional identity, clinical experience, influences on practice and factors sustaining practice. The chapter will conclude with a spotlight on literature describing how music therapists collaborate in teams, in particular, transdisciplinary teams, leading into the need for answers to the research questions.

In Chapter 3, I will describe in detail the method used for this study, drawing on descriptive phenomenology (Giorgi, 2009), phenomenological microanalysis (McFerran & Grocke, 2007), and the iterative stages of the phenomenological approach (Finlay, 2014). This chapter will outline the study design, introduce the participants, and describe the ethical considerations and precautions taken, giving a clear picture of exactly how the method was applied with both rigour and reflexivity.

Chapter 4 will present the results of the phenomenological interviews. These will be unfolded progressively, from the transcripts, through the individual analyses, to the Individual Distilled Essences. Then the horizontal analysis will reveal the Group Themes, Global Meaning Units and the Final Distilled Essence. A reconsideration of my standpoint and reflexivity will be central to the presentation of these results, in the interest of transparency and acknowledging my own position, in light of the emerging themes.

In Chapter 5, the results will be abstracted into two Key Focus Areas. I will bring depth to the discussion by drawing on my own practice and leadership experience, adding to the participant’s voices. The two Key Focus Areas will then be viewed through the lenses of transdisciplinarity and systems theory, highlighting the implications for music therapy team leaders. Finally, I will offer recommendations for further research in the areas of music therapy practice within a transdisciplinary model, and in leading strong, creative teams of music therapists.
Chapter 2

Literature Review

Introduction

The purpose of this chapter is to review the literature relating to music therapists working in autism specialist school teams and the factors shaping their practice. Through this review, I will identify what has been studied on this topic, and how this project will contribute to the existing literature related to my research question. Firstly, I will define the practice of music therapy and place it in an Australian context. Following this will be a review of current literature around the practice of music therapy with individuals with Autism Spectrum Disorders (ASD), and how they relate to other autism-specific learning frameworks. As this study focuses attention on the individual music therapist, I will also examine research concerning the experiences of music therapy practitioners, the influences on their practice, and the motivations for their work. A consideration of the music therapist’s practice will outline the formation of professional identity, and the need for ongoing professional learning in relation to evidence-based practice. Placing the music therapist in context, I will then turn to the specialist school system in Australia and conclude by considering the many collaborative models in which music therapists work within this system.

Music Therapy and Autism Spectrum Disorder

Music therapists have a long history of working with individuals with ASD (Alvin & Warwick, 1992; Kaplan & Steele, 2005; Nordoff, Robbins, & Marcus, 2007; Reschke-Hernandez, 2011), using a range of methods and techniques to shape their practice (Carpente, 2017; Kim, Wigram, & Gold, 2009; Oldfield, 2006; Schwartz, 2008; Simpson & Keen, 2011). In 2016 the Australian Music Therapy Association (AMTA) conducted its first workforce census (Jack et al., 2016) with a response rate of 71% (418 responses). Results
showed that 48.5% of the respondents work with people with ASD (171), 48% with
developmental disability (170), and 22% in special schools (77). These figures indicate that a
study on the experiences of a music therapy team in an autism specialist school may be
relevant to a high proportion of music therapists in Australia.

**Defining music therapy.** Music therapy can be difficult to define, as practice across
populations and countries can be so diverse. Giant Steps considers the definition according to
the Australian Music Therapy Association (AMTA) to be most relevant:

Music therapy is a research-based practice and profession in which music is used to
actively support people as they strive to improve their health, functioning and
wellbeing. Music therapy is the intentional use of music by a university-trained
professional who is registered with the Australian Music Therapy Association Inc.
Registered music therapists draw on an extensive body of research and are bound by a
code of ethics that informs their practice (AMTA, 2017).

It is the focus on health, functioning, wellbeing and research-informed practice that
captures the purpose and focus of music therapy programs at Giant Steps.

A music therapy practitioner, registered with the AMTA, may be described as a
‘music therapist’, or in Australia, a ‘Registered Music Therapist’ or ‘RMT’. Whilst the term
‘RMT’ is commonly used in Australia, in the interests of broader understanding from an
international perspective, I will be using the term ‘music therapist’, rather than ‘RMT’ to
refer to a music therapy practitioner.
**Autism Spectrum Disorder (ASD).** The Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 2013), or DSM-5, is widely regarded as the medical key classification reference. The DSM-5 classes ASD as a neurological disorder present at birth, stating the criteria for diagnosis as deficits across two areas: social communication and social interactions (not better accounted for by developmental delay), and restricted and repetitive behaviour, interests or activities. Under social communication, an individual must show deficits in social-emotional reciprocity, in nonverbal communicative behaviours used for social interaction, and in developing and maintaining relationships as appropriate to the developmental level of the individual. Additionally, they must display two of the following four symptoms: stereotyped or repetitive speech, motor movements or use of objects; excessive adherence to routines or resistance to change; highly restricted, fixated interests with an abnormal intensity or focus; and hyper- or hypo-reactivity to sensory input or unusual sensory interests (American Psychiatric Association, 2013). The DSM-5 also lists three levels of severity: Level 1 requiring support, Level 2 requiring substantial support, and Level 3 requiring very substantial support. The students at Giant Steps all have a formal diagnosis of ASD, moderate to severe ID, and a severity of Level 2 and Level 3.

The rising worldwide incidence of ASD is well documented, and in Australia, a 42.1% increase in prevalence between 2012 and 2015 revealed that 164,000 Australians were diagnosed with the disorder (Australian Bureau of Statistics, 2015). Whilst exploration into the reasons for this increase in prevalence is beyond the scope of this chapter, key theories include increased public awareness of ASD, expanding diagnostic criteria, improving diagnostic tools and more frequent reporting of diagnosis (World Health Organization, 2017). With the increase in children being diagnosed with ASD, the demand for tailored schooling options will continue to grow.
**ASD learning frameworks that have influenced Giant Steps.** A proliferation of ASD learning frameworks have been developed and marketed, particularly over the last two decades. The Giant Steps leadership team believes that an eclectic approach is what enables the school to provide socially and emotionally rich learning environments for its varied student population (Giant Steps, 2017a).

A selection of these developmental and behavioural frameworks have been explored and drawn upon by Giant Steps according to how well they fit with the school’s philosophy. The three approaches with the most impact on practice have been the SCERTS\(^1\) model (Prizant, Wetherby, Rubin, Laurent, & Rydell, 2006), SERVAM\(^2\) (Ulliana & Jackson, 2007), and Positive Behaviour Support (PBS) as an application of Applied Behavior Analysis (ABA) (LaVigna & Willis, 2012). Although there are many other models such as Relationship Development Intervention (Gutstein & Sheely, 2001), DIR-Floortime Approach (Greenspan & Wieder, 2006) and the Early Start Denver Model (Rogers & Dawson, 2010), that have also impacted the practice of all professionals at the school, I will focus on SCERTS, SERVAM and PBS for the purposes of this review.

The SERVAM model was instrumental in bringing a formal set of autism teaching strategies to Giant Steps from 2006 onwards. SERVAM was originally developed by Ulliana & Jackson as a parent handbook for developing children with ASD’s intellectual, emotional, social, physical and creative skills in daily family life (Ulliana & Jackson, 2007). Drawing from speech therapy, occupational therapy and special education professionals, this model introduced staff and families of Giant Steps to a range of adaptable strategies around sensory considerations, environmental management, routines and planned change, visual supports, autism friendly communication and motivation. This model was designed to be accessible to

\(^1\) SCERTS stands for Social Communication, Emotional Regulation and Transactional Supports

\(^2\) SERVAM stands for Sensory considerations, Environmental management, Routines and planned change, Visual supports, Autism friendly communication and Motivation
professionals and non-professionals alike, providing a good introduction to the field for new staff, and a means of developing consistent approaches for more experienced staff.

The SCERTS model is an educational model for students with ASD, addressing social communication development, emotional regulation and transactional support as its core domains (Prizant et al., 2006). Prizant takes a humanistic perspective on ASD (Prizant, 2015), viewing autistic behaviours as a part of broader human behaviours. SCERTS is a model that views social communication skills and emotional regulation as interdependent (Prizant et al., 2006, p. 96). Goals around developing mutual and self-regulation and the ability to recover after periods of dysregulation are approached first through developing social-communicative skills. These goals may be addressed through social partners modifying their interactional style, providing developmentally matched learning supports and adjusting the environment to support an emotionally regulated state (Prizant et al., 2006). Whilst the full assessment tool and curriculum of SCERTS is not implemented in its entirety at Giant Steps, the positive approach to emotional regulation through empowering students’ communicative abilities is fundamental to all individualized student programs.

Alongside the SERVAM and SCERTS models, many students at the school with challenging behaviours respond well to a more targeted behavioural approach. The purpose of taking a behavioural approach is to bring those students to a point where they are able to positively engage with peers, staff and the curriculum. PBS as an application of ABA aims to support people with challenging behaviour by shifting behavioural patterns via discrete trials and least restrictive practice, thereby improving an individual’s quality of life (LaVigna & Willis, 2012). For students with challenging behaviour at Giant Steps, it is the highly structured approach to the collection of behavioural and engagement data that has enabled staff to track student emotional regulation over time. Some of the issues documented with behavioural approaches such as ABA include a difficulty generalising and maintaining skills
across environments, and an overdependence on prompting (Schreibman et al., 2015). However, Naturalistic Developmental Behavioural Interventions focus on addressing these issues (Schreibman et al., 2015). For this reason, balancing a behavioural-focused framework such as PBS with frameworks that focus on developing the motivation to develop relationships with others such as SCERTS and SERVAM, is how learning programs are designed to support students with a range of complex needs in a wholistic manner.

**Music therapists working within ASD learning frameworks.** In the last two decades, the range of ASD learning frameworks has sharply increased, along with an increase in the body of research assessing their place within best practice (Prior, Roberts, Rodger, & Williams, 2011). Music therapists are often employed as part of a team of professionals within schools or health care facilities (Jack et al., 2016; Kern, Rivera, Chandler, & Humpal, 2013), and these facilities may be aligned with one or more specific ASD learning frameworks. A full review of interventions available for children with ASD and their intersection with music therapy is beyond the scope of this thesis, and so I will focus on the models that are relevant to the music therapy team at Giant Steps.

A small number of music therapists have written about how their music therapy practice fits with and complements an ASD learning framework, such as Walworth (2007), who suggests that aligning music therapy practice with an ASD curriculum such as SCERTS, gives weight to their case when sourcing funding for music therapy programs. Walworth established that a large proportion of music therapy goals can also be classed within the SCERTS model, as they relate to the focus areas of social communication and emotional regulation (Prizant et al., 2006). Walworth (2007) points out that music therapists may not believe that they are specifically working on goals around the third SCERTS focus area of transactional support, that is, goals around providing support and teamwork across all settings. However, in a follow-up study analysing video material from music therapy sessions
(Walworth, Register, & Engel, 2009), it was found that the music therapists were in fact addressing transactional support goals in their practice, without an awareness of doing so. This points to the ease with which music therapists may work alongside compatible ASD learning frameworks, without changing their own style of music therapy practice.

The writing of Carpente explores in depth how he has combined the framework of DIR/Floortime therapy with his own training in Nordoff-Robbins Music Therapy (NRMT) (Carpente, 2009). The Individual Music-Centered Assessment Profile for Neurodevelopmental Disorders (IMCAP-ND) (Carpente & Abrams, 2013) is a rich product of this alignment. Carpente highlights many commonalities between NRMT and DIR/Floortime, and in fact sees that the only key difference is the mode used to address goals, that is, music instead of toys and objects (Carpente, 2009). Carpente’s approach focuses on the creative process, including how the therapist engages the child with a creative and playful spirit, observing and following the child’s lead in order to support them in a lead role, the relationship as key to child development, and the respect of difference through valuing whatever the child brings to the setting (Carpente, 2009). These practice aspects all sit well with both NRMT and DIR-Floortime. This, however, relies on a particular model of music therapy practice (NRMT), where often a single child is supported by two music therapists in leading and co-facilitating roles. If the music therapist is part of setting up practice models in schools, then this may be successful. However, attempting to shift the culture of an organisation already aligned with an ASD learning framework to suit a specific model of music therapy practice, may prove challenging to the music therapist. It is clear that from the two examples of developmental models above, SCERTS and DIR/Floortime, that there are many parallels between music therapy and these developmental ASD learning frameworks, particularly around encouraging growth in social communication through developing deep, creative relationships.
In contrast to the two developmental methods above, some music therapists have documented how they have adapted their practice to embed principles of PBS and ABA (Lim, 2010; Martin, 2012). In reviews of evidence-based practice for individuals with ASD, ABA is reported as being backed by a large quantity of research studies (Prior et al., 2011), so it is frequently encountered in professional teams working closely with families who have secured government ASD funding packages.

In the 2013 survey of U.S. music therapists working with individuals with ASD (Kern et al., 2013), 54.2% of respondents reported applying a behavioural approach in their practice. Lim (2010) discusses how music can be used in ABA language assessment and training as a motivational tool to stimulate verbal response, and an automatic reinforcement for responding to, and initiating within tasks. It has been reported that a limitation of a traditional behavioural approach is the lack of spontaneity and difficulties generalising language skills to other environments (National Reserch Council, 2001; Schreibman et al., 2015). Successful outcomes are contingent on professional teams and families openly and regularly communicating with each other to support consistency and generalization.

Two specific influences from ABA that have impacted practice at Giant Steps include those of teaching routines through task analysis, and the use of a least-to-most prompting hierarchy (Martin, 2012). This is demonstrated through music therapists setting the steps of routines to song, to aid comprehension and motivation (Paul et al., 2015; Simpson & Keen, 2011) with careful thought given to pacing, musical structure and repetition. These songs are then taught to non-music therapy staff, to ensure generalisation.

An ABA concept of positive reinforcement in music therapy programs may come through verbal praise, and the act of offering positive emotional and verbal feedback to the child’s contributions in the creative process. Hanser (1999) also details the use of natural negative reinforcements in music therapy, such as removing an instrument when a child hits a
peer, or missing a turn when leaving the group. Music therapists with an eclectic practice use their skill and professional judgement to decide which behavioural approaches they may take in their programs, the times where they may be utilized, and how they will adapt the implementation across students with a range of behavioural needs.

**Applications of music therapy methods at Giant Steps.** A number of survey-based research studies and systematic reviews (Geretsegger et al., 2016; Hess, Morrier, Heflin, & Ivey, 2008; Kern et al., 2013; Proffitt, 2015; Srinivasan & Bhat, 2013), along with several handbooks of music therapy (Bunt & Hoskyns, 2002; Edwards, 2016; Wheeler, 2015; Wigram, Pedersen, Bonde, & Aldridge, 2002), outline a range of music therapy methods relevant to people with ASD. Here I have focused on the methods of music therapy commonly utilised in programs at Giant Steps.

Music therapists at Giant Steps may employ one or more methods within their practice, guided by whether the program goals are social, behavioural, communicative or movement-based. These are primarily active music-making methods, and may be drawn from Improvisational Music Therapy (Bruscia, 1987; Geretsegger et al., 2015), the use of pre-composed songs (Carnahan, Basham, & Musti-Rao, 2009; Kern & Aldridge, 2006; Simpson & Keen, 2011); and beat regulation and movement (Hardy & LaGasse, 2013; Keller, Novembre, & Hove, 2014; Thaut & Hoemberg, 2014; Tierney & Kraus, 2015). These three methods are embedded within tailored activities to suit the musical theme of the school term. In order to support non-music therapy trained staff to use these tailored activities in their programs, music therapists tend to add predictable structure and scaffolding to support both staff implementation and student engagement. A lack of musical training and confidence in using music (McFerran & Crooke, 2014), means that for many teachers, these activities need to be clearly modelled, and visual supports, recorded music and/or video modelling provided to ensure successful generalisation.
**The link between research and practice.** Registration with the AMTA requires graduates to demonstrate that they meet a range of competency standards (AMTA, 2004). Whilst the competency standards specify that a music therapist should use suitable resources and techniques to facilitate effective music therapy programs, there is no description or indication as to where suitable resources or techniques should be sourced, criteria on how they should be selected, nor reference made to evidence-based practice (EBP). EBP is a term originating from the medical use of the term ‘Evidence-Based Medicine’, and is now more broadly applied in areas other than medicine, including music therapy. Criticisms of the highly specific nature of EBP have included its undermining of professional autonomy and the value of clinical expertise (Fisher & Happell, 2009), making a revision of the definition necessary to be inclusive of the practice of health care professionals from a range of specialisations.

Currently the four factors of EBP according to the National Autism Centre (2009) in the US, is practice that considers research findings, professional judgement, values and preferences. The fourth factor is capacity, which is the ability to implement practice with a high level of integrity and to ensure its sustainability over time. The challenge for the music therapist here is that funding bodies frequently emphasise research findings as being the most important component of EBP, whilst neglecting the value of professional judgement, values, preferences and capacity. Music therapists may have difficulty accessing research literature (Waldon & Wheeler, 2017), and in some instances, find that it is advantageous to use interventions not shown yet to be effective through research. To respond to the wide range of needs presented in their practice, the music therapist must navigate the demands of reading and critiquing research, and engaging in clinical reasoning that includes all four factors of EBP in order to ensure the best possible outcomes for clients.
Few studies detail the use of EBP by music therapists (Kern et al., 2013; Silverman, 2010), but there is even less known about the greater range of resources being accessed by music therapists, including conference presentations, workshops, peer mentoring and communication with colleagues from various specialty areas. Many researchers have therefore proposed that there is a disconnect between clinical research and practice (Aigen, 2015; Reschke-Hernandez, 2011; Stige, 2015), and so exploring the ways that music therapists source information may provide some hints for why this is so. Baker and Young (2016) suggest that best practice should be informed by evidence drawn from research and academic literature, as well as from real-world experience, so that music therapists may benefit from a range of equally valuable options to meet the needs of clients. Gathering music therapist perceptions about both EBP and the additional resources that inform their clinical reasoning are essential in training music therapy professionals and for providing ongoing professional learning to music therapists throughout their career.

**Music Therapy Professional Development**

This study focuses on the professional practice experience of music therapists, and the factors informing their practice. Therefore, this section will commence with studies on how professional identity is formed in the early years after graduation. Phenomenological studies have explored a number of influences on practice in the formative years, highlighting that the music therapy professional is a product of their personal, educational and musical histories.

**Forming a professional identity as a music therapist.** Once a music therapist’s training is complete, the early professional years typically involve forming a professional identity in the context of their music therapy employment. A range of factors will impact the new music therapist, and these factors interact with each other in the workplace context (Warren & Rickson, 2016). The need for new graduates to have access to music therapy networks is important at a time when they may be carving out new positions and shouldering
new professional responsibilities (Seah & McFerran, 2016). Gonzalez (2011) also speaks about the music therapists’ transition to practice involving an integration of self-concept as a musician with their new identity as music therapist. She concludes that music therapists can be influenced by the culture in which they developed their music skills, and that this will inform the process of becoming a new kind of music professional.

Exploring the forming of professional identity, Warren & Rickson (2016) revealed that a need for validation and connection with other professionals was important to music therapists in New Zealand. This notion of validation was seen as a key influence on shaping practice, and that this could come through reciprocal professional communication with colleagues and other music therapists, through a sense of being competent in their work, and in the ability to adapt practice to changing client needs and workplace settings (Warren & Rickson, 2016). It is vital for employers of new music therapists to be aware of this transition to practice experience, so they may provide optimal levels of support and challenge for new professionals.

**Influences on music therapy practice.** A small number of studies have considered specific influences on the music therapists’ practice, such as their musical history, culture, co-qualification, ASD learning frameworks and Neurologic Music Therapy (NMT) (Carpente, 2009; Gonzalez, 2011; Hurt-Thaut & Johnson, 2015; Shapiro, 2005; Walworth, 2007). Shapiro (2005) discovered how the influence of music from other cultures, can help to broaden one’s range of improvisational styles, enabling social connections particularly where there is no shared spoken language. Mizrahi (2015), in her interviews with five dual trained teachers and music therapists revealed how being co-qualified in a school setting could influence practice. Her participants described how fulfilling both roles of teacher and music therapist impacted how they defined their identity, communicated with staff, assessed progress and drew on knowledge from both disciplines to provide a unique perspective on
addressing student needs (Mizrahi, 2015). For music therapists working within an NMT framework, practice is influenced by its highly structured and standardised set of clinical techniques (Hurt-Thaut & Johnson, 2015). With the rise in research around motor-planning deficits in people with ASD (Bhat, Landa, & Galloway, 2011; Hurt-Thaut & Johnson, 2015; Proffitt, 2015) this type of standardized treatment model may have an increasing influence on music therapists working with individuals with ASD.

Studies on the experience of practising music therapy. A small number of studies shed light on how music therapists experience their practice. In Lee, Davidson and McFerran’s study (2016), music therapists shared their thoughts on wellbeing outcomes for clients, but also for themselves as part of their work. Positive experiences in music therapy sessions were spoken about in terms of the music therapist’s own sense of wellbeing and improved mood after sessions, and how this contributed to an increased motivation to continue on with their work. Some of the participants however also noted negative feelings when anticipating the more challenging groups, and that these feelings motivated them to reflect on their responses and increase understanding about their relationship with those clients (Lee et al., 2016). Similarly, Quiroga’s study (2015), found that challenging moments for the music therapist could evoke a range of emotions and feelings, and that through reflection, these could have positive outcomes for the music therapist and client. Perhaps these challenging moments are vital in building the music therapists’ resilience and ability to learn from clinical challenges.

The theme of reflection appears again in Muller’s research (2008) into the experience of music therapists being emotionally present with clients. He concluded that it was important to both immerse oneself in the moment in music therapy, but also to reflect on the experience. The contention appeared in that, the more the participants engaged in one of these practices,
the less they were engaged in the other. Therefore, a balance of immersion and reflection is
needed in order for the therapist to be present with clients in music therapy.

From these studies, it appears that the music therapist may experience many deep,
profound and sometimes challenging moments as part of their music therapy practice. Many
of these moments have historically been difficult to describe in concrete terms. Taking a
qualitative approach in all these studies has enabled researchers to uncover an eloquent
understanding of some of these experiences. Wheeler (1999) noted that the small number of
studies on the experience of music therapists may be due to a number of factors, including the
reluctance of participants to reveal their shortcomings, and the belief that the focus should be
on clients, not the therapists. However, an increased understanding of the music therapy
practice experience is important for educators and leaders, as it increases awareness of
professional learning needs and the factors impacting job satisfaction.

Motivation and satisfaction of music therapists. A number of recent survey-based
research studies on professional aspects of music therapy practice have been conducted in
Australia, Korea, the U.K., the U.S., and one study with an international focus (Jack et al.,
2016; Kern et al., 2013; Kim, 2016; Langan, 2009; Waldon & Wheeler, 2017), yet few studies
specifically explore the motivation of music therapists to continue in their roles over time.
Understanding what motivates music therapists is important to those managing allied health
and music therapy teams, in order to create the conditions for staff retention and job
satisfaction.

A study by Lee et al. (2016) revealed that music therapists could be motivated by a
passion for the client populations with which they worked, and a firm belief in the power of
music to achieve therapeutic benefits for clients. It was interesting that in this study on
perceived wellbeing effects on clients, that the music therapists revealed their own sense of
wellbeing as contributing to their personal satisfaction and motivation for the work. Lee
(2014) also discovered that music therapists found meaning in developing deep, interpersonal relationships with long-term clients, and joy in the bonds built through sharing music together.

In focusing on the factors that impacted the music therapist’s work satisfaction, it has been found that a lack of support from administration, poor salaries, isolation, limited opportunities for advancement and performing activities outside their field have contributed to music therapist experiences of dissatisfaction (Clements-Cortes, 2013; Decuir & Vega, 2010; Hills, Norman, & Forster, 2000; Kern & Tague, 2017; Kim, 2012; Oppenheim, 1987). However, it has also been shown that being part of a team can increase collective self-esteem, and foster higher levels of personal accomplishment (Hills et al., 2000; Kim, 2012). This ability to collaborate effectively in teams is highly valued by music therapy employers (Spring, 2010), and it is important to address this competency as part of music therapy training (Jack et al., 2016).

From these studies, it appears that there are several motivations for music therapists to commence and continue in their work. These may be internally driven through personal belief systems or as a direct result of engaging in their practice, deriving satisfaction from success and developing meaningful relationships with the individuals in their care. Further research is needed in order for team leaders to ensure music therapy staff retention and satisfaction over the long term.
**Lifelong professional learning.** Music therapists are required to engage in ongoing professional learning throughout their careers, both by a Code of Ethics in Australia (AMTA, 2014), and a requirement to accrue a set number of Continuing Professional Development (CPD) points every 2 years (AMTA, 2017). Guiding documents and requirements may vary from country to country, but all essentially emphasise the importance of continued learning in maintaining professionalism and best practice. CPD points in Australia may be earned through completing formal learning, informal learning and engaging with the profession (AMTA, 2017).

In a study on sources of knowledge for U.S. music therapists, Geist (2016) discovered that the majority of his respondents rarely accessed research literature or professional development activities to inform their work. Instead, they identified clinical training and clinical practice experiences as having a greater influence and impact on their clinical decision making (Geist, 2016). A previous survey by Kern et al. (2013) indicated that whilst music therapists working with individuals with ASD were well prepared for the work by their tertiary training, ongoing online training and information sharing was also important to keep up with the rapidly moving knowledge base around music therapy and ASD (Kern et al., 2013). It appears that whilst national music therapy associations recommend ongoing and varied professional learning, music therapists look to their practice experience more than the research literature to inform their practice.

**Music Therapy in Special Education**

A great number of music therapists have documented and researched their work in mainstream and specialist schools (Adamek & Darrow, 2005; Darrow & Giorgos, 2013; Booth, 2004; Brown & Jellison, 2012; Daveson & Edwards, 1998; Nordoff et al., 2007; Rickson & McFerran, 2014; Skewes McFerran & Elefant, 2012; Tomlinson, Derrington, & Oldfield, 2012). For instance, McFerran & Elefant (2012) identify one of the changing
expectations as being the need to negotiate and align with prevailing EBP requirements for service provision, and the demand for measurable skill acquisition over developing a therapeutic relationship. Similarly, at Giant Steps, there is an emphasis on meeting curriculum outcomes and developing positive relationships (Giant Steps, 2017a), but a lesser understanding of the benefits of the therapeutic relationship within a music therapy dyad. Whilst it is imperative that music therapists are able to adapt their practice to meet the expectations of specialist schools, it is equally important to increase the school’s awareness of their own specialist knowledge and how they may contribute to positive student engagement outcomes.

**Special education in the Australian context.** Around the world, the move towards inclusion is taking place in response to changes in education policies such as Individual with Disabilities Education Act (IDEA) in the U.S. (U.S. Department of Education, n.d.), and Policy Guidelines on Inclusion in Education (UNESCO, 2009). In Australia, the Disability Standards for Education (Australian Government, 2005) outline the rights of students with a disability to “access and participate in education on the same basis as other students” (Australian Government, 2005, p. iii). Australia parents, therefore, have the right to choose the school for their children, regardless of the level of learning needs, and schools must make reasonable adjustment to allow this to be possible (Australian Government, 2005). Increasingly children with ASD are accessing education through NSW government schools (Forlin, Chambers, Loreman, Deppler & Sharma, 2013), however it is often the case that the population of students enrolling in specialist schools are those requiring the most significant support that cannot be provided in a mainstream setting, and therefore require a heavily adjusted curriculum program, complemented by therapeutic support.

In the NSW Ombudsman Inquiry into behaviour management in schools, (NSW Government, 2017), it was noted that children with disabilities generally make better progress
in a mainstream setting. However, it was also noted that there are some students with complex needs and challenging behaviour who appear to require different approaches and supports to those typically available in a mainstream setting. These include the ability to offer smaller class sizes, personalised support, particularly for those with complex mental health concerns (NSW Government, 2017). Simonoff et al. (2008) has also noted that co-morbid psychiatric disorders are common in children with ASD, with 70% of children with ASD affected by at least one disorder, and 41% with two or more, the most prevalent being social anxiety disorder, attention-deficit/hyperactivity disorder and oppositional defiant disorder. Roberts (2017) further identified that the lack of resources for non-academic curriculum and activities, such as social emotional education and work-based learning, makes it difficult for students to develop the non-academic skills they need in a mainstream school. These descriptions capture the needs of the cohort of students at Giant Steps. Whilst every effort is made to prepare and transition as many students as possible to a mainstream or supported, inclusive setting, the majority of students continue to require the ongoing high levels of support and resource that a smaller, specialist school is better able to provide.

**Defining specialist schools.** The NSW Parents’ Council describes the option of special schools as a setting that offers individualized programs for students with more than one disability, needing intensive support to engage in learning (Grocott & Hickmott, 2015). Additional support may consist of smaller class sizes, support staff and access to therapy services.

The terms ‘special schools’ and ‘special education’ are most commonly featured in literature on this student population. In some settings, the term ‘specialist school’ is used to describe schools with a focus on a particular subject, such as the performing arts, sports or science. However, as this term is increasingly being applied to schools catering solely for those with significant learning needs (Association for Children with a Disability, 2015), I will
be using the term ‘autism specialist school’ to refer to schools catering for students with ASD and significant learning needs.

**Australian music education curriculum and music therapy.** As with the other therapy programs at Giant Steps, music therapists contribute to the curriculum program by addressing curriculum outcomes alongside therapy goals in their music therapy and collaborative music programs. In the new Australian national curriculum, the general capabilities listed under music include:

- Literacy;
- Numeracy;
- Information and communication technology capability;
- Critical and creative thinking;
- Personal and social capability;
- Ethical understanding; and
- Intercultural understanding (ACARA, n.d.).

Giant Steps blends therapy with curriculum in music therapy programs, believing that music therapy and music education are different, but complementary, and that the teaching of music skills can enable students to engage socially and competently in group music-making (Giant Steps, 2017b).

Langan (2009) surveyed Australian music therapists working in special education and found that 90% of respondents were referencing six or more of the NSW Board of Studies Life Skills Syllabus in their work and outcome reporting. It is unclear whether this is by request of the school or on the initiative of the music therapist. A hint that this has not always been a comfortable fit is made in Wilson and Smith’s literature search (2000) revealing that a wide range of assessment tools were being used by music therapists in special education settings, with 51% using original assessment tools. This may be due to music therapists not
feeling that standard assessment tools from education are easily applied to their work, and that adjustments are necessary to combine therapeutic and educational outcomes.

Langan’s assessment tool aims to blend the outcomes of the Life Skills Syllabus with music therapy outcomes, and the music therapists at Giant Steps have similarly developed adjusted assessment tools to track student progress over time. Tailored assessment tools are able to capture the more complex needs of students, however by not utilising standardised assessment tools, they become increasingly set apart from research conducted in specialist schools. A standardised assessment that is particular to students with ASD and significant learning needs would be of great benefit to school students and music therapists. This benefit could be achieved through the promotion of standardized, multi-site research and collaboration between schools to accurately capture the progress of students over time.

**Music Therapists Working Collaboratively in Specialist Schools**

Music therapists employed in specialist schools collaborate with a range of professionals, support workers, administrators, families and carers (Strange, Odell-Miller, & Richards, 2016). Some of the earliest collaborative work documented was between Paul Nordoff, a composer-pianist, and Clive Robbins, a special educator. Their original model was developed to include a music therapist and co-therapist, with benefits to the client that were “musical, procedural, psychological and practical” (Nordoff et al., 2007, p. 189). Whilst the model of music therapy practice at Giant Steps does not fit within a Nordoff-Robbins framework, collaboration between the provider of musical support and the person facilitating direct engagement with the student is frequently seen in group sessions through the relationship between the music therapist and support staff.

A collaborative outlook by music therapists has produced a large number of research studies that cross one or more disciplines (Guerrero et al., 2014; Hobson, 2006; Loewy, 2001; Register, 2002). Collaborative music therapy practice within and associated with specialist
schools is also described through different models of service delivery, including collaborative programs (Skewes McFerran, Thompson, & Bolger, 2016; Rickson & McFerran, 2014), and providing input via a consultative model (Rickson, 2012). The manner of collaborative practice may vary depending on the position of the music therapist in relation to school staff. For example, when providing service through consultancy to schools, Rickson (2012) highlights the different skills and ethical issues needed to effectively offer this kind of support. These include practice experience, informed consent and investment by both the school and consultant in the process, and self-understanding through reflection (Rickson, 2012). A large number of music therapists work for small numbers of hours per week in a school, casually, on a contract basis or as a consultant (Jack et al., 2016; Register, 2002; Silverman & Furman, 2014). The scant research available has therefore focused predominantly on this part-time workforce, with little known about the experience of music therapists who are employed for most or all of a school week, on a permanent basis, and fully integrated into all aspects of service in school staff team as they are at Giant Steps.

In writing about music therapy in schools, Hall (2012) describes music therapy and music teaching as two distinct professions with differences in training, application and assessment, but also, that there are areas of overlap. She highlights how teachers and therapists may use some of the same activities to reach their respective goals but may have a different rationale for making those selections. This importance of being able to adjust music activities to meet individual student learning needs was also confirmed in McFerran, Thompson and Bolger’s (2016) study, along with its key role in enabling all staff to use music to build stronger relationships with students. To this end, Giant Steps teachers will consult with the music therapists on developing and accessing music resources to address these needs in the classroom. In the process, the teacher becomes more aware of the clinical reasoning of
music therapy, and the music therapist learns how to relate their work to a curriculum framework.

**Defining collaboration.** Register (2002), in her study of collaboration and consultation amongst music therapists, defined collaboration as a “process of working jointly with others in an intellectual endeavor to bring about change, and it implies shared responsibility” (p. 305). Twyford and Watson (2008) describe some of the benefits of the music therapist collaborating in teams as being an improved consistency of interventions, a holistic understanding of client needs, and a greater knowledge base to draw from, in targeting clinical goals. Twyford and Watson also point out the professional benefits of collaborative working to those who engage in the process, including a deeper understanding of the roles of other team members, reduced feelings of isolation and emotional support during challenging times. However, collaboration requires great effort, and many factors may impede its success along the way, such as individual personality and communication style, a lack of flexibility, institutional hierarchies and the adequate allocation of time (Twyford & Watson, 2008).

**Multi, inter and transdisciplinarity.** There is a great deal of literature around the team models, described variously as multidisciplinary, interdisciplinary and transdisciplinary, however the meanings of these terms may vary from country to country. Choi and Pak (2006) describe multidisciplinarity as drawing on the knowledge from each discipline but remaining within professional boundaries; interdisciplinarity as coordinating links between the disciplines; and transdisciplinarity as transcending the boundaries of discipline (Choi & Pak, 2006). The choice between these three models varies depending on the needs and collaborative culture of the context.

Reasons for employing a transdisciplinary model may relate to the complex needs of populations that require a high level of support (Wheeler, 2003), but also where teams need to
work closely together, in a highly cohesive manner with shared understanding around the needs of clients (Twyford et al., 2008). Service provision is enriched and made more effective by having professionals from more than one discipline release their professional boundaries and work alongside each other, utilising shared knowledge and skills (Twyford et al., 2008).

**Music therapy and transdisciplinary practice.** Much of the early literature about music therapists in teams focused on multidisciplinary models (Bladergroen, 2003; Odell-Miller, 1993; Priestley, 1993). More currently, the move is towards interdisciplinary teams (Magee, 2014; Robinson, 2015), transdisciplinary teams (Twyford et al., 2008), and even synerdisciplinary teams (Krout, 2004). Krout describes synerdisciplinary practice as a next level of transdisciplinarity, recognizing the role of music to hold and connect teams in collaborative work (Krout, 2004).

Despite recognition of the value of transdisciplinary teams, only 2.55% of music therapists in Australia report that they work in transdisciplinary teams, compared to 33.43% who work as part of a multi/interdisciplinary team (Jack et al., 2016). As the new model for disability funding in Australia, known as the National Disability Insurance Scheme (NDIS) continues to roll out across Australia, NDIS providers are expected to deliver services as part of a transdisciplinary team (NDIS, 2014). Therefore, it is reasonable to assume that the skills of collaboration with professionals from other disciplines will continue to be an area of professional development need for music therapists and other allied health professionals.

Little is known about how music therapists work in transdisciplinary teams. Hamilton (2005) believes there are benefits in this style of practice, and that having the opportunity to interact with, and learn from other professionals builds the confidence of new nursing graduates along with clinical competence. Twyford and Watson (2008) also detail a number of strategies for music therapists working within this model in schools. These include learning the language of education and other professions, attending team meetings, starting
out in a consultative role, and being flexible enough in one’s role to contribute to the team in more general ways across the day. When music therapists incorporate these strategies, and contribute to ongoing professional learning in transdisciplinary teams, a refreshing and stimulating atmosphere can be created in which to grow practice (Twyford et al., 2008).

**Music therapists working in discipline-specific teams.** Despite the fact that many school and medical settings have music therapy departments where more than one music therapist is employed, no research literature was found exploring the experience and/or function of these discipline-specific teams. Similarly, no studies on unidisciplinary teams of occupational therapists or speech therapists were found. However, research exploring the ways teachers learn from each other in teams of professionals with varying levels of experience and skill shows there are flow-on effects in improved outcomes for students (Sun, Loeb, & Grissom, 2017). Additionally, the presence of a transformational leadership style in teaching teams has a positive influence on teachers, enabling innovation and organizational change (Bouwmans, Runhaar, Wesselink, & Mulder, 2017).

Outside of school-based teams, a recent study on nursing teams affirms previous studies indicating that working together within the nursing discipline improves satisfaction and morale for team members, whilst also increasing patient safety (Dickerson, 2017). From a leadership perspective, nursing managers considered that the opportunities for learning amongst professionals of differing levels of experience was an advantage, and that ongoing professional learning is needed for nursing leaders to support their level of responsibility in guiding their teams (Ferguson & Cioffi, 2011).

The lack of literature regarding allied health therapists working together in teams of their own discipline may be due to a number of factors. As allied health therapists often speak of a lack of recognition from other disciplines, it is perhaps the priority on establishing a professional profile alongside other disciplines that has directed the focus of research in the
area of collaboration. It may also be that professionals of the same discipline feel a higher level of understanding about their team’s practice, and see less need to clarify their practice through research. As a growing number of music therapists are working in multi, inter and transdisciplinary teams within specialist schools, it is crucial to understand this experience at a deeper level, for employers, trainers and the music therapists themselves.

Summary

A review of the literature reveals that with the rise in prevalence of ASD, music therapists are increasingly working with this population, and needing to adjust their practice to align with, or complement ASD learning frameworks. An eclectic approach is common for music therapists, utilising a range of methods informed by research and workplace learning. Although music therapists are required by their professional organisations to maintain learning throughout their careers, it appears that they have difficulties accessing research literature, and instead look to learning from their clinical training and experience to develop their practice.

Music therapists working in schools may be influenced by the structure and culture of an educational focus, and they may be challenged both by establishing a professional identity for themselves within the team, and by the nature of working with students with significant learning needs. However, it seems that these challenges may be offset by the validation received through professional connections, and a positive team approach to student outcomes. Furthermore, the deep connections made with students, and the witnessing of their achievements motivates music therapists to continue in their profession.

Discussions around transdisciplinary and interdisciplinary practice are highly topical at this time of disability reform in Australia, with the introduction of the new NDIS funding model. For this reason, music therapists already working in transdisciplinary teams will have much to contribute in developing best practice for this model. However, in-depth qualitative
data exploring the experience of music therapists working within and across disciplines, with students with significant learning needs, is limited. The unique transdisciplinary working environment of the music therapy team at Giant Steps may provide a fascinating insight into the deeper experiences of teaming and learning. Data from these music therapists may also be important for those in leadership positions, to identify what is most important in building strong, sustainable teams of music therapists in specialist schools. In order to address this gap in the literature around music therapists working together in teams, I will address the question: What is the lived experience of a music therapy team in an autism specialist school, and what are the key factors informing their practice?
Chapter 3

Method

Introduction

The purpose of this study is to examine the phenomenon of music therapy teaming and learning, through drawing on the experiences of the Giant Steps music therapy team. I decided that a qualitative method was the most appropriate means of gaining a deep understanding of their experiences. Influence was drawn from descriptive phenomenology, primarily from the writings of Husserl (1931) and Giorgi (2009). Descriptive data was gathered through phenomenological interviews, and the method of analysing the data was inspired by descriptive phenomenology (Giorgi, 2009), the phenomenological microanalysis method (McFerran & Grocke, 2007) and the iterative stages of the phenomenological approach (Finlay, 2014).

This chapter will outline the research design, including the literature that guided the process. Background on the philosophy and methodology of descriptive phenomenology will be covered, including a focus on locating myself within the context, and the management of subjectivity through an examination of my pre-understandings. Reflections through the writing of the epoché will be shared, along with the research questions and preparations for the interviews. My procedure of phenomenological interviewing is then laid out, along with the relevant ethical considerations. Finally, a detailed description of the analytical process is provided, showing the practical steps taken and the level of depth involved in engaging with the data at an individual level, and with a wider group focus.

Epoché

This chapter commences with the epoché, an outline of my own ideas, beliefs and values around the experience of working at Giant Steps, and the various influences on my practice. Epoché is a Greek term, first articulated by Husserl, and Moustakas describes it as
meaning to “refrain from judgement, to abstain from or stay away from the everyday, ordinary ways of perceiving things” (Moustakas, 1994, p. 33). Husserl wrote how the discovery of the essences of phenomena was possible by putting aside the ‘natural attitude’ of one’s own everyday assumptions and beliefs in order to attend fully and be open to different perspectives from the data (Husserl, 1982). In the natural attitude, one is constantly evaluating experiences in the present, based on experiences from the past. However, in this constant state of comparison, he spoke of the present experience under study being diminished. Therefore, Husserl (1931) introduced the concept of bracketing previous knowledge about the phenomenon under study, in order to determine the essence of the present experience.

Giorgi (2009) believed that this natural attitude could not be avoided, and that researchers need not forget everything they know about the phenomenon they are exploring. Instead he believed that past knowledge should be made explicit, but not engaged whilst focusing on the present experience (Giorgi, 2009). Being immersed in this context meant that I already had my own experience and assumptions about the phenomenon of music therapy teaming and learning. To differentiate my own experiences from those of the music therapy team, I would need to bring them into consciousness before focusing on the participants. I will discuss my process of reflexivity in further detail under Managing Subjectivity Through Reflexivity.

The first version of my epoché was written at the commencement of my research. It outlined my beliefs in the value of research literature and practice wisdom, the value of learning from other disciplines, and how team support can offset some of the challenges of this work. It described how I have become increasingly selective about music therapy information over time, and that music therapy and music curriculum are different, but complementary. This initial epoché also reflexively explored the nature of my different roles
at Giant Steps and for the study. The full époché is included at Appendix A. At times, I would return to this époché, particularly when the participants’ descriptions appeared to align very closely with my own (McFerran & Grocke, 2007), to ensure that I was reading the data with fresh eyes and not bringing my own views either consciously or unconsciously into the process. Then again, whilst shaping the presentation of the Results chapter, I added to the original époché, adding further pre-understandings in light of the emerging themes. A reflexive Review of Researcher Standpoint is included in Appendix B.

Since the participants for this study were to be the members of my own team, I navigated several roles, including school leadership team member, music therapy team leader, music therapy clinician, colleague, friend, researcher and student. In a scientific model of research, the advantages of being an objective, distanced outsider researcher are highly valued. However, Berger (2015) and Ledger (2010) also talk about the benefits of being an insider to research. These may include having easier access to participants, a potential for greater buy-in from previously established relationships, a head-start in knowledge of the context, and the possibility of understanding the more nuanced reactions of participants. The blurring of boundaries and the possibility of imposing values and beliefs however is a risk of insider research (Ledger, 2010), so I took several measures to address this during recruitment, interviewing and data analysis, which will be explained in each relevant section.

Research Questions

My motivation in this study came from an interest in exploring the Giant Steps music therapists’ perceptions of their work, internal and external influences on practice, what they valued and found meaningful, and what was most important to them. I wanted to explore both the individual and collective experiences of the music therapy team, as I felt that individual, personal experiences could be expressed through group themes, or alternatively be unique to
the individual. As a team leader, I believe that the knowledge gained from listening to both individuals and groups gives a more rounded understanding of team experience.

The two research questions guiding this study were:

1. What is the lived experience of a music therapy team in an autism specialist school?
2. What are the key factors informing the practice of a music therapy team in an autism specialist school?

Research Design

The following sections outline my design for this research study, beginning with some key ideas from phenomenology, how knowledge is constructed in phenomenology and a look at some historical examples of methods used in phenomenological studies. I will describe how I dealt with concepts such as bracketing, interpretation and the managing of subjectivity through reflexivity. Also included will be references to the literature informing my decisions around data collection and analysis. My aim is to show how my process of thinking led to a research design that would comprehensively address the research questions above.

Design selection. Since my aim was to explore the lived experience of this team of music therapists, and as I wished to gather data in the form of first-person accounts, an interpretive, phenomenological approach and attitude resonated with my research purpose. The ideas from descriptive phenomenology supported my aim of gathering rich descriptions from the participants about their experiences and the influences on their practice. I aimed to draw deep levels of meaning from their accounts without attempting to cloud or change their meanings through my own beliefs and assumptions (Giorgi, 2009). Several phenomenological studies into music therapy practice and related experiences have been published over the last 25-30 years, demonstrating it to be an effective and useful approach
for increasing understanding around many facets of music therapy (Comeau, 2004; Ghetti, 2011; Lee, 2014; Muller, 2008).

**Phenomenology.** Phenomenology has a rich history, rooted in the writing of some of the most prominent philosophical thinkers of the 20th century, such as Brentano, Husserl, Heidegger and Giorgi. The writings of Brentano and his descriptive psychology (1995) provided the basis of concepts such as knowledge being gained via the study of experience through human consciousness. Brentano also wrote about how consciousness could be directed towards an object, a concept that Husserl would later describe as intentionality (Giorgi, 2009; Husserl, 1970). Husserl (1969) described how an object or phenomena was given reality through the act of directing one’s consciousness towards it. Husserl additionally wrote about a pure phenomenology (1969), developing an approach to the analysis of text now known as descriptive phenomenology.

Phenomenologists believe that nothing can be known without the engaging of consciousness, and they are most often interested in the “experienced as experienced” (Giorgi, 2009, p. 69), as well as the many possibilities of meaning that experience may elucidate. In writing about the descriptive phenomenological method, Giorgi clarifies that nothing may be spoken of without taking into consideration the person’s consciousness of that phenomenon, and that phenomenology is interested in both “what is given to consciousness and how it is given” (Giorgi, 2009, p. 68).

**Construction of knowledge.** Van Manen’s (1990) description of how knowledge is constructed in phenomenology is one interpretation that was clear and helpful in thinking about addressing the research questions. Van Manen’s writing, based on the University of Utrecht tradition, describes the construction of knowledge in phenomenology as taking three forms: (a) knowledge as text; (b) knowledge as understanding; and (c) knowledge as being (Van Manen, 2011). Phenomenological text differs from other text in books and documents
in that meaning is not explicit, but is embedded in the text, and must be extracted (Van Manen, 1997). By actively reflecting on the embedded meaning in phenomenological text, the researcher comes to a third-person understanding of the experience being described, and in this study, the meaning from interview data was elucidated through uncovering Experienced Meaning Units (EMUs), Group Themes and Distilled Essences from the data given (Husserl, 1931; McFerran & Grocke, 2007). The process used to create these EMUs and Group Themes will be described in the section under Data Analysis. The final knowledge from phenomenology is not so much information, but a deeper perception of the phenomenon itself. I would view this as being an increased understanding of how this team experiences their work context, and how they interact with information, people and the practicalities of working in an autism specialist school.

