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Supervision with guided imagery and music offers graduate music therapists an experiential space for self-reflection and professional development

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identification process implicit in these kinds of identifications can be a resource for deepening clinical work. This viewpoint is seconded by Tansey and Burke, who state that potential for an empathic outcome also lies in the successful processing of complementary identifications.

Audrey Morse studied music therapy at NYU and obtained her AMT certification from Benedikte Scheiby's institute. She is an AMT trainer at Molloy University and has a private practice in New York. She previously worked in inpatient psychiatry, neurological rehabilitation, and dementia care. She is a psychoanalytic candidate at the Institute for Contemporary Psychotherapy.

### **Murphy M & Clark: Supervision with guided imagery and music offers graduate music therapists an experiential space for self-reflection and professional development**

Melissa Murphy and Imogen Clark

**Background:** Graduate music therapists face considerable challenges as they transition from the role of student to practitioner. They may experience conflicting feelings of excitement following completion of study coupled with insecurity about establishing themselves as professionals (Seah & Skewes McFerran, 2016). This presentation shares findings from a study that explored the experiences of new graduates who participated in guided imagery and music (GIM) as a form of supervision.

**Method:** Four participants engaged in a series of six GIM-based supervision sessions and participated in semi-structured interviews. Thematic analysis was used to explore the interview data.

**Results:** Our findings yielded a central theme of emerging professional development and five inter-related subthemes. Creativity: music listening and drawing played to participants' strengths, evoking alternative perspectives. Experiential learning: an opportunity to understand the client role while receiving facilitator modelling. Personal work: marrying the personal and professional selves. Transformation: awareness of how to be a music therapist as opposed to how to do music therapy. Reflexivity: recognition of deep interpersonal processes within therapeutic relationships.

**Conclusions:** The music was described as an agent in itself as well as a tool for dialoguing. Music therapy graduates described GIM-based supervision as an opportunity to explore their professional identity through creative and experiential learning. This led to the processing of complex feelings, deep reflexivity and insight into understanding their authentic self in the therapeutic space.

Seah, C. H., & Skewes McFerran, K. (2016). The transition to practice experience of five music therapy graduates. *Nordic Journal of Music Therapy*, 25(4), 352-371

Dr Melissa Murphy (PhD) is a Guided Imagery and Music (GIM) Therapist, Music Therapist, and Educator. She has worked in mental health, aged and palliative care, and the disability sector. Melissa currently works with children and adults with disability in the education system, community settings and in private practice.

Imogen Clark (PhD) is a Music Therapist and Senior Lecturer at the University of Melbourne. Her research with older people and their families focusses on how creating songs, singing, and music listening support exploration of important life events, connection with family and others, and feelings of pride and achievement.

## **Nebelung: Fix this child! Navigating expectations in music therapy for children and adolescents in challenging life situations**

*Ingeborg Nebelung*

Music therapists are accustomed to working with expectations within the realm of music – the pauses, humor, shifts in tempo and rhythm, modulations, and musical negotiations. They are well-trained for these aspects. However, when it comes to addressing the broader spectrum of expectations placed upon music therapy by clients, caregivers, and institutional leaders – expectations that can be multifaceted and often contradictory – music therapists face a significant challenge.

Consider a scenario where an adolescent adamantly declares, “Beat it – I don’t want any therapy!” while the parent expresses skepticism, stating, “I don’t believe this will work either – we’ve exhausted all other options,” and the institutional leader asserts, “Music therapy is the one and only solution – we believe you can fix this child!” In this cacophony of discordant voices, how do music therapists navigate this wide array of expectations?

Drawing from ongoing Ph.D. research, this paper explores how music therapists, in group interviews, describe their use of clinical skills as both musicians and therapists to negotiate, manage, and reconcile these divergent expectations, ultimately harmonizing the “choir” of voices.

Ingeborg Nebelung works as a music therapist, has focused mainly on children and adolescents. Now she is teaching at the music therapy program at the Norwegian Academy of Music. As a PhD fellow, her research focus is on expectations towards music therapy with children and adolescents in challenging life situations.