

ARTICLE

Exploring music therapists' attitude toward wellness for successful ageing and its inclusion in music therapy training curricula

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ABSTRACT

Older adults worldwide are living longer and remaining active, contributing members of society. This unprecedented growth presents challenges for public health organisations, families, and communities who would benefit from taking proactive measures to treat this growing population (National Institute of Health, 2016). Some older adults may turn to music to attain a well-rounded healthy lifestyle. For this study, the author aimed to explore currently practising music therapists' attitudes about: (a) their personal wellness, (b) personal philosophy toward wellness and including wellness interventions in music therapy programmes targeting successful ageing, and (c) how wellness for successful ageing was presented in their training programme. A 32-question survey was sent to 207 currently practising board-certified music therapists in the southeastern region of the United States. The return rate was 32% (N=67). While only 19% of respondents reported feeling satisfied with their educational preparation for working in the wellness environment, 63% indicated a belief that studying wellness for successful ageing is relevant to the practice of music therapy. Strong correlations were found between healthy lifestyles and personal philosophies toward wellness and music therapy. Many music therapists will find themselves working with the ageing population. Constant re-evaluation of music therapy training curriculum from clinicians, educators and supervisors focused on wellness for successful ageing requires consideration.

KEYWORDS

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wellness,
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ageing

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INTRODUCTION

Advancements in medicine have changed the way people live, how long people live, and how people define well-being. As such, well-being or health is not only the absence of disease or disability (Hooyman & Kiyak, 2008) but also the presence of psychological, social, emotional, and spiritual development (Belgrave, Darrow, Walworth & Wlodarczyk, 2011). The World Health Organization defines health as "a state of complete physical, mental, and social well-being" (World Health Organization, 2017, par. 1). Thus, wellness is important for both young and old.

Currently, much attention is directed toward successful ageing in response to the baby-boomer population reaching the age of 65 and over. This demographic shift is unprecedented in the United States and requires consideration in how its growth will impact society and the ageing. In 1900 the 65-and-over population was three million. In 2010 the population grew to 40 million, and by 2030 it is

predicted that older adults will constitute nearly 25% of the United States' population (Hooyman & Kiyak, 2008). Older adults are living longer, retiring later, and remaining active, contributing members of society (Irving & Beamish, 2014). Therefore, perhaps an even more appropriate definition for wellness for successful ageing should include an emphasis on "the ability to live and function in society and to exercise self-reliance to the maximum extent possible" (Saxon, Etten & Perkins, 2010, p. 301). This demographic shift is unprecedented in the United States and requires consideration in how its growth will impact society and the ageing.

Many older adults are finding that music is helpful in achieving a well-rounded, healthy lifestyle (VanWeelden & Whipple, 2004). Music therapists frequently serve this population via retirement centres, rehabilitation facilities, senior centres, and wellness programmes (AMTA, 2005). Considering the increasing need for assistance related to the well-being of older adults (Hooyman & Kiyak, 2008; Irving & Beamish, 2014) and the meaningful role that music plays in their lives (Clair & Memmott, 2008; Cohen, et al., 2008; Creech, et al., 2013; Vincent & Velkoss, 2010; Yenilmez, 2014), incorporating wellness for successful ageing courses into music therapy curricula may be advantageous.

In the last 20-30 years the demographic composition of the United States has noticeably changed. For those completing music therapy degree programmes in the '80s and '90s, the effects of the baby-boomer generation had not yet occurred. Not until 2011 did the baby-boomer generation begin reaching the retirement age of 65+ (AARP, 2010); and it will continue to do so at the rate of 10,000 per day for the next 19 years ((Heimlich, 2010). For this study, the purpose is to explore currently practising music therapists' attitudes about: (a) their personal wellness, (b) personal philosophy toward wellness and including wellness interventions in music therapy programmes targeting successful ageing, and (c) how wellness for successful ageing was presented in their training programme.

REVIEW OF LITERATURE

Active music-making can be beneficial for older adults (Belgrave, et al., 2010; Bruhn & Clair, 1999; Clair & Memmott, 2008; Cohen, Bailey & Nilsson, 2002; Creech et al., 2013; Johnson, Deatrick & Oriol, 2012). Through singing, instrument play, active music-listening, and movement, older adults experienced increased levels of enjoyment and self-awareness during exercise (Bruhn & Clair, 1999; Johnson, et al., 2012; Stork, Kwan, Gibala, Martin & Kathleen, 2014). Cohen, Bailey, and Nilsson (2002) found that music experiences received the highest rating possible in their questionnaire exploring the importance of music to the lives of older adults. Older adults rated music-making opportunities equal to relationships with family and personal health (Coffman & Adamek, 1999). Some older adults have even described music as a life-enhancing tool, as "a way to survive" and "breathing a hole in my life" (Mulangi, 2013 p. 89). The aforementioned research emphasised the importance of music programmes (e.g., choirs, music education, and music therapists) to maintaining quality of life.