**Phenomenological methods.** The Husserlian method (1931) engages with three techniques designed to draw out meaning from first person accounts. Firstly, there is an assumption of the phenomenological attitude through the writing of an epoché and reduction. The next stage involves directing one’s consciousness towards the phenomenon under investigation, and intuiting its essence through imaginative variation (Husserl, 1931). Moustakas (1994) described imaginative variation as seeking “possible meanings through the utilization of imagination, varying the frames of reference, employing polarities and reversals, and approaching the phenomenon from divergent perspectives, different positions, roles, or functions” (pp. 97-98). Finally, in the Husserlian method, a description of the uncovered essence is written, in a form that should be understood by others (Giorgi, 2009). Whilst Husserl wrote in great depth about the philosophical application of the techniques just described, he did not outline the process or steps followed in order to draw out the distilled essence itself, so as to form the final description (Jackson, 2016). This led me
to search for methods which gave greater detail around possible steps in analysing the interview data.

The level of detail in phenomenological methods has varied greatly over time, and in more recent years, writers such as Giorgi, van Kaam, Colaizzi and Moustakas worked to create structured and detailed procedures for phenomenological inquiry (Jackson, 2016). Jackson highlights certain aspects pertinent to conducting a phenomenological study, including transparency about the use of an epoché and bracketing, showing how methodological decisions are made regarding data collection and analysis, and using quotes and descriptions drawn directly from the data (Jackson, 2016).

Giorgi (2009) took the writings of Husserl and contributed greatly to the rigour of phenomenology by giving guidance on how to carry out phenomenological studies, without prescribing the methods as absolute. Over a period of time from the 1970s to the present, he has developed the descriptive phenomenological method, including the steps of:

1. Writing the epoché before data is collected;
2. Gathering rich descriptions in the form of interview transcripts; and
3. Drawing out meaning within the text through searching for essences (Giorgi, 2009).

Giorgi (2009) considered the essences to be the result of a study that enabled others to see the experience, and often recognise it for themselves. Finlay (2009) also writes: “I value the communicative power of research that challenges, unsettles, and reverberates with our everyday experience of life” (p. 15). Van Manen (1990) referred to this recognition from others as phenomenological nodding, saying “A good phenomenological description is something that we can nod to, recognizing as an experience that we have had or could have had” (Van Manen, 1990, p. 27). This is another aspect of phenomenology that I found relevant to my study, the aim of making the findings accessible and relatable to readers.
However, I was also open to the possibility that the findings might contain surprises, and not necessarily only experiences that others have had, or could imagine having in their own work.

Other contemporaries of Giorgi such as van Kaam, Colaizzi and Moustakas also wrote about their processes for analysis (Jackson, 2016), with different levels of variation around using more or less interpretation, the ordering of steps, and levels of checking with participants. Despite the level of variation between their methods, all still remain congruent with the basic principles of a descriptive approach to phenomenology. For instance, whilst Giorgi did not write about returning transcripts or distilled essences to participants for checking, Colaizzi (1978) included a step to ask participants how his final description compared with their experience, and whether anything had been omitted. As I believed this would be a valuable way of checking the Individual Distilled Essences with participants, it was included as a step in my method.

**Managing subjectivity through reflexivity.** The process of listing presuppositions and putting them aside is often known as bracketing, where, as in mathematical equations, the information inside the brackets is processed first, then put aside and re-introduced when drawing the final result (McFerran & Grocke, 2007). It is important to clarify how I drew on this concept to manage the various roles held in the course of the study and the role of interpretation in analysing the data.

When considering the concept of bracketing, I viewed this as a metaphor, more than any kind of actual possibility in practice. I could not put aside my own background experience and knowledge, any more than I could step outside of my own skin (Denzin & Lincoln, 2011). Giorgi (2009) described bracketing in the following way: “Bracketing means ‘holding in suspension’, keeping a tension between the past and the present in order to discern their respective roles” (p. 93). I took the view that engaging a number of reflexive strategies would enable me to be consciously aware of my own experience and values. On
occasion, my own experience could even be seen as an advantage, enabling me to draw on a deep understanding of the context to understand what subtle references were being made in statements during the imaginative variation phase (Berger, 2015).

Finlay has written extensively on phenomenology (Finlay, 2008, 2009, 2013, 2014), and advocates for researchers to assume a phenomenological attitude. In order to engage with my project reflexively, I set about reflecting on my own preunderstandings of being in this team for a considerable time. As I became more aware of my own experiences, I actively worked to manage my own subjectivity, holding it lightly throughout the data collection and analysis. I strived to find a balance between acknowledging my own understandings, whilst privileging the voices of the participants.

Finlay (2014) describes four steps in adopting the phenomenological attitude. The first involves “seeing afresh” (p. 122), breaking away from the natural attitude of the way in which we normally see things, so we may be open to new ways of understanding the phenomenon. She outlines that this includes engaging in reductions and bracketing, engaging a sense of openness and genuine curiosity, and ensuring a phenomenological attitude before proceeding (Finlay, 2014). For myself, this involved acknowledging my own preunderstandings about the phenomenon through the epoché, and setting them aside so that I might engage in a genuine curiosity about the experiences of the Giant Steps music therapy team. It required that I take a humble stance, stepping back from a position of knowledge as the leader of the team, and having the “capacity to be surprised and sensitive to the unpredicted and unexpected” (Dahlberg, Dahlberg, & Nyström, 2008, p. 98). The second step, Finlay calls ‘dwelling’, and for me, this was a process of making myself at home with the data. She then describes the process of immersing the self in data, and that meaning units “are then progressively elaborated in an effort to pull out a deeper understanding. Meanings are then crystallized and condensed, with the researcher trying to stay as close as possible to
the participant’s actual words” (Finlay, 2014, p. 126). I found that in order to respectfully engage in this process, I needed to slow down, spending time with each statement, and each experience as described by the participants. From this I began to look for implicit meanings in each unit through reflection. The third step Finlay describes is ‘explicating the whole’, the distillation of meaning and searching for connections across the descriptions of participants. Free imaginative variation is used again in this process to arrive at a final description of the phenomenon as a whole. I will describe this process as I applied it in the section Explicating the Whole Through Identifying Group Themes. This stage also involved an ongoing reflexive process of comparing the experiences of the participants with my own “in order to move beyond the partiality of previous understandings and investments in particular outcomes” (Finlay, 2014, p. 130). In this study, this involved revisiting the epoché, and adding new pre-assumptions based on the results that were emerging in the Group Themes.

The final step Finlay describes is called ‘languaging’, the style of writing needed to express our findings in ways that balance the need for both scientific and artful descriptions, but still remain true to the phenomenon. She also adds a reminder that the language of phenomenology should be “tentative, emergent, and incomplete; there is always more to say” (Finlay, 2014, p. 134). The process of explicating the Final Distilled Essence will be explained under the section Languaging the Global Meaning Units and the Final Distilled Essence. These steps, alongside Giorgi’s method (2009), and McFerran & Grocke’s phenomenological microanalysis method (2007), proved a useful guide to dwelling in, and drawing meaning from the data.

The writing of the epoché was one of the reflexive strategies I used to clarify my standpoint, show transparency, and connect with any arising personal issues. As Finlay (2009) suggests, the epoché writing was not just be carried out at the beginning, but throughout the research process. Alongside the epoché, I engaged in other reflexive
strategies, including personal journaling, formal supervision and discussion with research colleagues. Meeting with my supervisor at regular intervals gave opportunities to discuss the project, to cross-check my presentations and interpretations of the data, and to ensure that my readings as an insider to the music therapy team resonated also with someone who was an outsider. I discussed my process of data analysis in detail with my supervisor, along with the challenges of occupying multiple roles in this study, and the desire to represent the essences of their descriptions fairly and accurately. I also met with the National Music Therapy Research Unit graduate research group of the University of Melbourne fortnightly by Skype, and twice per year face-to-face to share the progress of my project, and to invite questions and feedback from the group.

**Interpretation.** The idea of being able to present description without interpretation through bracketing was disputed by Heidegger, a student of Husserl’s, who believed that meaning was only able to be drawn from description through interpretation by the investigator (Heidegger, 1962). The idea of description with or without interpretation is a complex issue for phenomenology, with writers such as Finlay (2009) speaking about description and interpretation in phenomenology as a continuum, where writing may be more or less interpretive rather than simply one or the other. I found that it became necessary to apply interpretation through the forming of Structured Meaning Units (SMUs), EMUs, Group Themes and the Distilled Essences. However, in remaining as close to the participants’ own words as far as possible into the analysis process, I planned to use my own interpretation to draw a deeper meaning from their narratives, supported by my own experience of the context.

**Selecting a sample in descriptive phenomenology.** For the interviews, I needed to speak to individuals who were knowledgeable about, and had experienced the phenomenon being studied. Therefore, purposeful sampling was the method of identifying potential participants (Creswell & Plano Clark, 2011). Purposeful sampling was also relevant, as I
believed that this team of music therapists would be the only people who could comment on the experience being studied. On this basis, participants needed to be currently employed at Giant Steps, and an RMT registered with the AMTA. It is typical for phenomenological studies to be conducted with a small sample of up to ten participants (Creswell, 2014). However, as there were only four possible people in Sydney who had experienced the phenomenon under investigation, this was judged to be an appropriate number for this study.

Participants

**Ethics and informed consent.** Ethics approval was sought and received from the Human Research Ethics Committee through the University of Melbourne (HREC ID 1648068.1) on 27th October, 2016. A Plain Language Statement (Appendix C) and consent form (Appendix D) were prepared, outlining the purposes of the study, risks involved and giving information regarding opting out. Potential participants were asked to sign and return the consent form and direct any questions to the researcher or HREC.

**Recruitment to the project.** Due to the pre-existing workplace relationship between myself and the interviewees, and my position of seniority in the team, the Plain Language Statements and consent forms were sent via a third-party recruiter, with the aim of reducing - as far as might be possible - some of the pressure to participate. I approached an occupational therapist at the school who had expressed interest in my study, and he agreed to recruit on my behalf. The recruiter and I reviewed the Plain Language Statement, consent form and research plan together. We then drafted the invitation email together, so that he was familiar with the aims and methods of this study. As he already had the email addresses of those being invited, he sent out the invitations, along with the accompanying documentation, including a closing date 14 days later. The recruiter received responses to the invitations, and no additional questions were directed to him.
The participants. All four music therapists in the Sydney music therapy team agreed to participate and returned the signed consent forms. The data would therefore represent the full range of experiences of music therapists working in the Sydney campus. Participants were all RMTs registered with AMTA. At the time of the interviews, each music therapist worked across 3-5 classes, with an average of 15-22 students, and generally within one of the age-based programs of preschool (3-5 years), primary (6-12 years), secondary (12-18 years) or adult community college (18 years+). Whilst this was the case, three of the four RMTs also had experience working across different programs and teams in the school. After the interviews, all participants were asked to select a pseudonym for de-identification in the results.

Table 3.1
Participant Details

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>Years Registered</th>
<th>Years at School</th>
<th>Program</th>
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<td>Secondary</td>
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<tr>
<td>Grizelda</td>
<td>48</td>
<td>6</td>
<td>6</td>
<td>Primary</td>
</tr>
<tr>
<td>Louise</td>
<td>45</td>
<td>9</td>
<td>4.5</td>
<td>Primary/Secondary</td>
</tr>
<tr>
<td>Sally</td>
<td>39</td>
<td>4</td>
<td>1</td>
<td>Adult College</td>
</tr>
</tbody>
</table>

Procedure

Phenomenological interviews. In keeping with a descriptive phenomenological methodology, I looked to gathering descriptive data in the form of phenomenological interviews. To encourage participants to freely describe their experiences, I conducted loosely structured interviews, using a small number of open-ended questions, and a list of ideas for prompts and clarifications to draw deeper levels of description. Kvale and Brinkman (2009) highlight that “for a phenomenologically based meaning condensation, it becomes paramount to obtain rich and nuanced descriptions of the phenomena investigated in the subjects’ everyday language” (p. 207), and in this study, the language of the participants was maintained as far into the analysis as possible.
Kvale also paints two vivid metaphors: the interviewer as miner, and the interviewer as traveller. The researcher as miner is described as follows:

Knowledge is understood as buried metal and the interviewer is a miner who unearths the valuable metal. The knowledge is waiting in the subject’s interior to be uncovered, uncontaminated by the miner. The interviewer digs nuggets of data or meanings out of a subject’s pure experiences, unpolluted by any leading questions (Kvale, 1996, p. 3).

In embarking on these interviews, I particularly resonated with the miner metaphor, feeling that the nuggets of knowledge were buried within these participants, some very close to the surface, others that might require a little more digging to uncover. This might be due to the more introverted personalities of some participants, that they may not be accustomed to talking about this topic, or that they may not be consciously aware of some personal feelings around the topic. My tools in this phase of the study would be the interview guide, a range of prompts and probes and the active listening skills I had developed as a music therapist.

Ritchie and Lewis (2003) mention that “moments of silence in in-depth interviews are usually very productive and it pays dividends for the research if the interviewer can hold the pause until the participant is ready to speak” (p. 157). In order to see whether the open guiding questions and prompts would encourage discussion and description, a test interview was conducted with an occupational therapist from the same school (McFerran & Grocke, 2007). Adjustments were made to the interview guide in response to suggestions from the occupational therapist and from my own reflections. These included the addition of a warm-up question before asking about their experience. Ritchie and Lewis (2003) say that:

It is at the beginning of the interview that interviewees realise that their role is to ‘open up’ and give full answers. They can begin to do this most easily where the subject matter is something with which they are familiar (p. 145).
I believed that asking them to tell me about how they came to study music therapy and work at Giant Steps would be a familiar topic they could describe in detail, and in the process, become accustomed to talking at length.

From the test interview, it was also suggested by the occupational therapist that I add a final question, asking for an example of a specific meaningful experience, as this might help participants go into more depth with their descriptions, revealing their feelings about working at the school. Finally, I became acutely aware that the participants may feel a sense of time pressure, and the need to fill silences with talk, rather than taking the time they needed to reflect and describe experiences in detail. I added a note to talk about the value of silence in the introductory statement (Appendix E), and that at times, I would also need to occasionally take some time to formulate my own questions and responses.

Table 3.2 shows the final interview guide, including my starting questions, prompts and clarifiers.

Table 3.2

<table>
<thead>
<tr>
<th>Theme Question</th>
<th>Additional Prompts and Clarifying Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Introductory</strong></td>
<td><em>Further prompts when required</em></td>
</tr>
<tr>
<td>Can you tell me what led you study music therapy and how you came to work at Giant Steps?</td>
<td>That’s really interesting .. can you tell me more about that?</td>
</tr>
<tr>
<td></td>
<td>Can you describe that in more detail?</td>
</tr>
<tr>
<td></td>
<td>What do you mean by …?</td>
</tr>
<tr>
<td></td>
<td>Can you explain that further?</td>
</tr>
<tr>
<td></td>
<td>Can you share any examples?</td>
</tr>
<tr>
<td></td>
<td>Is there anything else you would like to add?</td>
</tr>
<tr>
<td>1. Can you describe your experience of working at Giant Steps</td>
<td><em>To clarify if asked</em></td>
</tr>
<tr>
<td>Theme Question</td>
<td>Additional Prompts and Clarifying Questions</td>
</tr>
<tr>
<td>----------------</td>
<td>--------------------------------------------</td>
</tr>
</tbody>
</table>
| Perhaps tell me about what your experience has been like for you, finding your place in the school, any positive or negative experiences. How do you usually describe what your work is like to others?  
*If narrative moves toward team work* Can you tell me more about what it’s like to be part of this kind of team? Any benefits or challenges? How might you explain it to an outsider? | |
| 2. What **informs** you in your practice? | **To clarify if asked** What kinds of information contribute to how you decide what to do and how to do it? Where do you source this information?  
*Further prompts where required* What sort of information makes you think “I could use that!” How do you decide what is useful or not, relevant or not, applicable or not? What do you think another music therapist might notice about how you practice? Examples?  
*If narrative moves toward curriculum* Can you tell me more about how you feel your practice sits with curriculum? | |
<p>| 3. What <strong>sustains</strong> you in your practice? | <strong>To clarify if asked</strong> What do you think it is that makes you stay? What makes you get up each morning and keep coming to work here? What supports, either within or outside school enable you to remain in this role? | |</p>
<table>
<thead>
<tr>
<th>Theme Question</th>
<th>Additional Prompts and Clarifying Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Can you tell me about an experience at the school that has held real meaning for you?</td>
<td>To clarify if asked</td>
</tr>
<tr>
<td></td>
<td>It could be an experience in your clinical work with students, with other staff or in other projects with which you’ve been involved</td>
</tr>
<tr>
<td></td>
<td>An experience that has encouraged reflection on your work and perhaps caused you to see it in a certain way</td>
</tr>
</tbody>
</table>

All the questions in the interview guide were open-ended, as I wanted to invite the participants to speak on whatever they deemed to be important, and to select which parts of their life experience they wished to share. The interview guide also included a number of prompts and clarifiers, to assist in keeping the narrative flowing, and to encourage the participants to speak further, following their initial statements if needed (Ritchie & Lewis, 2003). I familiarised myself with all questions, prompts and clarifiers, so I could remain present and not need to refer to them during the interview.

The final question was intended to provide a positive note on which to conclude the interview, in case it had been difficult to talk about the more challenging aspects of the work. This reflexive decision came from my role as team leader, and more personally, from a caring stance for the Giant Steps music therapists. I wanted the interview to be a positive experience for all the participants, one that they would enjoy and possibly even relish the chance to share from their years of experience. However, I was aware that there were potentially many challenging aspects to this work, and being in the final week of the final term of the school year, and at the end of a long day of session work, they may have had cause for emotional responses to questions or probes about their challenging moments. Whilst I felt descriptions of challenge were of great importance in building a well-rounded picture of their experience, I also wanted to end the interview in a way that would leave them feeling good about taking
part in the study. For this reason, the final added question asked for description of an experience that had held real meaning for them. Through this, I hoped that they would conclude the interview in a positive manner through reflecting on a meaningful aspect of their work.

At the request of the participants, the interview guide (containing questions only, no prompts or clarifiers) was distributed prior to the interviews, to allow them some time to think about how they would share their experiences. Some brought notes with them to the interviews, whilst others did not. Regardless, I took this as an indication that they wished to be well prepared and that they were ready to contribute to the study.

**The interviews with the music therapists.** Due to my senior role in the team, I was acutely aware of the power imbalance in these interviews, and I reflected at length on how to best manage this dynamic. I recognised that my existing professional relationship with each participant might have both positive and negative impacts on the interviews. For example, I viewed my own relationship with each of the participants as friendly and open, and we all appeared comfortable to share different opinions about our work with each other in team meetings. So, from a positive perspective, I hoped that this would translate into the interviews, creating a sense of ease and flow in the dialogue, honesty in their accounts of all kinds of experiences, and an openness to share thoughts that I may not have previously heard from them. However, from a more problematic perspective, it was possible that the participants might withhold information that they felt made them appear less professional, or aspects of the work that they found challenging, as they may have wished to project a confident professional face to me as their team leader. They may also have wanted to protect our future relationship through not speaking negatively about the workplace, students, or my role as team leader.
In an attempt to manage these potentially challenging dynamics, I prepared an introductory statement (Appendix C). In it I explained that I was truly interested in their perspectives and that there were no right or wrong answers. I talked about how this study could hopefully create learning opportunities for the team, the school, and the broader music therapy profession. I also took the opportunity to explain that their data would be de-identified, although with the small number of participants involved, anonymity could not be guaranteed. I also explained that they would have an opportunity to review their transcript and remove specific statements, if they wished. Other points mentioned in this introductory statement were aimed at creating a comfortable space for open dialogue, explaining the ways in which the data would be used to illustrate themes in the final results, and noting that personal information would not be sought. An acknowledgement of our prior professional and personal relationship was made, along with the hope that they would feel comfortable enough to share their experiences openly and honestly. A final opportunity for questions was given before commencing the interview.

The timing of the interviews is also worth noting. These were conducted in the final week of the final school term of the year, meaning that all the music therapists were quite tired and ready for a break. This made the answers around the question: “What sustains your practice?” particularly pertinent, as their answers reflected a searching for the things that kept them going when energy was at its lowest.

**Data collection.** All participants opted to conduct their interviews after school hours, and in one of the music rooms at the school, due to convenience and the fact that, in the height of the Australian Summer, the room was comfortably cool. Each interview took between 48-52 minutes, and recordings were made on an iPad using the app QuickVoice Pro, and on a laptop computer using the program Acala Audio Recorder.
Ritchie and Lewis (2003) mention that one of the helpful abilities of a qualitative interviewer is a good memory. They say that “it is often necessary to make a mental note of a point made earlier on by the participant and return to it at a judicious moment in the interview to seek further clarification or elaboration” (p. 142). After the test interview, I discovered that as I became more absorbed in listening to what the participant was saying, I was not always able to recall a key point that I wished to return to, as the initial narrative could often be quite long. So that I could recall important points for further clarification or discussion, paper and pen were provided on the table for both parties to make notes or reminders if they wished during the interview. So, whilst listening to free narratives during the interviews, I would note down a word or two about an interesting point which would warrant further exploration, as a reminder to return to this once they had finished speaking. This was explained to the participants at the start of the interview (Appendix E), and they were invited also to make notes if they wished during the interview.

Data Analysis

This section outlines my process of collating, organising and reflecting on the data in order to draw out the meaning essences. It includes some examples of my approach to working with the text, with the full results presented in the Results chapter.

For this study, I was guided by the method of phenomenological microanalysis, as described by McFerran and Grocke (2007). I felt this method offered a clear process for a new researcher to reference, giving the direction needed to help deepen my reflections into the data and move from description to abstraction. I also drew influence from the descriptions of Moustakas (1994), starting with identifying the phenomenon of interest, the notion of bracketing, and gathering data from people who have personally experienced the phenomenon under study. Moustakas describes how the data is then analysed by reducing it to significant statements, combining them into themes and producing a rich description of the
participant experiences, then finally drawing together a combined statement expressing the essence of the experience (Moustakas, 1994). These steps are reflected in the shape of the data analysis phase in this study.

Whilst engaging with the data, I also used the seven steps of phenomenological microanalysis (McFerran & Grocke, 2007) as an orienting framework, rather than a recipe, a guide that saw me revisiting the data several times in order to immerse myself deeper and deeper, drawing out new levels of meaning. Alongside these steps I also reflected on Finlay’s stages of phenomenological analysis (2014). It is important to note that whilst these steps are listed roughly in the order that I followed, the process was iterative, and movement backwards and forwards between the steps was necessary to ensure an accurate and reflective analysis of the descriptions. Here I will describe the analysis process I used for this study, illustrating each step with selected examples. Full results will be shown in the Results chapter and Appendices.

**Step 1. Seeing afresh and transcribing the interview.** Before beginning the analysis, I spent time reflecting on my own role in this project, and worked to assume the phenomenological attitude, the “seeing afresh” as described by Finlay (2014, p. 122). This was a state of mind I attempted to retain throughout the analysis whilst holding the text, remaining open to being surprised by the participants’ descriptions.

I began by transcribing each entire interview word for word, including pauses and any thinking words such as “um” and “ah”. The Wreally online program ([https://transcribe.wreally.com/](https://transcribe.wreally.com/)) was used to slow down the audio for transcription. A second and third listening was needed to confirm accuracy. The full transcript was then forwarded to each participant for checking. I felt this was an important step, as there may have been points they wished they had mentioned during the interview, but had not recalled in the moment. It
also offered the opportunity for them to remove any statements they did not wish to be included. Bella’s full interview transcript is included in Appendix J.

**Step 2. Dwelling with the data and identifying key statements.** For this step, I read through the first interview transcript several times, familiarising myself with the content. It was during this stage that I engaged in dwelling with the data (Finlay, 2014), listening to their stories, and remembering how they were expressed in person in terms of tone, body posture, eye contact and pace. Once I felt familiar and connected with the transcript, I then removed all the interviewer questions, and all participant text that was not directly related to the questions being asked. The retained data was copied into a new document with each key statement clearly listed separately and pages numbered for reference. Each of the four interviews revealed between 44-63 key statements.

At this stage, I left the interview text in exactly the same format it had been transcribed, including pauses and thinking words, as I was reluctant to change the feel of their descriptions through editing. However, at a later stage of compiling the key statements into tables of results, I could see that there was a clarity hidden in most statements that was being obscured by these extraneous words, and returned to this stage to amend all key statements. In this, I removed most of the thinking words and pauses, along with repetitions of words that would not alter the meaning of the statement.

There were at times, some highly emotive statements which were heavily laden with extraneous words like these. However, in the removing of these words and pauses, they then lost the emotion of the original message. In these few instances, I restored the key statement to its original format for the presentation of the results. For example:

When I said I first started and I was thrown in the deep end, it was with this student who is quite unlike the others. And I was terrified of him. And my introduction him was that he nearly pulled all my hair out. And I’ve seen him on and off over the years,
and he just gorgeous, he’s such a lovely boy. And in Term 4, and this has taken years really, but he held his hands out and shook an instrument, he acted. It felt like after 4 years of doing music with this guy, suddenly this year the sound of the guitar makes him look up. The sound of the sushi song gets him really excited. And he actually held two hands to play an instrument (Louise).

Was restored to be:

I said I first started and I was thrown in the deep end, it was with this student who is quite unlike the others. And I was terrified of him. And my introduction him was that he nearly pulled all my hair out. And I’ve seen him on and off over the years, and he just gorgeous, he’s such a lovely boy. And in Term 4 he, he, it was just and this has taken you know, years really, but he held his hands out and shook an instrument .. on my .. you know he acted, yeah it was just a, it was like it felt like after 4 years :laugh: of doing music with this guy, suddenly this year the sound of the guitar makes him look up. The sound of the sushi song gets him really excited. And he actually held his hand out to play a, two hands to play an instrument. Yeah (Louise).

As Nunkoosing (2005) says: “It is not enough to tell stories. The researcher has to also address how the stories are told” (p. 8) and for me, this included capturing the emotions expressed in the telling for some statements.

**Step 3. Creating Structural Meaning Units (SMUs).** In the process of individual analysis that follows, there were no preconceived categories, but all were drawn from the data itself. Hsieh and Shannon (2005) refer to this as conventional content analysis.

In this first shuffling of key statements, my aim was to become familiar with the concrete topics of the narrative, by categorising each statement literally according to what the participant was talking about (McFerran & Grocke, 2007). My process here began with printing all key statements on separate slips of paper in large font. I read each statement
several times and asked myself “What are they talking about?” At times, I was tempted to drift off into considering deeper meanings, and needed to pull back to using fewer words to describe these more concrete topics. I placed A4 pages around the room, each titled with a number, and laid the key statements on each numbered page in groups, to help organise and visually structure the shuffling during several iterations. I then wrote each SMU on a whiteboard, and again moved iteratively between the statements and the SMU titles. In this stage of reflection, some SMUs joined together, some separated and some changed in their description. As a result, 14 SMUs emerged from this process, and they are listed in Appendices F-I.

Below is an example of a group of key statements that came together under a single SMU.

Table 3.3

*Key Statements under Bella SMU8*

<table>
<thead>
<tr>
<th>Statement Number</th>
<th>Key Statement under Bella SMU8</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>For example, you’re singing a song with a student and they’re not holding the microphone properly. I’m in the middle of a phrase of the song and I <em>can’t help</em> them with the microphone and then having someone who knows that’s exactly what that student needs right now, jumping in and kinda <em>pre-empting what they need</em>. Some of the staff are <em>incredibly good at that</em>, which makes it so much easier to keep the flow of the music. It’s just great having that kind of staff member who can really <em>support you well</em>. I find there are many that can, there’s the odd person who when we get with them <em>you know you are going to have a good session</em>, like there’s someone in every class that will <em>support them</em>, which is great.</td>
</tr>
<tr>
<td>2</td>
<td>I think it also was something that staff really enjoyed because they suddenly <em>didn’t have to worry</em> about students going after another student, but we could do something together, <em>something structured</em> rather than always getting worried about the next move of our students, so that was really nice.</td>
</tr>
<tr>
<td>3</td>
<td>Because there’s always going to be difficult days and you know sometimes there’s days where you get an unexpected reaction from a student, but somehow magically you know that they’re not actually intending to hurt you, but they’re having their anxiety and they’re under stress. That’s when I think you need the <em>collegial support</em> as well, and someone says <em>just take a little bit of time out, you can just chill for a while, life will go on</em>, and to know that people around you are <em>sensitive to that</em> and also that I’m sensitive to others</td>
</tr>
</tbody>
</table>
who may be feeling taxed in some way and to give them some space and time out. Because it can be challenging at times definitely.

It’s a very intense environment. But it’s a very supportive environment and I really love the collaborative nature of working with speech therapists, occupational therapists, teachers and an incredible team of educators. So, that has really enriched my experience. It’s kind of a joy that feeds itself because you’re faced with challenges and you’re challenging yourself in what we feel you can and can’t do, and you get support from the team. It’s a very positive environment. So because you’re supported you can learn better and enrich your work and then you can give back more to the students. Whilst its very full-on at times, you get so much back from the students and I think that really sustains you.

The key words that came forward for me in the reading, are highlighted, and these pointed me to call this SMU: The team supports each other in many ways.

**Step 4. Creating Experienced Meaning Units (EMUs).** In the first grouping of SMUs, I looked for concrete theme areas, whereas now I was searching for more abstract meanings, necessitating a re-shuffling of key statements and a fresh approach. This stage involved the first real imaginative variation (Moustakas, 1994).

As in the previous stage, I used the key statements printed on slips of paper, numbered A4 pages around the room and a whiteboard to bring together the units in a visual way. During this stage, I carefully read and reflected on each key statement, this time considering the implicit meanings behind what the person was trying to say. As I reflected on the various possible meanings of each key statement, I began to see the relatedness between some statements, drawing them together under units based on their shared implicit meaning. Compared to the previous stage, I spent much longer thinking about the statements and moving iteratively between groupings and descriptions. For example, through consideration of the most meaningful words and phrases and their implicit meanings, the following statements gradually came together under a single meaning unit.
The following thoughts came to me whilst reflecting on the possible meanings of these statements: (a) we run most music therapy programs in groups at Giant Steps due to time pressures and the desire to give more therapy time to all students; (b) working on curriculum and therapy goals requires different frames of mind and it can be difficult to address both in groups; (c) Grizelda believes that social and musical goals complement each other, but she pushes music skill goals when students have the ability; and (d) if she was working outside of curriculum, there might be less need to have music skills in the front of mind in music therapy programs.
As a result, the key statements were grouped under EMU6 and given the title: Grizelda finds value in developing skills through both music therapy and music curriculum, but can sometimes find it challenging to focus on both, particularly within group sessions.

These new EMUs began to illuminate the lived experience of each participant. In writing the titles of the EMUs, I retained as much of the original language as possible, so as to remain close to their descriptions. At this point, all the EMUs were printed on slips of paper in large font, and labelled by participant, for reference later in the horizontal analysis (step 6).

**Step 5. Languaging the Individual Distilled Essence.** In developing the Individual Distilled Essence, the EMUs were combined into a narrative with the purpose of capturing each individual’s experience of working at Giant Steps. A week-long break was taken at this point for reflection and to step back from the data. Van Kaam’s method recommends that intersubjectivity be confirmed through expert judges (Reiners, 2012). This was a key point in the analysis, so I sent the Individual Distilled Essences to my supervisor, and her feedback influenced changes to the language and flow of these statements.

I also included here the additional step from Colaizzi’s method (1978) so as to check the data before moving on. In his procedure, Colaizzi suggests that Individual Distilled Essences should be returned to participants, asking how the results compare with their experience (Colaizzi, 1978). When I forwarded the Individual Distilled Essence to the participants, I adapted this step slightly, asking the question: “Does this meet with what you meant to say in the interview, and if not, how does it differ?” The feedback of all participants on their Individual Distilled Essences will be presented in the Results chapter, along with the complete individual analysis process.

**Step 6. Explicating the whole through identifying Group Themes.** This was the first stage of the horizontal analysis, and here I was looking to broaden my view beyond the
individual experiences in looking for commonalities across the descriptions of participants and developing a global understanding of the results. Finlay (2014) aptly describes this explication as a “rather messy process, involving both imaginative leaps of intuition and the systematic working through of many iterative versions” (p. 131). At the end of step 4, each individual EMU had been printed on slips of paper and labelled by name to see the source of meaning units whilst searching for Group Themes. Keeping the language of the EMUs in the participants’ own language to this point, and labelling them by participant, helped in supporting a “sense of individual voices being collected together” (McFerran & Grocke, 2007, p. 277). However, during this stage, the descriptions would now shift into my own professional language, as the researcher, to highlight the fact that the individual statements were being brought together and abstracted to a more generalised level (McFerran & Grocke, 2007).

As in previous stages of searching for SMUs and EMUs, here I took each EMU and again considered the implicit meanings behind the description. Again, a focus on key words and reflecting on the unit titles in light of my own knowledge of the context helped in drawing together EMUs that sat comfortably together or illuminated a larger theme. This process was carried out under the guidance of my supervisor, with several iterations occurring before finalising the Group Themes.

For example, in considering the key words of the following EMUs, reflections on implicit meanings and my own contextual knowledge, the following EMUs were drawn together.

Table 3.5

**EMUs Contributing to Group Theme 1**

<table>
<thead>
<tr>
<th>Participant</th>
<th>EMU Number</th>
<th>EMU Titles under Group Theme 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grizelda</td>
<td>9</td>
<td>She believes that the transdisciplinary knowledge she has gained from working alongside other disciplines has greatly enriched her practice</td>
</tr>
</tbody>
</table>
Participant | EMU Number | EMU Titles under Group Theme 1
---|---|---
Bella | 11 | She reflects on and develops her own practice by **observing** and speaking to other professionals at the school
Sally | 4 | **Watching music therapists in action**, either in person or on film, is **useful** to her as often finds reading about music therapy techniques to be too vague.
Louise | 10 | Speaking to Giant Steps staff, her external peer group and other people, as well as **watching the work** of others in person or online influences how she approaches her work with students
Grizelda | 8 | She accumulates and articulates **knowledge** by **collaborating** with other professionals in her work

In these EMUs, I drew a sense of the value they gave to working with others, and the knowledge to be gained from watching and speaking to them throughout the working day. Although the participants commented separately on observing music therapists in action both face-to-face and through watching videos online, I felt these belonged together, as they seemed to be giving value to watching, as opposed to reading about music therapy practice techniques. These EMUs were gradually drawn together into Group Theme 1: Knowledge gained from watching and working alongside other professionals is a key influence on the music therapist’s practice.

Cross checking occurred with my supervisor at each stage of the analysis, and the Group Themes were agreed upon in the final phases. First, I would gather together EMUs into possible groups, linked by common ideas, concepts and views. I would then engage in dialogue with my supervisor, articulating the reasons for my decisions. Together we reflected on how these decisions had been made, referring together back to the key statements where needed, to confirm that my own preunderstandings were not working their way to the fore in forming themes. Once we had agreed on the groupings, we collaborated on the writing of the Group Theme titles, with particular care around the selection of language and the many possible meanings that may be drawn from different descriptive words. At times during the imaginative variation of steps 6 and 7, I considered some of the pre-existing knowledge I had
about the team, and views that were regularly expressed by the group. Here is where my contextual knowledge helped me to find deeper meanings whilst still retaining authenticity for the participants.

**Step 7. Languaging the Global Meaning Units (GMUs) and the Final Distilled Essence.** This step again involved languaging, as described by Finlay (2014), requiring greater leaps of reflection and interpretation. Each of the Group Themes were printed separately and read many times to dwell in the richer meanings. In this final stage, I gathered together all Group Themes into groups of statements conveying related meanings. Through extensive reflection and imaginative variation, I also brought my own knowledge and experience into the larger issues and ideas of the emerging global themes. For example, when reflecting on how participants spoke about sources of knowledge and information that shaped their practice, the following Group Themes came to the fore.

Table 3.6

*Group Themes Contributing to GMU2*

<table>
<thead>
<tr>
<th>Group Theme Number</th>
<th>Contributing Participants</th>
<th>Group Theme Titles under GMU2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>4/4</td>
<td>Knowledge gained from watching and working alongside other professionals is a key influence on these music therapists’ practice</td>
</tr>
<tr>
<td>2</td>
<td>4/4</td>
<td>These music therapists believe their practice is richer by being open to approaches from a wide range of academic and practical resources</td>
</tr>
<tr>
<td>3</td>
<td>4/4</td>
<td>Creativity and diversity of approach within a music therapy team is a valuable resource that develops practice in their transdisciplinary teams</td>
</tr>
<tr>
<td>6</td>
<td>3/4</td>
<td>These music therapists feel that their practice is guided by responding to what they sense the student needs in the moment</td>
</tr>
</tbody>
</table>

Alongside this process, I spent time bringing words, phrases and thoughts together drawn from both these themes and also from my own knowledge of the context. A summary of these reflections is shown below.
### Reflections on Group Themes Contributing to GMU2

<table>
<thead>
<tr>
<th>Reflective Stage</th>
<th>Reflections contributing to GMU2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Initial reflection</strong></td>
<td>The first word that came to the front of my mind when reading these group themes together, was ‘welcoming’ – a sense of welcoming information, and openness to discovering new ideas and approaches from a range of sources, rather than remaining closed to new ideas and the views of others.</td>
</tr>
<tr>
<td><strong>Free association with words and phrases</strong></td>
<td>Broad, practical, eclectic, responsive, flexible, academic, videos, seeing with my own eyes, dynamic, adaptive, tailored, seeking innovation</td>
</tr>
<tr>
<td><strong>Possible sources of knowledge</strong></td>
<td>Others: watching, talking, working alongside Music therapy team: diversity, creativity Research and academic literature Practical, applied information sharing forums Student needs and context Historical experience and success Automatic application through instinct and intuition</td>
</tr>
<tr>
<td><strong>Other reflections</strong></td>
<td>Music therapy team with creative minds come up with creative solutions. A hive mind, with quick and easy access, creates confidence A constant asking of “what’s new?” and “what’s next?”</td>
</tr>
</tbody>
</table>

The writing of the final GMU involved many versions, with the consideration of each word being given importance in communicating the final message. Gradually, GMU2 was brought together from Group Themes 1, 2, 3 and 6 as: These eclectic music therapists seek out innovative knowledge from a range of academic and practical resources. Observing techniques and methods demonstrated through online videos or in person enables them to confidently apply this knowledge creatively and responsively in their practice.

In the final stage of bringing together the Final Distilled Essence, all five GMUs were joined together to form a narrative statement (McFerran & Groke, 2007, p. 278). I aimed to make the statement accessible, flowing and readable. My ultimate aim was to express this final result in a way that others might read and identify with the concepts expressed in relation to their own experience. The Final Distilled Essence will be presented in the Results chapter.
Conclusion

In this chapter I have described in detail the steps taken to ensure this study was rigorous and transparent, and how I navigated the complexities of having multiple roles in this research context. As a school leader, music therapy team leader, colleague, friend, student and researcher in this study, I relied on a number of reflexive strategies, to keep my own preunderstandings in perspective whilst attending with care to the narratives of the participants. Writing and maintaining an epoché, cross-checking with my supervisor, checking with participants, meeting with the graduate research group and professional discussions enabled me to clarify my standpoint and exercise reflexivity from a number of angles.

A consideration of phenomenology from philosophers and researchers including Husserl, Giorgi, van Manen and Finlay confirmed that the phenomenological approach was an appropriate choice in terms of research design and attitude. An application of phenomenology was well suited to the topic being explored, and the capacity for flexibility within this methodology has been invaluable for exploring the research questions. My hope is that by outlining the background preparations and thought in great detail, other readers and researchers will be able to clearly see my decision-making process and how the results were drawn from this process. In the following Results chapter, I will present the individual and collective results of this research method, through EMUs, Group Themes and Distilled Essences.
Chapter 4

Results

Introduction

This chapter presents the results of the interviews with the Giant Steps music therapists, including the rich descriptions, themes and the essences of their experiences. Drawing from phenomenological microanalysis (McFerran & Grocke, 2007) and descriptive phenomenology (Giorgi, 2009), I will present the EMUs for the first participant, Bella, accompanied by exemplary key statements, and supported by reflective narrative drawn from imaginative variation (Husserl, 1931; Moustakas, 1994). These will lead into the Individual Distilled Essence for Bella and her feedback from member checking. I will follow this format for each of the participants, in order to tell their story in full, before moving on to the next individual analysis. The following sections will then present the horizontal analysis process, taking each of the 13 Group Themes, showing the EMUs from which they were drawn, accompanied by exemplary key statements, and an example of reflexive thought on each theme. Concluding the chapter will be the Final Distilled Essence.

As outlined in the Method chapter, I conducted interviews at the school with each participant, and used an interview guide with open-ended questions to encourage free responses and reflections on their work experience, factors informing their practice, factors sustaining their practice, and meaningful experiences from their time at Giant Steps. The participants’ narratives were then transcribed word-for-word, and read several times in order to become immersed in the data. To briefly summarise the approach to analysis explained in detail in the Method chapter, after reading the transcripts, all text unrelated to the questions was identified and put aside, with remaining data considered to be the participants’ key statements. In the shift from exact transcription to key statements, I adjusted text minimally...
in terms of removing thinking words and repetitive text unrelated to the message. Then, each key statement was read, reflected upon, and a broad topic identified.

The key statements were next sorted into SMUs, where the unit titles literally described what the participants were talking about. The SMUs for all participants are listed in Appendices F-I. I found the key function of this step to be familiarising myself with the content in a structured manner, before delving reflectively into the meaning of the descriptions. The SMUs were then re-read and re-organised where required as I worked to dwell deeply with the data and attempted to search for the implicit meanings within each statement. Here I considered what the participants were really trying to say, and in creating new EMU titles, still retained as much of the language from the participant as possible.

Participants

The participants were introduced in the Method chapter, but for ease of reading, their details are summarised here, leading into the presentation of the results. Music therapists at Giant Steps work across the age-based programs, but at the time of this study, their narrative was focused on the programs below.

Table 4.1

*Summary of Participant Details*

<table>
<thead>
<tr>
<th>Participant</th>
<th>Years Registered</th>
<th>Years at School</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bella</td>
<td>4</td>
<td>4</td>
<td>Secondary</td>
</tr>
<tr>
<td>Grizelda</td>
<td>6</td>
<td>6</td>
<td>Primary</td>
</tr>
<tr>
<td>Louise</td>
<td>9</td>
<td>4.5</td>
<td>Primary/Secondary</td>
</tr>
<tr>
<td>Sally</td>
<td>4</td>
<td>1</td>
<td>Adult College</td>
</tr>
</tbody>
</table>

**Individual Analysis Process**

As the individual analysis process has been described in full in the Method chapter, Figure 4.1 is shown here as a reminder of the steps taken to uncover Individual Distilled Essences.
Experienced Meaning Units for Bella

Bella is 51 years old and has been at the school for the four years since becoming a music therapist. At the time of the interview, her practice was with the Secondary students aged 12-18 years old. Here I will outline my process for dwelling deeply with Bella’s data in order to look for any implicit meanings within the key statements and initial SMUs. To present the EMUs, I will first offer a reflexive introduction, and then show the EMU title, alongside a selection of exemplary key statements grouped together as having a common theme. I will follow this process for each EMU and conclude with the Individual Distilled Essence.

Bella EMU1. At the time of the interview, Bella was working across the Secondary program, and was involved in all aspects of the school day, more so than any other member of the music therapy team at the time. Here she shares some of the benefits of working outside of music therapy programs, including how it gives opportunities to generalise positive musical experiences across the school day and at home. It seems that the Secondary team...
supports this generalisation of skills and engagement, and that it may offer her a more rounded understanding of student needs and challenges in getting through their day. She seems to feel we are very lucky compared to those with limited training and resources, and wishes we could support more children with special needs. My sense is that Bella would like to be able to share useful knowledge outside the school, but due to the workload of the job, has not yet considered any details of content.

Table 4.2

*Bella EMU1 Title and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>EMU1 Title</th>
<th>Exemplary Key Statements under EMU1</th>
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<tbody>
<tr>
<td>Due to her role working with students across the day, Bella sees great value in helping them generalise positive skills and experiences to other settings</td>
<td>I love the school culture of music being used in so many different ways and not just in the music session. The fact that students get the reinforcement of the things that we do in music translated into other settings, so it’s not they come in, they do wonderful things in music and they go out and do nothing with it. It feels like we’re actually doing something more meaningful than just having a lovely experience in music. It’s great that the teams can support us in that way. So, I feel very lucky to have that support. I think we’re lucky in that we get to see that perspective of their lives and I think it’s something that not every music therapist may get to see if you come just come in for the session of music and then you’re gone, but we see our students in many different environments, even going on camp with them, bunking down with them for the night and just seeing how they get through their day. It gives a much deeper understanding. I definitely feel like it helps me know them so much better. Although it’s hard work to be part of all those other things, it’s a really great thing and it helps inspire me to find more ways to help them. And in ways that translate outside the music room too. It’s all about sustainability. Even having communication with the parents and telling them about the little victories that happen and if the student has done something wonderful on occasion and the parents will go ‘oh wow I think we might go buy a drum’ and then supporting them in taking what they do at school to home if it’s something they really enjoy.</td>
</tr>
</tbody>
</table>
**Bella EMU2.** Bella talks about placing a high value on creativity both for herself and from others in her teams. At the time of the interview, it was the final week of the school year, a stage in her creative cycle when she might be starting to look for new ideas to implement in the following year. Seeing how other music therapists in the team apply the same song in different ways to meet different needs seems to open her eyes to new possibilities. She sounds confident in her song writing skills, and in the power of songs to address student goals and needs.

Table 4.3

*Bella EMU2 Title and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>EMU2 Title</th>
<th>Exemplary Key Statements under EMU2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creativity and diversity in clinical approach are absolutely essential to Bella in sustaining her ability to meet individual student needs</td>
<td>Its creative, I definitely couldn’t do a job that wasn’t creative or had some creative aspect to it. And there’s so many ways to be creative, you can be creative in the music session in what you deliver and how you use instruments and how you use music and songs. But you can also be creative in how you persuade someone to eat their lunch. I think everything runs in cycles really, sometimes you’re in the middle of a really creative phase and you go through a phase of consolidation and then you reflect on something, and then start again. And that’s when you seek out new ideas. I think we all have a different way, for example in our team when we come up with an activity and we all roll it out into our classes according to our students, they end up looking quite different sometimes.</td>
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</table>

**Bella EMU3.** The following key statements reflect a sense of both collegiality and camaraderie in Bella’s work. She speaks glowingly about how important it is to relish the humour in the work, and although I feel the word “entertainment” is not an ideal word to describe this, my history with her leads me to believe she means this as an affectionate reference to her students and their interactions with others. Staff who can pre-empt the needs of students in a music session, support both the student and Bella by allowing the musical flow to continue without interruption. Knowing those staff will be in the session collaborating...
with her, appears to help her feel confident of achieving positive outcomes for student engagement.

