Book Review

Where Music Helps: Community Music Therapy in Action and Reflection
Brynjulf Stige, Gary Ansdell, Cochavit Elefant & Mérècedes Pavlicevic
Reviewed by Thomas Wosch

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The history
This recently published book by Brynjulf Stige, Gary Ansdell, Cochavit Elefant and Mérècedes Pavlicevic, is dedicated to Community Music Therapy (CoMT). As mentioned by Elefant in this new publication, the 10th World Congress of Music Therapy in 2002 in Oxford (United Kingdom) was something like a very strong outing and acknowledgement of CoMT in the field of music therapy worldwide, especially in its scientific community. Since that time several publications have been initiated and accompanied CoMT practice and research until today. I am thinking especially about the book Culture Centered Music Therapy by Stige in 2002 and his book (based on his PhD Thesis) Elaborations towards a Notion of Community Music Therapy in 2003, as well as the book Community Music Therapy edited by Pavlicevic and Ansdell in 2004. Since then lots of articles and online publications exploring aspects of CoMT have been published (for example, see Voices: A World Forum for Music Therapy, www.voices.no). It seems to be that, nearly ten years after the 2002 Congress in Oxford, CoMT practices and developments continue to grow and enlarge, so that we have now this new book Where Music Helps: Community Music Therapy in Action and
Reflection and together with it a milestone of practice and state of the art of theory of CoMT. This book presents an international research project on CoMT. This research was funded by the Research Council of Norway and took place in four countries in three continents, over a period of four years from 2004 until 2008.

The content

Eight case studies of CoMT practice are united and selected in this book. These examples of CoMT practice come from the Middle-European point of view, from the North, the West, the very East and the far away South. More specifically, there are two examples of CoMT from Norway, two from the United Kingdom (UK), two from Israel and two from South Africa. These locations are connected in the end of the book where their strong cultural differences are discussed. With Norway we have a little European country; with the UK one of the big countries in Europe; with Israel a very unique little nation outside Europe, whose culture significantly shaped European culture in history; and with South Africa quite another cultural background but shaped for some hundred years by European colonialism. So a music therapy, which centres cultural issues, is represented in this book, taking into consideration a broad range of cultural differences. Moreover, the worldwide changes, especially since the millennium shift, are represented in lots of the examples which are presented in this book. What touches in the Norwegian and Israeli examples are new ways of inclusion, in one UK example the growing differences between poor and rich in parts of the society, and in South Africa the old and new situation of Africans since the recent end of apartheid. In Israel most of the people are migrants, coming i.e., from East Europe and living apart with Arab people. In the UK you can feel globalisation perhaps most of all in the European countries. Norway has a long tradition of uniting very different cultures, i.e. in a small country with three official languages. All these facts are social and cultural challenges which can be accompanied by CoMT. All these challenges present also similarities in some places (e.g., in the UK and South Africa) with a growth of social differences of being rich and being poor. Another issue is the inclusion of people who are excluded from communities’ everyday life because of their conditions. For all these challenges and situations this book offers examples, impressions and music therapy case studies from the above mentioned four places in the world.

These impressions and case studies are followed by theoretical reflections. These reflections meet some of the basic ideas of CoMT: to be based on practice with a more constructive paradigm and getting knowledge direct from the complexity of practice especially in case studies. CoMT research is mainly done in a qualitative paradigm. Direct and complex results and theories from practice arise in this research. Because of this, case studies are the most needed sources of this research and reflections from these case studies are one step of moving from practice to theory. Moreover, the diversity in the theoretical reflections included in the book meet the polyphonic theoretical bases of CoMT principles (Stige 2003) with different results and focuses from all four authors. This can also be seen, that in the inductive way of CoMT research the case directly conducts the theoretical reflection of each case study, as well as the different cultural, theoretical and personal background of each author/researcher. But there are of course also overlapping outcomes to be seen in these results of theoretical reflections. One such example is ‘belonging’. Ansell comes to this result in his case study of “a socially and economically deprived area” of East London (p. 33). The observed outcome of this example of CoMT of “a modest and realistic mode of belonging” after five years contrasts with the social context of East London’s “deprived and hostile environment” (p. 62) and demonstrates a changed social experience. A similar special social experience of belonging is present in Pavlicevic’s case study and reflected by the words of one member who was part of her study: “Without music, I’m alone” (p. 241). One result of a case study by Stige is a ritual perspective, to which he gives future meaning within another theory with the following: “rituals pump the participants up with emotional energy that contributes to their feeling of agency and belonging in the society” (p. 147). Another kind and level of belonging is described by Elefant in one of her case studies with the citation of a member of a “two-group” CoMT with children with and without special needs: “They are Just Like Us” (p. 69). With the exciting wish of these children to continue with this project and the willingness of the community to make it possible, it means that both groups belong to this community and are a part of it in practice.

In the end of the book, all four authors/researchers reflect and discuss their results together. One new issue of CoMT that emerges is the idea of “the study of the outcomes of Community Music Therapy projects” and “quantitative surveys and statistical analyses of trends and developments in community resources” (p. 302). These are really new future perspectives in CoMT research. Also, one final result of all four authors is the idea of “Musical Conviviality and Hospitality” (p. 305), which can be and is created
and experienced in CoMT. In CoMT projects, issues regarding ‘living together’, ‘participation’ and ‘having a home’ are experienced; something that supports or develops trust, self-confidence and belonging in the members of these projects.

**Meaning**

This book gives space to and is based on eight case studies of CoMT in four different places of the world with different theoretical reflections and results of each, while general differentiated reflections and results of all together are presented. In this way, the book documents practice and theory of CoMT in a very detailed way and represents an important new step of the development of CoMT – in action and in reflection or, like we say, in practice and theory. One important issue of all practice and of all theoretical reflections is the participation of trained Community Music Therapists in this field of practice. This means that neither musicians nor music teachers would be able to accompany these projects and obtain the results observed in all eight examples. Music therapists are needed here, who practise and can do CoMT. From the outside all projects are music projects, but in their details and needs all these projects require trained CoMT practitioners. This issue of training could be communicated with the institutions and communities, which were responsible or gave the frame for these CoMT examples.

Lastly, it is worth mentioning that the long-term work of the CoMT projects included in this book can often contrast the application of music therapy in acute treatment and other places. Despite these long-term developments, single situations are described in the book with which the reader can feel touched by and can share this special CoMT experience and results. In a unique way this book brings together practice and theory. It is highly recommended for music therapy clinicians, researchers and students.

**References**


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*Suggested citation:*