Piano-based wellness classes also provide opportunities for older adults to achieve wellness goals. Wellness-enhanced keyboard lessons were effective in decreasing ageing participants' anxiety, depression, and loneliness scores (Bruhn & Clair, 1999). Individualised piano instruction enhanced executive function and working memory in older adults, suggesting an opportunity to meaningfully address age-related issues of cognitive decline (Bugos, 2007). Active music-making experiences, as opposed to passive music-listening experiences, strongly affected older adults' thoughts and feelings, and promoted cognitive functioning, stress relief, and development of coping skills. These active music-making opportunities further address issues related to quality of life, social engagement, personal well-being and feelings of accomplishment; primary factors that senior citizens identified as important to maintaining a high quality of life (Coffman & Adamek, 1999). Active music-making, accessibility to programmes, and participation in music-focused activities are ways that improve the well-being of older adults.

Another valuable music opportunity is through group-singing interventions. Music therapy group-singing techniques enhanced mood, energy, happiness, and even decreased pain for older adults (Clements-Cortes, 2014). Interventions facilitated in group settings may also have health-maintenance benefits. Therapeutic group singing enhanced respiratory function (Segall, 2016; Yinger & LaPointe, 2012) and has also been shown to delay or rehabilitate age-related respiratory issues (Baker & Uhlig, 2011). Intergenerational choirs incorporate active music-making by combining individuals from different generations. Older-adult participation in intergenerational choirs improved levels of self-esteem, feelings of usefulness (Belgrave, 2011) and served to positively alter age-related perceptions (Darrow, Johnson, Ollenberger & Miller, 2001).

Music functions in other ways to enhance quality of life, such as motivation to exercise. Although exercise is a critical component for the ageing population, finding the motivation to do so can be challenging. Incorporating music can affect motivation to exercise by encouraging movement, on-task behaviour, levels of exertion, enjoyment, and participation in group exercise classes through the use of preferred music (Johnson, Deatrack & Oriol, 2012; Stork, 2014). Listening to preferred music often increases participation and adherence to exercise protocol (Stork, 2014), making it a viable resource for the ageing population (Creech et al., 2013). Identifying music preference is key in addressing patient goals through musical engagement (Vanstone et al., 2016).

The aforementioned literature supports the value of music therapy in maintaining wellness for successful ageing. Therefore, it seems important that music therapy training should include wellness-focused coursework concerning the ageing population (Cohen, et al., 2002; Johnson et al., 2012). To date, there is a dearth of research examining the inclusion of wellness-focused curriculum in music therapy programmes.

The specific questions that guided this research study were:

- 1) What are currently practising music therapists' attitudes on personal wellness?
- 2) What are practising music therapists' personal perceptions regarding the importance of including wellness for successful ageing-focused curriculum in their academic curriculum? Or, in other words, since they have already concluded their education and are currently practising clinicians, do they perceive that additional training in wellness-related areas would have been applicable to their clinical practice?
- 3) Is there a relationship between therapists' personal wellness attitudes and personal philosophy toward wellness for successful ageing in their academic curriculum?
- 4) How was wellness for successful ageing presented in academic instruction?

METHOD

Research participants

Since a similar study has not been previously conducted, sampling was limited to practising music therapists in the southeastern region of the United States for an initial investigation. Participants were identified through the American Music Therapy Association (AMTA) website listing of currently practising music therapists. The researcher obtained email addresses with permission from the AMTA. Only individuals whose names were included on the AMTA's list and had a viable email address were included in this search (N=207).

Survey

The dependent measure was an online survey created by the researcher through Qualtrics™. This survey was adapted from Wuest (2009), who explored the inclusion of spirituality in the social work education curricula and utilised components of the TestWell®: Wellness Inventory for Adults (National Wellness Institute, 2016). The TestWell®: Wellness Inventory for Adults was developed by the cofounder and president of the board of directors of the National Wellness Institute, Dr Bill Hettler. The inventory focuses on the *6 Dimensions of Wellness* as defined by the National Wellness Institute, and includes a social, occupational, spiritual, physical, intellectual, and emotional dimension. The current study's survey consists of 32 questions pertaining to participants' attitudes regarding personal health as taken from TestWell®: Wellness Inventory for Adults, the importance of wellness for successful ageing-focused curriculum in music therapy programmes, their music therapy training, and their personal philosophy of wellness as used in the TestWell®: Wellness Inventory for Adults. Responses to questions utilised four- and six-point Likert-type rating scales, multiple-choice questions, and free response. A copy of the survey instrument is included in the Appendix.