Table 4.4

*Bella EMU3 Title and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>EMU3 Title</th>
<th>Exemplary Key Statements under EMU3</th>
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<tbody>
<tr>
<td>Bella loves being part of a team that is dedicated to supporting their students and is able to have fun whilst doing it</td>
<td>And all the fun that you can have. I mean there so much humour as well around the place and funny things that happen and the students have such personalities and I think it’s just when you really get to understand them and know what makes them tick, then there’s so much entertainment. For example, you’re singing a song with a student and they’re not holding the microphone properly. I’m in the middle of a phrase of the song and I can’t help them with the microphone and then having someone who knows that’s exactly what that student needs right now, jumping in and kinda pre-empting what they need. Some of the staff are incredibly good at that, which makes it so much easier to keep the flow of the music. It’s just great having that kind of staff member who can really support you well. I find there are many that can, there’s the odd person who when we get with them you know you are going to have a good session, like there’s someone in every class that will support them, which is great. I think we’re lucky that we do have those chances. It’s one of the great strengths in the school is the collaboration.</td>
</tr>
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</table>

*Bella EMU4.* Bella describes here a sense of satisfaction derived from thinking of creative ways to help students be more actively involved in their world. Her most satisfying problem-solving for disparate groups of students, comes in the form of giving opportunities for students to come together and regulating to the group, and the moments of joint attention achieved through innovative approaches. Bella shares that she has faith that change can happen over time. She gives an example of problem solving for disparate groups of students through innovative approaches, and how these approaches can offer opportunities for moments of joint attention and group regulation.

Table 4.5

*Bella EMU4 Title and Exemplary Key Statements*
**EMU4 Title**

**Exemplary Key Statements under EMU4**

Bella loves seeing her problem-solving efforts result in increased student engagement and achievements made over time.

A wonderful thing happens when you sort something out or you avoid something escalating or you use music to bring a student back on track. That’s a really good feeling as well so I think, there’s a lot of personal satisfaction doing this kind of work.

Sometimes it changes very slow. But there’s definitely change. And one just has to have faith that it’s going to happen at some point.

A student who was quite developmentally delayed, who would just sit and listen to music all day, doing lots of tactile things like touching carpets and things but having no real interests other than music. He was in a class with other students, a very, very challenging class, they all had very different needs and different sensory experiences. And there was a student in the class that disturbed everybody. And, these guys could just not, sit and do anything table top together as a group. They could do very, very few things together at the same time, be focusing on the board or do any kind of activity, there was just so much disturbance. But I did a nice yoga and meditation session with them which some of them reacted to in the beginning. But I made up a little yoga sequence and just to see them all doing the yoga poses, they were all lying on mats, there were probably the three most mobile doing the yoga poses. The student that I mentioned in the beginning who never really was interested in much, would sit and observe, he would not do the poses, he found that very difficult. But he was attending to everything that was going on. So, it meant that the attention of all the students was on the same task at the same time. And that was just such a joy to see that, they were going through the motions, they were all together as a group doing something together, that was very nice. And it also regulated them really well.

**Bella EMU5.** Here Bella is speaking about how, for her, the job was daunting at the start, and about the ongoing challenges of working with this student population. She seems stimulated by the fast pace, and surprised by how much she is able to achieve in her working week. She observes that team support allows her to positively manage the physically challenging aspects of the work. In turn, music can provide staff with a medium through which some respite from constant vigilance can be found.

Table 4.6

*Bella EMU5 Title and Exemplary Key Statements*
Bella experiences working at Giant Steps as a challenging job requiring great stamina, but she feels rewarded by seeing student gains and by having the support of her team because there’s always going to be difficult days and you know sometimes there’s days where you get an unexpected reaction from a student, but somehow magically you know that they’re not actually intending to hurt you, but they’re having their anxiety and they’re under stress. That’s when I think you need the collegial support as well, and someone says ‘just take a little bit of time out, you can just chill for a while, life will go on’, and to know that people around you are sensitive to that and also that I’m sensitive to others who may be feeling taxed in some way and to give them some space and time out. Because it can be challenging at times definitely.

It’s a very intense environment. But it’s a very supportive environment and I really love the collaborative nature of working with speech therapists, occupational therapists, teachers and an incredible team of educators. So, that has really enriched my experience. It’s kind of a joy that feeds itself because you’re faced with challenges and you’re challenging yourself in what we feel you can and can’t do, and you get support from the team. It’s a very positive environment. So, because you’re supported you can learn better and enrich your work and then you can give back more to the students. Whilst its very full-on at times, you get so much back from the students and I think that really sustains you.

It’s pretty full-on, it’s physically demanding, but I think you build up a stamina from working with that kind of pace, moving around a lot, carrying a lot of equipment around and being a step ahead, which you have to be because the students don’t appreciate things being disorganised or unpredictable. I’m quite amazed with how much we do in our weeks and how the stamina keeps us going. The busier I get the more I seem to be able to take on.

**Bella EMU6.** In the following key statements, Bella speaks about looking to the students themselves for information that can guide her practice in the moment. As students are highly affected by their difficulties with self-regulation and sensory processing, a session plan may be the basis of practice. However, if a student is struggling to engage with prescribed activities, Bella adjusts what she is doing to help them meet their needs, so they may re-engage with the program.

Table 4.7
**Bella EMU6 Title and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>EMU6 Title</th>
<th>Exemplary Key Statements under EMU6</th>
</tr>
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<tbody>
<tr>
<td>Bella uses her intuition to sense what they need in the moment and adjusts her approach accordingly</td>
<td>It may be that you take in to account the musical tastes of the student and what resonates with them. I tend to use a known song, or an existing song with word substitution. That works well. It took me a while to realise how powerful musical delivery really is with this particular population, and how much less of an assault for them it is to have a sung instruction compared to a verbal one, and how powerful that really is. And I guess once you really realise that effect then you use it even more. The students really inform my practice very much in terms of what do they need, do they need to be aroused, do they need to be calmed? Being in the moment engaging where they’re at, at that particular point in time. That’s what I mean about intense in the work that you’ve got to be really on the ball with sensing where the group is at and where the students are at.</td>
</tr>
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</table>

**Bella EMU7.** Bella tells here how she would like students to have more opportunities for self-expression as, due to their anxiety, they often necessarily become dependent on routine and prompting. She seems divided on the use of improvisation within groups. At times, she seems to find it a difficult medium through which to give individual attention, but also concedes that the group format is a great means of working on social cohesion. She describes how she would like to put learnings from reading on improvisation into practice, however, the concept of free expression in music without instruction is difficult for the students and complex to teach. She tries to meet them where they are at and provide different musical flavours with which to frame and inspire the improvisation.

Table 4.8

**Bella EMU7 Title and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>EMU7 Title</th>
<th>Exemplary Key Statements under EMU7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Since students can become very bound in routine, Bella feels it is important for them to work on self-expression</td>
<td>But I still feel like with the older students, they spend such a long time at school and they’ve learnt certain routines and ways of getting through their day that they become quite reliant on that, and sometimes I feel like they’ve lost maybe</td>
</tr>
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</table>
through improvisation, but that groups may not always be the best format for working on this goal. 

some of their self-expression. And that’s just by virtue of the fact that they need to survive through the day and not feel anxious and feel safe. But I feel like we all need to express something of ourselves, something spontaneous, something of our true self and it doesn’t really have to have meaning to anybody else but we all need to express. I’m still trying to find a way to bring that out in the students. I mean improvisation is a great way of doing that, but it’s very difficult in bigger groups to pay enough attention to each individual sometimes. I mean improvisation is a great way of doing that, but ah it’s very difficult in bigger groups to kind of pay enough attention to each individual sometimes. On the other hand there’s so many benefits in a group setting where all those social skills that are such a deficit with our guys, that those benefits outweigh what we can do with just a one-on-one kind of session.

I read the Tony Wigram bible on the subject really and there’s lots of great ideas in there. I would like to focus more on it. I feel like I haven’t spent enough time really thinking about improvisation. I like to try and make up songs, and go to that level, taking the material that the students have and what they’re producing and taking them to some kind of musical expression, but it’s very difficult often because a lot of the students are very prompt-dependent and they may not understand that you can do whatever you like, there’s no about what you’re supposed to do. But I think it’s also very much about being really comfortable in the medium and what you’re playing in terms of where you want to echo and reflect and take their music somewhere. Just supplying lots of different flavours for them to hopefully engage with.

**Bella EMU8.** In these statements, Bella tells how she doesn’t want to feel bored or stuck in her music, as she thinks it will make her a less effective music therapist. It is clearly important for her to like and enjoy the musical material used at school, so that her own enjoyment can flow through to the students. It seems she sometimes finds this enjoyable musical material when making music with her friends outside school.

Table 4.9

*Bella EMU8 Title and Exemplary Key Statements*
It is important for Bella to enjoy the musical material she uses, as she knows it makes her a more effective and authentic music therapist. You can go through the motions, but only so many times and everyone will get bored with it, and you don’t want to get to that point where you just feel like a human jukebox. There have been times with some of my students who, one in particular who was very regulated through singing but there was a situation where he was waiting to be picked up for an hour. I had to just keep singing, just humming this song for him to stay calm, and it started to become like ‘I don’t feel like I’m making music anymore’ It doesn’t feel like music, it just feels mechanical, and I just really don’t want to get to the point, not so much for myself but because I’m not going to be an effective therapist, I’m not going to give anybody else any joy or any opportunities to do anything great if I’m not really feeling it myself.

Sometimes I find just going out and making music with my friends and singing with them and they introduce me to new songs. You have to feel really passionate about the musical material for it to flow through to the students. Getting the right material and finding the right material and finding things that inspire you is very important. Because if I’m not inspired, I’m sure that the students will feel it. You can’t really fake that I think.

Bella EMU9. These statements encapsulate some of the aspects of the work that Bella finds personally and professionally satisfying. These include when she is able to build rapport with a student by meeting them where they are at, and when she can share her skills with other staff. Building a trusting, respectful rapport with students seems paramount to Bella developing a musical relationship. The moments of deeper connection are clearly important to her, as they may indicate a reduction in their anxiety. She expresses how moments like affirm that she is in the right profession.

Table 4.10

<table>
<thead>
<tr>
<th>Bella EMU9 Title and Exemplary Key Statements</th>
<th>Bella EMU9 Title and Exemplary Key Statements</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EMU8 Title</strong></td>
<td><strong>Exemplary Key Statements under EMU8</strong></td>
</tr>
<tr>
<td>It is important for Bella to enjoy the musical material she uses, as she knows it makes her a more effective and authentic music therapist</td>
<td>You can go through the motions, but only so many times and everyone will get bored with it, and you don’t want to get to that point where you just feel like a human jukebox. There have been times with some of my students who, one in particular who was very regulated through singing but there was a situation where he was waiting to be picked up for an hour. I had to just keep singing, just humming this song for him to stay calm, and it started to become like ‘I don’t feel like I’m making music anymore’ It doesn’t feel like music, it just feels mechanical, and I just really don’t want to get to the point, not so much for myself but because I’m not going to be an effective therapist, I’m not going to give anybody else any joy or any opportunities to do anything great if I’m not really feeling it myself. Sometimes I find just going out and making music with my friends and singing with them and they introduce me to new songs. You have to feel really passionate about the musical material for it to flow through to the students. Getting the right material and finding the right material and finding things that inspire you is very important. Because if I’m not inspired, I’m sure that the students will feel it. You can’t really fake that I think.</td>
</tr>
<tr>
<td><strong>EMU9 Title</strong></td>
<td><strong>Exemplary Key Statements under EMU9</strong></td>
</tr>
<tr>
<td>Being able to build a solid rapport and make deeper connections with students through music gives Bella great satisfaction</td>
<td>I think a person-centered approach is really important, and I wish someone had said to me when I started ‘get to know your students really well’. So, I think once the student is really trusting of you, feels really safe with you, then there’s really nothing that they can’t do or they won’t want to interact with</td>
</tr>
</tbody>
</table>
you in, if they feel that trust and I think that’s just so crucial to really build that mutual trust and respect. When you get to that point where they’re not feeling their anxiety, they start to share with you of themselves which is really wonderful and that definitely sustains my practice. That deeper connection that, I’m sure any music therapist would say that that deeper connection is the reward. Definitely there are magical musical moments that you have with students when you really make some kind of deeper connection with them or there’s some kind of knowing between you and the student and they achieve something great or you can just tell that they are feeling very proud of what they’ve done and they’ve been just very happy. I imagine for most music therapists that’s what really feeds back to you and gives you that inspiration to keep going. I feel like there’s a bit of a calling for music therapists, not just for us music therapists but anyone who works in this field. They’re definitely very passionate about wanting to give back and it’s just extremely rewarding to be able to give joy to someone who really needs it or to support someone who really needs it. I think that definitely sustains me a lot.

Bella EMU10. Here Bella talks about the importance of self-care for sustaining her work. This can include taking a break, or actively seeking out music-making with others outside the school. These music-making experiences appear to have the effect of re-igniting her musical spirit, enabling her to return to her work refreshed and better equipped to give her best to the students.

Table 4.11

*Bella EMU10 Title and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>EMU10 Title</th>
<th>Exemplary Key Statements under EMU10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bella draws musical inspiration and opportunities for self-care from outside the school</td>
<td>Sometimes you’ve got to step right outside this environment as well, the school environment and recharge your batteries. It’s like what Carl Jung said ‘when the well is empty you can’t get any water out’. So you have to go and make music sometimes in other settings or get that re-igniting of your musical spirit, so that you can bring it back. I think that it’s important to reflect on where you’re at and what you need in order to be effective and give the best to the students that you can.</td>
</tr>
</tbody>
</table>
EMU10 Title | Exemplary Key Statements under EMU10
--- | ---
Although there’s always self-care of course. Which one has to bear in mind as well. What sustains me too is having a break from it all from time to time.

**Bella EMU11.** These key statements describe Bella’s appreciation for the input from other disciplines, and how she adjusts her practice to incorporate their knowledge. Watching other music therapists at work seems to remind her of simple, but effective techniques that she may have overlooked, and may also affirm that she is doing the right thing. Receiving feedback from others can also affirm that her practice is well thought out, even if she is not always aware of it. Bella can see that observing other music therapists is good for developing her own practice, and she clearly wants to be able to take advantage of opportunities to observe the music therapy programs of others on the team.

Table 4.12

**Bella EMU11 Title and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>EMU11 Title</th>
<th>Exemplary Key Statements under EMU11</th>
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| Bella reflects on and develops her own practice by observing and speaking to other professionals at the school | But when you realise the support that everyone gives you, and I was lucky to work with some wonderful speechies to begin with. We did a music and speech program which was a really nice way to do a collaboration for me being not familiar with working as a team. I always imagined how I’d be out there as a music therapist on my own, you know, lugging my cases around and doing a bit here and a bit there and so it was really great to have that input and it taught me a lot about their perspectives on autism and from which perspective they operate, and using some of the speech therapist’s knowledge about the developmental stages of languages for example, And they were all very kind to give me examples of what a child does at certain ages and so that was something that enriched my practice. Recently I was down at the College and watching a colleague’s session, just being the recipient of the session. Just little things like they were doing a dance on the board and she would announce loudly what the next move is, and so everyone knew what was going on. I could see how effective that is, and I do it myself but sometimes I may doubt, should I shouldn’t I? Sometimes I get a bit hesitant, am I talking too
Bella EMU12. In these comments, Bella shows how her creative personality influences the seeking information to shape her practice. She uses intuition and visualisation to decide if a strategy is right for her and the students with whom she works. Whilst she says she originally found behaviourism to be too dry, she now seems to have an appreciation for its application in special education. She draws information from books with multiple perspectives and methods that are less prescribed, allowing more room for creative interpretation and application of methods for the individual.

Table 4.13

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<thead>
<tr>
<th>EMU12 Title</th>
<th>Exemplary Key Statements under EMU12</th>
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<tbody>
<tr>
<td>Bella believes her practice is richer by taking on philosophies and strategies from a range of information sources</td>
<td>I think it’s quite an intuitive thing. With me, if something resonates with me, feels like it’s going to work for the students, don’t know if I can put my finger on that really. Other than to imagine myself using a particular technique that I see or read about, and if I can visualise the students engaging with that and me being able to deliver that, then I think I would go yeah that feels right. I think it’s very intuitive with me. Then you can clarify with yourself where you sit within that. If something’s so very formulaic it wouldn’t inspire me so much. Some of those methods that have been branded and franchised out and everybody’s doing them in a certain way, and there’s no scope for anything new to happen. It doesn’t</td>
</tr>
<tr>
<td>EMU12 Title</td>
<td>Exemplary Key Statements under EMU12</td>
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<tr>
<td>really inspire me. Although there’s always a place for structure and that’s something I’ve learned to appreciate when working in autism. When I was studying, we were introduced to a lot of different schools of thought on what we would draw from and to shape our own practice and I always thought the whole psychodynamic school of thought was the right model, what it’s all about, all that hidden stuff, it’s all that stuff we keep inside and don’t get to express. I was never much of a behaviourist. I think in my personality, I like to be really spontaneous, I like to go with the flow, but when you’re working with autism of course you’ve got to be really organised. I mean you can still be spontaneous within parameters whey you know your kids, you know how far you can push it with them. But I always thought that the behaviourist stuff was so dry and joyless really. But through working with autism I’ve certainly discovered that it definitely has a place. It’s something I wish I’d learnt earlier to apply in my own life just with my own kids. I think that I can really appreciate the whole behaviourism focus to some extent.</td>
<td></td>
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</table>

**Individual Distilled Essence for Bella**

For each participant, the EMUs were woven together into a narrative, distilling the essence of their experience. This final abstraction of the individual analysis gives full attention to the individual stories, and the Individual Distilled Essence for Bella sheds a light on her experiences at Giant Steps.

**Bella – Individual Distilled Essence**

_Bella experiences working at Giant Steps as a challenging job requiring great stamina, but she feels rewarded by seeing student gains and by having the support of her team. She loves being part of a team that is dedicated to supporting their students and is able to have fun whilst doing it._
Due to her role working with students across the day, she sees great value in helping them generalise positive skills and experiences to other settings. Since students can become very bound in routine, she feels it is important for them to work on self-expression through improvisation, but that groups may not always be the best format for working on this goal.

Bella reflects on and develops her own practice by observing and speaking to other professionals at the school. She believes her practice is richer by taking on philosophies and strategies from a range of information sources. Creativity and diversity in clinical approach are absolutely essential to Bella in sustaining her ability to meet individual student needs. She also uses her intuition to sense what they need in the moment and adjusts her approach accordingly.

It is important for Bella to enjoy the musical material she uses, as she knows it makes her a more effective and authentic music therapist. She draws musical inspiration and opportunities for self-care from outside the school. Being able to build a solid rapport and make deeper connections with students through music gives Bella great satisfaction. She loves seeing her problem-solving efforts result in increased student engagement and achievements made over time.

Once complete, each Individual Distilled Essence was forwarded to the relevant participant, accompanied by the question: “Does this meet with what you meant to say in the interview, and if not, how does it differ?” Bella responded to the email by writing:
Thank you for sending me the summarized meanings - I find them to be really spot on and meaningful to me. Key words such as intuition, engagement and joy are the perfect ones to summarize my practice! Well done and please go ahead and use it!

(Bella)

**Experienced Meaning Units for Grizelda**

Grizelda is 48 years old, and has been at Giant Steps for six years, moving from a student clinical placement role into a position employed as a music therapist shortly after becoming registered. At the time of the interview, her work was focused on the Primary students aged 5-12 years old.

**Grizelda EMU1.** Grizelda seems to experience successful and not so successful moments in her work at the school. She describes trying to shake off the difficult days of challenging behaviour, and then discussing with her class team whether a change in approach is needed. She expresses appreciation for the capacity of the music therapy team to provide support for music-related challenges in sessions. When any of her teams work together, it seems she is buoyed along by being part of a unified school community.

**Table 4.14**

*Grizelda EMU1 Title and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>EMU1 Title</th>
<th>Exemplary Key Statements under EMU1</th>
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<tbody>
<tr>
<td>Belonging to a team makes Grizelda feel supported on hard days by being willing to solve problems collaboratively and by pitching in to do what needs to be done</td>
<td>Some days you’ve just got to say ‘that was a crap day’ and go home and shake it off and come back the next day with a fresh perspective and think about what you could do differently. We have day reviews and class meetings, and having that solid reviewing process is really important to sort of say, well you know I did this, it didn’t go down so well, maybe next time we could try something different. And to all be on the same page about what that new change may be, so that we’re really delivering an element of consistency to that student, which really reduces their anxiety and stress and hopefully their acting out behaviours. Because really it is about understanding the student, and the more that we can understand where they’re coming from and what they need, the happier they’ll be and the less frustrated and anxious they’ll be.</td>
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</table>
I think the fact that we work in a music therapy team, that’s a really big plus for me because it’s supportive and we can talk to each other about certain things that are going on, certain areas of concern and work through those issues as a team. Because you can get bogged down in the details sometimes on your own, and it can stop you from moving forward. Whereas when you’ve got that impetus from other people all wanting to work towards the same goal and work together and brainstorm ideas, verbally as well as emailing each other and communicating that way, I think it pushes the experience along a lot faster and you’re more productive.

**Grizelda EMU2.** Grizelda speaks of having an interest in reading about music and health long before coming to Giant Steps. She seems to think that in the field of ASD, learning from reading is an ongoing process, and that reading about specific techniques can help her rethink her role when she is feeling stuck. She gives the example of how reading helped clarify her role when improvising with students in groups. She also mentions how sometimes the random selection of reading within books can reveal useful information for her in that moment. Reading books and attending good presentations may help clarify and improve her practice.

Table 4.15

**Grizelda EMU2 Title and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>EMU2 Title</th>
<th>Exemplary Key Statements under EMU2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grizelda places great value on reading for rethinking and clarifying how she works</td>
<td>There’s always food for thought, there’s always something new. It’s such a big field, music therapy. I think still within autism there’s so much more to explore. So, you know, the more I read, the more ideas I get and the better my practice is. The Wigram work on improvisational music therapy is very relevant with what we’re doing at the moment. Looking at different approaches I sometimes get a little bit lost in a group musical improvisation because, I suppose what we trained to do was more one on one improvisational music therapy especially if you’re coming from a Nordoff-Robbins approach then you would do more individual with the client. But when in a group music therapy session and you’re working on improvisation, my role seems to be more about keeping the beat rather than doing a lot of to-ing and fro-ing and call and</td>
</tr>
</tbody>
</table>
Grizelda EMU3. These statements reveal some of what Grizelda finds meaningful in her work. She talks of feeling lucky to be able to witness student progress - however small - made over several years of a student’s life. Grizelda appears to gain satisfaction from seeing students move from active disengagement to a place of enjoying and participating in music. She seems particularly excited to see students working in a coordinated way with each other in music, being aware that it is a difficult skill for them to develop. She describes being drawn to stay at Giant Steps through having a positive view of the futures of students, and the hope and faith that they will reach their potential.

Table 4.16

**Grizelda EMU3 Title and Exemplary Key Statements**

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<thead>
<tr>
<th>EMU3 Title</th>
<th>Exemplary Key Statements under EMU3</th>
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<tbody>
<tr>
<td>Grizelda feels sustained by seeing the achievements of students and how these positively influence their futures</td>
<td>I think you know slow incremental gains. Because I suppose we do have the luxury here of seeing kids over their life span, and it's not fleeting, so to see them grow and their world open up and be more socially engaged and, less dysregulated hopefully and the small incremental gains, even within the course of a year when we see how a child has started and where they end up, there are a lot of hoorays at different times</td>
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</table>
Grizelda EMU4. In these statements, Grizelda reflects on the benefits of embracing the diversity of approaches and experiences in the music therapy team. Although all the music therapists on the team trained at the same university, she seems to like that their approaches are so diverse, and that they have the freedom to apply program activities in their own ways according to their own style. It appears that she believes that the diversity in experience and style of the music therapy team is a real asset to the school, and that having the whole team contribute resources to each program theme significantly reduces the very high creative workload for everyone. She speaks highly of the music therapy team being there to generate ideas and to brainstorm solutions to problems. She shares how she learns a great deal from talking to the other music therapists, as well as professionals from other disciplines.

Table 4.17

Grizelda EMU4 Title and Exemplary Key Statements

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<thead>
<tr>
<th>EMU4 Title</th>
<th>Exemplary Key Statements under EMU4</th>
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</thead>
<tbody>
<tr>
<td>Grizelda believes that the diversity of experience and approaches in the music therapy team is a real asset to the school and this helps them</td>
<td>Even though we have certain activities that we may say we’re going to do within our units of work, each of our approaches to doing that one activity can be very different. And it also depends on the students that we are working with, the age group of the students, but also what we feel comfortable doing</td>
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</table>
Grizelda EMU5. Grizelda is speaking here about the need to take into consideration student engagement and learning style when introducing and adjusting music therapy activities. As engagement can be related to student and staff energy, she notes that this can fluctuate across the year, and it guides her in how her activities and sessions unfold.

Table 4.18

Grizelda EMU5 Title and Exemplary Key Statements

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<tr>
<th>EMU5 Title</th>
<th>Exemplary Key Statements under EMU5</th>
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</table>
| Grizelda also finds that the level of student engagement and energy and their learning style tends to guide her practice in the moment | Sometimes it is child-led and if you find that if something works for a portion of the group, then you tend to change your approach to suit those children so that you get the best out of them over the course of the term or over the course of the year. So their style of learning or their way of engaging in music may sometimes dictate the way that your activities play out. It’s also dependent on the energy of the session and where it is within the framework of the of the year where there is the
Grizelda EMU6. Grizelda describes here how music therapy programs are delivered primarily in groups at Giant Steps, due to time pressures and the desire to give more therapy time to students. She notes that working on both curriculum and therapy goals tends to require different frames of mind from her, and that this seems to be challenging to address in the group format. She talks of social goals and music skill goals complementing each other, but also aims to target more advanced music skills with students who have the ability to go further in this area. It feels from these statements that if she was working outside of the curriculum, there would be less need to have music skills in the front of her mind during sessions.

Table 4.19

Grizelda EMU6 Title and Exemplary Key Statements

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<thead>
<tr>
<th>EMU6 Title</th>
<th>Exemplary Key Statements under EMU6</th>
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<tbody>
<tr>
<td>Grizelda finds value in developing skills through both music therapy and music curriculum, but can sometimes find it challenging to focus on both, particularly within group sessions</td>
<td>Part of that question is also related to the size of our groups. Because being in this school and being time-poor I suppose, we can get through and give each of our students as much music therapy time as we can, and we tend to do group work as opposed to individual sessions or dyads, which I think a lot of other music therapists may experience more of. Not sure but. Within the group setting, we need to address both curriculum and therapy-based outcomes. So that can be challenging in terms of programming. And psychologically in approaching a session, to really have some clarity about whether you are addressing curriculum or therapy-based outcomes. And I think there is an even split, it feels like we are doing a lot of both, but sometimes it can be difficult to know, it can be blurry to know what my focus should be at that time. So I have to really think about that and think about the goals I have set for each of the students. Many of the high support students have more therapy-based goals and more social foundation-based goals, because their music skills are more limited. But those that have higher abilities, you push them a little bit more with their music</td>
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</table>
Exemplary Key Statements under EMU6

literacy and their musical skills and being able to imitate rhythms and sing the melody or follow the pitch or follow the rhythm. Of course, social foundation skills are still a part of it, but with those kids you can really go to their edge of learning with their music skills and that in turn I think plays a role in increasing their social foundation skills. So it’s a balancing act.

Grizelda EMU7. From these statements Grizelda appears to feel she uses well-documented strategies in her work, and that she wants to retain a musical focus to their application. She talks about how not all professional learning outside of school is relevant to her setting, so she describes assessing its applicability and potential value before applying to her practice. To do this, she describes considering how a technique or approach would look with her students, whether it would present the right level of challenge, and whether she would be comfortable using it. She seems to finds some value in trialling a range of resources to work out what will help engage a student best, and she has drawn influence from various approaches including SERVAM, SCERTS, Orff Schulwerk and music notation teaching in the past.

Table 4.20

Grizelda EMU7 Title and Exemplary Key Statements

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<tr>
<th>EMU7 Title</th>
<th>Exemplary Key Statements under EMU7</th>
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</table>
| In her work, Grizelda draws on a variety of methods to address student needs, but she needs to critically evaluate them first before implementing into her practice | It’s always in some part of my mind I think about the students that I’m currently working with, or the students that I know at the school and then I think can I use this with them? If I did, what would it look like? What modifications would I need to make in order for that to work? Is it too hard, is it below their growing edge? Evaluating different approaches and then determining which one sits well with me I suppose, and then which I would feel comfortable with applying to the students that I work with. I remember when I first started here I said ‘oh I really don’t understand what’s going on with this child, I wish I could get in their head and understand what is happening’. And someone said to me ‘They’re a puzzle, you’ve just got to work out how to put the pieces together in the way that makes
sense. I mean there’s no right or wrong, it’s just a process of elimination, of trying new things, working out what works, what doesn’t work and you know hopefully over the course of time the process is refined and the jigsaw gradually comes together in some cohesive manner, some way that makes sense. It’s always a big question mark, and it’s just about having the confidence and the courage to take the risk to find out what works and what doesn’t.

We’ve had training in a lot of different areas, and with the UTS course it addressed many different models of music therapy. SERVAM definitely plays a big part here. I think Barry Prizant’s philosophy on working with those with autism is really relevant. Carl Orff’s work has been something that I’ve really enjoyed doing, particularly with kids that have more musical skills and can play more in a group. There are some teaching methods that are really interesting in terms of teaching notation.

**Grizelda EMU8.** Grizelda speaks here about valuing the opportunity to collaboratively run programs with therapists from other disciplines whenever possible, and in solving problems by combining the knowledge of different disciplines in a single program.

She seems to appreciate the help from other professionals in articulating transdisciplinary practice through describing strategies in professional language in a way that can be made accessible to those outside the field of ASD.

Table 4.21

**Grizelda EMU8 Title and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>EMU8 Title</th>
<th>Exemplary Key Statements under EMU8</th>
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<tr>
<td>Grizelda accumulates and articulates knowledge by collaborating with other professionals in her work</td>
<td>There’s also the opportunity to collaborate when timetables allow. Doing a collaborative program with the speech therapists, we had a program a few years ago here called Sounds Aloud, which was fantastic in eliciting articulation goals and diphthongs and literacy and different areas. And then with music and move I’ve worked with OTs, so we’ve worked on gross motor planning, fine motor planning within a musical framework which is more motivating for our students. Then I did a presentation at the Opera House last week and I asked one of the OTs if she could help me articulate about the proprioceptive and the vestibular movement that our students...</td>
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</table>
require. And I knew like in my mind, what I’ve seen and what
that means, but to articulate it was a difficult thing for me to
do in front of a whole bunch of professionals. So, it was
lovely just to be able to ask her to give me a bit more
information so that I could really articulate that in a way that
was accessible to a lot of other people from other
organisations and disciplines.
It’s just being able to really talk to people that have been
studying their own disciplines for many years and are very
passionate about what they do, and being able to have
conversations and talk through issues, come up with creative
ways to motivate our students and to teach each other,
whenever possible. I think that’s a really valuable thing.

**Grizelda EMU9.** In these statements, Grizelda speaks about the richness of
knowledge she has gained over the years from working alongside professionals from other
disciplines, and how helpful it is to have instant access to their expertise. This knowledge
appears to enable her to address goals from other professionals within her music therapy
programs. She also seems to apply this knowledge outside her programs with coaching newer
staff, as they become familiar with the high needs of their students. She describes feeling
better equipped as a music therapist with this knowledge and experience of working
alongside other disciplines.

Table 4.22

**Grizelda EMU9 Title and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>EMU9 Title</th>
<th>Exemplary Key Statements under EMU9</th>
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<tbody>
<tr>
<td>Grizelda believes that the transdisciplinary knowledge she has gained from working alongside other disciplines has greatly enriched her practice</td>
<td>Not all, but I could certainly see that music therapists in other environments work in isolation and don’t necessarily have the communication with other disciplines relating to the class that they’re working with. I think that is one of the big things that I really enjoy about working here is that I can speak to a speech therapist, an OT, a teacher, a teacher’s aide, and other music therapists and brainstorm different ideas and discuss certain students and work out creative and innovative ways of really utilising all of our disciplines to be able to bring out the best in these children. That’s what I really enjoy about working here.</td>
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</table>
EMU9 Title

Exemplary Key Statements under EMU9

I think if I came from purely a music therapy approach here, there’d be a whole depth of knowledge from the other disciplines that I’m missing out on. I think that knowledge gives me a more wholistic approach to the students. So when I first started working here, I didn’t have that knowledge, so when there were behavioural issues or sensory issues or speech difficulties, or communication-related difficulties, I didn’t feel as equipped to address those issues within my sessions because I wasn’t really educated about those concepts. So over time, going to a lot of PD sessions and speaking to and having those collaborative sessions with OTs and speechies really helped. And just lots of conversations and emails have meant that I’m much more equipped now to identify what’s going on with students and to address them more promptly, and also direct newer staff members towards an appropriate course of action with the student. Whereas I wouldn’t have felt as confident to do that when I first started without that transdisciplinary knowledge.

The information that I’ve learnt through the other disciplines has been invaluable. And I feel a lot more confident to take the lead on certain things if I feel that a child’s not coping because of sensory needs, a lack of input or too much input, if they’re dysregulated what to do to help them. To assist them in communicating their needs and also to communicate to them what’s expected of them much more effectively so that reduces their anxiety and stress. If a child is really seeking a lot of input from the wall or floor or jumping and landing on their knees, and that they need some proprioceptive input and they need to carry a heavy bag and go for a walk or have a big squeeze or get into a lycra sack. There’s a number of different tools in my tool kit now that I can offer and suggest to other staff members if they’re having trouble, or even when I know the children, what their experience is like, what they need. So there’s just a lot more tools in my tool kit than there were before basically.

Grizelda EMU10. Grizelda expresses here that the job is challenging, but that she hopes to avoid burnout, so she can maintain quality of practice. She finds support for dealing with issues of personal safety by accessing professional supervision outside of school. These statements show her desire to balance challenge with professional support in sustaining her professionalism and wellbeing.

Table 4.23
Grizelda EMU10 Title and Exemplary Key Statements

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<tr>
<th>EMU10 Title</th>
<th>Exemplary Key Statements under EMU10</th>
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<tbody>
<tr>
<td>Grizelda knows that there is a risk of burnout in this kind of work and accesses professional supervision outside of the school to help manage issues, particularly those around personal safety</td>
<td>I’ve actually been having some individual supervision externally, like once a month. And that’s been really good for me. There are some things that you can discuss within the school environment, but sometimes it’s good to get an objective viewpoint as well. Particularly with kids that I am struggling with, that I’m unsure how to move forward with, because their behaviours are so unpredictable and hurtful I suppose. Not emotionally but physically, then that’s maybe something that I might bring up in my individual supervision. I’m pretty happy to have lasted this long and not burnt out. But it’s been an incredible experience and continues to be and will continue to be for hopefully many more years.</td>
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Grizelda EMU11. Grizelda here shares how she finds it exciting to collaborate on projects with the music therapy team that make a real difference to their profession. In particular, she seems to gain satisfaction from applying her transdisciplinary knowledge to advocating for access to the arts for students with ASD and their families.

Table 4.24

Grizelda EMU11 Title and Exemplary Key Statements

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<thead>
<tr>
<th>EMU11 Title</th>
<th>Exemplary Key Statements under EMU11</th>
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<tr>
<td>Grizelda finds satisfaction in collaborating on projects that have a positive impact on families and the community outside of Giant Steps</td>
<td>Not just musically either, but in terms of theoretical approaches and different assessment tools and the fact that we’ve created our own assessment tool for NDIS I think is wonderful. It’s going to be very useful for us and I think for other music therapists, that may not have something like that to use, to put forward their case for their students or for their clients. Being able to do that collaboratively is also another real plus for us. And it’s something that excites me, to do that together. As music therapists, it’s something that I am passionate about, and that’s access. The more that I’ve been working on access for our students at the Opera House or other venues, the more interested I’ve been in that area. And it’s drawing from my music therapy experience and knowledge, and all of the transdisciplinary knowledge that I’ve accumulated has allowed me to really work on widening the scope of our children’s community access within the arts. I feel like it’s just one aspect, I mean there’s many other smaller things that</td>
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EMU11 Title | Exemplary Key Statements under EMU11
---|---
| happen within the school that I feel really satisfied by. But this is one thing that feels quite meaningful and it feels like it’s been noticed and it’s a strong advocate for those with autism within that realm. So I feel like it’s something good that’s really come from working here and started from just our students being able to have access to the Opera House to now other organisations taking notice and really being interested in the process and the model. So it feels more big picture.

**Grizelda EMU12.** In the following statements, Grizelda shares how important it is for her to work in an atmosphere where being social and sharing humour is part of the job. She speaks highly of the capacity to have fun with staff and students, and that she feels everyone is willing to pitch in and do whatever needs to be done in any moment. She seems inspired by watching staff who are passionate about working with their students.

Table 4.25

**Grizelda EMU12 Title and Exemplary Key Statements**

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<thead>
<tr>
<th>EMU12 Title</th>
<th>Exemplary Key Statements under EMU12</th>
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<tbody>
<tr>
<td>Grizelda is inspired and buoyed along by Giant Steps staff who are passionate about what they do and have fun while they work</td>
<td>For me, I really enjoy the social aspect of working here. Giant Steps does tend to invite people of a certain craziness maybe? I suppose there are certain people that are a good fit here, that are quite outgoing, that have a real focus on the quality of their work. But enjoy having a bit of fun while they’re doing it and are not scared to get their hands dirty, or to play with the children and really get down to their level. I love watching other people work with the students, especially people that are passionate and enthusiastic about what they are doing. I think that inspires me to be better and to work harder and to be the best that I can in this environment.</td>
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**Individual Distilled Essence for Grizelda**

Here the EMUs for Grizelda are woven together into a narrative, distilling the essence of her experience at Giant Steps.
**Grizelda – Individual Distilled Essence**

Grizelda is inspired and buoyed along by Giant Steps staff who are passionate about what they do and have fun while they work. Belonging to a team makes her feel supported on hard days by being willing to solve problems collaboratively and by pitching in to do what needs to be done. She believes that the diversity of experience and approaches in the music therapy team is a real asset to the school and this helps them in sharing the creative load of creating resources.

In her work, Grizelda draws on a variety of methods to address student needs, but she needs to critically evaluate them first before implementing into her practice. She places great value on reading for rethinking and clarifying how she works. She also finds that the level of student engagement and energy and their learning style tends to guide her practice in the moment.

Grizelda finds value in developing skills through both music therapy and music curriculum, but can sometimes find it challenging to focus on both, particularly within group sessions. She accumulates and articulates knowledge by collaborating with other professionals in her work. As a result, she believes that the transdisciplinary knowledge she has gained from working alongside other disciplines has greatly enriched her practice.

Grizelda knows that there is a risk of burnout in this kind of work and accesses professional supervision outside of the school to help manage
issues, particularly those around personal safety. She finds satisfaction in collaborating on projects that have a positive impact on families and the community outside of Giant Steps, and she feels sustained by seeing the achievements of students and how these positively influence their futures.

The final sentence of this Individual Distilled Essence had initially read: “She finds satisfaction in collaborating on projects that have a positive impact on families and the community outside of Giant Steps, and she feels sustained by seeing the achievements of students and having had a positive impact on their future.” It was changed in light of the feedback from Grizelda, shown below.

Good on you! That was not an easy job and the document reads really well - thank you. My only feedback relates to the last paragraph. The second half of the sentence may flow better with ‘... achievements of students and how these positively influence their futures’ (Grizelda).

Experienced Meaning Units for Louise

Louise has been registered as a music therapist for 9 years, spending more than four of those years at Giant Steps, combining it with work in other settings on other days of the week. She is 45 years old, and at the time of the interview, was working with both Primary and Secondary students aged 8-12 years old.

Louise EMU1. Louise speaks of struggling in the beginning at Giant Steps, but also of her feeling that having a team of music therapists around her makes it a good place to work. It seems that she feels that the school expects a lot of its staff, and that staff in turn do give a great deal, sometimes too much in her opinion. These demands can make it hard for her to balance work with family commitments. My feeling is that these demands are partly
offset for her by being a respected member of the class team, and not having to justify her work to the school, as she may need to do in her work outside of Giant Steps.

Table 4.26

*Louise EMU1 Title and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>EMU1 Title</th>
<th>Exemplary Key Statements under EMU1</th>
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<tbody>
<tr>
<td>Louise finds Giant Steps to be a challenging job with very high expectations of its staff, but being part of a team of respected music therapy professionals helps her to feel supported in meeting those challenges</td>
<td>It has been a rollercoaster place actually. From day 1, I was thrown in at the deep end. And I think the induction’s better nowadays, I know it’s much better nowadays. It was kind of a ‘sink or swim’ feeling for a year. And being stubborn I kept going, but it’s a fantastic place to work for that very reason that it’s a team of music therapists, which is fantastic. It’s just rare you know. It’s one of the most giving places I’ve been to. Which I’m not sure is entirely healthy, but it is what it is. And I think there’s a lot of expectations of giving, and a lot of people do give. But the upside of that is that you never feel like you’ve been left to organise anything on your own, it would never happen.</td>
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**Louise EMU2.** Louise expresses an appreciation for the role of the music therapy team meetings in saving time when organising events. She speaks of the creation of theme-based activities within the music therapy team as a primary source of information for her practice, and of how she appears to value being able to express different opinions in this forum. At times, the music therapy team has engaged in action research. Since she feels she does not do enough reading, she found these research projects beneficial, as they required reading and contribution from all members of the team.

Table 4.27

*Louise EMU2 Title and Exemplary Key Statements*

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<thead>
<tr>
<th>EMU2 Title</th>
<th>Exemplary Key Statements under EMU2</th>
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<tbody>
<tr>
<td>Being a part of a diverse team of music therapy professionals informs Louise’s practice through planning, researching and</td>
<td>Those meetings, although at a busy period we might whinge about having to go sometimes, they are still essential part of it really because even in the planning or the organisation of an event, it’s easier just to have everybody there in one go and you ask your question and you sort it out much quicker than sending</td>
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<tr>
<td>EMU2 Title</td>
<td>Exemplary Key Statements under EMU2</td>
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<tr>
<td>creating resources together in a collaborative manner</td>
<td>emails back and forth. So from the admin side of things they’re good. I’d like to say reading, but I don’t really do enough of that research. We had to do research for a time, and that was quite good. If we are all really bored silly with a song, to come up with something else we can do with it, or another song we can do for that particular activity. Or someone to say ‘oh god yes I hate that song too’, ‘I’m not doing it either, I’m doing this one .. ah yeah!’ Just the creativity of the team. And the back-up of the team. The main thing would be the sharing of ideas, so everybody chipping in every time we have a new theme, everybody chipping in with their own songs and ideas. Also, when we’re setting up new themes, when we get together, it’s just that sudden tsunami of ideas that we come up with. You know ‘oh look this song’, and ‘that would work like this’ and ‘that would be really good like this’, so that would be the main, as far as Giant Steps is concerned, that would be the main source of information.</td>
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**Louise EMU3.** In these statements, it feels that Louise knows that she doesn’t have to solve problems on her own, and that the team will support her when she experiences difficulties in her work. She talks of having many different people and forums through which to sound out problems with student engagement, but also seems to feel that the people who spend the most time with the student usually know them the best. This may be particularly important to her, as she works at Giant Steps two days per week, and has limited consistency in her contact with students. She expresses comfort in sharing her experiences with others on challenging days, and a feeling that everyone, regardless of perceived capability, experiences those challenges in their work. She speaks positively of the less formal aspects of team meetings, such as chatting and sharing funny moments. Having this team around her also appears to help her avoid becoming stagnant in her practice.

Table 4.28

*Louise EMU3 Title and Exemplary Key Statements*
Being part of a transdisciplinary team sustains Louise’s practice through solving problems together and by sharing the good and the bad days with each other.

I mentioned the formal version which is our meetings, so there’s always time to share a problem or share a win. Also the informal side of it, so for instance when I’m in the office with someone else, then there’s the informal discussion of ‘this is not working well for me’ or ‘I’m having a really, not a great time today’. And depending who you talk to, you could either maybe, get ideas from them or just have someone else say ‘oh yeah I’ve been there too’. Then you realise that everyone else has crappy days too I suppose. Even people who you think are quite capable.

But I think everybody has everybody’s back. If you need to discuss things or if you have issues then your other therapists are there for you, to nut out problems. And I think that’s constantly improving as well, the meetings when we can all be there, I think that’s been good.

We do generally have plans to discuss things but then we often end up, just having a chat. Which is just as good too. They’re just a valuable time to touch base, to get together and share ideas, and just have a chat and a laugh.

Louise EMU4. Louise works at Giant Steps and at other non-school settings across the week. In comparison, she seems to experience working within a school framework as more bound, whilst she says she is able to be more flexible in her work in other places. For example, she talks of being unable to make changes in programs during the school year, as it would affect the writing of her end of year school reports. She describes the pace of working within the school curriculum and its themes as challenging, finding it hard to navigate the grey area between teaching and therapy. Despite this, she acknowledges that the fast pace keeps things moving for her, and sometimes she chooses to use the materials developed at Giant Steps in her work outside of the school with other clients.

Table 4.29

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<tr>
<th>EMU4 Title</th>
<th>Exemplary Key Statements under EMU4</th>
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<tr>
<td>Louise experiences working within the school curriculum as fast-paced</td>
<td>I think I find it hard to use that model, and bring it into the school model. There’s no reason why it couldn’t be done, but I can’t, I have a mental blank often as to where I feel more</td>
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and highly pre-determined and having a lower capacity for flexibility than her music therapy work outside the school setting

constricted by the units of work and the goals and the report writing, where I feel like if you suddenly switch half way through, then that’s going to affect how the report’s going to be written at the end. How you might have only half a term to work on that one thing and because with the private clients you have maybe 2 years. If you’re thinking of a goal, then yes you could extend it out over 2 units of work but I think with the unit of work being there I’m still trying to get my head around thinking in terms of goals rather than in units of work. I still find it somewhat frustrating because I still think there’s a lot of grey area between the music teaching and curriculum side and the music therapy part. I think it’s just trying to marry the two, because when I think of it now they are two quite different ways of working. Maybe I just need to work out how to merge them a bit more effectively.

Louise EMU5. Louise’s main point here seems to be that having students in groups feels more like a music class to her than music therapy, and that she feels less able to provide what she views as music therapy in this format. She talks of heartbreaking experiences when she has to sacrifice moments of individual musical connection in the interest of keeping the rest of the group engaged and regulated. This felt to me like a key challenge for her, and she expressed it with great feeling in the interview.

Table 4.30

Louise EMU5 Title and Exemplary Key Statements

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<thead>
<tr>
<th>EMU5 Title</th>
<th>Exemplary Key Statements under EMU5</th>
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<tr>
<td>At times, Louise finds that working in groups feels more like teaching than therapy, and feels disappointed that opportunities for sustained interaction through improvisation are often missed in the interest of keeping the group regulated</td>
<td>So, there’s a lot of duty of care work which I get, it’s financial and it’s also just being part of it. But I do find it hard sometimes to get my head around. If you’re in a group, and you get that connection with one student and you know you could easily keep going for maybe 10 minutes doing the same, just with that one person but you can hear it all getting a little bit chaotic, so you have to cut short that moment. And that just breaks my heart sometimes, you have to have to do that, you have to go back to bringing the class in. I feel that sometimes there are some missed opportunities there. So, there’s a lot of group work and there’s a lot of people that I would love to see on an individual basis, for the same length of time that I see a whole group. And then a lot of kids that,</td>
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</table>
EMU5 Title

Exemplary Key Statements under EMU5

groups are just not, I don’t feel like they’re getting a whole lot out of it, really. But time factor dictates that that’s the only option, that or nothing. And that is sometimes where it feels a bit more just like a music class, than music therapy.

