



## Conference report

# The Second BAMT Conference

*'Re-visioning our voice: Resourcing music therapy for contemporary needs'*

Claire McCarthy

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*'Re-visioning our voice: Resourcing music therapy for contemporary needs'*

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University of Strathclyde, Glasgow, UK



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## INTRODUCTION

More than 300 music therapists, trainees and other professionals from the UK, Europe and the rest of the world attended the second conference of the British Association for Music Therapy (BAMT), which took place in the University of Strathclyde, Glasgow in April 2016.<sup>1</sup>

The weekend commenced with a Civic Welcome reception at the City Chambers in Glasgow. Piped in by music therapist, Rory Campbell, and formally welcomed by the Lord Provost of Glasgow, music therapists were received in opulent surroundings to drink fine wine as well as enjoy music by two music therapy students from Queen Margaret University,

Edinburgh. The Chair of BAMT Trustees, Ben Saul, then continued the celebration of getting together, leading the music and dancing late into the night in the Student Union, with music therapists joining in the jam.

## PLENARY SESSIONS

The plenary session speakers highlighted the need for music therapists to innovate, improvise and collaborate. Music therapists were encouraged to engage in skill sharing and partnership while still remaining confident in our specialism and individual expertise. The plenary sessions were followed by a 'talkshop' which allowed many voices from a variety

<sup>1</sup> For the conference proceedings, see Aravindh, Pavlicevic and Watts (2016).



**Photo 1: Music therapy students from Queen Margaret University, Edinburgh provided perfect accompaniment to the evening with background jazz music: Jeremy Devlin-Thorp and Meg Dowling**



**Photo 2: Welcoming music therapists to Glasgow at the splendid City Chambers**

of Trusts, third sector and freelance therapists to be heard. Isolation in practice emerged as an important theme. It is clear that collectively we are facing change in the health and social care landscape and that there is a need to share our expertise and experience across organisations and countries. Discussion commenced with therapists beginning to express ambitious and strategic ideas about lobbying government and informing policy. Ben Saul acknowledged the need for BAMT to take a steering role in such strategies and to support therapists across the UK to become involved in strategic groups.

### **Lang may yer lum reek! (Lit. Long may your chimney smoke!) Music therapy in a changing landscape (Kate Pestell and Emma MacLean)**

Kate Pestell (Head of Arts Therapies, NHS Lothian) and Emma MacLean (Lead Music Therapist, NHS Lothian) opened the dialogue on Saturday morning to outline the opportunities and challenges ahead for arts therapists considering both the changing landscape in the healthcare system in Scotland and the changing needs of the population. Among the questions posed was how do we hold on to our professional identity and unique contribution at a time when limited funding may put us in competition with our colleagues in arts in health? Particular emphasis was placed on partnership working to develop a continuum of music and arts in health and social care. They encouraged us to be outward facing, by developing partnerships with other agencies, finding strength in the affiliate disciplines of the arts therapies and further defining our roles *within* our professional workforce.

The speakers asked the audience to consider a definition and how well it communicates to commissioners the need, justification and effectiveness of our brand of therapy. Issues around evidencing effectiveness, and use of appropriate methods of measuring outcomes and evaluating patient experience were discussed between the clinician and the service manager. The subsequent conference buzz highlighted concerns around delivering a service that was both 'high quality' and 'low cost' and questioned where and how the freelance music therapist might fit in to this changing landscape.

### **Creative and credible: The challenge of coproduction in evidencing and developing music and arts for health and wellbeing (Norma Daykin)**

Norma Daykin (Professor of Arts as Wellbeing, University of Winchester) led the second plenary address by examining the broader landscape of music and arts for health and wellbeing. Professor Daykin presented the challenges faced in evidencing the contribution of the arts, including the difficulties faced explaining the 'effects' of the arts, when, where and why to carry out evaluation, and explored the case for standard evaluation frameworks. Despite the demand for evidence of measurable outcomes by commissioners and stakeholders, there are limited standardised methodologies for evaluation of the impact of arts

on health and wellbeing. This strategic talk encouraged the audience to consider what is involved with evidencing and evaluating the use of arts in health and why we should invest in doing this. Central to her presentation was the need for coproduction in evaluating process and effectiveness, to include stakeholders (funders, service users and carers) in developing sustainable and evidenced interventions. Daykin highlighted the need for arts therapists and arts practitioners to engage in coproduction to develop a common language when appealing to and working with commissioners and stakeholders.