Procedure

A cover letter was sent via email to potential participants. Within this cover letter, participants were informed about the study and its purposes, and invited to participate. Participants were informed that Institutional Review Board approval had been granted and that participation was voluntary. At the bottom of this letter was a Uniform Resource Locator (URL) address that directed participants to the online survey. In an effort to enable participants to more clearly respond to questions regarding music therapy and wellness for successful ageing, the following operational definition as constructed by the AMTA was provided.

Music therapy in wellness involves the specialized use of music to enhance quality of life, maximize well-being and potential, and increase self-awareness in individuals seeking music therapy services. A client may be a candidate for music therapy when a cognitive, communication, psychological, educational, social, or physiological need might be ameliorated or prevented by such services (AMTA, 2018, par. 2).

The survey took about five minutes to complete.

RESULTS

Surveys were sent to 207 practising music therapists. Of these, 67 completed the survey, resulting in a 32% return rate. This rate of return is within acceptable limits according to the current rate of online and web-based survey participation (Hoonakker & Carayon, 2009). Demographic responses showed that 92% were female and 8% were male. Length of clinical practice ranged from one to 30 years, with 48% of the respondents indicating having practised in the field less than five years. These demographics are consistent with data in the music therapy field (AMTA, 2011).

What are currently practising music therapists' attitudes on personal wellness?

Participants reported engaging in physical activity 20-30 minutes a day 2-3 times per week (45%), keeping informed about current issues (51%), enjoying their work (94%), avoiding foods that are high in

fat (31%), and avoiding the use of tobacco (91%). Respondents expressed some satisfaction in their balance between work time and leisure time (40%) and nearly every respondent reported feeling that life has a positive purpose (96%). The Likert data suggest that music therapists who have responded to this survey may have physically active and professionally rewarding lifestyles. Figure 1 displays results from respondents' answers to personal health questions taken from TestWell®: Wellness Inventory for Adults.

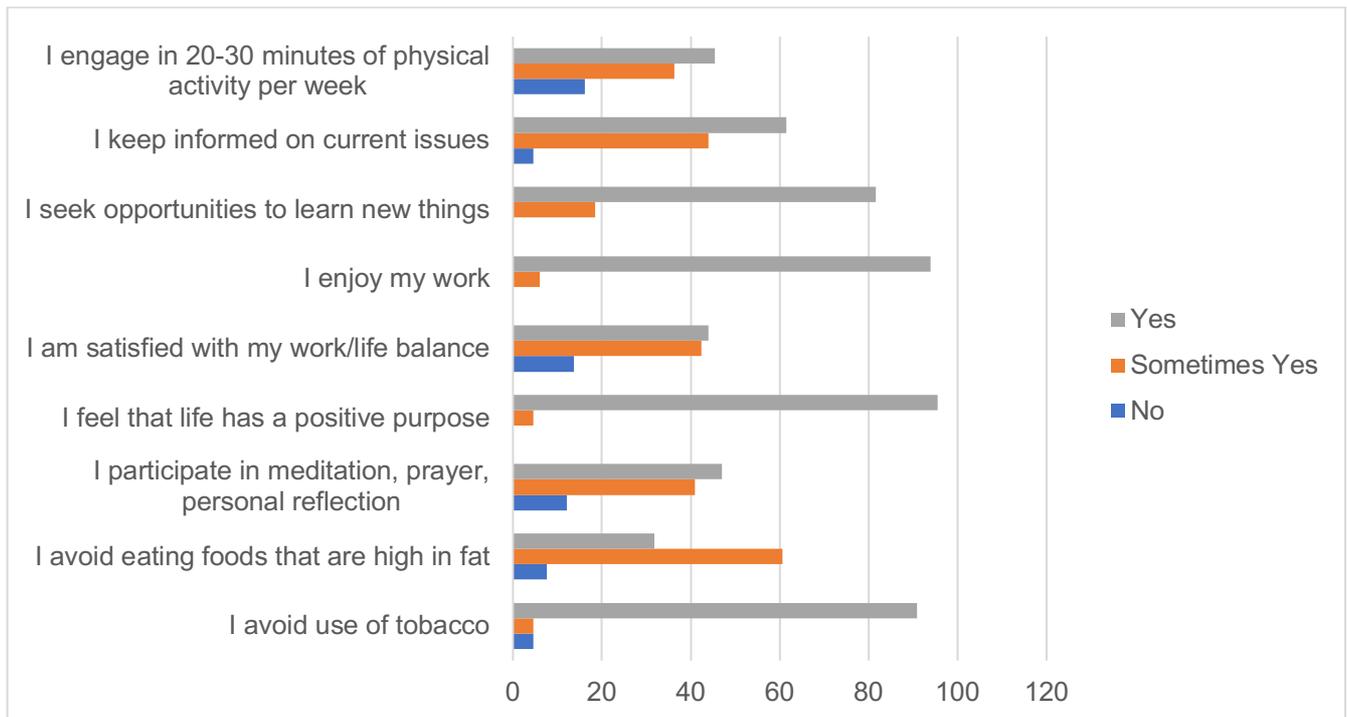


Figure 1: Personal Health – Questions taken from TestWell®: Wellness Inventory for Adults

What are practising music therapists' personal perceptions regarding the importance of including a wellness for successful ageing-focused curriculum in their academic curriculum?