Louise EMU6. Louise describes here how she often makes plans to do professional reading in the school holidays, as she cannot find the time during school terms. Despite these plans, she seems to find that taking a break between school terms from music therapy is more important to her health. These breaks and taking opportunities for self-care appear to contribute to her sustaining her enthusiasm for the work over time.

Table 4.31

Louise EMU6 Title and Exemplary Key Statements

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<thead>
<tr>
<th>EMU6 Title</th>
<th>Exemplary Key Statements under EMU6</th>
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<tbody>
<tr>
<td>Although she plans to read more in the school breaks, Louise finds it important to take a complete break from music therapy reading, planning and work at these times in order to sustain her enthusiasm</td>
<td>Which is maybe why I don’t do any reading in the holidays or anything. And that is why I just need a break from it, in order to regain enthusiasm for the next time. I’m learning that in order for you to be sustained the next time, you have to know what your limits are. But I don’t really do that. I have grand plans to do that in every holiday and I never do. I generally just do nothing, no music therapy, thinking, reading, planning, nothing in the holidays. I’ll sometimes play for myself but then sometimes I don’t play anything at all. Just don’t know if that’s a good idea or not. Yeah, it’s a shame because actually I don’t feel like I have time during term, and that’s why I always think oh well I’ve got time, I’ll do all this reading in the holidays, but I just never do. Taking a break from it every now and then keeps it fresh.</td>
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Louise EMU7. Louise expresses here an awareness of the importance of reading and the pressure she places on herself to always be doing more. She clearly has a very broad view
of where music therapy, special education and ASD information can be sourced, including print media, schools, websites, Facebook, online articles, bloggers and research literature.

Table 4.32

Louise EMU7 Title and Exemplary Key Statements

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<thead>
<tr>
<th>EMU7 Title</th>
<th>Exemplary Key Statements under EMU7</th>
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<tbody>
<tr>
<td>During school term time, Louise sources reading and information from a range of academic and general online media sources, and despite being time-poor, feels pressure to be reading more</td>
<td>I usually find that kind of stuff in Sunday and Saturday magazines. Often you get psychological things like that. Also through schools, both children’s schools, sometimes send out parenting things, advice things, websites. Websites and some autism websites. Facebook. Some articles that people share on Facebook, to click on those and see. That’s quite a good way of watching other people work actually, because that leads you into sites that other music therapists have set up showing their own practice. Social media and magazines. TV maybe not so much. TV maybe not so much. There’s also ideas from not necessarily music therapy literature but just reading things, just things. Just the idea of being open to getting ideas from any, whatever source. That’s probably what most informs me. Whether it be TV, radio, social media, people. Taking it in from wherever, and then in your quiet time at night, suddenly you might think of something that had happened earlier. Just be open to ideas. From wherever.</td>
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Louise EMU8. Louise seems to find satisfaction in continual learning and the process of self-improvement, including pushing herself beyond her comfort levels. This may be through music skills development, or through developing tools and systems that clarify her practice. Development of skills and professional tools that have a practical application seem to have an impact on her practice.

Table 4.33

Louise EMU8 Title and Exemplary Key Statements

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<thead>
<tr>
<th>EMU8 Title</th>
<th>Exemplary Key Statements under EMU8</th>
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<tbody>
<tr>
<td>Louise gains the most value from professional learning that is practical in nature and relevant</td>
<td>Learning and getting over your fear of improvisation, pushing yourself beyond your boundaries a little. That not so formal education, but extending your personal</td>
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</table>
to her work, especially when it helps to push her learning edge boundaries, developing musical skills, therapeutic skills, so just bettering yourself a bit. And not staying stagnant. Education and learning new things. Like even guitar skills, things like that. Even when we worked on that big NDIS document. Things that sort of make your life easier and clarify things.

Louise EMU9. In this EMU, Louise describes how she looks to her own instinct in applying music therapy techniques in sessions, and doesn’t seem to think of those techniques consciously during her sessions. She talks about observing student engagement closely, and how this informs the ways in which she continually adjusts her programs, and how she may transfer relevant ideas to her work with other students. Quiet time seems vitally important for Louise to reflect on her work, and she claims that new ideas can come to her at unexpected moments when she has space and time to let her mind rest.

Table 4.34

Louise EMU9 Title and Exemplary Key Statements

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<tr>
<th>EMU9 Title</th>
<th>Exemplary Key Statements under EMU9</th>
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<tr>
<td>Instinct, reflection and observation of student engagement tends to guide</td>
<td>What came to mind first with what informs is instinct. A lot of what I do is instinct. I was chatting to (other music therapist) about this, and then when we recorded ourselves and then looked back and we talked about ‘oh you’re doing this, you’re doing that, you’re doing ..’ but none of that was top of mind when I was doing it. It was just instinct. Sometimes just lying in bed at night time trying to get to sleep – bang! In pops an idea. Quiet time I think that is, I think that’s just when you have quiet time to let your mind wander. And the other area I was thinking was from clients themselves. I might get an idea from one client and then be able to apply it to another. Depending on what a client’s doing or a student, just going with the flow of that, and then amending the program the following week.</td>
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Louise EMU10. Louise speaks here about being observant in her work, always looking to learn from what she sees and hears from others. She seems to prefer to see the work of other music therapists in action, either online or in person, but may find it hard to organise the observation of other music therapists at work. Instead she spends time talking to people, learning about how to interact with students from the people who spend the most time with them. She describes finding the convenience of being able to watch music therapy practice videos online as beneficial, and this may relate to her comments about balancing work and family commitments. She seems to enjoy also sharing what she knows by creating a musical space where staff can see students in a different light. Outside the school, she mentions her peer supervision group as providing an outside view for a different perspective and as an opportunity for gathering ideas and accessing self-care.

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<tr>
<th>EMU10 Title</th>
<th>Exemplary Key Statements under EMU10</th>
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<tr>
<td>Speaking to Giant Steps staff, her external peer group and other people as well as watching the work of others in person or online influences how she approaches her work with students</td>
<td>Some articles that people share on Facebook, to click on those and see. That’s quite a good way of watching other people work actually, because that leads you into sites that other music therapists have set up showing their own practice. Social media and magazines. TV maybe not so much. And watching, just observing people with people. Observing how other, not necessarily music therapists but just other, workers or family members interact with whoever they’re interacting with. So just observing people. I get a lot out of a peer group that I go to outside of school that I’m in, people with a completely different outlook. Sometimes there’s a lot of crossover between aged care, dementia and autism especially when you’re thinking of non-verbal communication.</td>
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Louise EMU11. Here, Louise describes how witnessing the significant achievements of students over time brings meaning to her practice. The achievements may be witnessed by
herself over the long term, but also may come from parent feedback. She works at the school with students who may take years to learn new skills, and here she expresses admiration for their achievements, even when they appear small, as they were hard won over a long period of time.

Table 4.36

Louise EMU11 Title and Exemplary Key Statements

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<tr>
<th>EMU11 Title</th>
<th>Exemplary Key Statements under EMU11</th>
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<tr>
<td>Louise finds meaning in the connections she has made with students, whether they be large or very small, and in the small but significant gains made by students within a musical relationship that has grown over a long period of time</td>
<td>Sometimes you don’t even know you’re having a moment. Sometimes it has to come from someone else. For example, I have a private client. I was just sitting side by side and we were ding away on the coloured chimes, and I didn’t know it was a moment really until her dad came in and was speechless because she doesn’t let anybody sit beside her. You have to sit across the table from her. In that moment it was through the parent. Because you know I was just doing what I was doing, it didn’t mean anything to me. But when it was explained. It’s when you think you’re doing something positive, and something right and something meaningful. That’s what sustains me. Don’t always see it though. So not even big ‘wow’ moments, just connections, just little connections. The one that comes to mind is recent, with a student who I’ve known. When I said I first started and I was thrown in the deep end, it was with this student who is quite unlike the others. And I was terrified of him. And my introduction him was that he nearly pulled all my hair out. And I’ve seen him on and off over the years, and he just gorgeous, he’s such a lovely boy. And in Term 4 he, he, it was just and this has taken you know, years really, but he held his hands out and shook an instrument .. on my .. you know he acted, yeah it was just a, it was like it felt like after 4 years :lol: of doing music with this guy, suddenly this year the sound of the guitar makes him look up. The sound of the sushi song gets him really excited. And he actually held his hand out to play a, two hands to play an instrument. Yeah.</td>
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Individual Distilled Essence for Louise

Here the EMUs for Louise are woven together into a narrative, distilling the essence of her experience at Giant Steps.

Louise – Individual Distilled Essence

Louise finds Giant Steps to be a challenging job with very high expectations of its staff, but being part of a team of respected music therapy professionals helps her to feel supported in meeting those challenges. Being a part of a diverse team of music therapy professionals informs her practice through planning, researching and creating resources together in a collaborative manner. Additionally, being part of a transdisciplinary team sustains her practice through solving problems together and by sharing the good and the bad days with each other.

She experiences working within the school curriculum as fast-paced and highly pre-determined and having a lower capacity for flexibility than her music therapy practice outside the school setting, but it also can inform her other work through transferring themed resources to other settings. At times, she finds that working in groups feels more like teaching than therapy, and feels disappointed that opportunities for sustained interaction through improvisation are often missed in the interest of keeping the group regulated.

Louise gains the most value from professional learning that is practical in nature and relevant to her work, especially when it helps to push her
learning edge. Speaking to Giant Steps staff, her external peer group and
other people as well as watching the work of others in person or online
influences how she approaches her work with students. Looking to her own
instinct, reflection and observation of student engagement tends to guide
her practice in the moment and from week to week.

During school term time, Louise sources reading and information from a
range of academic and general online media sources, and despite being
time-poor, feels pressure to be reading more. Although she plans to read
more in the school breaks, she finds it important to take a complete break
from music therapy reading, planning and work at these times in order to
sustain her enthusiasm.

Louise finds meaning in the connections she has made with students,
whether they be large or very small, and in the small but significant gains
made by students within a musical relationship that has grown over a long
period of time.

In the feedback from Louise, she mentioned the importance of noting the variety of
sources from which she draws information. I returned to the text and made sure that I had not
left out any sources and that this was captured in the EMUs. Her feedback was as follows:

Yes, that’s pretty much it in a nutshell. I think maybe when you mention that I ‘get
information [and creative ideas] from a multitude of sources’ is it worth listing the
sources as more than peer journals? For example, websites, social media sites,
magazines. Otherwise it’s all good (Louise).
This indicated to me that she felt it a priority to communicate the range of sources of information she drew on, in shaping her own practice as a music therapist.

**Experienced Meaning Units for Sally**

Sally was the newest member of the team at the time of the interview, having been employed as part of the new music therapy program at the Giant Steps Adult Community College for one year. She is 39 years old and has been practising as a music therapist for four years.

**Sally EMU1.** Sally seems to be often on the lookout for opportunities to attend diverse types of training in different music methods. She describes music therapy information as often being too broad, and may sometimes prefer the delivery to be outlined in greater detail. Although she expresses a liking for professional learning that is clear and well-structured, she doesn’t appear inclined to subscribe to any one therapeutic method. She recognises that professional learning often describes techniques she already uses in her work, but that they may be named differently.

Sally highlights how her practice is based on a person-centred philosophy, and that its relational focus informs her practice. As relationships are core to her therapy practice, she links this to why she found drum circle training to be relevant. She says that she attends conferences in the hope of finding relevant, fresh ideas and inspiration for her practice, and this seems particularly appropriate for an early-stage professional.

Table 4.37

*Sally EMU1 Title and Exemplary Key Statements*

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<tr>
<th>EMU1 Title</th>
<th>Exemplary Key Statements under EMU1</th>
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<tr>
<td>Sally values well-structured professional learning that resonates with her own humanist, client-centered philosophy</td>
<td>I just like the way it was delivered, it was very clear. Which with music therapy it’s not easy just to go right this is what we do and this is how we do it. It can be such a broad way of practising different ideas and the different ways people do things. So, it was a very different approach</td>
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from what I’ve had in the past. It wasn’t sort of, UTS creative arts, which was very broad. It was just a clearer format the way they present things and everything was categorised and put into ‘this is what we use for this and this is what we use for this’. It was just really clear, and I like having that text there. I don’t think it would be something that I’d solely use, it’s not something that I’d just go ‘right I’m a neurologic music therapist and this is what I do’ but it’s definitely something I would draw on. I take a very client-centered approach. I’d say I probably come from a humanistic perspective. I like to see the client as a person first and the music comes after that, so I like a lot of the humanistic principles that I’ve read I think that suits my practice and informs my practice. I like the way from the humanistic perspective how they say the client’s existence is relational and it’s to do with where they relate to their society and the community and where they are. But I like the way that music is also very relational, how it relates, how the elements of music relate to each other and how a song might relate to a society and so I think that as an umbrella kind of perspective I really like that. It definitely informs the way I practice.

Sally EMU2. Sally works two days per week at Giant Steps, and acknowledges the value of team support and information learned from others who spend more time with students, as much can happen in between her days onsite. She speaks highly of having positive staff in her sessions and her appreciation for how they support client engagement and share her person-centered philosophy. She seems to trust the information she receives from staff more than what she reads in reports, and feels that a culture of trust and respect contributes to all feeling valued. In her work, she is also part of a small, creative arts therapy team, and describes how they work together in a transdisciplinary manner, but also how she would like more input from other disciplines as well.

Table 4.38

Sally EMU2 Title and Exemplary Key Statements
Sally views her team as positive, equal and collaborative and trusts the information she receives when talking to them, even more than written client reports.

Chris is a fantastic Director and he’s got a lovely approach, everyone’s good, everyone’s got a lovely approach. We work on a really good level there, it doesn’t feel like anybody’s in charge of anybody, we’re all very equal, so it doesn’t matter who’s an educator, an OT or a you know that it’s all very level which is really nice. It doesn’t feel like anyone’s above anyone else, which is a really good situation. It’s a great team to be part of.

I think there’s still the element of unpredictability of like every day is different. Every session is different, and you’ve got to really trust in information that you get from the staff about what’s going on for the client, if there’s been a medication change or they’ve had a bad week or they haven’t had as much sleep the night before and there’s gotta be a lot of communication.

There was great support and being able to talk to you, and being able to get advice from the staff, learn a lot more about the clients, I think that was really important. I needed a lot of background information about their triggers and what they liked and what they didn’t like and a lot of background information which took a long time. It wasn’t something I could just sit down and read from a file.

**Sally EMU3.** Sally speaks about how the job was confronting for her at the start, and about the heightened awareness she needs to have around personal safety with the adult college clients. Although she says she is always a little on guard, she seems to feels that this doesn’t overly affect her ability to practise music therapy. She is in constant communication with staff to maintain engagement with clients, even having a number of staff in her sessions at times to support and join in and this appears to make it easier for her to manage unpredictability between clients and to offer social opportunities.

**Table 4.39**

**Sally EMU3 Title and Exemplary Key Statements**

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<tr>
<th>EMU3 Title</th>
<th>Exemplary Key Statements under EMU3</th>
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<tr>
<td>Sally relies on staff to help support student engagement, as she needs to remain aware of issues around personal safety</td>
<td>Of course, it does make a difference because you can’t be completely relaxed and I suppose it does take up a part of my brain. I can’t be completely focused on the therapy and on the music and on the client because I’ve got to be really</td>
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aware of my surroundings, I’ve gotta be really aware of the space and, if I do have to get out fast where’s the closest exit. So, it does affect it, it’s not like I can be completely relaxed all the time. But life’s fairly unpredictable, there’s always a part of you that’s gotta be aware of your surroundings and what’s taking place. I don’t think it affects it overly negatively, I don’t think that it takes a lot away from it, but I think it’s important to be aware of it. Because there could be a negative outcome if I’m not aware of it, and that would be worse. But on the whole, I think as long as you’ve got that support staff, really important, and you keep your awareness high, I think it’s OK.

Each client has generally 1:1 support. So, from the morning I know which staff member is working with which client, we know who’s with who. So generally, I’ll talk to that person about what’s going on and they’re not always present for every session, but for the ones where there is that element of unpredictability and you don’t know whether there’s a risk, then I sort of insist that there’s someone or that they’re always close by. Like I had a session today and there was a song that I wasn’t sure if was going to be OK, a Xmas song. So, I was able to open the door and call out and someone came in to support me. So, they’re always very close by, and there’s gotta be a lot of talking and communication throughout the day. In sessions, especially in groups there’s always quite a few staff members present.

The first few weeks at College was quite challenging, quite confronting, I think my main concern was the risk to my personal safety just because I was working with young adults who were much, some of these guys are a lot bigger than me and a lot stronger than me, and I was pretty nervous to begin with. But I think as the weeks went by, I tried to remain very confident and confident in what I was there to do, I was there to be a music therapist and I’m not security. So, I just became very clear in what my role was.

**Sally EMU4.** Sally speaks here about her preference for seeing music therapy strategies and practice in action, rather than reading about them. When reading or attending conference presentations, case studies seem to be the form that she can relate to her work most readily. This applies to watching videos, including those of bloggers, as well as watching other music therapists face-to-face in their own work.
### Table 4.40

**Sally EMU4 Title and Exemplary Key Statements**

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<tr>
<th>EMU4 Title</th>
<th>Exemplary Key Statements under EMU4</th>
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<tr>
<td>Watching music therapists in action, either in person or on film, is useful to Sally as she often finds reading about music therapy techniques to be too vague</td>
<td>There’s a few different videos, I suppose they’re like bloggers, that put things up. They can have some helpful interventions, and they can have quite a bit of information. I think you have to be careful, I watch things but don’t necessarily think that there’s going to be a perfect fit, it’s not like it’s a carbon copy that right, I can do that now. But it gives you some nice ideas and some inspiration, and having that video makes it a lot clearer than just being able to read it off a page. It’s seeing it in practice, especially with music therapy. I like to always be reading and researching and looking at the way other music therapists practise. I like reading about other sessions and what other people do because I think it’s a profession where so many people practice differently. We generally have a similar training, although there’s different training as well, but everyone has a different way of practising. So I can be influenced by other music therapists but then I can bring it in to my own way I want to practice. When I go to a conference, I’m looking for presentations that are relevant to what I’m doing. Seeing case examples or showing videos and seeing people practising and what they’re doing, that’s very helpful. I think it’s nice just to see if there’s anything new taking place. The last couple of conferences I haven’t seen a great deal of really new things happening.</td>
</tr>
</tbody>
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**Sally EMU5.** Sally speaks a great deal about adapting ideas from education and drama for her own practice. Her creativity and knowledge of student needs seems to guide her in how she should adapt ideas to address program goals, and this may come partly from her previous training in drama teaching, and how she blends elements of drama into her programs. She also describes a preference for professional learning that includes techniques and assessment methods that she can imagine using effectively in her practice.

Table 4.41

**Sally EMU5 Title and Exemplary Key Statements**
EMU5 Title | Exemplary Key Statements under EMU5
---|---
Sally’s practice is influenced by ideas adapted from a range of sources | You can adapt things easily. It might be getting an idea but then adapting it for you or me. I think I find a lot of educational resources that maybe a teacher would use and adapt them. To make it adapted for clients so it works for the client better. Whether it’s as simple as slowing something down or changing words. Using a different instrument or trying some different things. I think there’s gotta be a touch of creativity there, it’s not something you can just look up. I found that with the speech related exercises, a lot of the techniques I use already but I think it was coming up with some new ideas. And the different assessment tools, they had a lot of ideas about assessing. I mean using non-music therapy assessment which was interesting, so I think that I might look further into that next year. I think the stroke rehab and Parkinsons, the rhythmic entrainment and the metronome was brilliant. There was a lot of techniques that I think I will be able to use.

**Sally EMU6.** From these statements, it appears that Sally gains great satisfaction from seeing clients begin to connect and engage with her through music. She describes how being present and staying in the moment is key to her practice, and acknowledges that even small changes and responses can be a big achievement for some students.

Table 4.42

**Sally EMU6 Title and Exemplary Key Statements**

EMU6 Title | Exemplary Key Statements under EMU6
---|---
Sally finds great satisfaction in being in the moment with students, and in seeing their progress, no matter how small | Not being too focused on outcomes. Trying to stay in the process and stay in the moment. That’s not the end for them, for your client to be able to sing a song, it’s more about the process and enjoying that, I think that’s really important. Not always just focusing on what are we trying to achieve. Being present in the moment, and seeing that engagement, that’s really important. Seeing the progress of this particular client who I just had. There was just absolutely no engagement to begin with, there was no eye contact. She wouldn’t pick up an instrument, she really just didn’t want to be anywhere near the guitar. And now to the progression from the start of the year where she will walk into the music room with me and sit down and choose an instrument, she used to even pick
Sally EMU7. Sally has been a part of the first music therapy program at the College, and she seems to feel that it is different to the school, and that staff are still in the early stages of developing the College model of practice. She describes with pride how her work in setting up music therapy has established it within the college program, and how she has been excited to be a part of something new. In the beginning, it sounds like she experienced finding her role in the college program to be quite challenging, until she realised she could exercise her creativity in developing the shape and scope of the program. Sally speaks positively of how the job is full of continual challenge and change for her, and that this excites and sustains her in her work.

Table 4.43
Sally EMU7 Title and Exemplary Key Statements

<table>
<thead>
<tr>
<th>EMU7 Title</th>
<th>Exemplary Key Statements under EMU7</th>
</tr>
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<tbody>
<tr>
<td>Sally has experienced working at Giant Steps to be both exciting and</td>
<td>I find the job exciting, so that’s quite sustaining in itself, that it’s not mundane, everything’s</td>
</tr>
<tr>
<td>challenging and it has</td>
<td>the same. I think the fact that it’s always changing, and there’s always new exciting challenges. I</td>
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<tr>
<td></td>
<td>think that that will sustain me, it’s</td>
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</table>
Sally EMU8. Here Sally is talking about the hard work involved in building and maintaining rapport with students when she was new to the college program, including those who had been disengaged from music for some years. Although at the time she read all the reports and assessments that she could, she found this to have limited value in building relationships with the clients. Now that she has built rapport and is more settled into the program, she seems to feel more confident in her role, understanding what engagement looks like for each person, and whether it appears in obvious or subtle ways.

Table 4.44

Sally EMU8 Title and Exemplary Key Statements

<table>
<thead>
<tr>
<th>EMU8 Title</th>
<th>Exemplary Key Statements under EMU8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building rapport and earning the trust of students has taken time but has</td>
<td>I did a lot of reading to start with but it didn’t sink in until you know the person, until you get to know them on that level, that on paper it doesn’t make much difference. So I could read about things they didn’t like but it took a long time to really build that rapport and get to know them and work out how I could be of most benefit in the College. So to begin with, very, very challenging.</td>
</tr>
<tr>
<td>also allowed Sally to be more confident in her practice</td>
<td></td>
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</table>
Now I’m at the point where I’m feeling more comfortable about what my role entails and I’m very comfortable that I’m valued there and what the expectations of me are. I also feel like I’ve built a really good rapport with all the clients, and they know me, as it’s just as important for them to know me as it is for me to know them, to trust me and to know what my expectations of them are, and that we are not placing huge demands on them. So that itself has made the experience so much better over the year just for them too, the whole process of building rapport can be such a long process.

**Sally EMU9.** In these key statements, Sally is describing what it is like to work with, and to be around other music therapists in her work. She describes being inspired and supported by being part of a large music therapy team, and how having these other music therapists around her helps her feel understood, since she doesn’t have to explain music therapy to them. At times, she says she may compare herself to other music therapists, in the different areas of speciality and skill and how they all do things differently. She also describes attending music therapy conferences with other music therapists as a validating experience.

**Table 4.45**

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<thead>
<tr>
<th>EMU9 Title</th>
<th>Exemplary Key Statements under EMU9</th>
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<tbody>
<tr>
<td>It has been exciting for Sally to be part of a music therapy team where her work is understood, but she can occasionally get caught in comparing herself to others</td>
<td>I think being able to share resources and share ideas and get some supervision if you’re having difficulties, having problems. Having that support, and knowing you can get support from other staff members. When we’ve all got the same mindset and we’re also trying to achieve the same things it’s nice to have somebody who’s practising the same profession as you, that you’ve got that support. I suppose you’ve got the comparing yourself. Am I as good as her? You’re always, you’ve got that you know I’m worse at that, I’m terrible at that, comparing what I do to somebody, what somebody else has done that we’re all so different, we have different ways of practising but you’ve gotta be careful not to go ‘that way’s better than me'. So</td>
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</table>
that may be the one area that might challenge. Because I suppose if you’re the only music therapist there’s nobody else to compare yourself to. That’s how it started, I was really excited when I first got the position, excited to be part of such a big team at Giant Steps of music therapists. Being surrounded by like-minded people, obviously that’s going to be inspiring. A whole lot of people that have the same sort of goals as you, I think it’s the best place to be, surrounded by your colleagues and that’s why it’s so good working in a team of five music therapists. Everyone’s got the same goals, the same intentions. But you get a lot of validation and you think that yep, we’re coming from the same place and you know we’ve got very similar goals and this is what we’re doing.

Sally EMU10. Sally accesses peer supervision outside of school with other music therapists, and credits it with helping her to process issues related to her work. Again, she highlights enjoying all the opportunities to liaise with other music therapists at conferences, and how this can reduce feelings of isolation. This may indicate that she feels some sense of isolation, either by being separate to the school, or by being a part-time member of the team.

Table 4.46

Sally EMU10 Title and Exemplary Key Statements

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<thead>
<tr>
<th>EMU10 Title</th>
<th>Exemplary Key Statements under EMU10</th>
</tr>
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<tbody>
<tr>
<td>Liaising with other music therapy professionals at conferences and at an external peer supervision provides Sally with avenues for support</td>
<td>Research within my field of my colleagues. I do quite a bit of peer supervision with other music therapists and we’ll get together and discuss what’s been going on and what we need, what we might have an issue with. So that’s really important. Actually, I think maybe (others music therapist’s) came to a couple of sessions but generally just a broad group, which is really good. I think a lot of music therapists can feel quite isolated. I think that’s why conferences are so great because a lot of people don’t have the benefit of being able to work in a team or might go to a place and be the only music therapist and go there once a week and leave. It can often be quite an isolating profession, so it’s nice having workshops and having as many opportunities that you can to liaise with other professionals in the same field, is really important.</td>
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</table>
Sally EMU11. In these statements, Sally draws attention to self-care as a means of sustaining herself in her work. At Giant Steps, she observes that there is a risk of burnout, and that taking breaks is important to her. Music for her self-care may consist of listening, composing and playing music.

Table 4.47

Sally EMU11 Title and Exemplary Key Statements

<table>
<thead>
<tr>
<th>EMU11 Title</th>
<th>Exemplary Key Statements under EMU11</th>
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<tbody>
<tr>
<td>Sally believes it is important to sustain herself through taking breaks to do things she enjoys, including writing and making music for herself</td>
<td>If I’m away from work I quite often will listen to songs and then think ‘could I use that?’ rather than just listen to a song. So it’s quite important for me to try and switch off and have some down time and some off time. That’s another thing that sustains my practice, having that it’s not about work anymore, let’s just listen to some music. I suppose being with my family and listening to music, my children like listening to, helps. Having that time where it’s just music for me and then I can go and sit at the piano and write a song and it doesn’t have to be a song for anybody else, it’s just for me. That’s really important. I’m trying towards the end of this year I’ve started to do more of, just realised that I want to get back into my own song writing my own personal music. You’ve gotta be careful not to burn out, to take that time to be able to just switch off and to do things that you enjoy.</td>
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Sally EMU12. Sally here shares some of the rewards of her work and how receiving positive feedback from parents, and having people show their appreciation, helps her to feel valued in her role. She talks also about sharing the successes of her students with their families, and hearing their thoughts on client progress, levels of happiness, and wellbeing.

Table 4.48

Sally EMU12 Title and Exemplary Key Statements

<table>
<thead>
<tr>
<th>EMU12 Title</th>
<th>Exemplary Key Statements under EMU12</th>
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<tbody>
<tr>
<td>Receiving positive feedback from families, students and staff</td>
<td>And I reported that back to her mother and to get the feedback from her mother saying that that had just made</td>
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</table>
**EMU12 Title**  
**Exemplary Key Statements under EMU12**

| makes Sally feel like a valued member of the team | her day and that was the best thing she’s heard. That’s when you go that’s lovely, really, really special. To get feedback from parents, I think that’s great. You know and they’re informed and see what we’re doing. The other experience I just wanted to mention was when we had the open presentation at the end of the year and to see the parents come in. I think the parents were a bit taken aback on the day because I don’t think they were expecting to be involved in anything. But I think since then I’ve had a lot of feedback, like Keith has said that he’s had quite a few comments from people, really impressed, seeing how engaged their son or daughter were in the process. You know it’s been really great. Feeling valued, getting that positive feedback really matters. It can be the littlest thing like someone saying ‘thank you that was fun’. That’s very much something that sustains me, that knowing there’s an element of appreciation for what we do. From staff, and from clients in their own way. I’ve had quite a few thank yous today which has been really nice, you don’t always get the thank yous but when you get the thank yous it’s really nice! |

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**Sally EMU13.** Here, Sally speaks about the music itself in her practice as a music therapist, and its role in sustaining herself in her work. Her own personal love of music-making and capacity to use music she loves in her work, seems to be one of the things that keeps her engaged in practice. Occasionally this reminds her of why she entered the profession. The need to keep exploring and learning new types of music for work has meant her own personal taste has expanded since becoming a music therapist, and I feel she views this as a positive aspect of the work.

Table 4.49

**Sally EMU13 Title and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>EMU13 Title</th>
<th>Exemplary Key Statements under EMU13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sally finds great personal value in using music that she loves in her work and in exploring and learning new music for different applications</td>
<td>My enjoyment of music in general, that sustains me. I think as music therapists we sometimes forget that it can be really good for us to actually enjoy the music, and it’s as much therapy that we can you know listen to a song and get enjoyment out of the song rather than be so focused on</td>
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</table>
### Exemplary Key Statements under EMU13

**EMU13 Title**

‘why am I using this song’ or ‘why am ..’ you know that it can be a very enjoyable process just for us. Like I know I sometimes learn a song for a client and think ‘I actually really like this song too!’

Sometimes I think you forget that - that’s right, I really love music. It’s why I’m doing this! You know, remember that I enjoy playing my instrument and I enjoy singing, it’s an enjoyable thing for me. You take away everything else, that’s what I love.

It’s broadening, since I’ve started practising I think my tastes have just gone all over the place. I used to be quite selective. I love learning new songs, and I love exploring different artists. Which is one of the great things about being a music therapist is you get to have to be so open to new repertoire all the time and not be stuck on anything. I love to learn, I still love dabbling in aged care because I love all the old songs, love all old musical numbers.

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**Sally EMU14.** Sally’s statements here are about reading as much as she can to stay informed, and looking to books, journal articles and other sources of information related to her field. Specific client needs and interventions seem to guide what she searches for in literature. Again, she expresses her preference for case studies, and how she finds them validating to her work. As she is a busy person, she firmly states that information needs to be accessible and quickly digestible. She appears less inclined to read literature that contains a great deal of theoretical, academic language and no practical examples.

**Table 4.50**

**Sally EMU14 Title and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>EMU14 Title</th>
<th>Exemplary Key Statements under EMU14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sally loves to read widely and finds that in her busy life, case studies provide information in a quick, digestible information format more so than theoretical, academic writing</td>
<td>From the internet, I do if I’m working with a specific client and I’m trying to come up with interventions and ways of working with specific people. I would go to the internet, might do a general search but then find things that might find a journal article within that search, so the internet’s fantastic. I particularly like case studies. So, when I can actually read about what might happen in a session and the way they tackle it and you'll see them using the intervention and it’s</td>
</tr>
</tbody>
</table>
Individual Distilled Essence for Sally.

For this final individual analysis, Sally’s EMUs are drawn together into a narrative, distilling the essence of her experience at Giant Steps.

**Sally – Individual Distilled Essence**

Sally has experienced working at Giant Steps to be both exciting and challenging and it has allowed her to use her creativity well. She views her team as positive, equal and collaborative and trusts the information she receives when talking to them, even more than written client reports. It has been exciting for her to be part of a music therapy team where her work is understood, but she can occasionally get caught in comparing herself to others.

Sally values well-structured professional learning that resonates with her own humanist, person-centred philosophy. She loves to read widely and finds that in her busy life, case studies provide information in a quick, digestible information format more so than theoretical, academic writing.

Her practice is influenced by ideas adapted from a range of sources.
Watching music therapists in action, either in person or on film, is useful to her as she often finds reading about music therapy techniques to be too vague. She relies on staff to help support student engagement, as she needs to remain aware of issues around personal safety.

Building rapport and earning the trust of students has taken time but has also allowed her to be more confident in her practice. Liaising with other music therapy professionals at conferences and at an external peer supervision provides her with avenues for support. She believes it is important to sustain herself through taking breaks to do things she enjoys, including writing and making music for herself.

Sally finds great satisfaction in being in the moment with students, and in seeing their progress, no matter how small. She finds great personal value in using music that she loves in her work and in exploring and learning new music for different applications. Receiving positive feedback from families, students and staff makes her feel like a valued member of the team.

Sally’s feedback on the Individual Distilled Essence was as follows:

“This looks great and very succinct. Very well-summarised! I hope the next stages go well for you” (Sally).

**Reflexive Review of Researcher Standpoint**

Having completed the individual analyses, I felt this was a key moment to pause and reflect, before moving on to the horizontal analysis. So as to remain within a descriptive
phenomenological framework, and due to my multiple roles within this project, I felt it was important to be explicit about my standpoint in light of the emerging individual themes. This would help me in checking whether I had misread any of the interview data and consciously or subconsciously steered the direction of the EMUs according to my own beliefs and agenda.

The return to my standpoint was undertaken by re-reading my époché (Appendix A) and noting where I needed to include or add to my thoughts on the themes that appeared in the individual results. The reflexive Review of Researcher Standpoint is included in Appendix B. After writing this review, I re-traced my steps through the EMUs, searching for any themes that appeared to resemble any of my own key points. This was repeated at the end of the horizontal analysis, as I wanted to be sure that any themes matching my own beliefs were reviewed, re-reading the interview transcripts where needed, and confirming that the theme was an authentic reading of the participants’ voices.

To illustrate this reflexive process, the following is an example taken from the individual results for Grizelda. Grizelda’s EMU9 read: Grizelda believes that the transdisciplinary knowledge she has gained from working alongside other disciplines has greatly enriched her practice. This was very similar to my own description in the époché (Appendix A). In returning to the original data, I found that the key statements relating to Grizelda’s EMU9 were about having the knowledge of other disciplines accessible to her at any time, and that knowledge forming part of her professional identity, enabling her to shift role from purely a music therapy perspective, to a more general leader role in coaching and problem-solving with newer staff. I found that whilst the statements appeared similar, I had thought more broadly of my professional identity as a music therapist and as a school leader, bringing this transdisciplinary knowledge into my leadership and teaching role, as much as my practitioner role. Doing this clarified that whilst Grizelda’s EMU9 and my revised époché
were similar, they were drawn from different experiences of working in transdisciplinary teams. However, it was clear from re-reading the interview and reflecting further on the EMU, that the meaning was drawn from her voice, as separate to my own researcher standpoint.

Group Themes

Once the individual analyses were complete, I turned to the horizontal analysis, searching for themes across the accounts of all participants. To briefly summarise the analysis approach for determining the Group Themes, as described in the Method chapter, all EMUs were grouped under initial themes drawn from my own perceived meanings, then they were cross checked, with critique, reflection and comparative input resulting in further re-shuffling of statements into Group Themes.

Figure 4.2. Process of group analysis.
Thirteen themes emerged from this process of shuffling and grouping the EMUs of all participants alongside each other according to the underlying meaning. I chose to label all themes as Group Themes, however, I felt it was still important in the interest of transparency to make explicit how many participants commented on each theme. I agreed with McFerran and Grocke (2007) in that themes raised by individuals are no less important than those agreed on by the group. For this reason, I did not exclude themes with only one contributor, or one contributing key statement. In the results below, I have included the number of participants commenting on each theme next to the Group Theme title, not as a means of showing equal weight, but purely for the information of the reader. My supervisor, being experienced in phenomenological analysis, provided me with guidance and mentoring throughout the horizontal analysis.

For the presentation of the group results, I will continue with a similar process as seen in the unfolding of the EMUs. I will begin with a reflexive introductory statement, then state the Group Theme title accompanied by 2-4 key exemplary statements supporting the Group Theme.

**Group Theme 1.** This theme emerged from EMUs describing workplace relationships, and specifically learning from others through watching others work, and participating in team discussions. Here I sense an immediacy in how this information is accessed and absorbed, then used to influence music therapy practice. All four music therapists speak about this valuing of knowledge that comes directly from the people themselves, as separate to that gained from reading literature.

Table 4.51

**Group Theme 1 Title, EMUs and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>Knowledge gained from watching and working alongside other professionals is a key influence on the practice of these music therapists</td>
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<tr>
<td>Category</td>
<td>Data</td>
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<tr>
<td>----------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Contributing</td>
<td>EMUs Speaking to Giant Steps staff, her external peer group and other</td>
</tr>
<tr>
<td>Participants</td>
<td>people as well as watching the work of others in person or online</td>
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<tr>
<td></td>
<td>influences how she approaches her work with students</td>
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<td></td>
<td>Bella reflects on and develops her own practice by observing and</td>
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<td></td>
<td>speaking to other professionals at the school</td>
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<td></td>
<td>As a result, she believes that the transdisciplinary knowledge she</td>
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<td></td>
<td>has gained from working alongside other disciplines has greatly</td>
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<tr>
<td></td>
<td>enriched her practice.</td>
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<td></td>
<td>She accumulates and articulates knowledge by collaborating with other</td>
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<td></td>
<td>professionals in her work.</td>
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<td></td>
<td>Watching music therapists in action, either in person or on film, is</td>
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<td></td>
<td>useful to her as she often finds reading about music therapy</td>
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<tr>
<td></td>
<td>techniques to be too vague.</td>
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<tr>
<td></td>
<td>Exemplary Statements Another thing that I think informs my practice</td>
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<td>is what my colleagues do. And I kind of wish I had more opportunities,</td>
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<td></td>
<td>I know the opportunities are offered here to swap with another</td>
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<td></td>
<td>therapist and go and observe their sessions, so I’m trying to make</td>
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<td></td>
<td>a note to take more advantage of that in future, because it makes</td>
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<td></td>
<td>you reflect on your own practice and it makes you see what are the</td>
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<td></td>
<td>really great things that this person is doing, what is really</td>
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<tr>
<td></td>
<td>engaging these students and taking that on board. I think sharing</td>
</tr>
<tr>
<td></td>
<td>with other colleagues and seeing what they do is very helpful too.</td>
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<tr>
<td></td>
<td>I think if I came from purely a music therapy approach here, there’d</td>
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<td></td>
<td>be a whole depth of knowledge from the other disciplines that I’m</td>
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<td></td>
<td>missing out on. I think that knowledge gives me a more wholistic</td>
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<td></td>
<td>approach to the students. So when I first started working here, I</td>
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<td></td>
<td>didn’t have that knowledge, so when there were behavioural issues or</td>
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<td></td>
<td>sensory issues or speech difficulties, or communication-related</td>
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<td></td>
<td>difficulties, I didn’t feel as equipped to address those issues</td>
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<td></td>
<td>within my sessions because I wasn’t really educated about those</td>
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<td></td>
<td>concepts. So over time, going to a lot of PD sessions and speaking</td>
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<td></td>
<td>to and having those collaborative sessions with OTs and speechies</td>
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<td></td>
<td>really helped. And just lots of conversations and emails have meant</td>
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<td></td>
<td>that I’m much more equipped now to identify what’s going on with</td>
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<td></td>
<td>students and to address them more promptly, and also direct newer</td>
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<td></td>
<td>staff members towards an appropriate course of action with the</td>
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<td></td>
<td>student. Whereas I wouldn’t have felt as confident to do that when I</td>
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<td></td>
<td>first started without that transdisciplinary knowledge.</td>
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<td></td>
<td>There’s a few different videos, I suppose they’re like bloggers, that</td>
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<td></td>
<td>put things up. They can have some helpful interventions, and they can</td>
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<td></td>
<td>have quite a bit of information. I think you have to be careful, I</td>
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<td>watch things but don’t necessarily think that there’s going to be a</td>
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<td></td>
<td>perfect fit, it’s not like it’s a carbon copy that right, I can do</td>
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<tr>
<td></td>
<td>that now. But it gives you some nice ideas and some inspiration, and</td>
</tr>
<tr>
<td></td>
<td>having that video makes it a lot clearer than just being able to read</td>
</tr>
<tr>
<td></td>
<td>it off a page. It’s seeing it in practice, especially with music</td>
</tr>
<tr>
<td></td>
<td>therapy.</td>
</tr>
</tbody>
</table>
**Group Theme 2.** A high number of EMUs here contain references to an eclectic approach in the seeking of knowledge and its application to practice. They also speak about what they look for in professional learning, prioritising practical, well-structured professional development that resonates with their own beliefs as a music therapy practitioner. They display an open-ness to ideas from a range of sources including professional courses, academic literature and online resources.

Table 4.52

*Group Theme 2 Title, EMUs and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>These music therapists believe their practice is richer by being open to approaches from a wide range of academic and practical resources</td>
</tr>
<tr>
<td>Participating EMUs</td>
<td>4/4</td>
</tr>
<tr>
<td>Louise</td>
<td>Louise believes her practice is richer by taking on philosophies and strategies from a range of information sources</td>
</tr>
<tr>
<td></td>
<td>In her work, Grizelda draws on a variety of methods to address student needs, but she needs to critically evaluate them first before implementing into her practice</td>
</tr>
<tr>
<td></td>
<td>Grizelda places great value on reading for rethinking and clarifying how she works</td>
</tr>
<tr>
<td></td>
<td>During school term time, Louise sources reading and information from a range of academic and general online media sources, and despite being time-poor, feels pressure to be reading more</td>
</tr>
<tr>
<td></td>
<td>Louise gains the most value from professional learning that is practical in nature and relevant to her work, especially when it helps to push her learning edge.</td>
</tr>
<tr>
<td></td>
<td>Sally values well-structured professional learning that resonates with her own humanist, client-centered philosophy.</td>
</tr>
<tr>
<td></td>
<td>Sally’s practice is influenced by ideas adapted from a range of sources. She loves to read widely and finds that in her busy life, case studies provide information in a quick, digestible information format more so than theoretical, academic writing.</td>
</tr>
<tr>
<td>Exemplary Statements</td>
<td>When I go to a conference, I’m looking for presentations that are relevant to what I’m doing. Seeing case examples or showing videos and seeing people practising and what they’re doing, that’s very helpful. I think it’s nice just to see if there’s anything new taking place</td>
</tr>
<tr>
<td></td>
<td>I like books that are well edited, that cover a subject in details where you get many different perspectives. So you get many different ideas from different approaches about how to do something.</td>
</tr>
<tr>
<td></td>
<td>There’s always food for thought, there’s always something new. It’s such a big field, music therapy. I think still within autism there’s so much</td>
</tr>
</tbody>
</table>
more to explore. So you know, the more I read, the more ideas I get and the better my practice is. Some articles that people share on Facebook, to click on those and see. That’s quite a good way of watching other people work actually, because that leads you into sites that other music therapists have set up showing their own practice. Social media and magazines. TV maybe not so much.

**Group Theme 3.** This theme is drawn from commentary around the music therapy team, and the diversity of creative approaches experienced when working together. They describe how having a variety of approaches and skills within the team is an asset to the school and an influence on how they work. The process of creating music resources together seems to lighten the creative workload for the whole team, indicating that this load would otherwise be very high for each individual. Creative collaboration also increases their awareness of the different skills within the music therapy team, and provides rich music experiences and programs for students across the whole school.

Table 4.53

*Group Theme 3 Title, EMUs and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>Creativity and diversity of approach within this music therapy team is a valuable resource that develops practice in their transdisciplinary teams 4/4</td>
</tr>
<tr>
<td>Contributing Participants EMUs</td>
<td>Creativity and diversity in clinical approach are absolutely essential to Bella in sustaining her ability to meet individual student needs Grizelda believes that the diversity of experience and approaches in the music therapy team is a real asset to the school and this helps them in sharing the creative load of creating resources Being a part of a diverse team of music therapy professionals informs Louise’s practice through planning, researching and creating resources together in a collaborative manner It has been exciting for Sally to be part of a music therapy team where her work is understood, but she can occasionally get caught in comparing herself to others. Creativity and diversity in clinical approach are absolutely essential to Bella in sustaining her ability to meet individual student needs</td>
</tr>
</tbody>
</table>
Exemplary Statements

When we get together, it’s just that sudden tsunami of ideas that we come up with. You know ‘oh look this song’, and ‘that would work like this’ and ‘that would be really good like this’, so that would be the main source of information.

So it’s nice when someone says I’ll do a hello song, I’ll do a goodbye song, I’ll do the singing song, I'll do the instrumental song, and you sort of pull together and you get this really lovely *depth* of musical experience for the students.

I think we all have a different way, for example in our team when we come up with an activity and we all roll it out into our classes according to our students, they end up looking quite different sometimes.

I think we all have a lot to offer, sometimes we will come into a meeting and say I’m having trouble with this, do you have any suggestions? And more often than not you get this incredible range of ideas that just really inspire you and give you a lot more impetus to move forward and come up with interesting ways of addressing certain issues. I mean there’s so much that we give to each other and it’s really indicative of the depth of musical experience when someone comes up with something and we all go ‘wow that is fantastic!’ and we all get our iPhones out and record it. People come up with some great ideas and that’s what I love about working here.

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
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</thead>
<tbody>
<tr>
<td>Exemplary Statements</td>
<td>When we get together, it’s just that sudden tsunami of ideas that we come up with. You know ‘oh look this song’, and ‘that would work like this’ and ‘that would be really good like this’, so that would be the main source of information. So it’s nice when someone says I’ll do a hello song, I’ll do a goodbye song, I’ll do the singing song, I'll do the instrumental song, and you sort of pull together and you get this really lovely <em>depth</em> of musical experience for the students. I think we all have a different way, for example in our team when we come up with an activity and we all roll it out into our classes according to our students, they end up looking quite different sometimes. I think we all have a lot to offer, sometimes we will come into a meeting and say I’m having trouble with this, do you have any suggestions? And more often than not you get this incredible range of ideas that just really inspire you and give you a lot more impetus to move forward and come up with interesting ways of addressing certain issues. I mean there’s so much that we give to each other and it’s really indicative of the depth of musical experience when someone comes up with something and we all go ‘wow that is fantastic!’ and we all get our iPhones out and record it. People come up with some great ideas and that’s what I love about working here.</td>
</tr>
</tbody>
</table>

**Group Theme 4.** These EMUs show each participant commenting on the challenges of the job, but also highlighting the role of trust and support from the team in enabling them to continue to engage students well. This theme speaks of how they receive support from others when they are having a difficult day, and how they collaborate to find solutions to problems together. There is also mention made of how the support of staff in sessions makes it possible to effectively engage with all students in their programs.