Again the focus on collaboration in a somewhat competitive environment seemed to function as a positive message for development of high quality yet cost effective arts-based health and social care.

### **Music therapists – a small band with safety in numbers and stories – leading, marching and playing with the beat (Stephen Sandford)**

Stephen Sandford (Head of Arts Therapies, East London NHS Foundation Trust) delivered the final plenary address. Using the backdrop of his own professional journey, Sandford mapped the evolving state of the music therapy profession using numbers, stories and songs. Despite the undeniable financial pressure, Sandford reinforced to the audience that as a profession, music therapy continues to grow faster than any other Allied Health Profession. There is a passion and drive to move the discipline forward and to develop our work through sharing. Within Sandford's playful and humorous delivery were strategic models of partnership working. In proposing a design for a tiered approach to music therapy intervention and service, Sandford presented the work of the East London NHS Foundation Trust's Arts Therapies team which has focused on training auxiliary therapy support to use the arts in compassionate care as a bridge from treatment to maintaining wellbeing.

There was a sense of excitement in the room as Sandford's passion, creative thought and innovative ideas were shared with the audience. In our eagerness to appeal to the wider world in healthcare and share a platform with bigger professions, Sandford highlighted our tendency to often omit the music. His energetic delivery served to both congratulate and inspire the room, while reminding us of our core values as music therapists and health professionals.

## **ORAL PRESENTATIONS AND ROUNDTABLES**

The weekend's oral presentations offered ways in which practitioners could re-vision their voices and resource music therapy for needs across the lifespan. Subject matter ranged from partnership working; short-term intervention; developing practice guidelines; formulating research and evaluation methods to pioneering music therapy in unfamiliar settings. Like many music therapists I am continuously exploring new means of measuring what I do. It was inspiring therefore to hear about the wealth of research that is taking place in music therapy, and the ways in which practitioners are designing assessment tools and outcome measures for use in partnership working and to develop practice.



**Photo 3: The civic welcome reception was a wonderful opportunity for catching up. Pictured: Philippa Derrington and Clare Reynolds**

Rebecca O'Connor and Dee Gray's (2016) presentation of the use of music therapy research to develop services in the neuro-rehabilitation hospital in Dublin, Ireland (where music therapy does not have statutory recognition) was an inspiring means of demonstrating the many capabilities of music therapists and the possibilities for development when we share what we do and work collaboratively. Both therapists work as part of a multi-disciplinary team in developing assessment protocols for awareness and responsiveness in patients with Prolonged Disorder of Consciousness

(PDOC) with their families. In addition to the benefits of developing research alongside practice, the unique contribution of music therapy to the assessment of awareness and responsiveness in patients with PDOC was also highlighted through video clips of the therapists' work, which taking place in a highly medical environment were often moving and emotive.

The overarching theme of re-visioning, re-defining and resourcing music therapy did not lose its urgency over the course of the weekend. With a staggering fifty talks, papers and presentations to choose from in the programme, I was left overwhelmed by both the potential and the pressure in music therapy as a profession. I was grateful of the space to take stock in Saturday's round table: *'Being pioneers in the 21<sup>st</sup> century: The state of the art of music therapy in six counties of the UK'* (Sutton, Nugent, Ward, Roche, Li, Harbinson and Wooderson), where therapists' identities, journeys, and achievements were considered against the backdrop of political uncertainty in Northern Ireland.