Sixty-three percent (63%) of the respondents believed that wellness for successful ageing is relevant to the music therapy curriculum, while only 19% indicated feeling satisfied with their educational preparation for working in the wellness environment. A majority of respondents supported the statements that "Wellness is essential to maintain a high quality of life," "Wellness for successful ageing courses are important/should be taught within the music therapy department," and "Understanding the relationship between wellness for successful ageing and music therapy is important for a well-rounded music therapy degree programme." Thirty-six percent (36%) indicated that wellness for successful ageing issues are not appropriately addressed in current music therapy programmes. The personal perceptions regarding the importance of wellness responses are displayed in Figure 2.

Although music therapists reported that they feel strongly that academic instruction and music therapy training at the institutional level needs to include more information about the role of wellness for successful ageing in the curriculum. When compared to other areas of practice, such as medical music therapy, hospice, psychiatry, and special education, however, wellness for successful ageing received the least support. Figure 3 explores how strongly music therapists agree with each area of practice being included in music therapy curriculum.

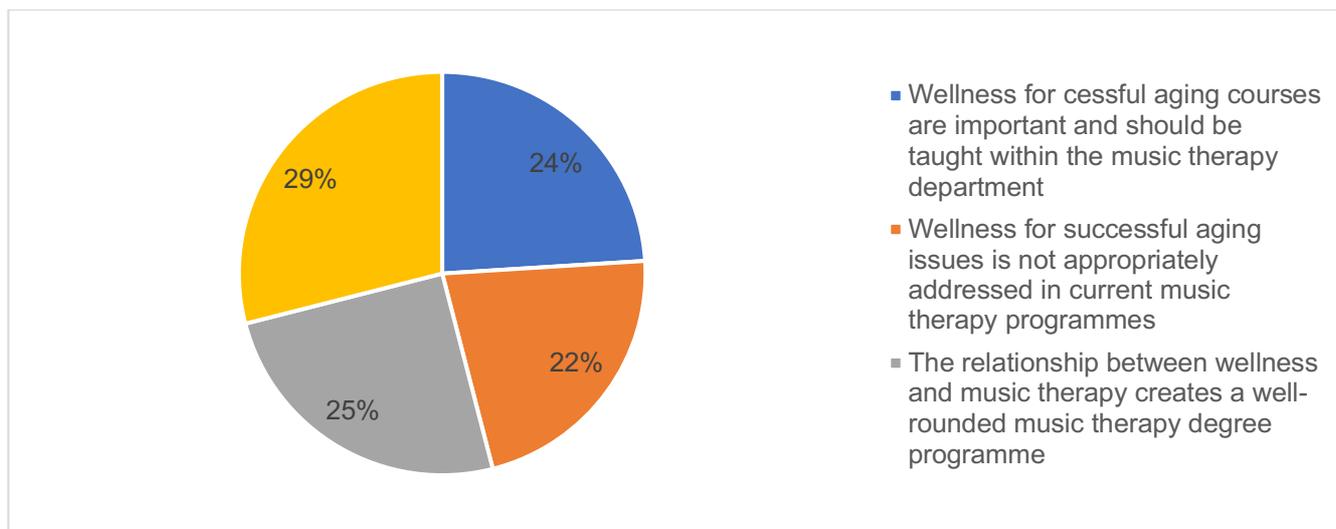


Figure 2: Perceptions regarding the importance of wellness

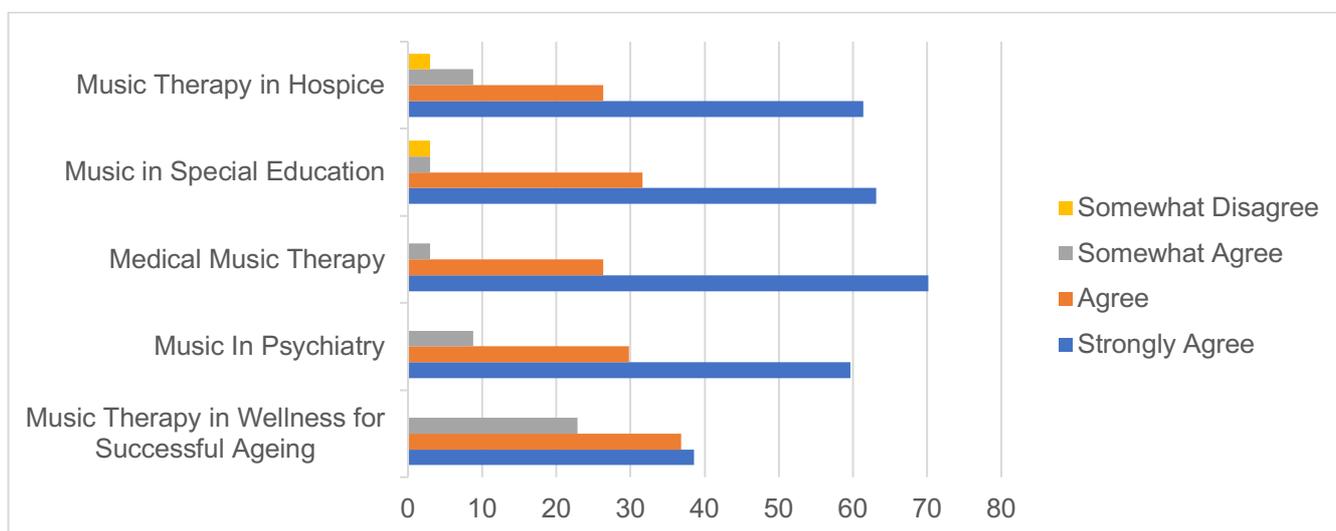


Figure 3: Perspectives of curricular importance in music therapy

Is there a relationship between music therapists’ personal philosophy toward wellness and including wellness interventions in music therapy programmes targeting successful ageing?

Twenty-two percent (22%) of respondents supported the idea that courses on wellness for successful ageing in music therapy are important to maintain a well-rounded academic music therapy programme, and 29% agreed that it was not appropriately addressed within their music therapy education. Twenty-four percent (24%) of respondents agreed on the relevance of wellness for successful ageing and that these courses should be taught within the music therapy department.

Relationships were observed between those who stayed informed about current events and those who felt that wellness for successful ageing was a relevant topic for music therapy curriculums. Those therapists who stayed informed about social, political, and/or current issues also tended to maintain a balance between their exercise/diet. Moreover, they supported the opinion that wellness for successful ageing courses belongs in the music therapy curriculum. The relationships between therapists’ personal wellness and personal philosophy toward wellness in the curriculum is displayed in Table 1.