Table 4.54

<table>
<thead>
<tr>
<th>Group Theme 4 Title, EMUs and Exemplary Key Statements</th>
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</thead>
<tbody>
<tr>
<td><strong>Category</strong></td>
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<tr>
<td>Title</td>
</tr>
<tr>
<td>Contributing Participants EMUs</td>
</tr>
<tr>
<td>Category</td>
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<tr>
<td>-------------------</td>
</tr>
<tr>
<td>Belonging</td>
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<tr>
<td></td>
</tr>
<tr>
<td>Exemplary</td>
</tr>
<tr>
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</tbody>
</table>
|                   | I think there’s still the element of unpredictability of like every day is different. Every session is different, and you’ve got to really trust in information that you get from the staff about what’s going on for the client, if there’s been a medication change or they’ve had a bad week or
they haven’t had as much sleep the night before and there’s gotta be a lot of communication.

**Group Theme 5.** Bella and Sally both speak about the type of music they used in their programs. They both express a personal joy in music-making, relating this to their level of satisfaction in the job. As the curriculum content moves the music therapy team through musical material of a wide range of styles and cultures, they seem to enjoy exploring new music, and describe how when they are enjoying the music, the students may feel this too, and therefore may be more easily engaged in the music-making process.

Table 4.55

**Group Theme 5 Title, EMUs and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Title</strong></td>
<td>Using musical material that these music therapists personally enjoy brings an authentic energy to their practice</td>
</tr>
<tr>
<td><strong>Contributing Participants EMUs</strong></td>
<td>It is important for Bella to enjoy the musical material she uses, as she knows it makes her a more effective and authentic music therapist</td>
</tr>
<tr>
<td></td>
<td>Sally finds great personal value in using music that she loves in her work and in exploring and learning new music for different applications</td>
</tr>
<tr>
<td><strong>Exemplary Statements</strong></td>
<td>Getting the right material and finding things that inspire you is very important, because if I’m not inspired I’m sure that the students will feel it. You can’t really fake that I think. You can go through the motions, but only so many times and everyone will get bored with it, and you don’t want to get to that point where you just feel like a human jukebox. Sometimes I think you forget that - that’s right, I really love music. It’s why I’m doing this! You know, remember that I enjoy playing my instrument and I enjoy singing, it’s an enjoyable thing for me. You take away everything else, that’s what I love. I love learning new songs, and I love exploring different artists. Which is one of the great things about being a music therapist is you get to have to be so open to new repertoire all the time and not be stuck on anything.</td>
</tr>
</tbody>
</table>

**Group Theme 6.** In this Group Theme, three music therapists reflect on how the needs of the students themselves tend to influence what they do in sessions and the
approaches they take. Instinct, observation and noticing the energy levels in the group appear to guide their decisions on what interventions are needed in the moment. If these decisions bring benefit to the students and their ability to engage, they may adjust their programs and activity schedules accordingly for future sessions.

Table 4.56

*Group Theme 6 Title, EMUs and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>These music therapists feel that their practice is guided by responding to what they sense the student needs in the moment</td>
</tr>
<tr>
<td>Contributing</td>
<td>3/4</td>
</tr>
<tr>
<td>Participants</td>
<td>Bella uses her intuition to sense what they need in the moment and adjusts her approach accordingly</td>
</tr>
<tr>
<td>EMUs</td>
<td>Grizelda finds that the level of student engagement, energy and their learning style tends to guide her practice in the moment</td>
</tr>
<tr>
<td></td>
<td>Instinct, reflection and observation of student engagement tends to guide Louise’s practice in the moment and from week to week</td>
</tr>
<tr>
<td>Exemplary</td>
<td>Sometimes it is child-led and if you find that if something works for a portion of the group then you tend to change your approach to suit those children, so that you get the best out of them over the course of the term or over the course of the year. So their style of learning or their way of engaging in music may sometimes dictate the way that your activities play out. The students really inform my practice very much in terms of what do they need, what would really be the best thing for them in this moment? What do they need, do they need to be aroused, do they need to be calmed. Being in the moment engaging where they’re at, at that particular point in time. That’s what I mean about intense in the work that you’ve got to be really on the ball with sensing where the group is at and where the students are at. Sometimes just lying in bed at night time trying to get to sleep – bang! In pops an idea. Quiet time I think that is, I think that’s just when you have quiet time to let your mind wander.</td>
</tr>
</tbody>
</table>

*Group Theme 7.* The following EMUs show Bella and Louise commenting on the challenges of using creative improvisation in groups with students who find it difficult to regulate themselves with others. They express how the use of improvisation is important in developing creative initiation outside of structured, routine tasks. At times, however they
seem to find it frustrating that they cannot develop an individual, child-led musical interaction more fully, as the loss of focus on others may mean they become distracted, disengaged or dysregulated. Having the chance to work on individual music interactions, and the time and space to do this well in individual music therapy sessions seems to be something they would like to pursue.

Table 4.57

Group Theme 7 Title, EMUs and Exemplary Key Statements

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
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</thead>
<tbody>
<tr>
<td>Title</td>
<td>These music therapists would like more opportunities for individual work in order to develop and sustain more meaningful musical exchanges</td>
</tr>
<tr>
<td>Contributing</td>
<td></td>
</tr>
<tr>
<td>Participants</td>
<td></td>
</tr>
<tr>
<td>EMUs</td>
<td>Since students can become very bound in routine, Bella feels it is important for them to work on self-expression through improvisation, but that groups may not always be the best format for working on this goal. At times, Louise finds that working in groups feels more like teaching than therapy, and feels disappointed that opportunities for sustained interaction through improvisation are often missed in the interest of keeping the group regulated.</td>
</tr>
<tr>
<td>Exemplary Statements</td>
<td>If you’re in a group, and say you get that connection with one student and you know you could easily keep going and keep going for maybe 10 minutes doing the same, just with that one person but you can hear it all getting a little bit chaotic, so you have to cut short that moment. And that just breaks my heart sometimes, you have to do that, you have to go back to bringing the class in. I feel that sometimes, some missed opportunities there. But I still feel like with the older students, they spend such a long time at school and they’ve learnt certain routines and ways of getting through their day that they become quite reliant on that, and sometimes I feel like they’ve lost maybe some of their self-expression. And that’s just by virtue of the fact that they need to survive through the day and not feel anxious and feel safe. But I feel like we all need to express something of ourselves, something spontaneous, something of our true self and it doesn’t really have to have meaning to anybody else but we all need to express. I’m still trying to find a way to bring that out in the students. I mean improvisation is a great way of doing that, but it’s very difficult in bigger groups to pay enough attention to each individual sometimes. On the other hand there’s so many benefits in a group setting where all those social skills that are such a deficit with our guys, that those benefits outweigh what we can do with just a one-on-one kind of session</td>
</tr>
</tbody>
</table>
**Group Theme 8.** In this theme, Bella, Louise and Sally talk about the experience of gaining student trust, and connecting with them, often through having worked with them for a number of years. These connections speak of a level of rapport and relationship that has had time to ripen, and how that has enabled both students and music therapists to know and understand each other better. These statements illustrate how gaining trust and making connections with students provides much to the music therapist in terms of meaningful moments, work satisfaction and increased confidence in their practice.

Table 4.58

**Group Theme 8 Title, EMUs and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>These music therapists gain great satisfaction from earning trust and connections with students over the long-term</td>
</tr>
<tr>
<td>Contributing Participants</td>
<td>3/4</td>
</tr>
<tr>
<td>EMUs</td>
<td>Being able to build a solid rapport and make deeper connections with students through music gives Bella great satisfaction</td>
</tr>
<tr>
<td></td>
<td>Louise finds meaning in the connections she has made with students, whether they be large or very small, and in the small but significant gains made by students within a musical relationship that has grown over a long period of time</td>
</tr>
<tr>
<td></td>
<td>Building rapport and earning the trust of students has taken time but has also allowed Sally to be more confident in her practice</td>
</tr>
</tbody>
</table>
| Exemplary Statements      | My introduction (to) him was he nearly pulled all my hair out. And I’ve seen him on and off over the years, and he just gorgeous .. And in Term 4 he, he, it was just and this has taken you know, years really, but he held his hands out and shook an instrument .. on my .. you know he acted, yeah it was just a, it was like it felt like after 4 years :lol: of doing music with this guy, suddenly this year he, the sound of the guitar makes him look up. The sound of the sushi song gets him really excited. And he actually held his hand out to play a, two hands to play an instrument. Yeah. I think a person-centred approach is really important, and I wish someone had said to me when I started ‘get to know your students really well’. So I think once the student is really trusting of you, feels really safe with you, then there’s really nothing that they can’t do or they won’t want to interact with you in, if they feel that trust and I think that’s just so crucial to really build that mutual trust and respect. Now I’m at the point where I’m feeling more comfortable about what my role entails and I’m very comfortable that I’m valued there and what the expectations of me are. I also feel like I’ve built a really good rapport
with all the clients, and they know me, as it’s just as important for them to know me as it is for me to know them, to trust me and to know what my expectations of them are, and that we are not placing huge demands on them. So that itself has made the experience so much better over the year just for them too, the whole process of building rapport can be such a long process.

**Group Theme 9.** Bella, Grizelda and Sally all speak about satisfaction in their work being related to seeing positive outcomes for students. Having a belief that their music therapy practice helps to make differences in student lives, seems to keep them sustained, and motivates them to continue in the job. As students tend to experience progress at different rates, these positive outcomes may appear quite minor, but no less meaningful to the music therapist.

Table 4.59

**Group Theme 9 Title, EMUs and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>These music therapists gain great satisfaction from supporting student achievements that make a difference in their lives</td>
</tr>
<tr>
<td>Contributing</td>
<td>Bella loves seeing her problem-solving efforts result in increased student engagement and achievements made over time</td>
</tr>
<tr>
<td>Participants EMUs</td>
<td>Grizelda feels sustained by seeing the achievements of students and how these positively influence their futures</td>
</tr>
<tr>
<td>Exemplary Statements</td>
<td>Sally finds great satisfaction in being in the moment with students, and in seeing their progress, no matter how small</td>
</tr>
<tr>
<td></td>
<td>I suppose the main thing that sustains is seeing progress. I think when you see changes and you see that you’re getting responses, that’s definitely my main thing that sustains my practice. When you’re making a difference. I’ve learnt to not have such huge expectations of myself or of clients, and look for the little changes and look for the little things, and not expect massive achievement. The little things can be big things. I think you know slow incremental gains. Because I suppose we do have the luxury here of seeing kids over their life span, and it’s not fleeting, so to see them grow and their world open up and be more socially engaged and, less dysregulated hopefully and the small incremental gains, even within the course of a year when we see how a child has started and where they end up, there are a lot of hoorays at different times from</td>
</tr>
</tbody>
</table>
Group Theme 10. Grizelda and Louise highlight the role of school curriculum in their music therapy programs and the need to keep pace with the goal-setting, assessment, and changing themes. They acknowledge that whilst it is a requirement of working in a specialist school, it does not always feel like a natural fit, and can require different ways of thinking, in order to balance the needs of education and therapy in a school.

Table 4.60

Group Theme 10 Title, EMUs and Exemplary Key Statements

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
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<tbody>
<tr>
<td>Title</td>
<td>At times, these music therapists can find it challenging to integrate a therapeutic sensibility into a curriculum framework</td>
</tr>
<tr>
<td>Contributing</td>
<td>2/4</td>
</tr>
<tr>
<td>Participants EMUs</td>
<td>Grizelda finds value in developing skills through both music therapy and music curriculum, but can sometimes find it challenging to focus on both, particularly within group sessions</td>
</tr>
<tr>
<td></td>
<td>Louise experiences working within the school curriculum as fast-paced and highly pre-determined and having a lower capacity for flexibility than her music therapy work outside the school setting</td>
</tr>
<tr>
<td>Exemplary Statements</td>
<td>I think it’s just trying to marry the two, because when I think of it now they are two quite different ways of working. Maybe I just need to work out how to merge them a bit more effectively. Many of the high support students have more therapy-based goals and more social foundation-based goals, because their music skills are more limited. But those that have higher abilities, you push them a little bit more with their music literacy and their musical skills and being able to imitate rhythms and sing the melody or follow the pitch or follow the rhythm. Of course social foundation skills are still a part of it, but with those kids you can really go to their edge of learning with their music skills and that in turn I think plays a role in increasing their social foundation skills. So it’s a balancing act.</td>
</tr>
</tbody>
</table>
I still find it somewhat frustrating because I still think there’s a lot of grey area between the music teaching and curriculum side and the music therapy part. Within the group setting, we need to address both curriculum and therapy-based outcomes. So that can be challenging in terms of programming. And psychologically in approaching a session, to really have some clarity about whether you are addressing curriculum or therapy-based outcomes. And I think there is an even split, it feels like we are doing a lot of both, but sometimes it can be difficult to know, it can be blurry to know what my focus should be at that time. So I have to really think about that and think about the goals I have set for each of the students.

**Group Theme 11.** In this theme, Bella, Grizelda and Sally comment on the effect of being around a positive team on their experience of working at the school. Words such as “fun” appeared in their descriptions, revealing that a lighter attitude may increase satisfaction for them in a challenging place. Seeing that other professionals on the team have the same positive outlook and passion for the work seems to inspire them to do better, and to keep finding more creative ways to have a positive impact on the lives of students and their families.

Table 4.61

**Group Theme 11 Title, EMUs and Exemplary Key Statements**

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>Working in a positive and passionate transdisciplinary team is inspiring and motivating for these music therapists</td>
</tr>
<tr>
<td>Contributing Participants</td>
<td>3/4</td>
</tr>
<tr>
<td>EMUs</td>
<td>Bella loves being part of a team that is dedicated to supporting their students and is able to have fun whilst doing it</td>
</tr>
<tr>
<td></td>
<td>Grizelda finds satisfaction in collaborating on projects that have a positive impact on families and the community outside of Giant Steps</td>
</tr>
<tr>
<td></td>
<td>Grizelda is inspired and buoyed along by Giant Steps staff who are passionate about what they do and have fun while they work</td>
</tr>
<tr>
<td></td>
<td>Sally has experienced working at Giant Steps to be both exciting and challenging and it has allowed her to use her creativity well</td>
</tr>
<tr>
<td>Exemplary Statements</td>
<td>Because you can get bogged down in the details sometimes on your own, and it can stop you from moving forward. Whereas when you’ve got that impetus from other people all wanting to work towards the same goal and</td>
</tr>
</tbody>
</table>
work together and brainstorm ideas, verbally as well as emailing each other and communicating that way, I think it pushes the experience along a lot faster and you’re more productive.

For example, you’re singing a song with a student and they’re not holding the microphone properly. I’m in the middle of a phrase of the song and I can’t help them with the microphone and then having someone who knows that’s exactly what that student needs right now, jumping in and kinda pre-empting what they need. Some of the staff are incredibly good at that, which makes it so much easier to keep the flow of the music. It’s just great having that kind of staff member who can really support you well. I find there are many that can, there’s the odd person who when we get with them you know you are going to have a good session, like there’s someone in every class that will support them, which is great.

I love watching other people work with the students, especially people that are passionate and enthusiastic about what they are doing. I think that inspires me to be better and to work harder and to be the best that I can in this environment.

As music therapists, it’s something that I am passionate about, and that’s access. The more that I’ve been working on access for our students at the Opera House or other venues, the more interested I’ve been in that area. And it’s drawing from my music therapy experience and knowledge, and all of the transdisciplinary knowledge that I’ve accumulated has allowed me to really work on widening the scope of our children’s community access within the arts. I feel like it’s just one aspect, I mean there’s many other smaller things that happen within the school that I feel really satisfied by. But this is one thing that feels quite meaningful and it feels like it’s been noticed and it’s a strong advocate for those with autism within that realm. So I feel like it’s something good that’s really come from working here and started from just our students being able to have access to the Opera House to now other organisations taking notice and really being interested in the process and the model. So it feels more big picture.

**Group Theme 12.** All music therapists at Giant Steps are part of the whole school day, involved in music therapy programs, other lessons, playground time, meal times and duties, but none more so than Bella in the Secondary program at the time of this interview. This aspect is clearly in her mind when speaking about her experience, and whilst challenging, she clearly finds there to be many benefits to having a wholistic perspective on the schooling life of students. Her relationships with staff and families enable her to extend the reach of music’s benefits to times and places outside of the music therapy program.
### Group Theme 12 Title, EMUs and Exemplary Key Statements

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
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</thead>
<tbody>
<tr>
<td>Title</td>
<td>Music therapists in these transdisciplinary teams believe their working relationship with students is better informed by seeing them in a range of settings</td>
</tr>
<tr>
<td>Contributing</td>
<td>Due to her role working with students across the day, Bella sees great value in helping them generalise positive skills and experiences to other settings</td>
</tr>
<tr>
<td>Participants</td>
<td>1/4</td>
</tr>
<tr>
<td>EMUs</td>
<td>I think we’re lucky in that we get to see that perspective of their lives and I think it’s something that not every music therapist may get to see if you come just come in for the session of music and then you’re gone, but we see our students in many different environments, even going on camp with them, bunking down with them for the night and just seeing how they get through their day. It gives a much deeper understanding. I definitely feel like it helps me know them so much better. Because I have been with the older students, I spend a lot of time in the classroom doing other things, and sometimes I feel a little bit like I’m deviating a little bit too much from music at times, I love the school culture of music being used in so many different ways and not just in the music session. The fact that students get the reinforcement of the things that we do in music translated into other settings, so it’s not they come in, they do wonderful things in music and they go out and do nothing with it. It feels like we’re actually doing something more meaningful than just having a lovely experience in music. It’s great that the teams can support us in that way. So I feel very lucky to have that support.</td>
</tr>
<tr>
<td>Exemplary</td>
<td>I think we’re lucky in that we get to see that perspective of their lives and I think it’s something that not every music therapist may get to see if you come just come in for the session of music and then you’re gone, but we see our students in many different environments, even going on camp with them, bunking down with them for the night and just seeing how they get through their day. It gives a much deeper understanding. I definitely feel like it helps me know them so much better. Because I have been with the older students, I spend a lot of time in the classroom doing other things, and sometimes I feel a little bit like I’m deviating a little bit too much from music at times, I love the school culture of music being used in so many different ways and not just in the music session. The fact that students get the reinforcement of the things that we do in music translated into other settings, so it’s not they come in, they do wonderful things in music and they go out and do nothing with it. It feels like we’re actually doing something more meaningful than just having a lovely experience in music. It’s great that the teams can support us in that way. So I feel very lucky to have that support.</td>
</tr>
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</table>

**Group Theme 13.** This theme was initially discarded, with the reasoning that descriptions of self-care and supervision outside of the school were not dealing explicitly with their experience within the school. During the iterative process however, this theme was re-introduced, as further readings and reflection revealed that this was an important theme to them, with three of the four participants speaking of it in their interviews. Further consideration showed that they were in fact drawing information about approaches from professionals in other fields for their work. Their descriptions show that their experience of
working at the school is influenced by a need to build resilience, and that this is supported through accessing professional supervision.

Table 4.63

*Group Theme 13 Title, EMUs and Exemplary Key Statements*

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
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</thead>
<tbody>
<tr>
<td>Title</td>
<td>These music therapists are supported and inspired by accessing self-care and supervision outside the school setting</td>
</tr>
<tr>
<td>Contributing Participants</td>
<td>3/4</td>
</tr>
<tr>
<td>EMUs</td>
<td>Bella draws musical inspiration and opportunities for self-care from outside the school. Grizelda knows that there is a risk of burnout in this kind of work and accesses professional supervision outside of the school to help manage issues, particularly those around personal safety. Liaising with other music therapy professionals at conferences and at an external peer supervision provides Sally with avenues for support. Sometimes you’ve got to step right outside this environment as well, the school environment and recharge your batteries. It’s like what Carl Jung said ‘when the well is empty you can’t get any water out’. So you have to go and make music sometimes in other settings or get that re-igniting of your musical spirit, so that you can bring it back. I think that it’s important to reflect on where you’re at and what you need in order to be effective and give the best to the students that you can. I’ve actually been having some individual supervision externally, like once a month. And that’s been really good for me. There are some things that you can discuss within the school environment, but sometimes it’s good to get an objective viewpoint as well. Particularly with kids that I am struggling with, that I’m unsure how to move forward with, because their behaviours are so unpredictable and hurtful I suppose. Not emotionally but physically, then that’s maybe something that I might bring up in my individual supervision. I think a lot of music therapists can feel quite isolated. I think that’s why conferences are so great because a lot of people don’t have the benefit of being able to work in a team or might go to a place and be the only music therapist and go there once a week and leave. It can often be quite an isolating profession, so it’s nice having workshops and having as many opportunities that you can to liaise with other professionals in the same field, is really important.</td>
</tr>
<tr>
<td>Exemplary Statements</td>
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</table>

**Global Meaning Units (GMUs)**

In the next stage of analysis, I reflected at length on the Group Themes and, as described in the Method chapter, worked to draw together threads of meaning into larger,
global themes. Five GMUs were drawn from the 13 Group Themes. Finally, the GMUs were combined into a flowing, accessible narrative and formed the Final Distilled Essence.

**GMU1.** GMU1 draws together themes around how the transdisciplinary team enables music therapists to effectively engage with students across settings and across professional boundaries. A culture of trust and support developed over many years, seems to motivate and inspire the music therapists in their practice. This GMU speaks also of the respect music therapists have for members of their music therapy and class teams, including professionals from other disciplines, and the feeling that their own expertise is valued in helping students.

Table 4.64

**GMU1 Title and Contributing Group Themes**

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GMU1 Title</td>
<td>The transdisciplinary practice of these music therapists is strongly influenced by the shared knowledge and experience of their colleagues. Trust and respect within the transdisciplinary team supports these music therapists in developing more meaningful working relationships with students.</td>
</tr>
<tr>
<td>Group Themes Contributing to GMU1</td>
<td>Trust and support within their transdisciplinary team is crucial to these music therapists being able to effectively engage students with complex needs. Working in a positive and passionate transdisciplinary team is inspiring and motivating for these music therapists. Music therapists in these transdisciplinary teams believe their working relationship with students is better informed by seeing them in a range of settings.</td>
</tr>
</tbody>
</table>

**GMU2.** GMU2 encompasses the descriptions of where music therapists seek knowledge to shape their practice and address challenges as they arise in their work. Aligning with the school’s best-fit philosophy, they clearly embrace an eclectic outlook when looking for sources of innovation and the latest findings about ASD, music therapy, special education and child development. As creative professionals, they appear to find great benefit in having a team of music therapists who approach resource-making and music therapy practice from different perspectives. Having the opportunity to watch other professionals at work seems to
have a great impact on their practice, along with watching videos online and at conferences, and reading case studies. It feels to me that for them, seeing music therapy techniques in action is more practical to them, particularly when it relates specifically to the needs of students they are working with at the time.

Table 4.65

**GMU2 Title and Contributing Group Themes**

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GMU2 Title</td>
<td>These eclectic music therapists seek out innovative knowledge from a range of academic and practical resources. Observing techniques and methods demonstrated through online videos or in person enables them to confidently apply this knowledge creatively and responsively in their practice.</td>
</tr>
<tr>
<td>Group Themes</td>
<td>Knowledge gained from watching and working alongside other professionals is a key influence on the practice of these music therapists.</td>
</tr>
<tr>
<td>Contributing to</td>
<td>These music therapists believe their practice is richer by being open to approaches from a wide range of academic and practical resources.</td>
</tr>
<tr>
<td>GMU2</td>
<td>Creativity and diversity of approach within this music therapy team is a valuable resource that develops practice in their transdisciplinary teams.</td>
</tr>
<tr>
<td></td>
<td>These music therapists feel that their practice is guided by responding to what they sense the student needs in the moment.</td>
</tr>
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</table>

**GMU3.** In GMU3, the aspects of individual sessions and groupwork, and the embedding of music therapy within school curriculum are contained. Whilst they describe the value of creative improvisation in their work with these students, they also seem challenged in its application within groups. This, along with describing the curriculum as highly pre-determined and fast-paced, may mean that they are regularly needing to think about how to meet the various competing needs of school documentation, programming and developing therapeutic relationships with students. The mention of students who have difficulties regulating themselves points to how implementing improvisational group techniques with this population may be seen as more challenging than in other settings.
**Table 4.66**

*GMU3 Title and Contributing Group Themes*

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
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<tbody>
<tr>
<td>GMU3 Title</td>
<td>These music therapists find it hard to employ a therapeutic sensibility in targeting individual social goals when only working with groups, within a pre-determined curriculum, and using musical improvisation with students who have difficulties regulating themselves.</td>
</tr>
<tr>
<td>Group Themes Contributing to GMU3</td>
<td>These music therapists would like more opportunities for individual work in order to develop and sustain more meaningful musical exchanges. At times, these music therapists can find it challenging to integrate a therapeutic sensibility into a curriculum framework.</td>
</tr>
</tbody>
</table>

**GMU4.** GMU4 dwells on the positive aspects of music therapy practice in this school. The music therapists speak about seeing students over a number of years, and how the effects of their work may be seen through student achievements, whether perceived as minor or significant. However, regardless of scale, these achievements always seem significant from the perspective of the music therapists. They express feeling fortunate to be able to work in a medium that also brings them much personal enjoyment, and with this, they draw on their enjoyment to bring energy, enthusiasm and an appreciation for music to the therapeutic relationship with students.

**Table 4.67**

*GMU4 Title and Contributing Group Themes*

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GMU4 Title</td>
<td>Transdisciplinary practice brings satisfaction and motivation to these music therapists through developing strong student relationships grounded in trust, meaningful achievements and shared pleasure in making music together.</td>
</tr>
<tr>
<td>Group Themes Contributing to GMU4</td>
<td>Using musical material that these music therapists personally enjoy brings an authentic energy to their practice. These music therapists gain great satisfaction from earning trust and connections with students over the long-term. These music therapists gain great satisfaction from supporting student achievements that make a difference in their lives.</td>
</tr>
</tbody>
</table>
GMU5. GMU5 was drawn from a single Group Theme, as I imagined it standing alone in its meaning. In the descriptions, music therapists describe different self-care activities outside of the school and their function in relation to their work. They speak of professional supervision as proving support around personal safety, and the more challenging aspects of the job. However, they also mention that problems at work can be discussed with music therapists from other workplaces in peer supervision groups. Added to this, the opportunity to share different kinds of music with other professionals outside school, appear to provide inspiration, and may lead to the sharing of new ideas and fresh input for creating resources with the music therapy team at Giant Steps.

Table 4.68

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>GMU5 Title</td>
<td>These music therapists draw additional support and inspiration by accessing self-care and supervision outside the school setting.</td>
</tr>
<tr>
<td>Group Themes</td>
<td>Group Theme 13 (3/4): These music therapists are supported and inspired by accessing self-care and supervision outside the school setting</td>
</tr>
<tr>
<td>Contributing to GMU5</td>
<td></td>
</tr>
</tbody>
</table>

Final Distilled Essence

The final stage of the group analysis involves forming the Final Distilled Essence. This process involved weaving the Group Themes into a flowing, narrative form. The Final Distilled Essence represents a blend of the individual and group experiences of this team of music therapists at Giant Steps.

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**Final Distilled Essence**

The transdisciplinary practice of these music therapists is strongly influenced by the shared knowledge and experience of their colleagues.
Trust and respect within their teams supports them in developing more meaningful working relationships with students. These eclectic music therapists seek out innovative knowledge from a range of academic and practical resources. Observing techniques and methods demonstrated through online videos or in person enables them to confidently apply this knowledge creatively and responsively in their practice. These music therapists find it hard to employ a therapeutic sensibility in targeting individual social goals when only working with groups, within a predetermined curriculum, and using musical improvisation with students who have difficulties regulating themselves. They draw additional support and inspiration by accessing self-care and supervision outside the school setting. Transdisciplinary practice brings satisfaction and motivation to these music therapists through developing strong student relationships grounded in trust, meaningful achievements and shared pleasure in making music together.

Conclusion

In conclusion, these results elucidate the lived experience of these four music therapists working in a transdisciplinary, autism specialist school, and shed light on the key factors informing their practice. Data was captured through phenomenological interviews and analysed with methods drawn from descriptive phenomenology and microanalysis techniques. The themes emerging from the group analysis will be discussed in depth in the following Discussion chapter, and an interpretation offered from my own clinician-
researcher’s standpoint, including reflections on music therapy teaming and learning, and the role of these phenomena in a complex specialist school system.
Chapter 5
Discussion

Introduction

The purpose of this chapter is to engage in a deeper reflection on the participant experiences, and my own professional experiences as a team leader. This study was a first, exploratory step towards understanding the dynamics and needs of music therapy teams through phenomenological interviews with four music therapists in an autism specialist school. It was also a reflexive experience for me as a music therapy team leader, revealing new insights around the complex demands on the music therapist in transdisciplinary schools, and how the music therapy team leader may negotiate multiple roles as a leader, clinician and researcher. The Discussion chapter can therefore be viewed as the final stage of abstraction. Here I will view and reflect on the results through the lenses of systems theory and transdisciplinarity in order to gain a deeper understanding of how the participants’ experiences of teaming and learning continue to shape their practice.

In this chapter, I will construct the discussion through two Key Focus Areas that have emerged as a result of my deep reflections on the data. Key Focus Area 1 looks at the considerations for leading a music therapy team in a transdisciplinary school. This Key Focus Area is divided into three Sub-Topics. In Sub-Topic 1 will discuss the preferred styles of professional learning for music therapy teams that were identified by the four participants, including interpersonal learning, and the notion of transdisciplinary learning, as particular to a transdisciplinary environment. In Sub-Topic 2, I will emphasise the value that the participants placed on encouraging diversity in teams, and nurturing the collaborative, creative process of creative arts therapy professionals. Finally, in Sub-Topic 3, I will explore the participants views around the importance of peer support and professional supervision in sustaining resilience and satisfaction in practice over the long term.
Key Focus Area 2 will explore professional issues for the music therapist in transdisciplinary schools, with Sub-Topic 1 dealing with the benefits and challenges of practising music therapy with individuals and groups of students with ASD raised by the participants. Sub-Topic 2 will draw attention to the participants’ views on the nature of working across the school day as a music therapist, and the implications for student learning and trust, as well as the positioning of the music therapist within the class team. Lastly, in Sub-Topic 3 I will discuss the importance placed by the participants on building respectful and trusting relationships with support staff in music therapy programs, enabling more effective practice for the music therapist.

Across both Key Focus Areas, I will consider current literature and critique the results in light of my own long-term experience as a clinician and leader. As a final part of my process of reflection and abstraction, I will view and frame these Key Focus Areas through the lenses of transdisciplinarity and systems theory. Through contextualising the results in this manner, my purpose is to bring the results to life, and to invite reflection on their relevance to researchers, creative arts therapy team leaders, school leaders and allied health professionals.

**Key Focus Area 1: Considerations for Leading Music Therapy Teams in Transdisciplinary Schools**

Music therapists are well positioned for leadership roles, and particularly those dedicated to building resources within a team culture. They use active listening, improvisation, interpretation and the provision of support in their work, all skills lending themselves well to the leading and navigating of team dynamics and the endlessly shifting needs and demands of schools. Bunt & Hoskyns (2002) speak of the qualities needed to train and practice as a music therapist, including empathy, tolerance, patience, and open and questioning attitude, gentleness and strength, flexibility and adaptability, a sense of humour,
and emotional stability. Other desirable abilities mentioned in the AMTA Competency Standards (2004) include the use of interpersonal skills to engage and relate, and to use discussion effectively (p. 5). Goleman (1999) in writing about the importance of emotional intelligence for leaders, describes how the chief components of self-awareness, self-regulation, motivation, empathy and social skill contribute to effective leadership. From my own experience, I have found that skills developed as a music therapist have enriched my ability to effectively lead, not just music therapy teams, but teams of professionals from a range of disciplines.

**Sub-Topic 1: Professional learning.** The Continuing Professional Development (CPD) requirements for Australian music therapists involve the continual updating of professional skills through the accrual of points every 2 years (AMTA, 2017). This ongoing learning throughout the career of a music therapist is therefore both required to maintain registration status, and desirable in maintaining quality practice for the profession.

All four participants identified a number of different sources from which they drew learning, information and inspiration to shape their practice. This approach of not identifying exclusively with one treatment approach, but rather drawing from a range of approaches and ideas, may be described as eclecticism. Gold, Voracek and Wigram (2004) found that the effects of music therapy for children with psychopathology tended to be greater for eclectic, psychodynamic and humanistic approaches than for behavioural models. Odom, Hume, Boyd and Stabel (2012) in a study comparing literature on Intensive Behavioural Treatment (IBT) and eclecticism, noted issues with comparing the two practices in previous research, and that a technical eclectic approach can be effective with children with ASD if it is “conceptually grounded, incorporates evidence-based focused intervention practices, and is well implemented” (p. 270). The philosophy of Giant Steps is drawn from a best fit approach to therapy and education for students with ASD, ID and behavioural challenges. Therapy and
educational programs at Giant Steps therefore incorporate a curriculum addressing the core diagnostic deficits and building on the strengths of students with ASD. These programs are therefore aligned with best practice, and include a functional approach to challenging behaviours, offering predictability and routine, using visual supports, and delivering education and therapy within a multi or transdisciplinary team model (Prior et al., 2011).

In speaking about the relevance of information to practice, some of the participants tended to consider the learning intuitively, looking for resonance with their own practice, identifying closely with their students, and visualising themselves putting the information into action. Bella says: “If I can visualise the students engaging with that and me being able to deliver that, then I think I would go yeah that feels right” (Bella).

Having the information presented in case study or video format enabled them to visualise ways to incorporate the knowledge more readily into their practice. Overall, the participants were drawn to information that, with a creative view, was easily adaptable to the needs of students. Other considerations included whether the intervention would deliver just the right level of challenge for students to enable engagement and progress. They also considered how comfortable they would feel implementing new strategies or interventions into their programs. For example, if a music therapist’s main instrument was the guitar, a technique involving higher music skills on another instrument might feel less comfortable for them. It was clear that the participants put great thought into where they drew influence, and that they knew that not everything was a good fit, nor did it need to be.

As the format of music therapy programs at Giant Steps is primarily group-based, music therapy techniques suited to individual therapy were not viewed as having a great influence. Additionally, the substantial level of support needed in the student population means that some techniques were considered of lower relevance in their practice. For
example, techniques involving developing a high level of singing technique have limited relevance, due to the majority of students having limited verbal and vocal skills.

**Interpersonal learning.** This style of learning emerged as engaging in watching and talking to others, as well as in the nature of transdisciplinary learning. Through observing others, three of the four participants reflected on their own style of practice and their manner of relating to students. An additional way in which they watched other music therapy professionals, was through searching websites for video examples of music therapy techniques. Sally says “Having that video makes it a lot clearer than just being able to read it off a page. It’s seeing it in practice, especially with music therapy” (Sally).

One advantage of online videos is the capacity to view a technique or interaction multiple times, enabling observation of the process in greater depth. Video demonstrations of music therapy techniques may also be shared with other professionals as examples of clinical practice that may be undertaken by teams or to share professional learning and ideas with other music therapists. However, Sally does add that these videos can’t simply be transplanted exactly into practice, saying “I watch things but don’t necessarily think that there’s going to be a perfect fit, it’s not like it’s a carbon copy that right, I can do that now” (Sally).

When it comes to accepting the validity of practices as demonstrated by others in online videos, it can be harder to determine whether the practice has the backing of research or even whether it is, in fact, best practice. The decision to incorporate practices learnt through videos comes down to the individual clinical decision making of music therapists, their trust in the source of information, and their own ability to determine whether it is a good fit with their practice.

Equally, all the participants highlighted the advantage of being able to talk to colleagues, and how watching others in action, either in person at school or through online
video demonstrations, made it easier to visualise the possibility of integrating learning into practice. Interestingly, the practice of observing and giving feedback on other professionals is well documented in teaching literature, but not so in music therapy literature. The Department of Education and Training, Victoria (2005) suggests that “One of the most effective ways to learn is by observing others, or being observed and receiving specific feedback from that observation. Analysing and reflecting on this information can be a valuable means of professional growth” (p. 11). However, whilst the opportunity to observe other music therapists at work is offered, the logistics of organising these observation visits is complex to manage, as programs must have alternatives arrangements for the missed music therapy session, and staffing needs to be reallocated to maintain appropriate student support.

In an Australian ethnographic study into how nurses learn in a neonatal intensive care unit (Hunter, Spence, McKenna, & Iedema, 2008) it was discovered that workplace learning could be “informal, incidental, interpersonal and interactive” (p. 657), and that it was important to understand both the formal and informal ways in which professionals (in this case, nurses), learn and apply knowledge in their work. According to Hunter et al., their participants described the importance of learning “how we do things here” (p. 657), and this sentiment relates well to the Giant Steps participants describing their interpersonal learning at the school. Grizelda in particular, spoke about this informal style of learning as being motivating, saying:

I love watching other people work with the students, especially people that are passionate and enthusiastic about what they are doing. I think that inspires me to be better and to work harder and to be the best that I can in this environment (Grizelda).

In watching other music therapists at work, the participants described how this opportunity gave rise to seeing their collaboratively-created resources being used to engage students with a range of needs, and how they may be adapted to be age-appropriate across the
school. In watching others, there emerged a clear sense of respect for their colleagues. Particularly when spending such a limited amount of time with classes, this openness to learning from others is key to the music therapists being able to develop working relationships with students in the time that they have with them.

The theme of transdisciplinary learning emerged from thick descriptions of workplace relationships, and how learning from others widened the scope of their music therapy practice. Hamilton (2005) found that interactions with professionals from other disciplines can be crucial for confidence building in one’s clinical competence, particularly in the early years of practice. All the participants spoke about the valuing of knowledge that comes directly from these people themselves, as separate to that gained from reading their literature. Grizelda said:

I think if I came from purely a music therapy approach here, there’d be a whole depth of knowledge from the other disciplines that I’m missing out on. I think that knowledge gives me a more wholistic approach to the students … there’s just a lot more tools in my tool kit than there were before basically (Grizelda).

This transdisciplinary knowledge appeared to be absorbed through being in immediate and constant contact with professionals from other disciplines, rather than simply attending a one-off training session. It was those who had been at Giant Steps for a longer period of time that spoke of transdisciplinary learning and knowledge, hinting that absorbing a broad knowledge base, and gaining the confidence to apply transdisciplinary learning, is something that is developed over an extended period of time, rather than simply finding a position within the right transdisciplinary culture.

The open sharing of knowledge at Giant Steps between disciplines has grown and developed over the years, with protectiveness around each discipline gradually fading, as the benefits of sharing and using methods from each other’s expertise manifests in better
outcomes for students. Up to this point, I have discussed professional learning as described by the participants, when asked the question “what informs your practice?” As a result, the emergent themes centred only on learning they had received from others. A limitation of this study is that, as a result, the participants may appear to be simply passive recipients of learning. It is important to clarify here that the participants also contribute to this culture of shared knowledge by running training sessions for all staff in using music to engage students, music skill development and music for self-care, although they did not refer to this aspect of their role in the interviews. A question worded in a different manner might have drawn this information from participants.

In reflecting on the interpersonal style of learning in a transdisciplinary environment, it seems that the professional knowledge gained in a context like Giant Steps contributes to the forming of a new kind of music therapy professional - a transdisciplinary music therapist. Due to experience gained over several years, the transdisciplinary music therapist is one that has “a lot more tools” (Grizelda) in their tool kit. When Wheeler (2003) speaks of how music therapists may draw from other disciplines in their work, she describes incorporating this learning as exciting, and that it can help in communicating with other professionals through using similar language. However, she also mentions how it can be difficult to integrate information from a number of other disciplines into their work. This potential for being overwhelmed is present in this context. However, there are only four disciplines being combined in programs at Giant Steps (teaching, music therapy, occupational therapy and speech therapy), and professional learning is structured carefully for new staff. Perhaps that is why participants seemed to view these opportunities in a primarily positive light. Transdisciplinary learning at Giant Steps is most successful when disciplines are not just open to sharing knowledge, but actively participating in a whole context culture of learning. Music therapists may benefit greatly from this collegial environment, when there are just a
small number of disciplines working together, and they take the time to shape their practice in a way that makes the description of transdisciplinary music therapist, a true reflection of context, skill and experience.

**Formal learning.** The process of introducing professional learning about best practice, evidence-based practice, and ASD-specific teaching strategies in schools, and the ongoing issues with gaps between learning and implementation is well documented. Some write that single training workshops are limited in their ability to effect sustainable changes (Fixsen, Naoom, Blase, Friedman, & Wallace, 2005), and I have also found this to be the case at Giant Steps. A single workshop, even one of great interest to staff, is often lost in the more immediate demands of daily workload and practice, unless it is quickly followed up in a regular, systematic manner through team discussion, reflection, small project work and further research. Odom (2012) also advocates for an ecological perspective of supporting professional learning in schools, and for the adoption of innovation and systems change. He further states that through the stages and drivers of exploration, installation, initial implementation and full implementation, that it can take between two to four years for a school to fully integrate and embed a new practice learning into daily school programs. If this is the case, then attention must be given to the style of professional learning around implementing best practice, ensuring that professionals don’t just attend training sessions, but thoughtfully and collaboratively focus on implementing professional learning into practice alongside their colleagues. I propose that school leaders should be aware of two factors that contribute to the ability of professionals to take on new learnings in their practice: the different ways in which the learning is taught and experienced; and the ability to have staff actively engaged and invested in the process.

Whilst most of the school-facilitated training at Giant Steps is not related to music therapy, it is related to ASD, and may come from a variety of different perspectives.
Generally, however, presenters are invited with whom the leadership team feels there is a confluence of thought. The most regular presenters take a very respectful and humanistic position on the teaching and support of people with ASD, and this fits comfortably alongside the ethos and values of the school.

All the participants at the time of this study, had completed their training through a university course that had nurtured an eclectic, creative arts approach, and this broad view of music therapy has influenced the seeking of different creative approaches to incorporate into their work. However, they continue to seek learning outside of the school to grow their practice, as seen in Sally’s description of how the relational aspect of drum circle facilitation training helped to clarify her therapeutic purpose in group sessions.

**Self-directed learning.** All participants drew attention to professional learning that was self-directed, including the sourcing and reading of research literature, reading online music therapy blogs, and attending conferences. They referred to books as a key source of reading, and less so to academic journal articles, as they found it difficult to access research literature through university databases. Waldon & Wheeler (2017) identified a number of barriers to music therapists engaging with research literature, including accessibility and lack of institutional support, and in the case of Giant Steps, accessibility continues to be a challenge. Some, like Sally, source journal articles that are open access by conducting initial web searching and finding links to academic literature.

The inaccessibility of research literature to the music therapy clinician is an issue that needs to be resolved if the bridge between music therapy research and practice is to be strengthened. Music therapists need access in order to inform themselves, and to know with confidence that they are working within a best practice framework. In 2017, the Australian Journal of Music Therapy recognised this need, and moved from a paid subscription model to open access, enabling music therapists to access current, quality music therapy research. This
kind of innovation is needed internationally, to increase access not just to the research of one’s own country, but also from the international music therapy research community.

The participants expressed an appreciation for high quality writing that reflects a range of different perspectives on the one topic. Sally in particular, finds case studies to be of the most value, as she is able to relate them directly to her own practice. All participants were influenced by reading about specific interventions, and how these might be applied in their own work. In contrast, writing that contains mostly theoretical content, tended to be overlooked. Sally makes a strong point, saying:

> When you’re quite time poor and a busy person, you need something quick, you need to be able to access the information as quick as you can and use it. So, if it’s really wordy and becomes very academic, I would probably not read as much of it (Sally).

From these comments, it is easy to see the appeal of music therapy blogs and websites, offering information on current research and ways to apply findings into practice. However, it is possible that by limiting oneself only to practice-based literature, there may be less time spent reflecting on the broader, theoretical issues of music therapy practice, perspectives that differ from one’s own, and shifting thought about the profession as a whole. Whilst it is clearly of practical relevance to the music therapy clinician to read about music therapy techniques and methods, research and literature on the larger, more theoretical frameworks for music therapy are illuminating, particularly for those wishing to consider the deeper issues of music therapy practice in context. As a team leader, this is one of the considerations in selecting research and literature, as a whole school vision requires larger scale thinking and new perspectives from music therapy thinkers from around the world.

Participants described a variety of websites, Facebook forums and blogs by other music therapists as sources of online learning. The appeal of this type of learning platform, is in offering the opportunity to pursue learning, even within the confines of a busy life, and at
convenient times. In the 2016 AMTA Census, a high number of respondents identified the need for more opportunities to accrue their CPD points through accessible, online learning options (Jack et al., 2016). In a survey of music therapists in the U.S., isolation and the inability to travel long distances were identified as barriers to continued professional learning (Vega & Keith, 2012). Vega and Keith posited that online professional learning would enable these music therapists to stay up-to-date with current clinical information, and to meet the requirements for continued registration. Addressing issues of accessibility to learning opportunities is already being seen in Australia and the U.S. with online professional learning modules being recently made available to music therapy professionals for an enrolment fee through commercial websites.

In an age of web-based communication, information is easily sought and located, so it is not surprising that the participants look to these forums, particularly for complex practice-related questions, or issues that they may not wish to discuss with colleagues, music therapist or otherwise. Whilst research literature may be able to answer some of these practice-related questions, access restrictions and possibly inaccessible, academic language mean that it may be simpler and quicker to search the internet as a first port of call. If research findings are presented in simpler, abbreviated formats, then it is possible that some music therapists may not see the need to read research papers in their entirety. However, if online learning is of a high quality, constructed through knowledge of research and theory, then this is may be a practical, partial solution to keeping up with current research with limited time for learning. The gap between research and practice is best addressed by universities themselves, as the facilitators and holders of research findings, through communicating summarised information via broader social media channels to clinicians. Additionally, peer-reviewed music therapy journals that are open access could include a blog section on their website, where clinicians
or other professionals could comment on the relevance of research articles to their work, and how they have applied the findings.

**Teams as learning spaces.** In the Introduction chapter, I provided a visual representation of the music therapist’s place within the complex layers of transdisciplinary teaming at Giant Steps. Throughout the analysis of the interview data, the participants identified a range of methods of contextual learning, depending on which team they were speaking about. Their descriptions have now provided further insight about their approach to learning practice skills, and in which teams they are finding this information. This revised representation can now be viewed in light of the types of learning discussed above, and to give further context to the chapter sections referring to professional learning.

![Teams as learning spaces](image)

*Figure 5.1. Teams as learning spaces for the music therapist.*

At an individual level, the music therapist engages in learning through reading research and online literature and attending conferences and courses. As a part of the music
therapy team, they draw learning through a collaborative process, where learnings from courses and conferences accessed individually are then shared with the music therapy team, adding new insight to clinical discussions. Here they also engage in the creative processes of creating resources and problem solving around music therapy-specific challenges. In the class team, they develop transdisciplinary knowledge through learning directly from other disciplines, and by putting into practice transdisciplinary knowledge gained through school-facilitated training sessions. In the class team they also participate in discussions around more general student engagement across the class program. As part of the age-based programs, they learn about the developmental stage of their students and gain a holistic view of student life through working across the school day in non-music therapy programs, and helping to coordinate and participate in celebration events, sporting days and excursions and camps. Then as part of the whole school staff body, they engage in school-facilitated learning from other disciplines, which is subsequently applied in class teams. Finally, as part of the wider school community, they engage in learning that includes families, such as workshops by visiting international speakers. This is a complex system, with each team providing opportunities for the music therapists to learn and be challenged to continue to develop their practice in response to the changing needs of each team.