Here, the growth of music therapy in Northern Ireland from one to over thirty music therapists in the last thirty years was discussed with respect to the creative approaches taken to develop, maintain and sustain their work. All six therapists representing a range of cultural and training backgrounds presented their experience as 'outsiders', leading music therapy in a country familiar with cultural tensions, and considered what support and skills are necessary to navigate work as music therapy pioneers. I was struck by how powerful the exploration of themes of professional identity, isolated practice and cultural differences was when considered from six contrasting voices. Cultural issues in the therapy room between therapist and client were considered with respect to nationality, first language and religious background.

As music therapists we are all, to a large extent, outsiders, and professional differences in our places of work can often introduce similarly challenging tensions and impact on our sense of professional identity and belonging. The therapists' innovative approach to developing their practice was not only evident in how they have set up work and reduced resistance to working with the tensions of insiders/outsiders but also in their approach to writing this discussion. Through group musical improvisation themes such as identity, cultural awareness, diversity, isolation and support emerged. Excerpts from the first and last musical

improvisation were played at the beginning and end of this roundtable respectively, allowing time to reflect on what unites us in an often isolating profession. The development of one voice was evident in the music and the group expressed hope to continue to meet to play, reflect and support one another in the future.

The remaining round tables explored the ever-present issue of defining and explaining music therapy among non-music therapists; developing collaborative relationships to improve access to music therapy where direct therapeutic work is not possible due to lack of resources; developing music therapy in the field of perinatal clinical services; examining approaches in delivering intensive music therapy for young children with autistic spectrum disorder; developing music therapy services for children in NHS hospital settings; and exploring the needs of freelance music therapists to promote professional approaches to fostering sustainable freelance working.



**Photo 4: The Barony, a spectacular venue for the conference meal**



**Photo 5: 300 music therapists and a ceilidh! An evening of dancing followed the conference meal, led by the Drams Ceilidh Band**



**Photo 6: BAMT area group (Scotland) pop-up meeting over lunch**

## WORKSHOPS AND POSTERS

The variety of the workshops demonstrated the skills of so many music therapists. Practical means of re-visioning and resourcing music therapy were offered through focusing on inherent resources such as the voice and musical cultures in practice; partnerships with technology; skills sharing; and learning to market, brand and disseminate music therapy research and practice to the public.

A wealth of work was displayed in the form of posters over the course of the weekend. Innovative work with clients across the lifespan was on display and many presenters were available to engage with attendees as they viewed the material. Richard Murison (NHS Oxleas Foundation Trust) was the Delegate Poster Prize winner for his presentation '*All change: A therapeutic model of transition support*'. Claire Gillespie's poster entitled '*Creative connections: Intensive interaction training in a residential service for people with profound and multiple learning disabilities*' won the scientific committee vote. Both the visual representation of the work and the work itself was received as highly relevant in re-visioning and resourcing music therapy for contemporary needs and a clear role for the music therapist in consultancy and education was again identified.

## SUMMARY

Although the wealth of presentations, the number of experienced researchers and practitioners in the field and good company could well have justified another day in Glasgow, the conference came to a

close on Sunday afternoon. Those seeking inspiration, contact and dialogue will not have been disappointed. It is a busy time for music therapy and indeed the arts therapies in the UK, and it is encouraging to witness the growth of music therapy and the innovative ways colleagues and partners are creating opportunities from the hub of London to the extremities of the Shetland Islands. Music therapists are outward facing in their approach to health and social care in the UK and in taking their place on the changing landscape. The opportunity to spend time within our professional group is invaluable. In isolated practice it is perhaps too easy to remain an 'outsider', which can have a negative impact on the growth of the profession, and indeed services. By first sharing the work music therapists can become stronger and more confident in wearing our 'many hats' to grow, develop and make music with others.

## REFERENCES

- Aravindh, U., Pavlicevic, M., & Watts, G. (Eds.). (2016). *Book of abstracts: Re-visioning our voice: resourcing music therapy for contemporary needs (The second BAMT conference; Re-Visioning our Voice: Resourcing music therapy for contemporary needs)*. London: British Association for Music Therapy. Retrieved from [www.bamt.org](http://www.bamt.org)

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