Personal philosophy	Professional philosophy	r	p
Kept informed about current and social issues	Wellness courses belong in the music therapy curriculum	.262	.049
Kept informed about current and social issues	Wellness for successful ageing courses are relevant for the practising music therapist	.262	.049
Kept informed about current and social issues	Wellness is essential to maintain a high quality of life	.302	.021
I enjoy my work	Understanding the relationship between wellness and music therapy is important for a well-rounded programme	.420	.001
I enjoy my work	Wellness is essential to maintain a high quality of life	.343	.008

Table 1: Correlations between therapists’ personal wellness and personal philosophy toward wellness in the curriculum – Personal Philosophy questions from the TestWell®: Wellness Inventory for Adults

How was wellness for successful ageing presented in academic instruction?

Respondents indicated that the topic of wellness for successful ageing was addressed mostly through classroom instruction, although textbook coverage and assigned readings were close in respondent rates. Five percent (5%) of respondents indicated that specific coursework was offered on wellness for successful ageing and music therapy. Information relating to wellness for successful ageing came from their personal interest in the topic, conferences, and teaching assistant assignments. Time of training contributed to the amount of wellness-related materials provided in coursework. One respondent wrote, “I graduated in 1971. Little to no attention was given to wellness at that time”. Figure 4 includes graphical representation to respondents’ experiences of learning about wellness.

As society changes, so, too, does the population with whom music therapists work. Wellness for successful ageing is a relevant topic resulting from the growing number of baby boomers reaching senior status. For many, wellness for successful ageing was not applicable during their training. One respondent shared that, during her training in the ‘90s, “wellness was not a focus of society or of music therapy.” In the institution where she teaches now “students are exposed to wellness theory and wellness models within the music therapy context.” Another participant shared that during his/her training in the late ‘80s early ‘90s there was not “a need for wellness in any client population.” These responses are indicative of the dynamic society in which we live.