**Sub-Topic 2: Diversity and creativity within teams.** All participants spoke of the diverse range of skills, training and approaches within the music therapy team, and the vibrant, creative process that energised their practice. There appeared to be a sense that this diversity was a strength of the team, rather than a barrier to creativity and team discussions. Bella says: “If you asked everybody to write a song about something, on a specific topic, it would come out different, like everyone has a different interpretation, and a different emphasis in how they would create an activity” (Bella). Their comments on learning from the other music therapists, may be imaginatively viewed as a hive mind. Oxford Living
Dictionaries (207) define the hive mind as “A notional entity consisting of a large number of people who share their knowledge or opinions with one another, regarded as producing either uncritical conformity or collective intelligence”.

In this interpretation, the music therapy team, although small in number, share their knowledge and opinions with one another, and in one sense become a more cohesive, possibly conformed group in the process. It is through the sharing of collective intelligence, knowledge and skills, that they are able to draw on the team as a resource for their students. If they have attended conferences or short courses outside of the school, this is where the sharing of their learning benefits the group, with many minds considering how new knowledge may be applied or not within context. Whilst the music therapists do also go to the internet, conferences, courses and reading for possible solutions to clinical issues, often it is the others on the music therapy team, with their collective experiences across classes and programs, who have the most helpful input.

A further advantage of the hive mind that was mentioned, was how the capacity to divide up the creation of songs and musical activities when needed, seemed to lighten the creative workload for everyone. As the music therapy program in this context follows the school curriculum, each semester is characterised by a different unit of work, or theme. This means that, whilst the music therapists continue to work towards achieving student outcomes as set at the beginning of the year, each semester they create a new bank of music therapy activities that are tailored to fit the theme. If this were the responsibility of a single music therapist, the workload for creating new resources would be immense. So, the collaborative process here is one that is necessary for sustaining the pace of programming, but also enjoyable in sharing the creative process and drawing on each other’s strengths and skills. Bella comments that: “I think we all have a different way, for example in our team when we come up with an activity and we all roll it out into our classes according to our students, they
end up looking quite different sometimes” (Bella). Whilst the collaboration of creating resources tends to produce a fairly uniform activity in one respect, individual learning and experience sees them moulding these products according to their own practice style, and the knowledge gained from other team learning in the school.

**Sub-Topic 3: Peer support and professional supervision.** All the participants made comments about the peer support from their work colleagues, and the professional supervision accessed outside of the school setting. Within the school music therapy team, they value being able to discuss difficult issues, and are supported by the variety of fresh perspectives. This comes from having intimate knowledge of both the significant support needed by students at the school, as well as what it means to be a music therapist in this setting. They differentiated between the peer support of their class teams and the peer support of the music therapy team in subtle ways. Louise particularly notes that the closed setting of the music therapy team allows for more a more honest and open discussion forum, being able to share the successes but also about the challenging days. Louise says:

> For instance, when I’m in the office with someone else, then there’s the informal discussion of ‘this is not working well for me’ or ‘I’m having a really, not a great time today’. And depending who you talk to, you could either maybe, get ideas from them or just have someone else say ‘oh yeah I’ve been there too’. Then you realise that everyone else has crappy days too I suppose. Even people who you think are quite capable (Louise).

At the time of this study, Louise was struggling with the demands of the job, and looked to the music therapy team particularly for peer support. It may be due to the trusting relationships in the music therapy team that she felt able to talk to them in this way. But others in the music therapy team also confided in each other around clinical challenges and personal difficulties. I would propose that this atmosphere is created through shared
therapeutic knowledge linked to training, and an ability to apply this in reciprocal ways within the music therapy group.

All the participants make reference to team support influencing their motivation for the work, and this can be seen as related to building resilience, an essential personal quality in this highly challenging, and often physically confronting context. Bella commented that:

It’s kind of a joy that feeds itself because you’re faced with challenges and you’re challenging yourself in what we feel you can and can’t do, and you get support from the team. It’s a very positive environment. So, because you’re supported you can learn better and enrich your work and then you can give back more to the students (Bella).

Some participants also spoke of the value of accessing professional supervision outside the school. A small number of research studies on professional supervision for music therapists have indicated that accessing professional supervision is beneficial for gaining professional and personal insight into music therapy practice (Kennelly, Daveson, & Baker, 2016), and whilst recommended by professional organisations, many music therapists do not access professional supervision for various reasons (Jack et al., 2016; Kennelly, Baker, Morgan, & Daveson, 2012; Kennelly et al., 2016). Even access to more informal networks of support outside of the workplace, is recommended in order to prevent burnout and maintain satisfied in one’s work (Clements-Cortes, 2013). I believe it is vital to access professional supervision outside of the school context, to maintain professionalism in challenging times, and that team leaders of music therapists should encourage the practice of accessing supervision to support their professional roles.

**Key Focus Area 2: Professional Issues for the Music Therapist in a Transdisciplinary School**

This section considers the three Sub-Topics related to issues for the music therapist in a transdisciplinary school context. These include working with individuals and groups,
Sub-Topic 1: Working with individuals and groups. Music therapy programs at Giant Steps are predominantly delivered in a group format, with these groups comprising anywhere between 2-10 students, and supported by a number of staff. The participants spoke both of the benefits of working in groups, but also some of the tensions around having limited ability to work at an individual level. In terms of benefits, some participants highlighted that creating a sense of togetherness with groups of students who have difficulty regulating themselves is highly rewarding. Grizelda highlighted the rare moments of synchronicity as being extremely satisfying:

“I get great sense of satisfaction when our kids can play in a group, because it does not happen very often” (Grizelda).

However, some participants also described the frustration of not being able to be responsive at an individual level, to be child-led, when the needs of the group cannot be put on hold for any length of time. Louise describes this challenge:

If you’re in a group, and you get that connection with one student and you know you could easily keep going, just with that one person but you can hear it all getting a little bit chaotic, so you have to cut short that moment. And that just breaks my heart sometimes, you have to have to do that, you have to go back to bringing the class in. I feel that sometimes there are some missed opportunities there (Louise).

Whilst music therapists have long described using an improvisational model in groups (Bruscia, 1987; Skewes McFerran & Wigram, 2007), the issue here is around students being unable to wait or occupy themselves whilst another is the focus of individual attention, resulting in disruptions to the group dynamic. In a review of music therapy practice around group improvisation, some participants commented on the issues of juggling the dynamics of
groups, and how the music therapist aims to meet the individual needs of participants and, at the same time, enable and contain the cohesion of the group (Skewes McFerran & Wigram, 2007). This was a tension point for both Grizelda and Louise, with Grizelda acknowledging her role primarily as beat-keeper in facilitating group improvisation. Recent research is increasingly showing that the act of playing together in a group on the beat, is socially rewarding and pleasurable (Cirelli, Einarson, & Trainor, 2014; Keller et al., 2014; Kirschner & Tomasello, 2010; Kokal, Engel, Kirschner, & Keysers, 2011). However, this is a skill that is challenging for most students at Giant Steps. In the absence of a sense of cohesion in group improvisation, this may lead to music therapists adapting this format to include recorded music, or to focus on joint action in improvisation for improving impaired movement timing (Hove & Keller, 2015).

A consideration of individual and group music therapy programs at this school is complex and challenging. School budgeting and human resourcing steer decisions on delivery mode towards groups, in the interest of making maximum use of staff time and meeting the demands of curriculum timetable requirements. Students may receive individual music therapy programs for varying amounts of time, solely due to their inability to emotionally regulate themselves in a group setting. If they were not able to access individual sessions, they would not be able to participate in music therapy programs at all. It is indicative of the positive regard for music therapy’s potential that these occasional allowances are made. However, individual allowances are often short-term, until such time that the student can self-manage in a group setting. This is unfortunate, as there are many benefits to individual music therapy for people with ASD, and the Giant Steps music therapists are often unable to practice in a way that offers those benefits. Nordoff and Robbins historically advocated that “Individual therapy is the most appropriate setting for children who are oblivious or noncommunicative, or who have behaviours which interfere with peer interaction or
participation in a group musical activity” (Nordoff, Robbins, & Britten, 1971). However, Bruscia later acknowledged that in education settings, the music therapist often had little control over who attended groups, and so instead would attempt to meet individual needs by adapting the musical activities (Bruscia, 1987). Perhaps the benefits of individual music therapy have not been communicated or shared widely enough at Giant Steps, inviting more accommodation to be made for individual attention. The sharing of individual session videos could potentially serve this purpose, including description around what is happening within the dyad and how this cannot be achieved in a group setting.

The participants also acknowledged that working in groups had many social benefits for their students. Particularly when it comes to addressing joint action, synchrony and imitation, working in groups can be the preferred method for music therapy (Hove & Keller, 2015). In this case, an improvement to service may involve the introduction of large, cross-class drumming groups, which were previously very successful in the school in engaging students in awareness of pulse and following large group visual and auditory cues to synchronise with others.

Sub-Topic 2: Working across the day in non-music therapy programs. Bella believes that the music therapist’s working relationships with students are better informed by seeing them in a range of settings and engaged in a variety of activities. She commented that:

I think we’re lucky in that we get to see that perspective of their lives and I think it’s something that not every music therapist may get to see if you come just come in for the session of music and then you’re gone, but we see our students in many different environments, even going on camp with them, bunking down with them for the night and just seeing how they get through their day. It gives a much deeper understanding (Bella).
Bolger (2015) spoke about collaborative relationships grown through a hangout period, engaging in non-music related activities (p. 102), and how this involvement is essential in supporting buy-in from music therapy participants. Bolger surmised that these activities did not replace musical interaction, but were still an important part of the music therapy process, adding that “I believe music therapists can feel that they are not ‘doing their job’ unless they are actively making music with people” (p. 102). Bella mentioned that, at times, she might have been deviating a bit much from her music therapy practice by working across the day, but that the student gains to be made were well worth the effort.

Whilst a small number of music therapists write about engaging in extra-musical activities as part of their work (Cobbett, 2009; Derrington, 2012), these do not seem to be for regular and extended periods of time, but rather during lunch/leisure breaks or as a prelude to a time-limited music therapy program. The involvement of the participants in this context across the whole school program every day, means that they are truly immersed in the student’s day. This gives such a fully rounded understanding of school life for their students, and this knowledge enables them to adapt the music therapy programs to fit with the flow, demands and shifting sensory needs of students across the day. My own experience has shown me that being able and willing to contribute to all aspects of a student’s learning in the day garners respect for the music therapist in the team, “pitching in with whatever needs to be done” (Grizelda). Twyford (2008) supports these other activities as opportunities to gain insight around their student’s lives, and simultaneously, earning acceptance from the team, which inevitably benefits the music therapist’s programs. I believe that music therapists should embrace the opportunity to engage with students in other programs or times of the day when given the chance, rather than limiting themselves to only delivering music therapy programs, as this has many benefits for developing relationships with students and staff teams.
An added benefit of working across the school day is the opportunity to transfer skills and joys discovered in music sessions, to other times, and to share them with different people in the student’s lives. As students with ASD can often limit the places and people with which their skills can be seen, this constant generalisation is of great benefit to students, families and staff. Because of this model, students benefit by getting more access to the music therapist across the day for incidental music sharing, but also other staff become more comfortable in sharing music with students in different settings through regular modelling from the music therapist. Encouraging class staff to use music for engagement at different times, has revealed those who are most enthusiastic about embracing music in their work, the school players (Bolger, 2015; Rickson & McFerran, 2014), who are the natural allies of the music therapists in bringing more music to students across programs. This role release for the music therapist is a positive feature of the transdisciplinary model, resulting in greater carryover of music into all programs, and more generalisation of outcomes for students.

Sub-Topic 3: Collaborating with music therapy support staff. Some participants described the key benefits of developing relationships with support staff as including assistance in managing any physical risk from challenging behaviour, and their involvement as social partners in music-making. The role of support staff is rarely described in the music therapy literature, however Munro (2017) interviewed music therapists on their experiences of having support staff in sessions, and some participants confirmed that they would sometimes have the two-to-one support for behavioural reasons. This is the case, specifically for the few individual music therapy programs run at Giant Steps, where the level of support to engage in music therapy programs, requires additional staff support for safety reasons. The importance of trust between the music therapist and support staff became apparent, particularly when considering the management of physical risk and maintaining positive engagement.
Much of the commentary around managing personal physical safety came from Sally who works with the adult students of the College, who present the highest level of physical risk to others and themselves due to their size, strength and reduced ability to self-regulate. She describes how this risk to personal safety feels during some music therapy programs:

It does make a difference because you can’t be completely relaxed and I suppose it does take up a part of my brain. I can’t be completely focused on the therapy and on the music and on the client because I’ve got to be really aware of my surroundings, the space and, if I do have to get out fast where’s the closest exit. But on the whole I think as long as you’ve got that support staff, really important, and you keep your awareness high, I think it’s OK (Sally).

However, all of the music therapists work with students who present similar challenges but did not necessarily talk about this aspect of their work in such a direct way as Sally. Instead they refer to “unpredictable responses” (Bella), the workplace being “intense but supportive” (Bella), “he nearly pulled all my hair out” (Louise), and “behaviours are so unpredictable and um .. hurtful I suppose, not emotionally but physically” (Grizelda). Their comments also on how the team always “has your back” (Louise and Grizelda) spoke of the importance of collaboration and support in supporting personal safety. This is an example of one of the benefits of being an insider researcher, where references to personal safety were made in more veiled ways, but I was able to interpret their responses with a knowledge of context and culturally located language.

Whilst the participants each spoke of these physically challenging behaviours as having underlying and understandable causes such as anxiety and frustration, their descriptions were often vague and unclear. This may have been due to a number of factors. Giant Steps has a very strong culture around the use of language to describe students, and particularly behaviour. In recent years, a great deal of discussion about behaviour has shifted
instead towards considerations of engagement, and the link between behaviour and engagement. In the interviews, the music therapists may have been reluctant to frame student behaviour in any ways that might be viewed as negative, in keeping with this contextual culture. They may have similarly felt a level of protection around their students, knowing that the results of the interviews would be shared in a public forum. This is not to say that physically challenging behaviour is not discussed, but that it is set within an engagement framework, and therefore, staff may not feel as comfortable talking about effects of personal safety concerns on their wellbeing and resilience.

When the music therapists need an alternative forum to raise concerns around personal safety, it appears that they may take these issues to supervision outside of school. Accessing professional supervision is one channel of developing resilience around personal safety in this context, but also the school culture may need to shift, to enable staff to talk openly about their personal concerns. Currently Giant Steps is actively embracing a staff wellbeing program, and this should provide opportunity for the music therapists to encourage an openness in discussing these issues at work, as well as in professional supervision.

At times, the participants refer to having not just one, but a number of support staff in their music therapy sessions. What is special about this aspect of teamwork is that those staff in sessions are not present purely in a managerial role, they are there to engage students, to join in with appropriate affect, warmth and an invitational style. Alvin and Warwick (1992) even referred to the dynamism of assistants being crucial to the success of music therapy programs, and this is a sentiment that I fully align with in this context. At Giant Steps, support staff may use exaggerated expressions, gestures and a communicative style that enables greater emotional comprehension and engagement from students. Munro (2017) writes about the benefits of support staff modelling music-making in sessions and that this could relieve pressure on the child and allow them to observe what was possible.
Munro (2017) also goes on to describe how having good relationships with support staff enables the music therapist to keep the flow of the session moving, rather than stopping and starting to support participants. Bella described this as knowing exactly what was needed in the moment, and how this enabled her to maintain the session flow. As support staff are always present in music therapy sessions in this context, it is vital that the music therapist trusts those present to provide the right kind of support needed, and that they in turn, trust and support the music therapist in guiding the style of their music-making with students. Having a shared understanding of student outcomes and role expectations and a collaborative outlook, helps to alleviate some of the stress of working with students presenting physical challenges, and find positive ways in which to engage students in music therapy programs.

The Transdisciplinary Music Therapist as Viewed Through Systems Theory

This study began with exploring the experiences of individuals, and was followed by a broader group analysis, looking across the experiences of the participants, to draw themes from their interviews. In this process, my reflections also extended sideways: to the other staff members in the classroom, discipline and program teams. Now, I will now take an even broader view of the data, one that encompasses the entire school context and all the people who are part of it. For this reason, I am drawing on systems theory as a lens through which to weave the themes into my final reflection.

Systems theory is an interdisciplinary framework, featuring in scientific and philosophical literature in the latter half of the 20th century (Shaked & Schechter, 2017). However, its principle of the whole being more than the sum of its parts goes back to the writings of Aristotle, and the desire for comparative study between the sciences at the time (Dekkers, 2015). This style of thinking became less popular during the scientific revolution of the 17th century and its focus on reductionism, however with the industrial advances of the 20th century, it re-emerged in the necessity for multi-disciplinary research. The common aim
of systems theory is to determine the boundary of a system, its elements, the relationship between the elements, and the input and output of the system under study (Dekkers, 2015, p. 4).

Bronfenbrenner (1979, 2005) is widely regarded as the father of systems theory, and wrote prolifically about an ecological systems theory of child development, a theory which continues to have a great impact on education, research and understanding of the influence of social systems on human development across the lifespan. Bronfenbrenner’s model (1979), as depicted through diagrams of nested systems, illustrates the many layers of interaction and context in a single individual’s life. These begin with the microsystem, the people whom an individual interacts with on a daily basis, such as family members, school peers and friends, and the connections between these people alongside the individual. This is surrounded by the mesosystem, which captures the links between different settings in the individual’s life, such as home and school. Next, the exosystem incorporates indirect environments which the individual may never enter, but that influence the microsystem through events that occur within them, such as media, services and neighbours. The macrosystem then shows the larger effect of social and cultural values of a society in which the individual lives. This is then framed within a chronosystem, which shows the changes in people and environments over time (Bronfenbrenner, 1979).

What is specific to the ecological model, is its move away from behavioural psychology, and its tendency to de-contextualise individuals for the purposes of science. Instead, a systems theory approach places great emphasis on the inter-connectedness of individuals with their environment and their society (Bronfenbrenner, 1979). It is precisely this focus on the relationships between the components of a system, rather than their distinctions, that make systems theory particularly relevant to this final abstraction of a transdisciplinary context. A systems analysis may be approached by either starting with the
individual components and moving outward to increasingly larger systems, or it may focus on the system as a whole, and then explore the components and their relationship with each other (Fang & Casadevall, 2011). In this case, I began with the individual components of this system (the music therapists), then considered their relationship within the music therapy sub-system and their interactions within class teams. Finally, I brought these components into the larger picture of the whole school system. Throughout this study, I have returned to my own complex role as the music therapy team leader, and its multiple relationships across the school system.

In considering the Key Focus Areas discussed earlier in this chapter, it became clear that an emergent process was taking shape, one that brought the experiences of the participants into a picture showing the inter-connectedness between the team member, the music therapy team leader and the school leadership team. I will discuss the practice cycle for the music therapy team member, then the school leadership team, and finally consider the practice cycle of the music therapy team leader, articulating their role in bridging these inner and outer systems.

**Practice Cycle of the Music Therapist**

The first layer of this process traces the practice cycle of the individual music therapist, detailing the resources they need, their involvement in the collaborative process, and the outcomes for their practice. The figure is depicted at the end of this section. When the school year begins, the music therapist identifies self-directed professional leaning, based on their existing clinical skills and experience. They assess the needs of their new student cohort, engaging in reflection and determining how they will address the needs of individuals and groups, and work across the school day.

The central phase involves the collaborative team space, where diversity of approach is sought and appreciated. They apply professional learning into team discussions with the
purpose of creating music therapy program resources, and problem solving around music therapy clinical challenges. More general problem solving around student engagement tends to be addressed within class teams. This creative and supportive process can seem messy at times, but ultimately serves to build the level of trust within the team through mutual peer support, and to value shared knowledge and experience.

In the final phase, the music therapist may experience personal satisfaction in their work, through witnessing meaningful student achievements, leading to a willingness to stay on with the school. A sense of team value may come through coaching support staff, seeing music successfully shared across the day, and valuing the learning from other disciplines and staff who know students very well. These practice outcomes of personal satisfaction, meaningful student achievements and an increased sense of team value feeds forward into the next cycle, beginning again with a new sense of the resources needed in terms of learning, skills and reflection.

*Figure 5.2. Practice cycle of the music therapist.*
**Practice Cycle of the School Leadership Team**

This next layer of the cycle moves from the inner system of the music therapy team member, to the outer system of the school leadership team. The actions and possibilities in this layer may be influenced by school economics, philosophy, culture and the beliefs and values of the leadership team, particularly the school principal. The figure for this practice cycle is shown at the end of this section.

The school leadership cycle begins at the end of the school year, with budgetary planning, allocation of resources, and the professional learning calendar for all staff being finalised. Music therapists continue to source external professional learning that complements the school professional learning calendar. Budget planning influences the number of music therapists employed, the number of days they work, and therefore, the individual caseloads. Driving these decisions, is the value that the leadership team places on music therapy and a curriculum that nurtures the arts. Without this support, the flow-on of resources and support at all stages would be lacking and unsatisfactory.

Whilst the music therapy team is engrossed in the creative, collaborative space, the school plays a vital role in shaping team culture, supporting promising initiatives, and encouraging staff to apply professional learning in their work in practical and flexible ways, and providing additional support in times of crisis. At Giant Steps, it has taken many cycles of repeated professional learning, interpersonal development, team building and school projects to foster an environment of respect and value for collaborative practice. An expectation of high performance from all staff, keeps a notion of continual improvement and innovation alive throughout the year.

Practice outcomes for the school may be positive when other elements of the cycle have been implemented successfully. Relationships with external arts organisations enable
new experiences for students both in school time, and with their families. Collaborations with arts organisations give a positive public face to the school, and help to build community awareness of the needs of families including children with ASD. Finally, a positive outcome for a transdisciplinary school is the developing of stronger teams through increased trust, professional knowledge and skills. The music therapy team contributes to this outcome through sharing their creativity, working across the school day in non-music therapy programs, delivering professional learning, and engaging in respectful dialogue in teams around student engagement.

![Collaborative team process](image)

**Figure 5.3.** Practice cycle of the school leadership team.

**Practice Cycle of the Music Therapy Team Leader**

In this third layer of the system, I consider the practice cycle of the music therapy team leader, framed within theories of parallel processes and system leadership. This section is a reflexive consideration of my own role as enabling communication and collaboration.
between the music therapy team and the school leadership team. As the music therapy team leader, I may at times engage in exactly the same tasks and processes as the music therapy team, or as the school leadership team. But at other times, I stand to the side of these two system layers, either advocating for music therapy resources in the school, or guiding the music therapy team in making decisions based on the larger school direction, rather than just the needs of the music therapy program. The practice cycle for the music therapy team leader is shown at the end of this section.

At the beginning of the cycle, I ensure that the caseload and collaborative opportunities for the music therapy team are spread equitably and according to student need. To ensure a creative, collaborative music therapist space is possible, regular meeting time needs to be scheduled in the crowded school timetable, and I source research literature that will be theoretically relevant and offer practical application for the music therapists. Additionally, I consult the music therapists on their professional learning needs, source funding where required, and look for opportunities to share music learning with the whole school where relevant.

In the middle phase, I engage in collaboration with the music therapy team, encouraging a healthy team culture. During this time, I am also monitoring the wellbeing of the music therapists, making time to meet individually if needed, and recommending external supervision when issues are better addressed by an outside professional. At this point, theories of parallel processes in supervision become pertinent. Parallel processes appear in the clinician supervisory relationship as transference, where the clinician brings the dynamics of their relationship with clients into their communications with supervisors, opening the way to learn how to work with clients more effectively (Arnaud, 2017; Crowe, Oades, Deane, Ciarrochi, & Williams, 2011). However, this is not a one-way process. Crowe et al. (2011) argue that utilising strategies such as being supportive and less directive, exercising
reflection, and training in relationship skills and change facilitation, can increase the clinician’s insight into their own practice experiences. Over time, it can be seen that Smith, Simmons & Thames’ (1989) description of parallel processes becomes clear. “When two or more systems – whether these consist of individuals, groups or organizations – have significant relationships with one another, they tend to develop similar affects, cognition and behaviours” (p. 13).

Systems theory and parallel processes are useful lenses through which to consider how the layers of a system interact with one another. When the school principal is supportive and treats the staff with positive regard, encouraging learning and reflection, this leadership influence flows through the school leadership team, and to the class and therapy team leaders by encouraging them also to set directions in a consultative manner and treat staff positively. This positive flow of influence then re-appears in how individual staff treat students, in supportive and engaging ways that respect their rights to make choices and direct their own learning wherever possible. If, however, there was little support or resource made available for music therapy, it follows that this would translate into a more stressed music therapy team where they felt less valued for their work, and this may, in turn, show itself as a lowered capacity for treating students with unconditional positive regard. My role as a music therapy team leader in this flow of transference means that I have the opportunity to positively influence the school leadership team and community, the individual music therapists, and the students. An awareness of this transference when communicating with staff from all parts of the school system, allows me to effect change through listening, and encouraging reflection on how practice may be seen from different perspectives.

In the final phase, I encourage reflection on learning and celebration of achievements. Celebration may come through special events including families, and I collaborate with both the school leadership team and the music therapists to ensure these events are innovative and
inclusive. I encourage the sharing of successful music projects through the school newsletter and the submission of abstracts to conferences. Most importantly, at the end of the cycle, I find myself able to reflect on the learnings of the year, as a clinician and as a leader. These learnings inform how I approach the following cycle, what I envision to be possible, and how as a leader, I can make this happen for the school.

Figure 5.4. Practice cycle of the music therapy team leader.

School System Practice Cycle

When the three layers of this process cycle are combined, they show a complex, interactive system, where the roles of each person are made clear, in order for the whole to operate smoothly and collaboratively.
System Leadership in Music Therapy Teams

System leadership literature draws on principles of system theory and applies them to a leadership framework. Whilst much of this literature deals with leadership in a business or commercial environment, many of its concepts are applicable to thinking about leadership in a specialist school. Senge, Hamilton and Kania (2015) describe the three core capabilities of a systems leader as: (a) an ability to see the larger system, rather than just the individual parts; (b) fostering reflection and conversations that appreciate other points of view and build trust and collective creativity; and (c) moving from reactive problem solving to co-creating the future through acknowledging accomplishment. This is a broad range of skills, developed over time, and in an environment with a strong team culture. These kinds of capabilities rely

Figure 5.5. School system practice cycle
on a system where all components have a similar agenda, not just in writing, but in daily practice (Katzenbach & Smith, 2008). The Final Distilled Essence reflects the shared purpose of the music therapy team, and this is also reflected in the school’s core values, including: remaining open to the acceptance of new ideas and approaches (eclecticism), adopting collaborative approaches to challenges (transdisciplinary practice), recognising the skills of staff (learning from and teaching each other), and strengthening professional relationships (trust and respect within teams) (Giant Steps, 2017a).

Two other key qualities of a systems leader resonated with me, those of the team leader as deviant and as a creator of space. Hackman (2009) describes the role of the system leader in setting the right conditions for good team health. He describes the deviant as the person who questions processes, adds contrasting points of view and generally does not follow the group flow. Whilst this person can often be ostracised in teams, Hackman explains that this role is important to keep creativity and openness alive in decision making. I suggest that this deviant may exist in any team, but that some of these qualities would also assist a music therapy team leader in keeping the team in a reflexive and responsive state of mind when working together.

Senge et al. (2015) further describe the need of the system leader to respond to complex problems by creating a space “wherein collective wisdom emerges over time through a ripening process that gradually brings about new ways of thinking, acting, and being” (p. 30). At Giant Steps, it is the creating of this space that draws trust and commitment from the music therapy team. Whilst time to plan is important in driving change, equally a space is needed where creativity can emerge, ideas can be voiced and contributions are respected. This is where the system leader works to balance plans and space in enabling the optimal conditions for growth. If the system leader is successful in enabling a healthy team culture through creating collaborative space and facilitating connection with the larger school
vision, this results in better outcomes for students through well-resourced, innovative music therapy programs based on research and multiple levels of professional learning.

**Recommendations for Future Research**

A growing number of music therapists are working within teams in larger health care and education settings around the world, both with professionals from other disciplines, and with other music therapists. As this trend continues, understanding the experiences of creative arts therapy team members and the role of the music therapy team leader will become increasingly important. A focus on transdisciplinary service delivery by teams of professionals within the NDIS framework in Australia, means that music therapists will need to be clear in what this model means to practice. This includes an understanding of how their practice may be enriched by working in collaboration with professionals from other disciplines, and what their own specialist knowledge may contribute to clients being able to achieve functional outcomes. Further research on the role of music therapy in a transdisciplinary team would be highly relevant to furthering the place of music therapy in allied health services within NDIS in Australia.

Along with the move towards team-based models in Australia, a rising issue for executive leaders is in how to ensure that services are driven by collaboration and best practice in those teams. As shown in this study, practice may be informed by information from a wide range of sources, including research literature, conferences and courses and online reading. However, the learning that occurs on an interpersonal level between professionals of the same or differing disciplines, may in fact be the learning has the most immediate and lasting impact on music therapy practice. Developing systems of quality assurance that also meet with the culture of the setting, would ensure leaders are confident in maintaining quality programs for individuals with ASD. Understanding the learning trends of music therapists within specialist schools will also help guide leaders in connecting their
teams with quality resources, whether through face-to-face professional learning or via online platforms. The accessibility to online resources for music therapists working with individuals with ASD, is particularly relevant for the large number of music therapists who do not work in team environments, and who initiate all professional learning for themselves.

Until now, music therapy teams and the role of the music therapy team leader have not been investigated through research. This first, exploratory study begins to address this gap in the literature. The results from this study suggest that team leaders play a vital role in creating a collaborative and creative space for music therapists to grow their practice and provide peer support to one another. In the specialist school system, this leadership role is also crucial in connecting the school vision of leadership teams with the music therapist’s ability to provide engaging music therapy programs. As Hackman (2009) wrote:

“The best team leaders are like jazz players, improvising constantly as they go along”
(p. 5).

As leaders of creative arts therapy teams, the solutions to complex problems usually lie within these teams, waiting to be uncovered through the embracing of a creative approach and trusting professional relationships. By actively participating in learning and collaboration within and across disciplines, transdisciplinary music therapists will make significant contributions towards positive outcomes for the specialist school system.

Conclusion

This first, exploratory study into a school-based transdisciplinary music therapy team has revealed aspects of music therapy teaming and learning not previously addressed in the literature. Participants in this study spoke of their commitment to ongoing professional learning, motivated by being in constant contact with other disciplines over a long period of time. They expressed that having diverse and creative perspectives within the music therapy team, collaborating with staff irrespective of qualification, and immersing themselves in all
aspects of the school day, led to an understanding of how to better role release to other members of the transdisciplinary team. Finally, an emphasis was placed on the importance of professional supervision, and the differences between peer support drawn from other disciplines and that found within the music therapy team. These results suggest that active engagement in shared interpersonal learning, collaboration and role release are vital aspects in the success of this model. By actively participating in learning and collaboration within and across disciplines, transdisciplinary music therapists have the potential to make significant contributions towards positive outcomes for the specialist school system.
References


https://www.austmta.org.au/content/what-music-therapy

Retrieved from

and bylaws for grievance procedures. Retrieved from

Ayson, C. (2011). The use of music therapy to support the SCERTS model objectives for a
three year old boy with autism spectrum disorder in New Zealand. New Zealand
Journal of Music Therapy, 9, 7-31.

Wheeler & K. M. Murphy (Eds.), Music therapy research (3rd ed., pp. 26-26). Dallas,
TX: Barcelona Publishers.

Berger, R. (2015). Now I see it, now I don’t: Researcher’s position and reflexivity in
qualitative research. Qualitative Research, 15(2), 219-234. doi:
10.1177/1468794112468475

functioning in infants, children, and adults with autism spectrum disorders. Physical

Bibb, J., Castle, D., & Newton, R. (2016). ‘Circuit breaking’ the anxiety: Experiences of
group music therapy during supported post-meal time for adults with anorexia
https://www.austmta.org.au/journal/article


Derrington, P. (2012). 'Yeah I'll do music!': Working with secondary-aged students who have complex emotional and behavioural difficulties. In J. Tomlinson, P. Derrington & A. Oldfield (Eds.), *Music therapy in schools: Working with children of all ages in*
mainstream and special education (pp. 195-212). London, Great Britain: Jessica Kingsley.


Reiners, G. M. (2012). Understanding the differences between Husserl’s (descriptive) and Heidegger’s (interpretive) phenomenological research. *The Journal of Nursing Care, 1*(119). doi: 10.4172/2167-1168.1000119


Beliefs and Values

In the beginning, I believed from my own experiences that:

- a combination of reading research literature and practice wisdom contributes to delivering quality music therapy services;

- knowledge and experience gained from working alongside other disciplines changes and enriches music therapy practice, and even creates a different kind of music therapy practitioner altogether;

- the more experience I accumulate, the more selective I become around the information chosen to shape practice, and the more awareness I develop around quality sources of professional development and learning;

- music therapy and music education curriculum are complementary, with each positively influencing the outcomes for students in specialist school music therapy programs; and

- working with students with physically challenging behaviours can take a toll on wellbeing, but the support of a team helps to sustain energy.

Navigating Multiple Roles

Role-complexity in this study seems a direct result of conducting the research in my own workplace. As a member of the school leadership team, my values have been based around connecting the music therapists with the larger school vision, increasing the visibility of their projects and successes within the school community, and with identifying professional learning for the whole staff body.
As the music therapy team leader, I stand to benefit from the outcomes of this study, in that having a greater understanding of the team’s experiences and influences will help me to be a better leader. My work in this role has valued identifying and facilitating learning specifically for the music therapy team, growing their access to resources, and recommending areas of professional learning they might provide for the school, staff and families. So, as a leader I assume that they will express their experiences clearly, and make reference to the many types of professional learning provided by the school. I anticipate that they will describe the process of addressing both educational outcomes from the school curriculum and the meeting of therapeutic objectives as a complementary framework, contributing to well-rounded music therapy programs for students. Furthermore, I hope they will feel free to say what they need to say, and not be worried about others taking a negative view of their work values, or of the challenges presented by the students with whom they work.

As a music therapist and colleague to the Giant Steps music therapists, I have valued the opportunities to learn from each other, both through observing each other in practice and through collegial discussion. I have also valued learning for myself as a clinician, and through this, identifying areas of learning relevant to the whole team. The support that this team of music therapists offer, engaging in problem solving together, generating ideas and giving encouragement on challenging days, has been essential to sustaining my energy in this work. As a colleague, I think they may describe some experiences that are similar to my own, such as how the work might be intensely challenging at times, but overall very satisfying. I expect that they will talk of the support of their team, particularly the music therapy team, in working through issues and creating effective resources such as visual songbooks and video dance tutorials, as this is one product of our work which I hold in high regard.

The new role of researcher will hopefully give me the chance to step outside of the music therapy team and consider how a systematic and thoughtful study could bring to light
different perspectives on questions I ask myself about our practice. I hope that their
descriptions bring a fresh outlook to practice for the music therapy team and the school, and
that the findings will be valuable both for the music therapy team and the broader music
therapy profession. As a researcher, I hope the participants feel comfortable to share
experiences of their work that are both positive and negative; that they trust my confidential
treatment of the data; and that I see a different side to them, finding out new aspects of their
professional lives that they may not have spoken of in team meetings. In sharing the findings
of this research, I expect that other music therapists working in specialist education settings
and with young people with ASD will resonate with at least some of the themes shared. By
clarifying the experiences of the participants in this setting, I anticipate that useful
information will be gained around the ongoing professional development needs for music
therapists.
Appendix B: Review of Researcher Standpoint

Review of Researcher Standpoint

I believe that whilst this school has very high expectations of its staff, it also offers a great deal of professional and collegial support. Music therapy and curriculum are complementary to me, and each approach positively influences the other in my work. Shared knowledge and language has increased the knowledge base of professionals from all disciplines, not just music therapy. I feel as a result, I have a broad knowledge of a range of discipline-specific strategies in working with students with autism and am confident in applying them through a music therapist’s professional lens.

Key factors informing my practice include my prior experiences as a musician, books, journals and research literature, formal learning through extended training and conferences, and the knowledge shared between professionals at the school. I reflect on my own practice through experiences of giving feedback to others. Whilst I believe online learning is an ideal learning platform, I have to date found books and research literature to be more reliable sources of information. Seeing students make their first connections through music is very meaningful to me, and I am sustained by empowering others to use music with students throughout the day, whether they be music therapists or not. Professional supervision and self-care activities help me to sustain my passion and energy for the work.

I hope to learn more about this team, their experiences and their professional relationships, as well as finding out where they located the most reliable and helpful information. I hope that they have spoken freely about their experiences, both positive and challenging, and that our pre-existing relationship has not caused them to withhold thoughts and information. My plan is to use their feedback and experiences to shape the professional development plan for this team, the staff body and the music therapy profession in Australia.
Appendix C: Plain Language Statement

Plain Language Statement

Faculty of the VCA&MCM

Project: Influences on music therapy clinical practice in autism specialist school settings

Dr Grace Thompson (Responsible Researcher)
Tel: +61 3 9035 8978 Email: graceat@unimelb.edu.au

Ms Bronte Arns (Student Researcher)
Tel: +61 411 289 731 Email: arnsb@student.unimelb.edu.au

Introduction
Thank you for your interest in participating in this research project. The following few pages will provide you with further information about the project, so that you can decide if you would like to take part in this research.
Please take the time to read this information carefully. You may ask questions about anything you don’t understand or want to know more about.
Your participation is voluntary. If you don’t wish to take part, you don’t have to. If you begin participating, you can also stop at any time.

What is this research about?
This project explores the clinical practice of a team of music therapy professionals at an autism specialist school, how they think about evidence and resources when designing music therapy programs for students with autism. It also aims to look at how music therapists work alongside the Board of Studies music curriculum and what they contribute to professional teams and healthy music culture in schools.

What will I be asked to do?
Should you agree to participate you will be asked to participate in one individual interview with the researcher of up to 1 hour and one focus group of up to 2 hours.

What are the possible benefits?
The team of music therapists being invited to participate in this research have a great deal of collective experience of clinical practice with school students with autism. Articulating and sharing this knowledge may have the benefit of clarifying the model of practice within this particular school. Insights gathered from this research will help to
develop professional training options that are of greatest relevance to practice, both within the school and for the profession of music therapy in Australia. Other benefits could include learning more about the practice of others in the team and how they view the position of the music therapy program in the school community.

**What are the possible risks?**
There are 2 potential risks involved in this study. The first risk is that you may divulge comments and information whereby you may not feel that your work is ‘evidence-based’ or best practice, in which case you may be concerned that those comments will have a negative effect on your professional standing in the department. This is being addressed through all narrative data being de-identified, and a coding system being used to replace names. The research team are not evaluating your practice, but rather attempting to gain an understanding about how evidence currently informs practice in this setting. The second risk is that due to the small sample size, individuals may be identifiable from detailed comments. Whilst there is no guarantee that identification will be impossible from the narrative, you will see a summary of the outcomes before submission and be given the option to remove any content that you do not wish to be included.

**Do I have to take part?**
Participation is completely voluntary. You are able to withdraw (quit) at any time. Any data collected from you can be removed before it is analysed should you choose to withdraw your participation.

**Will I hear about the results of this project?**
A summary of the results of this project will be initially distributed to you for your information and written up as the first phase of a larger study. Information from this study will be included in a journal article, a conference presentation and the final thesis.

**What will happen to information about me?**
Data collected from the interviews and focus group will be stored digitally on the laptop and backup external hard drive of the researcher, both of which are password-protected. Individual interviews will be audio recorded and the focus group will be video recorded. Video recording of the focus group will help to ensure that comments are attributed to the right person when coded. The interviews and discussions will then be transcribed for analysis. You will have the option of reviewing the transcripts to correct or add to your responses. The only access to this information will be given to the researcher and the supervisors for the purposes of analysing data and writing up of results for publication and presentation. All information will be stored for 5 years after the final publication, after which it is to be digitally destroyed, including audio, video and text information.

**Where can I get further information?**
If you would like more information about the project, please contact the student researcher; Ms Bronte Arns: arnsb@student.unimelb.edu.au
Who can I contact if I have any concerns about the project?

This research project has been approved by the Human Research Ethics Committee of The University of Melbourne. If you have any concerns or complaints about the conduct of this research project, which you do not wish to discuss with the research team, you should contact the Manager, Human Research Ethics, Office for Research Ethics and Integrity, University of Melbourne, VIC 3010. Tel: +61 3 8344 2073 or Email: HumanEthics-complaints@unimelb.edu.au. All complaints will be treated confidentially. In any correspondence please provide the name of the research team or the name or ethics ID number of the research project.
Appendix D: Consent Form

Consent Form
Faculty of the VCA&MCM

Project: Influences on music therapy clinical practice in specialist school settings

Responsible Researcher: Dr Grace Thompson
Additional Researchers: Ms Bronte Arns, Dr Katrina McFerran

Name of Participant: __________________________________________________________

1. I consent to participate in this project, the details of which have been explained to me, and I have been provided with a written plain language statement to keep.

2. I understand that the purpose of this research is to investigate how RMTs interact with evidence and resources to design, implement and evaluate programs for students with autism in schools, and the impact of these programs on team function and school culture.

3. I understand that my participation in this project is for research purposes only.

4. I acknowledge that the possible effects of participating in this research project have been explained to my satisfaction.

5. In this project I will be required to participate in one individual interview with the researcher of up to 1 hour and one focus group of up to 2 hours.

6. I understand that my interviews will be audio and/or video-recorded to ensure consistency of data.

7. I understand that my participation is voluntary and that I am free to withdraw from this project anytime without explanation, prejudice or detriment to my professional standing in the school, and to withdraw any unprocessed data that I have provided.

8. I understand that the data from this research will be stored by the researcher for the University of Melbourne and will be destroyed 5 years after the final publication.
9. I have been informed that the confidentiality of the information I provide will be safeguarded subject to any legal requirements; my data will be password protected and accessible only by the named researchers.

10. I understand that given the small number of participants involved in the study, and even with de-identification through coding, it may not be possible to guarantee my anonymity.

11. I understand that after I sign and return this consent form, it will be retained by the researcher.

I consent to my interview being audio recorded for use by the research team in analysis:

☐ Yes ☐ No

I consent to the focus group being video recorded for use by the research team in analysis:

☐ Yes ☐ No

I wish to receive a summary report of the project outcomes

☐ Yes ☐ No

Please provide an email address if you wish to receive a report:

_________________________________________________

Participant Name: ____________________________

Participant Signature: __________________ Date: ________________
Appendix E: Introductory Statement for Interviews

- Anonymity will be sought in this project, however confidentiality will not be possible, as the results of our interviews will be published and read by others. All results will be de-identified, with only myself and my supervisors having access to the raw data.

- Once the interviews are transcribed, I will provide the opportunity for you to read and check for accuracy of meaning and give the option to withdraw any specific statements.

- Direct quotes from interviews will provide illustrative examples of data in the final analysis and will be included in published material.

- You may withdraw from participation in this project at any stage up until the time of data analysis. Withdrawal will not be possible after the work is at the stage of seeking publication.

- I acknowledge that there is a pre-existing professional relationship between us. I’m hoping that we’ll be able to have honest discussions in the interest of gathering good, accurate data.

- Personal information will not be sought and you do not have to reveal everything about yourself.

- The outcomes of this project may differ from expectations, and this is OK. Hopefully the outcomes will be a learning experience for us all.

- At times there might be silence in the interview, you may need time to think before speaking and I might need time to think before continuing, and this is fine. There is no rush.

- At times I might jot down a word or two whilst you are speaking, this is just to remind me of interesting points to return to in our discussion.

I’m hoping to hear your stories and learn as much as possible about your experience of working as a music therapist at Gant Steps

Do you have any questions before we start?
| Pg no. | Key statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SMU# | SMU                                                                                     |
|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3     | It’s pretty full-on, it’s physically demanding, but I think you build up a stamina from working with that kind of pace, moving around a lot, carrying a lot of equipment around and being a step ahead, which you have to be because the students don’t appreciate things being disorganised or unpredictable. I’m quite amazed with how much we do in our weeks and how the stamina keeps us going. The busier I get the more I seem to be able to take on.                                                                                                                                                                                                                                                                                                                                                       | 1    | What it has been like to work at Giant Steps                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 1     | Time has flown and I’ve learnt so much. It’s been such a great thing to expand my skills and to work with this population. And it has taken me to places I never thought I would go, in terms of learning about autism, and about myself at the same time.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 1     | When I first started, it was very daunting, being part of a team, so many incredibly qualified people and especially the educators who know the students so well in such minute detail. So it was kind of daunting to begin with. People’s expertise was so vast and then to be standing up there in front of a group delivering something was daunting.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 9     | You need to know your limitations too. I’m quite surprised myself with how much I get through in a day and how much happens. I feel like I’m quite productive in this environment. I’m probably more productive than in any other job I’ve ever been in. I feel like I’m churning it out in many different ways, but I’m not getting tired in the way that I would doing other tasks. And I think that’s probably because that’s giving back on a really meaningful deeper level for me.                                                                                                                                                                                                                                                                                                                                                   | 1    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 9     | Sometimes I feel like we’re in such a bliss bubble here compared to when you hear about other children with autism and their families and struggles they have. And how labour intensive it is to deliver what we deliver to these students, it makes me wish that other young people out there could have the same support. Sometimes it’s frustrating to think that it can’t happen but at the same time it’s very important to seek out the best practice possible so that we can, but then it’s important I think that we share it, if we do find something that really could be helpful it would be very important to share it.                                                                                                                                                                                                                                   | 2    | Wanting to share what we have                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
Especially in schools where a lot of teachers have neurotypical children but then they have one or two with autism and they don’t have many resources and they may not have much training. That’s very sad, and we have such expertise here and so much knowledge, and it would really be nice to find a way to communicate that further afield, so we can support more children.

I always thought when I started as a music therapist I’m going to be writing things, I’m gonna be sharing things, I’m gonna be, whatever I experience, whatever I learn I want to share it. But I have been so busy just doing my job that I feel like there’s just not a lot of time or energy left over, and I’m still wondering what it is that will be important to share. Maybe I’m not at that stage where something has crystalized and that’s fine that it hasn’t and that it doesn’t. But it would be nice to have some kind of pearls that can be taken away.

One of these students, the student I mentioned who was unable to move from the classroom to the music room, we got a little Bluetooth speaker going and with his favourite song. Once that was on he was happy to move between spaces. And he’s also very gradually over this year really attending to the session. Whereas in the past he would just be demanding his iPad, and he’d be sitting with his own music, but now he is watching what is going on, he may only like, a couple of strokes on the djembe, but he’s engaged as an onlooker, most of the time, at least not thinking I just want to get back to my iPad. It’s just great to see that kind of development. And you know it’s hard to say that that is having the right support or whether his brain’s growing, he’s getting older and he’s opening up to the world or maybe it’s a combination of those things or its happening, in a happy synchronicity at a particular point in time, but it’s really nice to see.

Sometimes it changes very slow. But there’s definitely change. And one just has to have faith that it’s going to happen at some point.

A student who was quite developmentally delayed, who would just sit and listen to music all day, doing lots of tactile things like touching carpets and things but having no real interests other than music. He was in a class with other students, a very, very challenging class, they all had very different needs and different sensory experiences. And there was a student in the class that disturbed everybody. And these guys could just not, sit and do anything table top together as a group. They could do very, very few things together at the same time, be focusing on the board or do any kind of activity, there was just so much disturbance. But I did a nice yoga and meditation session with them which some of them...
reacted to in the beginning. But I made up a little yoga sequence and just to see them all doing the yoga poses, they were all lying on mats, there were probably the three most mobile doing the yoga poses. The student that I mentioned in the beginning who never really was interested in much, would sit and observe, he would not do the poses, he found that very difficult. But he was attending to everything that was going on. So it meant that the attention of all the students was on the same task at the same time. And that was just such a joy to see that, they were going through the motions, they were all together as a group doing something together, that was very nice. And it also regulated them really well.