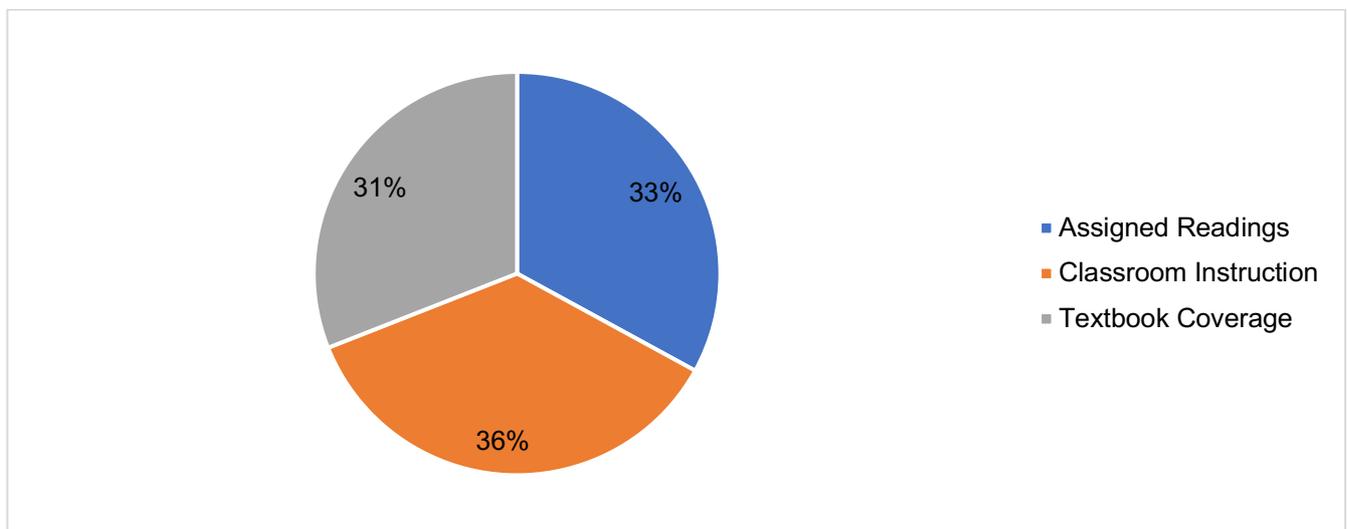


Figure 4: Respondents’ exposure to methods of teaching wellness

Eighty-three percent (83%) of respondents reported being unfamiliar with textbooks relating to wellness and successful ageing. For the 17% who were familiar with associated textbooks, the most commonly mentioned resources were: *Therapeutic Uses of Music with Older Adults* (Clair, 2008) and *Music Therapy and Geriatric Populations* (Belgrave, et al., 2011).

DISCUSSION

The purpose of this study was to explore currently practising music therapists' attitudes toward wellness for successful ageing and its inclusion in music therapy curricula at academic institutions offering music therapy degrees. The researcher in this study used a survey, as a data-gathering tool, to explore aspects of wellness attitudes relating to personal wellness, classroom application, and professional philosophy. Music therapists' personal relationship with wellness appears important to examine, as one's own practice likely influences professional philosophy. A majority of respondents reported living healthy lifestyles and having high levels of job satisfaction. The emphasis on personal wellness behaviours could impact the importance they place on the wellness of others.

Music therapists indicated that their primary method of learning about wellness for successful ageing curriculum in their coursework was through classroom instruction (e.g., lectures) and the least utilised method of instruction was through the use of a textbook. Field work in adult day-care facilities, hospice, orthopaedic, intergenerational choirs, and skilled nursing-home facilities offered valuable hands-on opportunities for learning. Given the percentage of responders who indicated that wellness topics must be included in the academic curriculum for training music therapists, wellness for successful ageing in the curriculum should be considered within the music therapy department. It could be the case that if training programmes emphasised the role of wellness through their teaching, and music therapy students appreciate the value of wellness interventions for their patients, this knowledge may transfer to the personal wellness of the therapist.

Strong connections were found between healthy lifestyles and personal philosophies toward wellness and music therapy. Over half of the respondents indicated that staying informed about current issues contributed to their healthy lifestyle. This connection could suggest that staying current on social, political, and current issues informs their feelings on the development of the music therapy profession and their personal well-being.

For the 19% of participants who reported feeling not satisfied with their level of preparation in their curriculum in this area, several themes emerged as to how it could be improved. Many respondents reported a desire for increased opportunities for discussion as a result of assigned readings/ textbook. One respondent suggested that a direct independent study course would provide beneficial training. As a means to better understand wellness and successful ageing, experiential opportunities were mentioned as a possible solution. Many therapists reported that their personal desire to seek out information led them to articles, conferences, and other sources of education to prepare them to work with their clients. These suggestions could provide meaningful ways to engage the topic within curriculum structures. Because each university is unique in its design, each of these suggested measures could offer valuable training opportunities.

The ever-changing environment of music therapy within the United States reinforces the importance of music therapists' participation in continuing education courses, national conferences offered by the AMTA, state-wide organisations, and task forces. Maintaining current knowledge of the field allows for enhanced clinical practice, sustained growth of the field, and job satisfaction. Murillo (2003) found that music therapists who reported feeling motivated and inspired to continue practising music therapy indicated attending conferences and symposiums as a primary reason. Maintaining diligent self-care practices may aide in sustaining an enthusiastic desire for lifelong learning and

enhancing clinical skills. Self-care is a topic frequently highlighted within the music therapy community. This survey was no exception as it also raised issues relating to therapist self-care.

Throughout the review of free-response survey submissions, the theme of therapist health emerged. In an effort to maintain job satisfaction and reduce burnout, “music therapists should have their own experience in personal therapy before going out into the field,” one respondent suggested. The therapist must “start with the self” before venturing on to help others. Therapist health and wellness is a related and valid topic as the importance of professional boundaries and self-care are discussed at regional/national conferences, in articles, and addressed in coursework (Clements-Cortes, 2013; Kim, 2012). Research in this area is growing as the reality of burnout for music therapists is evident (Clements-Cortes, 2013; Fowler, 2006; Richardson-Delgado, 2006; Vega, 2010). It could be suggested that incorporating wellness-related topics into music therapy curriculum could encourage music therapists to appreciate aspects of wellness in their own lives. This focus on therapist health and wellness may prevent attrition and increase the job satisfaction of music therapists.

Several of the recommended methods of preventing burnout align with the National Wellness Institute’s *6 Dimensions of Wellness Model* (National Institute of Health, 2016). Techniques involving relaxation, meditation, exercise, social engagement, and exploring new interests are effective methods of avoiding burnout for music therapists (Clements-Cortes, 2013). Participants in the current study corroborated these findings. Significant correlations were found between those satisfied with their work/life balance and exercise/seeking out opportunities to learn new things. Those who stayed informed about current topics reported eating healthier diets and those who felt their life had a positive purpose significantly correlated with enjoying their work. Results of the current research reflect earlier findings demonstrating that diet/rest, self-care, job satisfaction, and work/life balance contribute to lower rates of burnout (Clements-Cortes, 2013; Fowler, 2006; Hettler, 1976; Kim, 2012; Murillo, 2013; Richardson-Delgado, 2006; Vega, 2010). The National Wellness Institute (2016) emphasised the interconnectedness of a wellness lifestyle and how each dimension of wellness can impact the other.

While support for wellness for successful ageing in music therapy curriculum is enthusiastic, it received the least support from respondents when asked how strongly they agreed with it being included in music therapy curriculum. Possible explanations for this could be that when compared to traditional disciplines such as medical music therapy or music in special education, wellness may appear less urgent. Conceptually, wellness for successful ageing is new.

Future research

Faculty members of music therapy programmes would offer deeper insight regarding the role of wellness for successful ageing in music therapy programmes and the related challenges of planning a curriculum. The music therapist in training could further define how wellness for successful ageing is perceived from the novice point of view. Research could also examine the relationship between years of clinical practice/age of therapist and feelings of relevance regarding this topic.

To gain further knowledge of how music therapy is best used within the wellness population, interviewing those who participate in music therapy sessions would be an invaluable resource in deciding which components of music therapy are most preferred. Further research would benefit from surveying not only a larger sample size but also a broader range of experiences, professional time spent in the field, and a wider geographic representation. Wellness for successful ageing approaches on a global scale could be particularly meaningful in establishing future clinical practice.

Limitations

The area of wellness for successful ageing is broad and can have various meanings. AMTA defines this area of practice as “the specialized use of music to enhance quality of life, to maximize well-being potential, and to increase self-awareness in individuals seeking music therapy services” (AMTA, 2005). Creating an operational definition of wellness and successful ageing in future research may provide even more specific data relating to this topic’s role within the curriculum. Results of this study represented only a small number of practising music therapists in the southeastern United States.

Data collection through survey measures presents unique challenges. Often surveys are returned incomplete or not at all. This survey resulted in a 32% return rate, which is within acceptable limits according to the current rate of online and web-based survey participation (Hoonakker & Carayon, 2009). However, a larger sample size could have provided a clearer and more in-depth picture of the topic. Finally, some of the questions in this survey required participants to reflect on their past educational experiences. For one participant, whose education was nearly 40 years ago, it could be difficult to accurately answer questions pertaining to memories so far in the past.

CONCLUSION

It can be difficult to include every aspect of patient care that music therapists in training may encounter, and as the current study suggests, instilling a desire for lifelong learning is essential to the music therapist for personal and professional reasons. However, the shifting demographic of the United States requires constant re-evaluation of curricula focused on wellness for successful ageing. Soon, many music therapists could find themselves working with this population. Moreover, as society begins to examine the quality of life of our older adults, so, too, will society begin to examine the quality of younger lives. While the ageing needs of older adults are imminent, the future of our younger adults is not. By emphasising wellness at every age, music therapists can change not only the lives of today’s older adults but also the lives of tomorrow’s older adults.