They were no longer kind of upsetting each other with their noises and all the other distractions of their sensory systems that were dominating, so just to see them following the yoga sequence and do everything together.

1 But when you realise the support that everyone gives you, and I was lucky to work with some wonderful speechies to begin with. We did a music and speech program which was a really nice way to do a collaboration for me being not familiar with working as a team. I always imagined how I’d be out there as a music therapist on my own, you know, lugging my cases around and doing a bit here and a bit there and so it was really great to have that input and it taught me a lot about their perspectives on autism and from which perspective they operate, and using some of the speech therapist’s knowledge about the developmental stages of languages for example, And they were all very kind to give me examples of what a child does at certain ages and so that was something that enriched my practice.

The team collaborates creatively with diverse approaches

6 I think we’re lucky that we do have those chances. It’s one of the great strengths in the school is the collaboration.

6 You would give everyone the same task to create a song and it would come out uniquely different for each music therapist, like however many versions according to how many music therapists have done it.

If you asked everybody to write a song about something, on a specific topic, it would come out different, like everyone has a different interpretation, and a different emphasis in how they would create an activity.

6 I think we all have a different way, for example in our team when we come up with an activity and we all roll it out into our classes according to our students, they end up looking quite different sometimes.

1 They were very open to my creativity in terms of creating a song for a particular student and that’s a part
of my job that I really love, the freedom to create something, a song which is a lot easier than making a physical item.

It’s a very expedient creative process that can make a difference to the students very quickly. Like a new song, or an activity through which they can express something, whether it be verbalising or vocalising.

I gather little bits of information. The speech therapist might say we’re working on this particular sound or how we can get the student to request something.

<table>
<thead>
<tr>
<th>7</th>
<th>Sometimes I find just going out and making music with my friends and singing with them and they introduce me to new songs. You have to feel really passionate about the musical material for it to flow through to the students.</th>
</tr>
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<tbody>
<tr>
<td>7</td>
<td>Getting the right material and finding the right material and finding things that inspire you is very important. Because if I’m not inspired, I’m sure that the students will feel it. You can’t really fake that I think.</td>
</tr>
<tr>
<td>5</td>
<td>There are different ways to sustain inspiration and job satisfaction</td>
</tr>
</tbody>
</table>

5  A wonderful thing happens when you sort something out or you avoid something escalating or you use music to bring a student back on track. That’s a really good feeling as well so I think, there’s a lot of personal satisfaction doing this kind of work.

5  And all the fun that you can have. I mean there so much humour as well around the place and funny things that happen and the students have such personalities and I think it’s just when you really get to understand them and know what makes them tick, then there’s so much entertainment.

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<th>You can go through the motions, but only so many times and everyone will get bored with it, and you don’t want to get to that point where you just feel like a human jukebox. There have been times with some of my students who, one in particular who was very regulated through singing but there was a situation where he was waiting to be picked up for an hour. I had to just keep singing, just humming this song for him to stay calm, and it started to become like ‘I don’t feel like I’m making music anymore’ It doesn’t feel like music, it just feels mechanical, and I just really don’t want to get to the point, not so much for myself but because I’m not going to be an effective therapist, I’m not going to give anybody else any joy or any opportunities to do anything great if I’m not really feeling it myself.</th>
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<td>Sometimes you’ve got to step right outside this environment as well, the school environment and recharge your batteries. It’s like what Carl Jung said ‘when the well is empty you can’t get any water out’. So you have to go and make music sometimes in other settings or get that re-igniting of your musical spirit, so</td>
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<td>There are different ways to sustain inspiration and job satisfaction</td>
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<td>9</td>
<td>What sustains me too is having a break from it all from time to time.</td>
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<td>Although there’s always self-care of course. Which one has to bear in mind as well.</td>
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<td>I think a person-centred approach is really important, and I wish someone had said to me when I started ‘get to know your students really well’. So I think once the student is really trusting of you, feels really safe with you, then there’s really nothing that they can’t do or they won’t want to interact with you in, if they feel that trust and I think that’s just so crucial to really build that mutual trust and respect.</td>
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<td>9-10</td>
<td>One would probably be, and it’s not even music related, but it’s just having had this opportunity to be in the classroom and interact with the kids. One student who was very disengaged sitting in the back of the classroom and I just started talking to him about his interests what he likes doing, and he started really responding well and I don’t even think it was me planning out what I was going to say or do, but I think there was some kind of resonance between the two of us in the way we understood each other and really brought him out of his shell. He started talking about his world, and what he was doing and it started to translate as he went into another class, this conversational style with him started to take off and was just really nice to see him so interested and engaged with the world. Other staff who found it hard to engage positively with him took on a similar communication style and received lots of positive feedback, communication and relationship building from the student. It just made me realise rapport and that mutual respect, how important that is if you’re dealing with someone who’s very verbal.</td>
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<td>7-8</td>
<td>Definitely there are magical musical moments that you have with students when you really make some kind of deeper connection with them or there’s some kind of knowing between you and the student and they achieve something great or you can just tell that they are feeling very proud of what they’ve done and they’ve been just very happy. I imagine for most music therapists that’s what really feeds back to you and gives you that inspiration to keep going. I feel like there’s a bit of a calling for music therapists, not just for us music therapists but anyone who works in this field. They’re definitely very passionate about wanting to give back and it’s just extremely rewarding to be able to give joy to someone who really needs it or to support someone</td>
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who really needs it. I think that definitely sustains me a lot.

| 4 | When you get to that point where they’re not feeling their anxiety, they start to share with you of themselves which is really wonderful and that definitely sustains my practice. That deeper connection that, I’m sure any music therapist would say that that deeper connection is the reward. The students really inform my practice very much in terms of wat do they need, what would really be the best thing for them in this moment? What do they need, do they need to be aroused, do they need to be calmed. Being in the moment engaging where they’re at, at that particular point in time. That’s what I mean about intense in the work that you’ve got to be really on the ball with sensing where the group is at and where the students are at. Another thing that I think informs my practice is what my colleagues do. And I kind of wish I had more opportunities, I know the opportunities are offered here to swap with another therapist and go and observe their sessions, so I’m trying to make a note to take more advantage of that in future, because it makes you reflect on your own practice and it makes you see what are the really great things that this person is doing, what is really engaging these students and taking that on board. I think sharing with other colleagues and seeing what they do is very helpful too. |
| 6 | Recently I was down at the College and watching a colleague’s session, just being the recipient of the session. Just little things like they were doing a dance on the board and she would announce loudly what the next move is, and so everyone knew what was going on. I could see how effective that is, and I do it myself but sometimes I may doubt, should I shouldn’t I? Sometimes I get a bit hesitant, am I talking too much, am I saying too much? But then when I see other people do it I realise that it makes it so clear. So it is helpful to see as an observer how different instructional techniques work. |
| 6 | She had a nice drumming activity which was really simple, but it was all about participation and getting everyone involved in a very, very easy to follow way. It doesn’t have to be something musically complicated to be something that they get a lot of joy and enjoyment out of. |
| 6 | That was a really nice thing to see, that how you could do a session, and how you appear to others. Because you forget that sometimes and even having read the observations of a recent session from an outsider perspective, you think, yeah all these things are there and they’re helpful, it just makes me more confident in what I do in terms of delivering instructions. But also

| 7 | Opportunities to observe colleagues at work are informative |
new ideas about how to use instruments and how to use songs are always coming up.

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<th>For each one of us, we will think that’s the most obvious way of doing this. But then we go and see how another person’s doing it and we think yeah, that’s genius, I would never have done it like that. Or I would have done it slightly differently, but it really works, so it’s really good to see what other people do.</th>
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<td>Another thing that I think informs my practice is what my colleagues do. And I kind of wish I had more opportunities, I know the opportunities are offered here to swap with another therapist and go and observe their sessions, so I’m trying to make a note to take more advantage of that in future, because it makes you reflect on your own practice and it makes you see what are the really great things that this person is doing, what is really engaging these students and taking that on board. I think sharing with other colleagues and seeing what they do is very helpful too.</td>
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<td>For example, you’re singing a song with a student and they’re not holding the microphone properly. I’m in the middle of a phrase of the song and I can’t help them with the microphone and then having someone who knows that’s exactly what that student needs right now, jumping in and kinda pre-empting what they need. Some of the staff are incredibly good at that, which makes it so much easier to keep the flow of the music. It’s just great having that kind of staff member who can really support you well. I find there are many that can, there’s the odd person who when we get with them you know you are going to have a good session, like there’s someone in every class that will support them, which is great.</td>
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<td>10-11</td>
<td>I think it also was something that staff really enjoyed because they suddenly didn’t have to worry about students going after another student, but we could do something together, something structured rather than always getting worried about the next move of our students, so that was really nice.</td>
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<td>7-8</td>
<td>Because there’s always going to be difficult days and you know sometimes there’s days where you get an unexpected reaction from a student, but somehow magically you know that they’re not actually intending to hurt you, but they’re having their anxiety and they’re under stress. That’s when I think you need the collegial support as well, and someone says ‘just take a little bit of time out, you can just chill for a while, life will go on’, and to know that people around you are sensitive to that and also that I’m sensitive to others who may be feeling taxed in some way and to give them some space and time out. Because it can be challenging at times definitely.</td>
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It’s a very intense environment. But it’s a very supportive environment and I really love the collaborative nature of working with speech therapists, occupational therapists, teachers and an incredible team of educators. So, that has really enriched my experience. It’s kind of a joy that feeds itself because you’re faced with challenges and you’re challenging yourself in what we feel you can and can’t do, and you get support from the team. It’s a very positive environment. So because you’re supported you can learn better and enrich your work and then you can give back more to the students. Whilst its very full-on at times, you get so much back from the students and I think that really sustains you.

Because I have been with the older students, I spend a lot of time in the classroom doing other things, and sometimes I feel a little bit like I’m deviating a little bit too much from music at times, but then at the same time like today was a very, very hot day and we were trying to keep the load quite light for them, nothing too challenging and we started singing some songs and suddenly, the students’ attention is just rapt, they’re all focused and they all wanna have a turn and suddenly you forget how hot it is and they’re all just joining in. And then you realise that there’s such a power in that and that. It’s really important for us to go in there and offer those kinds of opportunities wherever possible. Without ramming it down anybody’s throat as well and not thinking that our agenda is always superior to other peoples’ of course. But about picking the right times and offering something really positive.

But I still feel like with the older students, they spend such a long time at school and they’ve learnt certain routines and ways of getting through their day that they become quite reliant on that, and sometimes I feel like they’ve lost maybe some of their self-expression. And that’s just by virtue of the fact that they need to survive through the day and not feel anxious and feel safe. But I feel like we all need to express something of ourselves, something spontaneous, something of our true self and it doesn’t really have to have meaning to anybody else but we all need to express. I’m still trying to find a way to bring that out in the students. I mean improvisation is a great way of doing that, but it’s very difficult in bigger groups to pay enough attention to each individual sometimes.

On the other hand there’s so many benefits in a group setting where all those social skills that are such a deficit with our guys, that those benefits outweigh what we can do with just a one-on-one kind of session.

I read the Tony Wigram bible on the subject really and there’s lots of great ideas in there. I would like to focus
more on it. I feel like I haven’t spent enough time really thinking about improvisation. I like to try and make up songs, and go to that level, taking the material that the students have and what they’re producing and taking them to some kind of musical expression, but it’s very difficult often because a lot of the students are very prompt-dependent and they may not understand that you can do whatever you like, there’s no about what you’re supposed to do. But I think it’s also very much about being really comfortable in the medium and what you’re playing in terms of where you want to echo and reflect and take their music somewhere. Just supplying lots of different flavours for them to hopefully engage with.

5

I think it’s quite an intuitive thing. With me, if something resonates with me, feels like it’s going to work for the students, don’t know if I can put my finger on that really. Other than to imagine myself using a particular technique that I see or read about, and if I can visualise the students engaging with that and me being able to deliver that, then I think I would go yeah that feels right. I think it’s very intuitive with me.

Deciding what is relevant to practice from the information received

Then you can clarify with yourself where you sit within that. If something’s so very formulaic it wouldn’t inspire me so much. Some of those methods that have been branded and franchised out and everybody’s doing them in a certain way, and there’s no scope for anything new to happen. It doesn’t really inspire me. Although there’s always a place for structure and that’s something I’ve learned to appreciate when working in autism.

Meeting the complex needs of students is a key to effective practice

How magical it is when you have all the right communications and it’s all very clear the board is up there and everything is there and the turn taking is there and you give little rewards which is, you know to me, my own nature the whole rewards system to me is sort of, efforts and engagement should be its own reward you know. But then realising how much that little cartoon character reward picture means to somebody it’s just amazing that suddenly they’re doing everything that you ask them to do because they get this little picture at the end. How well that works and then how well regulated they remain and then how everyone benefits more. It’s quite magical. But I think I sometimes overthink things too much, so I’m kind of just going around in circles rather than sticking to the basics and keeping it simple.

2-3

Because I have been with the older students, I spend a lot of time in the classroom doing other things, and sometimes I feel a little bit like I’m deviating a little bit too much from music at times, but then at the same time like today was a very, very hot day and we were trying to keep the load quite light for them, nothing too
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<td>challenging and we started singing some songs and suddenly, the students’ attention is just rapt, they’re all focused and they all wanna have a turn and suddenly you forget how hot it is and they’re all just joining in. And then you realise that there’s such a power in that and that. It’s really important for us to go in there and offer those kinds of opportunities wherever possible. Without ramming it down anybody’s throat as well and not thinking that our agenda is always superior to other peoples’ of course. But about picking the right times and offering something really positive.</td>
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<td>It may be that you take in to account the musical tastes of the student and what resonates with them. I tend to use a known song, or an existing song with word substitution. That works well. It took me a while to realise how powerful musical delivery really is with this particular population, and how much less of an assault for them it is to have a sung instruction compared to a verbal one, and how powerful that really is. And I guess once you really realise that effect then you use it even more.</td>
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<td>I like books that are well edited, that cover a subject in details where you get many different perspectives. So you get many different ideas from different approaches about how to do something.</td>
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<td>When I was studying, we were introduced to a lot of different schools of thought on what we would draw from and to shape our own practice and I always thought the whole psychodynamic school of thought was the right model, what it’s all about, all that hidden stuff, it’s all that stuff we keep inside and don’t get to express. I was never much of a behaviourist. I think in my personality, I like to be really spontaneous, I like to go with the flow, but when you’re working with autism of course you’ve got to be really organised. I mean you can still be spontaneous within parameters whey you know your kids, you know how far you can push it with them. But I always thought that the behaviourist stuff was so dry and joyless really. But through working with autism I’ve certainly discovered that it definitely has a place. It’s something I wish I’d learnt earlier to apply in my own life just with my own kids. I think that I can really appreciate the whole behaviourism focus to some extent.</td>
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<td>6-7</td>
<td>Sometimes you get really bogged down in what you’re doing, and you feel like you’re just, sometimes it loses meaning I think. If it’s just the end of a long year and you’ve been doing the same thing all over and you get to this point where you think I need some fresh ideas, I need to go in, wipe the slate clean and just start again.</td>
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<td></td>
<td>Being creative and having fun is part of the job.</td>
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and be creative. I think I’m in that kind of phase at the moment.

I think everything runs in cycles really, sometimes you’re in the middle of a really creative phase and you go through a phase of consolidation and then you reflect on something, and then start again. And that’s when you seek out new ideas.

8

Its creative, I definitely couldn’t do a job that wasn’t creative or had some creative aspect to it. And there’s so many ways to be creative, you can be creative in the music session in what you deliver and how you use instruments and how you use music and songs. But you can also be creative in how you persuade someone to eat their lunch.

2

I love the school culture of music being used in so many different ways and not just in the music session. The fact that students get the reinforcement of the things that we do in music translated into other settings, so it’s not they come in, they do wonderful things in music and they go out and do nothing with it. It feels like were actually doing something more meaningful than just having a lovely experience in music. It’s great that the teams can support us in that way. So I feel very lucky to have that support.

8-9

I think we’re lucky in that we get to see that perspective of their lives and I think it’s something that not every music therapist may get to see if you just come in for the session of music and then you’re gone, but we see our students in many different environments, even going on camp with them, bunking down with them for the night and just seeing how they get through their day. It gives a much deeper understanding. I definitely feel like it helps me know them so much better.

8-9

Although it’s hard work to be part of all those other things, it’s a really great thing and it helps inspire me to find more ways to help them. And in ways that translate outside the music room too. It’s all about sustainability. Even having communication with the parents and telling them about the little victories that happen and if the student has done something wonderful on occasion and the parents will go ‘oh wow I think we might go buy a drum’ and then supporting them in taking what they do at school to home if it’s something they really enjoy.

It’s really nice to see. It’s really god to keep doing that, expanding that. The skills in that area.
Appendix G: Structured Meaning Units (SMUs) for Grizelda

Interview with Grizelda – SMUs – “What is the interviewee talking about?”

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<th>Pg no. (Key statements doc)</th>
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<td>Part of that question is also related to the size of our groups. Because being in this school and being time-poor I suppose, we can get through and give each of our students as much music therapy time as we can, and we tend to do group work as opposed to individual sessions or dyads, which I think a lot of other music therapists may experience more of. Not sure but.</td>
<td>1</td>
<td>Therapy programming along school curriculum</td>
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<td>Within the group setting, we need to address both curriculum and therapy-based outcomes. So that can be challenging in terms of programming. And psychologically in approaching a session, to really have some clarity about whether you are addressing curriculum or therapy-based outcomes. And I think there is an even split, it feels like we are doing a lot of both, but sometimes it can be difficult to know, it can be blurry to know what my focus should be at that time. So I have to really think about that and think about the goals I have set for each of the students.</td>
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<td>Many of the high support students have more therapy-based goals and more social foundation-based goals, because their music skills are more limited. But those that have higher abilities, you push them a little bit more with their music literacy and their musical skills and being able to imitate rhythms and sing the melody or follow the pitch or follow the rhythm. Of course social foundation skills are still a part of it, but with those kids you can really go to their edge of learning with their music skills and that in turn I think plays a role in increasing their social foundation skills. So it’s a balancing act.</td>
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<td>I think in other settings as far as working in a hospital or in a nursing home or something like that, it would be a lot more cut and dry about what my focus was. But in a school setting where curriculum is so important, because we are a registered school so we have to address it, as music therapists I think it sometimes can be a little difficult to really have a strong focus, that strong therapeutic focus without having a strong musical focus.</td>
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<td>It can even be transition songs and working on lyric substitution and working through visual schedules with music. I was reading a little bit about ABA and some of the approaches there. With the pivotal response training and then using that with music. And I think we do that a</td>
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<td>Professional Development and learning about specific methods</td>
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lot already, because we’re really looking at the different ways of prompting kids and we’re looking at motivation and we’re looking at their self-management and their initiation. But maybe taking a little bit more of a musical approach with that as well, there’s another thing that I wanna look at a little bit more.

4 We’ve had training in a lot of different areas, and with the UTS course it addressed many different models of music therapy. SERVAM definitely plays a big part here. I think Barry Prizant’s philosophy on working with those with autism is really relevant. Carl Orff’s work has been something that I’ve really enjoyed doing, particularly with kids that have more musical skills and can play more in a group. There are some teaching methods that are really interesting in terms of teaching notation.

4 Talking to each other, music therapists talking to each other about what we enjoy or where we would like to go. And also just learning from the other disciplines as I mentioned before.

2 It’s just being able to really talk to people that have been studying their own disciplines for many years and are very passionate about what they do, and being able to have conversations and talk through issues, come up with creative ways to motivate our students and to teach each other, whenever possible. I think that’s a really valuable thing.

5-6 I think if I came from purely a music therapy approach here, there’d be a whole depth of knowledge from the other disciplines that I’m missing out on. I think that knowledge gives me a more wholistic approach to the students. So when I first started working here, I didn’t have that knowledge, so when there were behavioural issues or sensory issues or speech difficulties, or communication-related difficulties, I didn’t feel as equipped to address those issues within my sessions because I wasn’t really educated about those concepts. So over time, going to a lot of PD sessions and speaking to and having those collaborative sessions with OTs and speechies really helped. And just lots of conversations and emails have meant that I’m much more equipped now to identify what’s going on with students and to address them more promptly, and also direct newer staff members towards an appropriate course of action with the student. Whereas I wouldn’t have felt as confident to do that when I first started without that transdisciplinary knowledge.

6 The information that I’ve learnt through the other disciplines has been invaluable. And I feel a lot more confident to take the lead on certain things if I feel that a child’s not coping because of sensory needs, a lack of input or too much input, if they’re dysregulated what to
do to help them. To assist them in communicating their needs and also to communicate to them what’s expected of them much more effectively so that reduces their anxiety and stress. If a child is really seeking a lot of input from the wall or floor or jumping and landing on their knees, and that they need some proprioceptive input and they need to carry a heavy bag and go for a walk or have a big squeeze or get into a lycra sack. There’s a number of different tools in my tool kit now that I can offer and suggest to other staff members if they’re having trouble, or even when I know the children, what their experience is like, what they need. So there’s just a lot more tools in my tool kit than there were before basically.

7 I love watching other people work with the students, especially people that are passionate and enthusiastic about what they are doing. I think that inspires me to be better and to work harder and to be the best that I can in this environment.

2 The transdisciplinary culture of this workplace gives me a lot more confidence to be able to elicit OT related goals or speech goals within a musical framework. By having those conversations with the people that I work alongside daily, I learn a lot from them and I feel more confident in addressing those goals within the music therapy sessions.

1 I really felt like I belonged at Giant Steps, I really felt like this was a good fit for me. 4 Job satisfaction and meaning

7 Having hope and faith and maybe a vision of where you want to see the students go, is also something that sustains me and really makes me want to stay.

8 As music therapists, it’s something that I am passionate about, and that’s access. The more that I’ve been working on access for our students at the Opera House or other venues, the more interested I’ve been in that area. And it’s drawing from my music therapy experience and knowledge, and all of the transdisciplinary knowledge that I’ve accumulated has allowed me to really work on widening the scope of our children’s community access within the arts. I feel like it’s just one aspect, I mean there’s many other smaller things that happen within the school that I feel really satisfied by. But this is one thing that feels quite meaningful and it feels like it’s been noticed and it’s a strong advocate for those with autism within that realm. So I feel like it’s something good that’s really come from working here and started from just our students being able to have access to the Opera House to now other organisations taking notice and really being interested in the process and the model. So it feels more big picture.
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<td>There are many individual sessions with students that give my life meaning. The growth that they experience is very satisfying. I can’t think of one student off the top of my head just that encompasses everything that I find satisfying about this job.</td>
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<td>I’m pretty happy to have lasted this long and not burnt out. But it’s been an incredible experience and continues to be and will continue to be for hopefully many more years.</td>
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<td>There’s always food for thought, there’s always something new. It’s such a big field, music therapy. I think still within autism there’s so much more to explore. So you know, the more I read, the more ideas I get and the better my practice is.</td>
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<td>The Wigram work on improvisational music therapy is very relevant with what we’re doing at the moment. Looking at different approaches I sometimes get a little bit lost in a group musical improvisation because, I suppose what we trained to do was more one on one improvisational music therapy especially if you’re coming from a Nordoff-Robbins approach then you would do more individual with the client. But when in a group music therapy session and you’re working on improvisation, my role seems to be more about keeping the beat rather than doing a lot of to-ing and fro-ing and call and response and mirroring and maybe it is happening. But it feels like I’m holding the space more than I am responding to various rhythmic riffs that are coming out through the improvisation. So by going to books like that, you look at the different approaches and you look at ways that maybe I can alter my way of facilitating a group musical improvisation to get the best out of the students and to change my role, from being the beat-keeper to something that’s a little bit more fluid and responsive.</td>
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<td>I’m semi-regularly flicking through Petra Kern and Marcia Humpal’s book on the early interventions in music therapy and kids with autism. And it doesn’t seem to matter what page I read, I just do indiscriminate pages here and there, I always find something useful and it inevitably is something I really need at the time.</td>
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<td>There’s a number of articles that I’ve read, and books that have really helped to give me more of a focus and clarity around what I’m doing and how I can do it better. I particularly enjoyed Petra Kern and Marcia Humpal, and Grace Thompson’s work, Tony Wigram’s work. There’s some really good articles and journals, books and papers, presentations that I’ve been to that have really inspired me.</td>
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| 1    | I’ve been the sort of person that was really focused on music for so many years and I was the kind of person
that would read medical dictionaries and Oliver Sacks and all those sorts of things, ‘The man who mistook his wife for a hat’.  

| 2 | There’s also the opportunity to collaborate when timetables allow. Doing a collaborative program with the speech therapists, we had a program a few years ago here called Sounds Aloud, which was fantastic in eliciting articulation goals and diphthongs and literacy and different areas. And then with music and move I’ve worked with OTs, so we’ve worked on gross motor planning, fine motor planning within a musical framework which is more motivating for our students. | 6 | Collaboration with other disciplines |

| 2 | Then I did a presentation at the Opera House last week and I asked one of the OTs if she could help me articulate about the proprioceptive and the vestibular movement that our students require. And I knew like in my mind, what I’ve seen and what that means, but to articulate it was a difficult thing for me to do in front of a whole bunch of professionals. So it was lovely just to be able to ask her to give me a bit more information so that I could really articulate that in a way that was accessible to a lot of other people from other organisations and disciplines. | 6 |

| 1 | Not all, but I could certainly see that music therapists in other environments work in isolation and don’t necessarily have the communication with other disciplines relating to the class that they’re working with. I think that is one of the big things that I really enjoy about working here is that I can speak to a speech therapist, an OT, a teacher, a teacher’s aide, and other music therapists and brainstorm different ideas and discuss certain students and work out creative and innovative ways of really utilising all of our disciplines to be able to bring out the best in these children. That’s what I really enjoy about working here. | 6 |

| 2 | We have different approaches which enhance each of our experiences I think, and different levels of experience within the profession. We’re all pretty much trained in the same tertiary institution which is quite interesting. | 7 | Diversity of the music team |

| 2-3 | Even though we have certain activities that we may say we’re going to do within our units of work, each of our approaches to doing that one activity can be very different. And it also depends on the students that we are working with, the age group of the students, but also what we feel comfortable doing or where we’re coming from musically or how we respond to our children. | 7 |

<p>| 1 | Being in a team of five music therapists is quite unique. I know in some hospitals there are teams of music therapists within a play therapy framework, but I really enjoy the fact that we all have different musical styles, we have different experiences that we draw from. We gravitate towards different styles, different ways of | 7 |</p>
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<td>3</td>
<td>I think we all have a lot to offer, sometimes we will come into a meeting and say I’m having trouble with this, do you have any suggestions? And more often than not you get this incredible range of ideas that just really inspire you and give you a lot more impetus to move forward and come up with interesting ways of addressing certain issues. I mean there’s so much that we give to each other and it’s really indicative of the depth of musical experience when someone comes up with something and we all go ‘wow that is fantastic!’ and we all get our iPhones out and record it. People come up with some great ideas and that’s what I love about working here.</td>
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<td>1</td>
<td>I can imagine in other work environments, where you do have to come up with all the creative material yourself. Admittedly you can use improvisation’s way of not necessarily having to source repertoire. But just coming up with activities that are interesting and motivating, and particularly for us when we use different units of work, I think having a theme can be a lot of work for one person to come up with every single activity for that unit of work. So it’s nice when someone says I’ll do a hello song, I’ll do a goodbye song, I’ll do the singing song, I’ll do the instrumental song, and you sort of pull together and you get this really lovely depth of musical experience for the students.</td>
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<td>1-2</td>
<td>Not just musically either, but in terms of theoretical approaches and different assessment tools and the fact that we’ve created our own assessment tool for NDIS I think is wonderful. It’s going to be very useful for us and I think for other music therapists, that may not have something like that to use, to put forward their case for their students or for their clients. Being able to do that collaboratively is also another real plus for us. And it’s something that excites me, to do that together.</td>
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<td>Because you can get bogged down in the details sometimes on your own, and it can stop you from moving forward. Whereas when you’ve got that impetus from other people all wanting to work towards the same goal and work together and brainstorm ideas, verbally as well as emailing each other and communicating that way, I think it pushes the experience along a lot faster and you’re more productive.</td>
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<td>I think you know slow incremental gains. Because I suppose we do have the luxury here of seeing kids over their life span, and it’s not fleeting, so to see them grow and their world open up and be more socially engaged and, less dysregulated hopefully and the small</td>
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| Music therapy team as brainstormers and collaborators |

| Satisfaction in student progress and achievements |
incremental gains, even within the course of a year when we see how a child has started and where they end up, there are a lot of hoorays at different times from everyone involved. When someone does something that we haven’t seen before.

8 I get great sense of satisfaction when our kids can play in a group, because it does not happen very often. Last week when you actually had a tour group come through and I thought I’d try something new because I’d been working on individual parts with this group for like two terms and they’d learnt the cymbal part and they’d learnt the drum part but I’d always had the intention of putting them together so that they could play it simultaneously in two groups. But it had never happened, and then deciding to try that when there was an observation group come through was very interesting. But they rose to the challenge and that was very satisfying. They did really, really well and I was so pleased. And I did my happy dance afterwards so that was going to sustain me for a long time.

6 For me personally you know a satisfying moment or satisfying achievement has been watching a young girl who would only be in a music session for two minutes to be able to sit through a whole session and, really enjoy it and be engaged and participate in everything. That’s just a huge improvement from where she was and that brings me a lot of joy and sustains me. And also I suppose affirms that what I’m doing is OK and it’s enjoyable and motivating at times.

3 Sometimes it is child-led and if you find that if something works for a portion of the group, then you tend to change your approach to suit those children so that you get the best out of them over the course of the term or over the course of the year. So their style of learning or their way of engaging in music may sometimes dictate the way that your activities play out.

7-8 I remember when I first started here I said ‘oh I really don’t understand what’s going on with this child, I wish I could get in their head and understand what is happening’. And someone said to me ‘They’re a puzzle, you’ve just got to work out how to put the pieces together in the way that makes sense. I mean there’s no right or wrong, it’s just a process of elimination, of trying new things, working out what works, what doesn’t work and you know hopefully over the course of time the process is refined and the jigsaw gradually comes together in some cohesive manner, some way that makes sense. It’s always a big question mark, and it’s just about having the confidence and the courage to take the risk to find out what works and what doesn’t.
| Line 3 | It’s also dependent on the energy of the session and where it is within the framework of the of the year where there is the beginning of the year when everyone’s all energetic or its Week 10 Term 4 and you know, everyone’s had enough. | 10 |
| Line 7 | I think the fact that we work in a music therapy team, that’s a really big plus for me because it’s supportive and we can talk to each other about certain things that are going on, certain areas of concern and work through those issues as a team. | 11 |
| Music therapy team as supporters  |
| Line 7 | Some days you’ve just got to say ‘that was a crap day’ and go home and shake it off and come back the next day with a fresh perspective and think about what you could do differently. We have day reviews and class meetings, and having that solid reviewing process is really important to sort of say, well you know I did this, it didn’t go down so well, maybe next time we could try something different. And to all be on the same page about what that new change may be, so that we’re really delivering an element of consistency to that student, which really reduces their anxiety and stress and hopefully their acting out behaviours. Because really it is about understanding the student, and the more that we can understand where they’re coming from and what they need, the happier they’ll be and the less frustrated and anxious they’ll be. | 11 |
| Line 7 | For me, I really enjoy the social aspect of working here. Giant Steps does tend to invite people of a certain craziness maybe? I suppose there are certain people that are a good fit here, that are quite outgoing, that have a real focus on the quality of their work. But enjoy having a bit of fun while they’re doing it and are not scared to get their hands dirty, or to play with the children and really get down to their level. | 11 |
| Line 7 | I’ve actually been having some individual supervision externally, like once a month. And that’s been really good for me. There are some things that you can discuss within the school environment, but sometimes it’s good to get an objective viewpoint as well. Particularly with kids that I am struggling with, that I’m unsure how to move forward with, because their behaviours are so unpredictable and hurtful I suppose. Not emotionally but physically, then that’s maybe something that I might bring up in my individual supervision. | 12 |
| Self-care sustains practice  |
| Line 4 | It’s always in some part of my mind I think about the students that I’m currently working with, or the students that I know at the school and then I think can I use this with them? If I did, what would it look like? What modifications would I need to make in order for that to work? Is it too hard, is it below their growing edge? Evaluating different approaches and then determining | 13 |
| Assessing relevance and applicability of information  |
which one sits well with me I suppose, and then which I would feel comfortable with applying to the students that I work with.

| 4-5 | When we have PD here, everything is useful. Because the PD at Giant Steps that’s selected for us is relevant already. But I suppose if I was going maybe to neurologic music therapy for example, I mean I haven’t done it yet, but from my own perception and from what I’ve heard, there are some aspects that would be relevant to autism but others that may not be applicable. So it’s just a matter of really identifying with the students that I work with, and with the information that I’m receiving and just evaluating and filtering through to work out what’s really applicable here and what isn’t. | 13 |
Appendix H: Structured Meaning Units (SMUs) for Louise

Interview with Louise – SMUs – “What is the interviewee talking about?”

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<th>Pg no. (Key statements doc)</th>
<th>Key statement</th>
<th>SMU</th>
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<td>1</td>
<td>It has been a roller coaster place actually. From day 1, I was thrown in at the deep end. And I think the induction’s better nowadays, I know it’s much better nowadays. It was kind of a ‘sink or swim’ feeling for a year. And being stubborn I kept going, but it’s a fantastic place to work for that very reason that it’s a team of music therapists, which is fantastic. It’s just rare you know.</td>
<td>Work is challenging but one is respected</td>
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<td>It’s one of the most giving places I’ve been to. Which I’m not sure is entirely healthy, but it is what it is. And I think there’s a lot of expectations of giving, and a lot of people do give. But the upside of that is that you never feel like you’ve been left to organise anything on your own, it would never happen.</td>
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<td>I’ve never worked in a place with such caring, giving staff.</td>
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<td>1</td>
<td>The whole working for a school thing is hard for me personally, trying to juggle family as well. Because the flexibility isn’t there as much as if you were in an office or working for yourself.</td>
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<td>6-7</td>
<td>The one that comes to mind is recent, with a student who I’ve known. When I said I first started and I was thrown in the deep end, it was with this student who is quite unlike the others. And I was terrified of him. And my introduction him was that he nearly pulled all my hair out. And I’ve seen him on and off over the years, and he just gorgeous, he’s such a lovely boy. And in Term 4 he, he, it was just and this has taken you know, years really, but he held his hands out and shook an instrument .. on my .. you know he acted, yeah it was just a, it was like it felt like after 4 years :lol: of doing music with this guy, suddenly this year the sound of the guitar makes him look up. The sound of the sushi song gets him really excited. And he actually held his hand out to play a, two hands to play an instrument. Yeah.</td>
<td>Working within curriculum in groups is challenging</td>
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<td>I still find it somewhat frustrating because I still think there’s a lot of grey area between the music teaching and curriculum side and the music therapy part.</td>
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<td>So there’s a lot of group work and there’s a lot of people that I would love to see on an individual basis, for the same length of time that I see a whole group. And then a lot of kids that, groups are just not, I don’t feel like they’re getting a whole lot out of it, really. But time factor dictates that that’s the only option, that or nothing. And that is sometimes where it feels a bit more just like a music class, than music therapy.</td>
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<td>So there’s a lot of duty of care work which I get, it’s financial and it’s also just being part of it. But I do find it hard sometimes to get my head around. If you’re in a group, and you get that connection with one student and you know you could easily keep</td>
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going for maybe 10 minutes doing the same, just with that one
person but you can hear it all getting a little bit chaotic, so you
have to cut short that moment. And that just breaks my heart
sometimes, you have to have to do that, you have to go back to
bringing the class in. I feel that sometimes there are some
missed opportunities there.

1 But I think everybody has everybody's back. If you need to
discuss things or if you have issues then your other therapists are
there for you, to nut out problems. And I think that's constantly
improving as well, the meetings when we can all be there, I think
that's been good.

2 I’d probably just try and come up with something myself. And
then I share the space on Friday with someone, so then I might
have a chat to her, or bring it up in the meeting. Or in fact
actually with the teacher of that particular student. Maybe not
even a direct question – ‘how do you think I can resolve this?’
Sometimes that’s fine but just even a chat about what’s
happened. So if there’s a meeting on and I get a chance to ask
the teacher or the educator ‘what would you do?’, I would do
that, ‘what would you do about this problem?’ or ‘I’m having this
issue, what would you do?’, ‘cause they’re usually a mine of
information. There are lots of avenues. Because it might not be a
musical thing, it might not be a creative thing, it might be just a,
‘this person knows best how to deal with this issue’ thing.

2 I mentioned the formal version which is our meetings, so there’s
always time to share a problem or share a win. Also the informal
side of it, so for instance when I’m in the office with someone
else, then there’s the informal discussion of ‘this is not working
well for me’ or ‘I’m having a really, not a great time today’. And
depending who you talk to, you could either maybe, get ideas
from them or just have someone else say ‘oh yeah I’ve been
there too’. Then you realise that everyone else has crappy days
too I suppose. Even people who you think are quite capable.

7 Oh you know just anytime that there’s an event on. A musical
event. Although there might be one or two people organising it
generally, it feels good that everyone comes together and helps
or offers to help and supports it beforehand or on the day. So you
never feel like you’re left to organise something on your own.

2 Those meetings, although at a busy period we might whinge
about having to go sometimes, they are still essential part of it
really because even in the planning or the organisation of an
event, it’s easier just to have everybody there in one go and you
ask your question and you sort it out much quicker than sending
emails back and forth. So from the admin side of things they’re
good.

6 If we are all really bored silly with a song, to come up with
something else we can do with it, or another song we can do for
that particular activity. Or someone to say ‘oh god yes I hate that
song too’, ‘I’m not doing it either, I’m doing this one .. ah yeah!’
Just the creativity of the team. And the back-up of the team.
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<td>5</td>
<td>The main thing would be the sharing of ideas, so everybody chipping in every time we have a new theme, everybody chipping in with their own songs and ideas. Also when we’re setting up new themes, when we get together, it’s just that sudden tsunami of ideas that we come up with. You know ‘oh look this song’, and ‘that would work like this’ and ‘that would be really good like this’, so that would be the main, as far as Giant Steps is concerned, that would be the main source of information.</td>
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<td>We do generally have plans to discuss things but then we often end up, just having a chat. Which is just as good too. They’re just a valuable time to touch base, to get together and share ideas, and just have a chat and a laugh.</td>
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<td>I think I find it hard to use that model, and bring it into the school model. There’s no reason why it couldn’t be done, but I can’t. I have a mental blank often as to where I feel more constricted by the units of work and the goals and the report writing, where I feel like if you suddenly switch half way through, then that’s going to affect how the report’s going to be written at the end. How you might have only half a term to work on that one thing and because with the private clients you have maybe 2 years. If you’re thinking of a goal, then yes you could extend it out over 2 units of work but I think with the unit of work being there I’m still trying to get my head around thinking in terms of goals rather than in units of work.</td>
<td>Difference between working in a school and external private work</td>
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<td>So I feel like I work in two different ways, within the school and outside of the school. Outside of the school is more free form. Interviewer: And inside the school is ..? L: More structured, more bound. By paperwork. And time and the reality of group work and just the reality of being in a school.</td>
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<td>I think it’s just trying to marry the two, because when I think of it now they are two quite different ways of working. Maybe I just need to work out how to merge them a bit more effectively. Because actually what we do at Giant Steps I have a theme, I have taken some of those ideas outside and had maybe a loose theme with some of the private autism clients. Especially the Australian one where I’ve taken some of those songs and done them and used them externally. I nearly always work with a theme in aged care. Not always, but often. But it’s kind of different anyway. It’s got different goals.</td>
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<td>For starters it’s just with one person. So it would be used in a much more improvisational way, because I can go with what the client’s doing. I might have some instruments there so they might pick up something and then we go with that. It’s more improvisational.</td>
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<td>I think also the staff look forward to it as much as the students, cos you know it’s a nice break for them. Not a break, just something different and a chance for them to see new things, that surprise them about students that they maybe didn’t think could do.</td>
<td>How other staff experience music therapy sessions differently to the rest of the day</td>
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<td>What came to mind first with what informs is instinct. A lot of what I do is instinct. I was chatting to (other music therapist) about this, and then when we recorded ourselves and then looked back and we talked about 'oh you’re doing this, you’re doing ..’ but none of that was top of mind when I was doing it. It was just instinct.</td>
<td>Instinct, intuition, reflection and applying ideas from other students/clients</td>
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<td>Sometimes just lying in bed at night time trying to get to sleep – bang! In pops an idea. Quiet time I think that is, I think that’s just when you have quiet time to let your mind wander.</td>
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<td>And the other area I was thinking was from clients themselves. I might get an idea from one client and then be able to apply it to another. Depending on what a client’s doing or a student, just going with the flow of that, and then amending the program the following week.</td>
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<td>The other area I get ideas from is other people. Watching other people which I probably don’t do enough of. Even though we get the chance to, I didn’t take it because it’s just hard to get out of class sometimes. So I’m talking to other people.</td>
<td>Talking to, and observing other professionals and non-professionals</td>
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<td>And watching, just observing people with people. Observing how other, not necessarily music therapists but just other, workers or family members interact with whoever they’re interacting with. So just observing people.</td>
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<td>I get a lot out of a peer group that I go to outside of school that I’m in, people with a completely different outlook. Sometimes there’s a lot of crossover between aged care, dementia and autism especially when you’re thinking of non-verbal communication.</td>
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<td>Other people, the peer group that I attend, that’s often a good source. Sometimes we share ideas and it’s not related to autism whatsoever, but you think “oh actually that might work’. Often it’s self-care.</td>
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<td>There was that guy, an American guy, I watched him and I like the way he worked, Ryan somebody. But as we’re talking I’m thinking that yes, actually, following on from something I’d said earlier about not having enough time to watch other people, actually there are a lot of opportunities to watch other people online, if you delve in hard enough.</td>
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<td>Mostly observation, unless there was a particular problem and then I would just ask, share that with the class team. But often it would be no-one, just mostly observation.</td>
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<td>I’d like to say reading, but I don’t really do enough of that research. We had to do research for a time, and that was quite good.</td>
<td>Reading information from different sources and finding the time to read.</td>
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<td>There’s also ideas from not necessarily music therapy literature but just reading things, just things.</td>
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<td>I usually find that kind of stuff in Sunday and Saturday magazines. Often you get psychological things like that. Also through schools, both children’s schools, sometimes send out parenting things, advice things, websites. Websites and some autism websites. Facebook.</td>
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<td>244</td>
<td>Some articles that people share on Facebook, to click on those and see. That’s quite a good way of watching other people work actually, because that leads you into sites that other music therapists have set up showing their own practice. Social media and magazines. TV maybe not so much.</td>
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<td>Just the idea of being open to getting ideas from any, whatever source. That’s probably what most informs me. Whether it be TV, radio, social media, people. Taking it in from wherever. Then in your quiet time at night, suddenly you might think of something that had happened earlier. Just be open to ideas. From wherever.</td>
<td>Bring open to new ideas from anywhere</td>
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<td>But I don’t really do that. I have grand plans to do that in every holiday and I never do. I generally just do nothing, no music therapy, thinking, reading, planning, nothing in the holidays. I’ll sometimes play for myself but then sometimes I don’t play anything at all. Just don’t know if that’s a good idea or not.</td>
<td>Taking a break and knowing your limits</td>
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<td>Yeah, it’s a shame because actually I don’t feel like I have time during term, and that’s why I always think oh well I’ve got time, I’ll do all this reading in the holidays, but I just never do.</td>
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<td>Taking a break from it every now and then keeps it fresh. Which is maybe why I don’t do any reading in the holidays or anything. And that is why I just need a break from it, in order to regain enthusiasm for the next time. I’m learning that in order for you to be sustained the next time, you have to know what your limits are.</td>
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<td>So not even big ‘wow’ moments, just connections, just little connections.</td>
<td>Connections with students</td>
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<td>Sometimes you don’t even know you’re having a moment. Sometimes it has to come from someone else. For example I have a private client. I was just sitting side by side and we were ding away on the coloured chimes, and I didn’t know it was a moment really until her dad came in and was speechless because she doesn’t let anybody sit beside her. You have to sit across the table from her. In that moment it was through the parent. Because you know I was just doing what I was doing, it didn’t mean anything to me. But when it was explained. It’s when you think you’re doing something positive, and something right and something meaningful. That’s what sustains me. Don’t always see it though.</td>
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<td>5-6</td>
<td>Education and learning new things. Like even guitar skills, things like that. Even when we worked on that big NDIS document. Things that sort of make your life easier and clarify things.</td>
<td>Education and learning</td>
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<td>6</td>
<td>Learning and getting over your fear of improvisation, pushing yourself beyond your boundaries a little. That not so formal education, but extending your personal boundaries, developing musical skills, therapeutic skills, so just bettering yourself a bit. And not staying stagnant.</td>
<td>The momentum of curriculum and not remaining stagnant</td>
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<td>Which I think is probably where the team thing is hugely beneficial, because when you’re relying on just yourself then it is easier to become stagnant, whereas if you’ve got the team</td>
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around you then you can’t, you don’t and you can’t, because everybody keeps each other going.

| 6 | The ever-changing units of work keeps things moving, probably a little faster than I would like, but doing one unit of work the whole year would drive you bananas wouldn’t it. The team thing and the curriculum keeps things moving. |
Appendix I: Structured Meaning Units (SMUs) for Sally

Interview with Sally – SMUs – “What is the interviewee talking about?”

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<th>Pg no.</th>
<th>Key statement</th>
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<td>I think there’s a lot more trust with everyone. I trust the staff, I trust my capabilities, what I what I’m capable of, and I think that the clients do have trust in me mostly I think.</td>
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<td>Creating a new program for the College</td>
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<td>I went for it, but then I wasn’t totally aware that I was going to be working in with the adults in the college, so that’s been a completely eye-opening experience, and completely different from the school, from what I initially thought it was going to be like.</td>
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<td>I find the job exciting, so that’s quite sustaining in itself, that it’s not mundane, everything’s the same. I think the fact that it’s always changing, and there’s always new exciting challenges. I think that that will sustain me, it’s exciting for me to go to work. And the fact that we’ve got new clients next year and there’s new challenges, that’s great. It’s not your standard job where you do the same thing over and over again.</td>
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<td>I think just being able to stay creative, I think being creative definitely sustains me. Being in a job where I can be creating new ideas, new programs, new goals I think that’s very helpful.</td>
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<td>I feel like it is quite separate to the school. I think they are gaining more and more momentum, it feels like still a quite a new organisation which is still finding its feet and still working out the best way to make it work. I mean we’ve changed like this year the hours have changed so they’re not shutting down as much as the school is, and so it’s still sort of finding what works best. It feels new, exciting, like we’re creating something that that I think in the future could be really well organised, well run you know, smoothly run. Like as much as the school is you know.</td>
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<td>It’s exciting, it’s new, and I didn’t know what to expect to begin with, I didn’t realise how sort of new it was. But it’s a great team and everyone’s very energetic and enthusiastic and wants to have a very positive outlook and have the clients come first. They really put them first and their enjoyment.</td>
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<td>That’s what was difficult to begin with, so I wasn’t quite sure of the expectations of what my role was, it was fairly broad and I wasn’t sure how much was set. Then I realised that I did have a lot of creativity within that role which I loved. And that’s what I started to embrace through the year which made it more enjoyable and I</td>
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<td>realised that I could create something quite amazing, quite solid there. The fact that it was new and it hadn’t had a lot of centre-based learning or therapy there, that was exciting. Yeah very good experience.</td>
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<td>In groups you’ve also got to be aware of the group dynamics between the clients, because there can be a lot of clients that don’t work well together.</td>
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<td>2-3</td>
<td>Of course it does make a difference because you can’t be completely relaxed and I suppose it does take up a part of my brain. I can’t be completely focused on the therapy and on the music and on the client because I’ve got to be really aware of my surroundings, I’ve gotta be really aware of the space and, if I do have to get out fast where’s the closest exit. So it does affect it, it’s not like I can be completely relaxed all the time. But life’s fairly unpredictable, there’s always a part of you that’s gotta be aware of your surroundings and what’s taking place. I don’t think it affects it overly negatively, I don’t think that it takes a lot away from it, but I think it’s important to be aware of it. Because there could be a negative outcome if I’m not aware of it, and that would be worse. But on the whole I think as long as you’ve got that support staff, really important, and you keep your awareness high, I think it’s OK.</td>
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<td>This is a very unique population. I had some experience with young adults but not as much as I’ve had with young children and aged care, and it’s a very different, very unique population. I think it’s mainly their physical size, their strength and unpredictability. And also at the adolescent age there’s hormones running wild, there’s mood swings that you don’t often get so much with younger children and aged care and those other ends of the scale so, you’re dealing with that as well.</td>
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<td>You’ve gotta keep your wits about you all the time. There’s sessions that are unpredictable, you don’t know and you’ve gotta go with that. As much as I feel I know the clients, I think there’s still that element of, you can never completely rest on your laurels. You’ve just gotta be a little on guard and keep your wits about you.</td>
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<td>The first few weeks at College was quite challenging, quite confronting, I think my main concern was the risk to my personal safety just because I was working with young adults who were much, some of these guys are a lot bigger than me and a lot stronger than me, and I was pretty nervous to begin with. But I think as the weeks went by, I tried to remain very confident and confident in what I was there to do, I was there to be a music therapist and I’m not security. So I just became very clear in what my role was.</td>
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<td>When I go to a conference, I’m looking for presentations that are relevant to what I’m doing. Seeing case examples</td>
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or showing videos and seeing people practising and what they’re doing, that’s very helpful. I think it’s nice just to see if there’s anything new taking place. The last couple of conferences I haven’t seen a great deal of really new things happening. But you get a lot of validation and you think that yep, we’re coming from the same place and you know we’ve got very similar goals and this is what we’re doing. I have seen a lot of interesting presentations over the last couple of years. And I’m always looking for new ideas and new inspiration and fresh material. Because you can get very stuck and stuck in a rut. Yeah fresh ideas.

I think a lot of music therapists can feel quite isolated. I think that’s why conferences are so great because a lot of people don’t have the benefit of being able to work in a team or might go to a place and be the only music therapist and go there once a week and leave. It can often be quite an isolating profession, so it’s nice having workshops and having as many opportunities that you can to liaise with other professionals in the same field, is really important.

There were a lot of music therapists that work in autism. So there were a lot of questions that were very much related. Which was really good. I think a lot of the techniques, interventions they were talking about were things that I already do. But I think they added a lot of clarity and it was more about the way that they assess and evaluate and then also the transfer to non-musical goals, that was something that I hadn’t, I think we do it, but it was just a clearer format the way they present things and everything was categorised and put into ‘this is what we use for this and this is what we use for this’. It was just really clear, and I like having that text there. I don’t think it would be something that I’d solely use, it’s not something that I’d just go ‘right I’m a neurologic music therapist and this is what I do’ but it’s definitely something I would draw on.

I found that with the speech related exercises, a lot of the techniques I use already but I think it was coming up with some new ideas. And the different assessment tools, they had a lot of ideas about assessing. I mean using non-music therapy assessment which was interesting, so I think that I might look further into that next year. I think the stroke rehab and Parkinsons, the rhythmic entrainment and the metronome was brilliant. There was a lot of techniques that I think I will be able to use.

I just like the way it was delivered, it was very clear. Which with music therapy it’s not easy just to go right this is what we do and this is how we do it. It can be such a broad way of practising different ideas and the different ways people do things. So it was a very different
approach from what I’ve had in the past. It wasn’t sort of, UTS creative arts, which was very broad.

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<th>I try to stay up to date. So this year I’ve trained in Neurologic Music Therapy and I’ve done training with Arthur Hull in drum circle facilitation.</th>
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<td>If I’m away from work I quite often will listen to songs and then think ‘could I use that?’ rather than just listen to a song. So it’s quite important for me to try and switch off and have some down time and some off time. That’s another thing that sustains my practice, having that it’s not about work anymore, let’s just listen to some music. I suppose being with my family and listening to music, my children like listening to, helps. Having that time where it’s just music for me and then I can go and sit at the piano and write a song and it doesn’t have to be a song for anybody else, it’s just for me. That’s really important. I’m trying towards the end of this year I’ve started to do more of, just realised that I want to get back into my own song writing my own personal music.</td>
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| 10 | You’ve gotta be careful not to burn out, to take that time to be able to just switch off and to do things that you enjoy. |
| 6 | Research within my field of my colleagues. I do quite a bit of peer supervision with other music therapists and we’ll get together and discuss what’s been going on and what we need, what we might have an issue with. So that’s really important. Actually I think maybe (other music therapist)’s came to a couple of sessions but generally just a broad group, which is really good. |

| 11 | And I reported that back to her mother and to get the feedback from her mother saying that that had just made her day and that was the best thing she’s heard. That’s when you go that’s lovely, really really special. To get feedback from parents, I think that’s great. You know and they’re informed and see what we’re doing. |
| 11 | The other experience I just wanted to mention was when we had the open presentation at the end of the year and to see the parents come in. I think the parents were a bit taken aback on the day because I don’t think they were expecting to be involved in anything. But I think since then I’ve had a lot of feedback, like Keith has said that he’s had quite a few comments from people, really impressed, seeing how engaged their son or daughter were in the process. You know it’s been really great. |

| 9 | Feeling valued, getting that positive feedback really matters. It can be the littlest thing like someone saying ‘thank you that was fun’. That’s very much something that sustains me, that knowing there’s an element of appreciation for what we do. From staff, and from clients in their own way. I’ve had quite a few thank yous today |
which has been really nice, you don’t always get the thank yous but when you get the thank yous it’s really nice!

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I think that being a music therapist in the team, I think they’ve had a couple come through but it doesn’t feel like it was really an established role, like it was a sort of casual, certainly not an established thing. So I feel like that it’s being recognised as an established role and that it is there now, and I don’t see it as being taken away from the College now, like I think hopefully we’re there to stay. And it’s importance is respected and everyone’s been really grateful, really appreciative of the music therapy and the art therapy and the collaborative efforts that we’ve been putting in there. It’s been great having, having an art therapist there as well, really good to work together, having that creative arts team, our therapy team.

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My enjoyment of music in general, that sustains me. I think as music therapists we sometimes forget that it can be really good for us to actually enjoy the music, and it’s as much therapy that we can you know listen to a song and get enjoyment out of the song rather than be so focused on ‘why am I using this song’ or ‘why am ...’ you know that it can be a very enjoyable process just for us. Like I know I sometimes learn a song for a client and think ‘I actually really like this song too!’

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Sometimes I think you forget that - that’s right, I really love music. It’s why I’m doing this! You know, remember that I enjoy playing my instrument and I enjoy singing, it’s an enjoyable thing for me. You take away everything else, that’s what I love.

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It’s broadening, since I’ve started practising I think my tastes have just gone all over the place. I used to be quite selective. I love learning new songs, and I love exploring different artists. Which is one of the great things about being a music therapist is you get to have to be so open to new repertoire all the time and not be stuck on anything. I love to learn, I still love dabbling in aged care because I love all the old songs, love all old musical numbers.

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It’s just reading as much as I can and researching and staying informed.

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From the internet, I do if I’m working with a specific client and I’m trying to come up with interventions and ways of working with specific people. I would go to the internet, might do a general search but then find things that might find a journal article within that search, so the internet’s fantastic.

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I do have a lot of books that I’ve purchased over the years, some texts that I have borrowed from friends and colleagues.

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<td>I particularly like case studies. So when I can actually read about what might happen in a session and the way they tackle it and you'll see them using the intervention and it's sort of validating in a way. You go OK that's what I'm doing, it's a lot of validation I think for me as well and I think that's what that sounds right, what I'm doing is working. Definitely case studies.</td>
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<td>If I saw that client's got a similar disposition, that's relevant to my practice. I work with a lot of autism-specific material, and I try to do a lot of reading around autism and around what's going on. It doesn't necessarily have to be music therapy related, just work out the best ways I can meet their needs.</td>
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<td>If there's a lot of theory and not so much practical examples, there is no case study. I've read some texts that are very theory based and can get very wordy and very academic. When you're quite time poor and a busy person, you need something quick, you need to be able to access the information as quick as you can and use it. So if it's really wordy and becomes very academic, I would probably not read as much of it.</td>
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<td>I've gone to the conference and I like to stay on top of research, up to date research. I've read a lot of the older texts but it's nice hearing new research being done all the time. I like to see what people are doing, and that definitely influences my practice.</td>
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<td>10-11</td>
<td>Seeing the progress of this particular client who I just had. There was just absolutely no engagement to begin with, there was no eye contact. She wouldn't pick up an instrument, she really just didn't want to be anywhere near the guitar. And now to the progression from the start of the year where she will walk into the music room with me and sit down and choose an instrument, she used to even pick up an instrument I put in her hand to throw it down now she'll select an instrument and hold it and play it and give me eye contact and occasionally will give a word. There was just one session where I remember she smiled and I hadn't really seen her smile before you know. To see her smile and just, and I heard her say, she said 'happy', and .. which I know is one of the only words she says but she said that and she but, but with, with very much the right intention and a smile. And you know that was just yeah that was really lovely.</td>
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<td>I suppose the main thing that sustains is seeing progress. I think when you see changes and you see that you're getting responses, that's definitely my main thing that sustains my practice. When you’re making a difference. I’ve learnt to not have such huge expectations of myself or of clients, and look for the little changes and look for the little things, and not expect massive achievement. The little things can be big things.</td>
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I think there’s still the element of unpredictability of like every day is different. Every session is different, and you’ve got to really trust in information that you get from the staff about what’s going on for the client, if there’s been a medication change or they’ve had a bad week or they haven’t had as much sleep the night before and there’s gotta be a lot of communication.

I’m always after that first thing in the morning, wanting to know how everybody is, how’s the week been. Because I’m only there two days a week as well, a lot can happen from Friday to Wednesday, so I have to get all that information before anything starts.

Being surrounded by like-minded people, obviously that’s going to be inspiring. A whole lot of people that have the same sort of goals as you, I think it’s the best place to be, surrounded by your colleagues and that’s why it’s so good working in a team of five music therapists. Everyone’s got the same goals, the same intentions.

There’s a high staff ratio so it’s great, there’s a lot of staff support. Quite often in a group session I’ll have as many staff as clients, which is good. And the staff’s attitude is really important as well, most of the staff are fantastic, they very much try to be involved and join in and try to increase the clients’ participation or enjoyment which is really good, really important, so you get that involvement.

Chris is a fantastic Director and he’s got a lovely approach, everyone’s good, everyone’s got a lovely approach. We work on a really good level there, it doesn’t feel like anybody’s in charge of anybody, we’re all very equal, so it doesn’t matter who’s an educator, an OT or a you know that it’s all very level which is really nice. It doesn’t feel like anyone’s above anyone else, which is a really good situation. It’s a great team to be part of.

I think it could be. It would be good to see a speech therapist coming over and I’d like to have a little bit more input from other disciplines, I think with the art and music definitely transdisciplinary that how I’d describe it. We work a lot together and we feed off each other and she has a lot of the same goals as I do and a lot of the same theories and ideas so it’s a very collaborative effort, it’s good.

Each client has generally 1:1 support. So from the morning I know which staff member is working with which client, we know who’s with who. So generally I’ll talk to that person about what’s going on and they’re not always present for every session, but for the ones where there is that that element of unpredictability and you don’t know whether there’s a risk, then I sort of insist that there’s someone or that they’re always close by. Like I had a session today and there was a song that I wasn’t
Sure if was going to be OK, a Xmas song. So I was able to open the door and call out and someone came in to support me. So they’re always very close by, and there’s gotta be a lot of talking and communication throughout the day. In sessions, especially in groups there’s always quite a few staff members present.

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<th>I think being able to share resources and share ideas and get some supervision if you’re having difficulties, having problems. Having that support, and knowing you can get support from other staff members. When we’ve all got the same mindset and we’re also trying to achieve the same things it’s nice to have somebody who’s practising the same profession as you, that you’ve got that support.</th>
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<td>I suppose you’ve got the comparing yourself. Am I as good as her? You’re always, you’ve got that you know I’m worse at that, I’m terrible at that, comparing what I do to somebody, what somebody else has done that we’re all so different, we have different ways of practising but you’ve gotta be careful not to go ‘that way’s better than me’. So that may be the one area that might challenge. Because I suppose if you’re the only music therapist there’s nobody else to compare yourself to.</td>
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<td>That’s how it started, I was really excited when I first got the position, excited to be part of such a big team at Giant Steps of music therapists.</td>
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<td>If there are specific case studies or if I can be referred to a video. There’s quite a lot on youtube and videos that I can access. That can be very helpful.</td>
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<td>Watching other music therapists’ work</td>
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<td>There’s a few different videos, I suppose they’re like bloggers, that put things up. They can have some helpful interventions, and they can have quite a bit of information. I think you have to be careful, I watch things but don’t necessarily think that there’s going to be a perfect fit, it’s not like it’s a carbon copy that right, I can do that now. But it gives you some nice ideas and some inspiration, and having that video makes it a lot clearer than just being able to read it off a page. It’s seeing it in practice, especially with music therapy.</td>
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<td>There’s a guy, an American guy who’s actually good, he’s quite useful. I don’t know if you’ve seen the Rhythm Tree? He has a few good things I quite enjoy.</td>
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<td>I like to always be reading and researching and looking at the way other music therapists practice. I like reading about other sessions and what other people do because I think it’s a profession where so many people practice differently. We generally have a similar training, although there’s different training as well, but everyone has a different way of practising. So I can be influenced by other music therapists but then I can bring it in to my own way I want to practice.</td>
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<td>You can adapt things easily. It might be getting an idea but then adapting it for you or me. I think I find a lot of educational resources that maybe a teacher would use and adapt them.</td>
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<td>I’ve found resources that haven’t been directly music therapy related. I found this one woman who was running energisers. It was just for a classroom, for education for in between classes and had lots of really good rhythm related charts and poems and raps and movement exercises.</td>
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<td>8-9</td>
<td>To make it adapted for clients so it works for the client better. Whether it’s as simple as slowing something down or changing words. Using a different instrument or trying some different things. I think there’s gotta be a touch of creativity there, it’s not something you can just look up.</td>
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<td>There was great support and being able to talk to you, and being able to get advice from the staff, learn a lot more about the clients, I think that was really important. I needed a lot of background information about their triggers and what they liked and what they didn’t like and a lot of background information which took a long time. It wasn’t something I could just sit down and read from a file.</td>
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<td>I did a lot of reading to start with but it didn’t sink in until you know the person, until you get to know them on that level, that on paper it doesn’t make much difference. So I could read about things they didn’t like but it took a long time to really build that rapport and get to know them and work out how I could be of most benefit in the College. So to begin with, very, very challenging.</td>
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<td>Now I’m at the point where I’m feeling more comfortable about what my role entails and I’m very comfortable that I’m valued there and what the expectations of me are. I also feel like I’ve built a really good rapport with all the clients, and they know me, as it’s just as important for them to know me as it is for me to know them, to trust me and to know what my expectations of them are, and that we are not placing huge demands on them. So that itself has made the experience so much better over the year just for them too, the whole process of building rapport can be such a long process.</td>
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<td>Even when you have holidays and you come back, it’s almost like you’ve gotta rebuild a lot, so I found that was the big thing, having that time to get to know them and build the rapport and now I’m feeling really comfortable, really enjoying it. Feeling really part of the team as well which is really good.</td>
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<td>I was just thinking about the drum circle, and how I like the way music is intrinsically relationship-based. I think this year especially I’ve really noticed how so much of my</td>
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**Practice**

Practice is about the relationship I have with my client and how they relate to me, so that’s where the therapy really starts to happen. I think that’s something that’s just been growing more since I graduated that it becomes more clear that that’s where the therapy’s really taking place.

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<th>Not being too focused on outcomes. Trying to stay in the process and stay in the moment. That’s not the end for them, for your client to be able to sing a song, it’s more about the process and enjoying that, I think that’s really important. Not always just focusing on what are we trying to achieve. Being present in the moment, and seeing that engagement, that’s really important.</th>
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<td>That engagement. And it can be the smallest level of engagement but it’s still engaging and it’s still relating and communicating. I think it was at the Arthur Hull they said a drum circle is like this little mini-society, and there’s leaders, there’s observers, there’s followers, and I like that concept that we’re all just relating to music, such a beautiful way of being able to relate to each other and finding that. That’s definitely a big thing in my practice.</td>
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<td>I take a very client-centred approach. I’d say I probably come from a humanistic perspective. I like to see the client as a person first and the music comes after that, so I like a lot of the humanistic principles that I’ve read I think that suits my practice and informs my practice. I like the way from the humanistic perspective how they say the client’s existence is relational and it’s to do with where they relate to their society and the community and where they are. But I like the way that music is also very relational, how it relates, how the elements of music relate to each other and how a song might relate to a society and so I think that as an umbrella kind of perspective I really like that. It definitely informs the way I practice.</td>
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**Humanism as a personal philosophy**
Appendix J: Interview Transcript Excerpt for Bella

B: Thank you very much for your time.
Bella: It’s a pleasure.
B: So, the first bit, I might kick off by asking you a little bit about, tell me, ah how you came to study music therapy? How you chose it as a profession? And how you ended up working here at Giant Steps?
Bella: Well that, that’s quite a story actually, um one I still can’t believe myself, um. It was kinda due to an interest in Indian music that I .. went and studied Indian singing, um I’d always loved music and I’d always, um, sung in a music group and singing was particularly my passion, um, and I … went to study music therapy from a, a wonderful vocalist in India and, unlike most Indians he said well if you know what I’ve taught you now, he taught us some lovely exercises mainly for meditation and relaxation and he said if you um, if you want to use this as, as deliberate for other people, you can’t call it music therapy unless you have um, a qualification.
B: uh huh
Bella: And, sorry I hope this is not getting too long winded.
B: No
Bella: No, so and I thought this is something wonderful, this is something I would love to share with others and I think he also, um was the first person to really mention music therapy to me. Just sorta by chance and I thought what a wonderful thing that would be to, um, give people joy through music, I mean what is, that is the most obvious thing in the world ‘cause it does that to me, um and so I came back home and realised there was a music therapy course down the road from where I lived, like literally five minutes from home. And I thought ‘oh that’s a bit of an undertaking’, anyway I applied for the course um. Got into the course and thought ‘yes this is going to be a bit of a, bit of a hobby on the side’ kind of thing, ‘cause I was at home with the kids at the time and, had, had a big break from working in a whole different career.
B: Yeah
Bella: Um and the more I delved into the course and the more I just was thinking wow this is amazing! This is, this feels like this s so right for me, um. And I remember going to the first music therapy conference and suddenly I was like ‘I’m with like-minded people, these are the kind of, all these people are just like me!’ And that was beautiful.
B: Hmm

Bella: So um, yeah and um, I loved what I was doing and, had to go on a steep learning curve and um, loved every minute of it and um, did a .. prac here at the school.

B: Yes

Bella: Ah which was actually quite by chance too, it was kinda, it’s like the whole thing has just been fate. I can’t put it down to any logic, cause um, um there was only one placement. And it went to another friend of mine in my course. But because the course was winding up, um.. that, the head of our course asked, you know, could we have one more, ah place, and so, Giant Steps agreed to take an extra student and so we had this lottery with egg shakers, and I won the last place to be a student here.

B and B: :lol:

Bella: Yeah, so, so um, so I came here and um thought wow this would be my dream job, but I’m sure no music therapist will ever, ever leave this place because this is, this is an amazing place to work as a music therapist, so I just enjoyed it and, and lo and behold a position became available and I went for it and .. that’s how I came to work here. And yeah, it’s been wonderful.

B: How long ago was that?

Bella: Four years ago.

B: Hmm, excellent.

Bella: So time has flown and I’ve learnt so much, um, it’s been .. it’s been such a great thing to, to expand my skills and to work with this population. And it has taken me to places I never thought I would go and ..

B: Hmm

Bella: .. in terms of learning about, about autism, and about myself at the same time I guess.

B: Hmm

Bella: Yes, so, yeah.

B: Lovely, well .

Bella: Anecdote

B: Yeah, no that’s perfect.

Bella: Thank you

B: Um. So I guess leading on from that, I’m hoping you could give me, ah to describe your experience of working at the school?

Bella: Um.. it’s, it’s very intense, it’s a very intense environment. Ah, but it’s a very supportive environment and .. I really love the collaborative nature of working with speech
therapists, occupational therapists, teachers and an incredible team of educators, um. So, that has, really enriched my experience. So um, it’s kind of a .. joy that feeds itself because, um, you’re faced with challenges and you, you’re challenging yourself in what we feel you know, you can and can’t do and you get support from the team, it’s a very positive environment and um. So because you’re kind of supported you can learn better and enrich your work and then you can give back more to the students, so, um. Whilst its very full-on at times, you get so much back from the students and I think that yeah really sustains you.

B: Mm, it’s um, I’m very interested to know more about the collaboration, um and, if you can tell me anything you like about it – positives, negatives, challenges um gains, um examples of, of that kind of collaboration. Um yeah, I’d love to hear some more description of that.

Bella: Yes, well when I first started um, it was very daunting, sort of being part of a team, so many incredibly qualified people and especially the educators who knew, who know the students so well in such minute detail. Um, so it was kind of .. daunting to begin with.

B: Mm

Bella: And people’s expertise was so vast and then to be standing up there in front of a, a group delivering something um, was daunting but … then I, when you realise the support that everyone gives you, um, and I was lucky to work with some wonderful speechies to begin with who um, we did a music and speech program which was a really nice way to do a collaboration for me being not familiar with working as a team, so much I always kind of imagined how I’d be out there as a music therapist on my own, you know, lugging my cases around and doing a bit here and a bit there and um so .. It was good to, it was really great to have that input and it, it taught me a lot about their perspectives on autism and from which perspective they operate, and um using some of, some of the speech therapist’s um knowledge about the developmental stages of languages for example, and they were all very kind to give me examples of, um, what a child does at certain ages and so that was something that enriched my practice.

B: Uh hm

Bella: And they were very open to my creativity in terms of creating a song for a particular student and, and that’s a part of my job that I really love, the freedom to create something um yeah. A song which is, is a lot easier to, than making a physical item, so ..

B: Yeah

Bella: .. it’s something you know it’s a very expedient creative process

B: Yeah

Bella: .. that can make a different, difference to the students very quickly.
B: Creating something new?
Bella: Hm like a new song, or an activity through which they can express something, whether it be verbalising, vocalising..
B: ah mm and you do that um, generally on your own or with others?
Bella: The song writing?
B: Creating
Bella: I guess I gather little bits of information, I mean the speech therapist might say we’re working on this particular sound or this, how can we get the student to request something..
B: Mm
Bella: .. and, and then it may be that you take in to account the musical tastes of the student and what, what resonates with them and I guess you try .. I mean I tend to use a known song, or an existing song with word substitution. That works well, well and it took me a while to realise how powerful musical delivery really is with this particular population, and how, how much less of an assault for them it is to have a sung instruction compared to a verbal one, and how powerful that really is. And I guess once you really realise that effect then you use it even more.
B: Mm do you find that other people do as well?
Bella: Definitely. I love the, the, the school culture of music being, um, used in so many different ways and not just in the music session and, and the fact that, um the students get this, um, they get the reinforcement of the things that we do in music, translated into other settings so it’s not they come in, they do wonderful things in music and they go out and, and do nothing with it so that it feels like were actually doing something more meaningful..
B: Mm
Bella: .. than just having a lovely experience in music so um. It’s great that the teams can support us in that way. So I feel very lucky to have that support.
B: You mentioned support a few times, um, I’m interested to know what, what support looks like? What are some of the ways people in the team work and support each other?
Bella: Well for example you have, you’re singing a song with a student and they’re not holding the microphone properly. I’m you know, in the middle of a phrase of the song and I can’t help them with the microphone and then having someone who knows that’s exactly what that student needs right now is, um, jumping in and kinda pre-empting what they need um, and some of the staff are incredibly good at that..
B: Mm
Bella: .. which makes, makes it so much easier to keep the flow of the music for example. It’s, it’s just great having that kind of staff member who can really support you well. And I find ah there are many that can, not just you know, there’s the odd person who um when we get with them you know you are going to have a good session like there’s someone in every class that will support them, which is great.

B: That’s beautiful. Hmm … So there um.. Are there any other aspects of um, the experience of working here as a music therapist in the school that, that you would describe?

Bella: Um sometimes I guess because I have been with the older students, I spend a lot of time in the classroom um, doing other things, and sometimes I feel a little bit like um, I’m deviating a little bit too much from music, at times, but then at the same time like today was a very, very hot day and the students were, we were trying to keep the load quite light for them, nothing too challenging and we started singing ah some songs and suddenly, the students’ attention is just rapt, you know they’re all focused and they all wanna have a turn and suddenly you forget how hot it is and they’re all just joining in. And then you realise that there’s such a power in that and that, you know, even if other people don’t run to schedule the same kind of activities it’s really important for us to go in there and offer those kinds of opportunities wherever possible. Without ramming it down anybody’s throat as well and not thinking that our agenda is always superior to other peoples’ of course. I suppose. But about picking the right times and, yeah. Offering something really positive.

B: Mm. (Phone buzzes) Need to check your phone? Alright well is there anything else that you would describe?

Bella: About practice at school?

B: Mm. About what it’s like to work here?

Bella: Well it’s pretty full-on, it’s physically demanding, but I kind of um, I think you, you build up a stamina from working with that kind of pace, moving around a lot I mean, carrying a lot of equipment around and being a step ahead which you have to be because the students are, don’t appreciate things being disorganised or, or unpredictable, so um its, um, I feel like I’ve built up, you build up a stamina at the start of the year like this, its, you’ve gotta start again but I’m quite amazed with how much, how much we do in our weeks and how the stamina keeps us going, yeah.

B: Mm
Bella: The busier I get the more I seem to be able to take on.

B: Ah ha
Bella: Although there’s always self-care of course.
B: Yes
Bella: Which one has to bear in mind as well.
B: Yeah. We’ll talk a little about sustaining later.
Bella: Mm
B: Well alright well if it’s OK I’ll move onto the next one. Um so I’m hoping that you might be able to tell me what informs your practice?
Bella: Mm that’s a very good question.
B: Do you understand?
Bella: Yes
B: OK
Bella: Yes um. When I was studying. Ah we were introduced to a lot of different um, I guess, schools of thought on what we would draw from and to kind of shape our own practice and I always thought the whole psychodynamic, um, school of thought was, was, was the right, right model, was really the one that yeah that’s what it’s all about, its all that hidden stuff it’s all that you know stuff we keep inside and don’t get to express, and um, and I was never much of a behaviourist. Um in fact and I think in my personality, I like to be really spontaneous, I like to go with the flow, but when you’re working with autism of course you’ve got to be really organised. I mean you can still be spontaneous within parameters whey you know your kids, you know how far you can push it with them. But I always thought that the behaviourist stuff was so dry and, and ah joyless really but, through working with autism I, I, I’ve certainly discovered that it definitely has a place. And um. It’s kind of something I wish I’d learnt earlier to apply, apply in my own life just with my own kids and um, yeah, so I think that I can really appreciate the whole, you know, behaviourism um, focus to some extent. But I still feel like with the older students you know, you, they spend such a long time at school and they’ve learnt certain routines and ways of, um, getting through their day that they become quite reliant on that and sometimes I feel like they’ve lost maybe some of their self-expression. And that’s just by virtue of the fact that they need to survive through the day and not feel anxious and feel very, you know feel safe. But I sort of feel like we all need to kind of express something of ourselves, something spontaneous, something of our true self and it doesn’t really have to have meaning to anybody else but we all need to express. So it’s something, I’m still trying to, I guess find a way to bring that out in the students. I mean improvisation is a great way of doing that, but ah it’s very difficult in bigger groups to kind of pay enough attention to each individual sometimes.
B: Yep
Bella: On the other hand there’s so many benefits in a group setting where, you know all those social skills that are so, such a deficit with our guys that um, that those benefits outweigh the, the, what we can do with just a one-on-one kind of session.

B: Mm

Bella: So, and I think you know a kind of person-centred approach is really important, I think it’s really important to, and I kind of wish someone had said to me when I started was ‘get to know your students really well’. So I think you know once the student is really trusting of you, feels really safe with you, then there’s really nothing that they can’t do or they, they won’t want to interact with you in, if they feel that trust and I think that’s just so crucial..

B: Mm

Bella: .. um to really build that mutual trust and respect.

B: Mm

Bella: That’s big words but very important words for me.

B: Mm

Bella: And when you get to that point, then, they’re not feeling, their anxiety also reduces a lot and, yeah they start to share with you of themselves which is really wonderful and I think that, that definitely sustains my practice. That deeper connection that you, I’m sure any music therapist would say that that deeper connection is, is the reward. But what also informs, so I would say that the students really inform my practice very much in terms of what do they need, what would really be the best thing for them in this moment? Um. What do they need, do they need to be aroused, do they need to be um, calmed. So, so being in the moment engaging where they’re at, at that particular point in time it’s a, that’s what I mean about intense in the work that you’ve got to be really, on the ball with, sensing where the group is at and where the students are at. Um. So I think it’s very important, important so, another thing that I think informs my practice is what my colleagues do. And I kind of wish I had more opportunities, I know the opportunities are offered here to, um swap with another therapist and go and observe their sessions, so um, I kinda wish I, I’m trying to make a note to take more advantage of that in future, because um, it, it makes you reflect on your own practice and it makes you see what are the really great things that this person is doing, what is really engaging these students and taking that on board, so, I think sharing with other colleagues and seeing what they do is very helpful too.

B: Mm. So. You spoke about improvisation for example. Um, I’m interested to know where perhaps you source information, ideas that inform practice about, perhaps about improvisation specifically?
Bella: Yes
B: Techniques that you use.
Bella: Well I read the Tony Wigram bible on the subject really. Um. And there’s, lots of great ideas in there. So I, I would like to focus more on it, I feel like I haven’t sort of spent enough time really um, thinking about improvisation. I’d like to, I like to try and make up songs, and go to that level where students just taking the material that the students have and what they’re producing and, taking them to some kind of musical expression, but it’s very difficult often because ah a lot of the students are very prompt-dependent and they, um, may not understand that you can do whatever you like, yeah there’s no expectation, there’s no um yeah there’s no expectation about what you’re supposed to do. But I think it’s also very much about being really comfortable in the medium and what you’re playing in terms of where you want to echo and reflect, and take, take their music somewhere and yeah just supplying lots of different flavours for them to hopefully engage with.
B: Excellent. Um. So, when you are looking at um, things that inform your practice for example, um so you mentioned you know other colleagues, needs of the students, reading um .. What sort of thing makes you, um evaluate that information and decide mm this is right for me, this is relevant for me, or when it’s not?
Bella: Good question mm. I think .. I think if something resonates, I think it’s quite an intuitive thing. With me, that um something resonates with me, feels like it’s going to work for the students, and don’t know if I can put my finger on that really. Other than to say, to imagine myself using a particular technique that I see or read about, and, and if I can kind of visualise the students engaging with that and me being able to deliver that, um, then I think I would go yeah that feels right. But it’s yes .. I think it’s very intuitive with me.
B: Yeah. So what sort of sources of information do you find the most relevant?
Bella: I like books that are sort of, well edited that perhaps cover a subject in details where you get many different perspectives. So you get many different ideas from, from different ah approaches about how to do something.
B: Mm
Bella: Then you can kind of clarify, with yourself where you sit within that. Mm. If something’s so very formulaic I would just not, wouldn’t inspire me so much.
B: What do you mean formulaic?
Bella: Oh just you know some of the, those kinds of ah methods that have kind of been branded and franchised out and everybody’s doing them, ah in a certain way, and there’s no sort of scope for anything new to happen I guess it’s, it doesn’t really inspire me.
B: Right OK.
Bella: Although there’s always a place for structure and um and that’s something um, I’ve learned to appreciate when working in autism definitely.
B: :lol:
Bella: And how magical it is when you have all the right communications and, and it’s all very clear the board is up there and everything is there and the turn taking is there and .. and you give little rewards which is, you know to me, my own nature the whole rewards system to me is sort of .. it’s um, efforts and engagement should be its own reward you know, to do something, but then of course realising that um how much that little character, he cartoon character reward picture, means to somebody it’s, it’s just amazing that suddenly they’re doing, doing everything that you ask them to do because they get this little picture at the end. Um and how well that works and then how well regulated they remain and then how everyone benefits more. Yeah so um, it’s quite magical mm. But I think I sometimes like, overthink things too much perhaps so I’m kind of just going around in circles rather than sticking to the basics and, yeah keeping it simple.
B: Mm. So you mentioned about other colleagues being um, informing practice. Um. Can you think of any examples of that?
Bella: Mm recently I was down at ah the College and watching a colleague’s session. Um.
And just being the recipient of the session, and, just little things like, they were doing a dance on the board and she would announce loudly what the next move is, and so everyone knew what was going on like, I .. I could see how effective that is, and it sort of like I, I do it myself but sometimes I may doubt , you know, should I shouldn’t I? Sometimes I get a bit like hesitant about you know, am I talking too much, am I saying too much or. But then when I see other people do it I realise that, this is .. it makes it so clear. So it is helpful to see as an observer how different instructional techniques work.
B: Mm
Bella: So it kind of reinforces what works and what doesn’t work, just by ..
B: Watching someone’s ..
Bella: .. yeah watching someone else’s
B: .. music session.
Bella: Mm. And she had a nice drumming activity which was really simple I guess, um yeah just very simple but, it was all about participation and getting everyone involved and um, in a very, very easy to follow way .. and it um doesn’t have to be something musically complicated to be something that they get a lot of joy and enjoyment out of.
B: Mm
Bella: So that was a really nice thing to see. That um yeah just how you could do a session, and how you appear to others ‘cause you forget that sometimes and, even having read the observations of a recent session from an outsider perspective, you think, yeah all these things are there and they’re helpful, it just makes me more confident in, in what I do in terms of delivering instructions. But also new ideas about how to use instruments and how to use songs are always coming up, ‘cause we all, for example, you wold give um, everyone the same task to create maybe a song and it would come out, uniquely different for each music therapist like however many versions according to how many music therapists have, have done it.
B: So is this within a session, or amongst professionals?
Bella: Oh it’s just like if you asked everybody to write a song about something, on a specific topic, it would come out different, like everyone has a different interpretation, and a different ah emphasis in .. how they would create an activity for a group of ..
B: So this is music therapists or students?
Bella: Yes
B: Right sorry
Bella: Music therapists. Sorry I’m just not making much sense.
B: No it’s fine.
Bella: But I think we all um, have a different way of even say for example in our team when we um, come up with an activity and we all roll it out into our classes ah according to our students, they’re going to, they end up looking quite different sometimes.
B: Mm
Bella: And um for each one of us I think oh that’s the most obvious, that we will think that’s the most obvious way of doing this. But then we go and see how another person’s doing it and we think yeah .. that’s genius, you know I would never have done it like that. Or I would have done it slightly differently, but it really works, so .. um yes it’s really good to see what other people do.
B: Mm
Bella: And I think we’re lucky that we do have those chances, to do that. It’s one of the great strengths in the school is .. the collaboration.
B: Mm. Alright. Well, is there anything else you can think of, um on that question about informing practice?
Bella: I think it’s sometimes you get really bogged down in what you’re doing, and you’re, you feel like you’re just, kind of .. sometimes it loses meaning I think. If you’re just doing I don’t know, I think it’s just the end of a long year and you’ve been doing the same thing all over and you get to this point where you think I need some fresh ideas, I need to go in, wipe the slate clean and just, um start again, and kind of be creative. I think I’m in that kind of phase at the moment.

B: Mm

Bella: Um I think everything sort of runs in cycles really, sometimes you’re in the middle of a really creative phase and you go through a phase of kind of consolidation and then you reflect on something, and then start again. Um mm. And that’s when you kind of seek out .. new ideas I guess .. Sometimes I find just going out and making music with my friends and singing with them and they introduce me to new songs and, you kind of you have to feel really passionate about the musical material I think for it to kind of, flow through to the students.

B: Mm

Bella: So .. getting the right material and, and finding the right material and, finding things that inspire you is very important, um. ‘Cause if I’m not inspired I’m sure that the students will feel it. Um. You can’t really fake that I think. You can go through the motions, but only so many times and everyone will get bored with it :lol:, and you don’t want to get to that point where you just feel like a human jukebox. There has been times with some of my students who, well, one in particular who, um, was very regulated through singing but, at times he, there was a situation where he was waiting to be picked up for an hour I had to just keep singing, just humming this song to um just, for him to stay calm, and it started to become like ‘ I don’t feel like I’m making music anymore’ I, it doesn’t feel like music, it just feels mechanical, and I, I just really don’t want to get to the point because, not so much for myself but because I don’t, I’m not going to be an effective therapist, I’m not going to give anybody ese any joy or any opportunities to do anything great if, um if I’m not really feeling it myself.

B: Yeah yeah.

Bella: And so I think sometimes you’ve got to step right outside this environment as well, the school environment and kind of recharge your batteries it’s like what’s it Carl Jung said ‘when the well is empty you can’t get any water out’, so um, so you have to go and kind of um music or, make music sometimes in other settings or get that kind of um, re-igniting of your musical spirit. Um so that you can bring it back and yeah, I think that’s, that’s important
to sort of reflect on where you’re at and what you need in order to be effective and give the best to the students that you can.

B: Mm. Good point. Um the last thing and its leading nicely onto ..

Bella: Yes

B: .. you talked about that, was about, tell me a little about what sustains you in your practice here.

Bella: Definitely there is magical musical moments that you have with students when you really make some kind of deeper connection with them or there’s some kind of knowing between you and the student and they achieve something great or you can just tell that they are feeling very proud of what they’ve done and they’ve been just, just very happy. I think for most, I imagine for most music therapists that’s, that’s what really feeds back to you and gives you that inspiration to keep going :lol: um. So I think yeah it, don’t know I feel like there’s a bit of a calling for music therapists that there’s definitely, and I think that’s not just for us music therapists but anyone who works in this field they’re definitely very passionate about wanting to give back and um It’s just extremely rewarding to, to be able to give joy to someone who really needs it or to support someone who really needs it. I think that definitely sustains me a lot. Um ‘cause there’s always going to be difficult days and you know sometimes there’s days where, you know, you get um an unexpected reaction from a student um, but somehow I don’t know magically you kind of know that they’re, they’re not actually intending to hurt you, but they um, they’re having their anxiety and um they’re under stress.

So um, and that’s when I think you need the collegial support as well, and someone goes and says ‘just take a little bit of time out, you can just chill for a while, life will go on’, ah and to know that people around you are sensitive to that and also that I’m sensitive to others who may be feeling um, taxed in some way and to give them some space and time out for um because it can be, it can be challenging at times definitely.

B: Mm

Bella: But then the, the sort of wonderful thing about … happens when you sort something out or you avoid something escalating or you, you use music to bring a student back on track um. That’s a really good feeling as well so I think, there’s a lot of personal satisfaction doing this kind of work. Also that some kind of desk job in a you know finance sector of some company, not really for us I guess um .. Yeah and all the fun that you can have, I mean there’s so many, there so much humour as well around the place and funny things that happen and, and the students have such personalities and I think it’s just when you, you really get to understand them and know what makes them tick, and um, then there’s so much
entertainment and its creative um, I definitely couldn’t do a job that wasn’t creative, had some creative aspect to it, and there’s so many ways to be creative, you can be creative in the, the music session in what you deliver and how you use instruments and how you use music and songs. But you can also be creative in how you persuade someone to eat their lunch or, you know, all these other things and I think we’re lucky in that we get to see that perspective um of their lives and I think it’s something that, I guess not every music therapist may get to see if you come just come in for the session of music and then gone, but we see our students in many different environments, even you know going on camp with them, bunking down with them for the night and, and um just seeing how they get through their day it gives a much deeper understanding, well I don’t know if it’s much deeper but I definitely feel like it’s, it helps um help me know them so much better.

B: Mm

Bella: And although it’s, it’s hard work to be part of all those other things, um, it’s a really, it’s a great thing and it helps, helps I guess inspire me to find more ways to help them. And in ways that translate outside the music room too. It’s so, it’s all about sustainability. And even like having communication with the parents and telling them about the little victories that happen and if the student has done something wonderful on occasion and the parents will go ‘oh wow I think we might go buy a drum’ and um so and then supporting them in taking what they do at school to home if it’s something they really enjoy.

B: Mm

Bella: And it’s really nice to see. It’s really god to keep doing that, expanding that. The skills in that area.

B: Um

Bella: And I guess what sustains me too is having a break from it all from time to time :lol: I guess .. um.

B: Well yeah.

Bella: ‘Cause yeah you do, you do, you need to know your limitations too I suppose and .. yeah but, but I, you know I’m quite surprised myself with how, how much I get through in a day and how, how much happens and how, like I feel, I feel like I’m, I’m quite productive in this environment like I’m probably more productive than any other job I’ve ever been in. Um yeah I just really feel like you know I’m churning it out in many different ways, But I’m not getting tired in the way that I would doing other tasks perhaps. And I think that’s probably because um that’s giving back on a really meaningful deeper level for me.

B: Great. That’s a lovey description.
Bella: Mm
B: Um was there anything else you wanted to add about sustaining practice?
Bella: Ah sometimes I feel like perhaps we’re, we’re in such a bliss bubble here compared to
when you hear about other children with autism and their families and struggles they have.
And you know how um labour intensive it is to deliver what we deliver to these students it
kind of, yeah, it makes me wish that other, other young people out there could have the same,
same support um and sometimes it, it’s frustrating to think that it can’t happen but at the same
time it’s very important I guess to, to seek out the, the best practice possible so that we can,
but then it’s important I think that we share it, if we do find something that really could be
helpful it would be very important to share it.
B: Mm
Bella: Um especially in schools where I guess a lot of teachers have neurotypical children but
then they have one or two with autism and they don’t have many resources and they may not
have much training. Um yeah that’s kind of very sad and, we have such expertise here and
um, and so much knowledge, and it would really be nice to find a way to sort of communicate
that further afield, so we can support more children.
B: Mm. So that sustains you?
Bella: Yeah I, I guess, I always thought when I sort of started as a music therapist I’m going
to be writing things, I’m gonna be sharing things, I’m gonna be, you know, whatever I
experience, whatever I learn I want to share it, but I have been so busy just doing my job :lol:
that I feel like that’s, there’s just not a lot of time or energy left over, and I’m still kind of
wondering what it is that will be important to share. Maybe I’m not at that stage where
something has crystalized and .. um and that’s fine. Um that’s fine that it hasn’t and that it
doesn’t. I guess .. that’s OK but it would be nice to have some kind of pearls that can be
taken away :lol: yeah.
B: To share. Alright. Well just to wrap up and, and if you want some time to think that’s fine,
but um I’d love to end with if you’re able to share ah perhaps an experience of working here
that’s had some real meaning to you.
Bella: There, there’s so many. One would probably be, and it’s not even music related as, so
much, but it’s just having had this opportunity to sort of be in the classroom and interact with
the kids, ah one student who was very disengaged sitting in the back of the classroom and
um .. I don’t know, I just kind of started talking to him about his interests and, what he likes
doing, and um, he started really responding well and I don’t even think it was sort of me
planning out what I was going to say or do but I think there was some kind of resonance
between the two of us in, in the way we understood each other and um, kind of really brought him out of his shell and, and he started talking about his world, and what he was doing and, it kind of started to translate um, as he went into another class, this kind of conversational style with him kind of, started to take off and was just really nice to see him so interested and engaged with the world, and other staff who found it hard to engage positively with him took on a similar communication style and received lots of positive feedback, communication and relationship building from the student.

B: Mm

Bella: Um .. and it just made me realise rapport and that mutual respect, how important that is if you’re dealing with someone obviously who’s very verbal um. And others like a student who was quite developmentally delayed. Um, um he would just really sit ah, listen to music a lot all day and doing lots of tactile things like touching carpets and things but having no real interests other than music. Um and he was in a class with other students very, very challenging class, they all had very different needs and different sensory experiences and, and there was a student in the class that disturbed everybody um. And these guys could just not, sit and do anything table top together as a group. They could do very, very few things together um at the same time, be focusing on the board or do any kind of activity, there was just so much disturbance. Um. But I did a nice yoga, yoga and meditation session with them which some of them reacted to in the beginning. Um .. but I made up a little yoga sequence um and just to see them all doing the yoga poses, they were all lying on mats, there were probably the three most mobile doing the yoga poses. The student that I mentioned in the beginning who never really was interested in much, would sit and observe, he would not do the poses, ah he found that very difficult, but, he was attending to everything that was going on. So it meant that the attention of all the students was on the same task at the same time. And that was just such a joy to see that, they were going through the motions, they were, they were all together as a group doing something together, that was very nice. Um and it also regulated them really well.

B: Mm

Bella: They were no longer kind of upsetting each other with their noises and their, all the other distractions of their sensory systems that were dominating, so yeah just to see them following the yoga sequence and do everything together and, and I think it also um was something that staff really enjoyed. Um because they suddenly didn’t have to worry about student going after another student but we could do something together, something structured rather than always getting worried about the next move of our students, so that was really
nice, just seeing .. and one of these students, the student I mentioned just was unable to move from the classroom to the music room, um got a little Bluetooth speaker going and with his favourite song, um and he, once that was on he was happy to move between spaces. Um, and he’s also very gradually over this year really, um attending to the session. Whereas in the past he would just be demanding his iPad, and he’d be sitting with his own music, but now he is watching what is going on, he may only like, a couple of strokes on the djembe, um, but he’s engaged yeah in, as an onlooker perhaps, most of the time but, at least not thinking I just want to get back to my iPad. It’s just great to see that kind of development. And you know it’s hard to say that that is .. having the right support or whether it’s just simply like he’s, his brain’s growing he’s getting older and he’s opening up to the world or maybe it’s a combination of those things or its happening, in a happy synchronicity at a particular point in time, but it’s really nice to see.

Bella: So sometimes it changes very slow, um but there’s definitely change. And it’s, one just has to have faith that it’s going to happen at some point. 

Bella: Oh .. :lol: It’s very late in the year :lol: 

B: Don’t have to, just if you had something else you wanted to say. 

Bella: I’ll probably think of a million things when I get home :lol: 

B: Alright. Yeah? Ok, well thank you very much.
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