APPENDIX: SURVEY INSTRUMENT

Demographics

Gender

- Male
- Female

Years of practice as a music therapist.

- 0-5
- 6-10
- 11-15
- 16-20
- 21-25
- 26-30

Personal Health

For each statement listed below click on the most appropriate response.

Statement	No	Sometimes	Yes
I engage in sweat-producing physical activity 20-30 minutes at least three times a week.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I keep informed about social, political, and/or current issues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I seek opportunities to learn new things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I enjoy my work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am satisfied with the balance between my work time and my leisure time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that my life has a positive purpose.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I spend a portion of every day in prayer, meditation, and/or personal reflection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I avoid eating foods that are high in fat.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I avoid the use of tobacco products.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The following questions pertain to the topic of music therapy and wellness. The following operational definition of wellness as defined by the American Music Therapy Association's Standard of Practice is given in an effort to provide clarification.

"Music therapy in wellness involves the specialized use of music to enhance quality of life, maximize well-being and potential, and increase self-awareness in individuals seeking music therapy services. A client may be a candidate for music therapy when a cognitive, communication, psychological, educational, social, or physiological need might be ameliorated or prevented by such services" (AMTA, 2005).

Your Classroom Experience...

To what level was the topic of wellness for successful ageing addressed in your classroom experience?

	Never	Rarely	Sometimes	Often	All of the time
Classroom instruction	<input type="checkbox"/>				
Textbook coverage	<input type="checkbox"/>				
Assigned readings	<input type="checkbox"/>				

Are you familiar with classroom textbooks in music therapy relating wellness to successful ageing?

- Yes
- No

Skip To: Q31 If Q41 = Yes (1)

If possible, indicate the name of the textbook utilised for wellness and successful ageing. *Free Response*

At Your Institution...

How were you, as a student, if at all, exposed to issues relating to wellness and successful ageing in music therapy at your institution?

- Class Discussion
- Field Work
- Assigned Readings
- Electives (seminars)
- Other: please specify (free response)
- No exposure

Skip To: Q2 If Q39 = No exposure (6)

To the best of your ability please indicate the types of field work, titles of assigned readings or names of electives in your music therapy programme that contributed to your understanding of the relationship between wellness and successful ageing.

Besides the university you attended, are you aware of other programmes that incorporate wellness for successful ageing in their curriculum?

- Yes
- No

Did your music therapy programme at your institution offer a specific course focusing on wellness and successful ageing and its role in music therapy?

- Yes
- No

Skip To: Q43 If Q44 = No (2)

Please indicate course title, or specific elements of the course which characterise it as a wellness course. *Free Response*

Rate your satisfaction of wellness and successful ageing education in your professional preparation.

- Not Satisfied
- Somewhat Satisfied
- Neutral
- Satisfied
- Very Satisfied

What would you have changed about your programme to improve your preparation in this area? *Free Response*

Personal Philosophy...

Choose the best answer for the following statements.

	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
Wellness for successful ageing is essential to maintain a high quality of life.	<input type="checkbox"/>					
Understanding the relationship between wellness for successful ageing and music therapy is important for a well-rounded music therapy degree programme.	<input type="checkbox"/>					

Wellness for successful ageing issues is not appropriately addressed in current music therapy programmes.	<input type="checkbox"/>					
Wellness for successful ageing courses are important, and should be taught within the music therapy department.	<input type="checkbox"/>					

For the statement listed below move the slider to indicate the amount of relevance you feel wellness for successful ageing has on music therapy curriculum. 1 = least relevant and 7 = most relevant

<p>Indicate the level of relevance wellness for successful ageing has on music therapy curriculum.</p> 
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For the following identified areas in music therapy, identify how strongly you agree with their being included in music therapy curriculum.

	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
Music therapy in hospice	<input type="checkbox"/>					
Music in special education	<input type="checkbox"/>					
Medical music therapy	<input type="checkbox"/>					
Music in psychiatry	<input type="checkbox"/>					
Music therapy in wellness for successful ageing	<input type="checkbox"/>					

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Ελληνική περίληψη | Greek abstract

Εξερευνώντας την στάση των μουσικοθεραπευτών προς την ευεξία για επιτυχημένη γήρανση και την ένταξή της στα εκπαιδευτικά προγράμματα μουσικοθεραπείας

Lorna Segall

ΠΕΡΙΛΗΨΗ

Οι ηλικιωμένοι σε όλον τον κόσμο έχουν μεγαλύτερη διάρκεια ζωής, και παραμένουν ενεργά, συμβαλλόμενα μέλη της κοινωνίας. Αυτή η πρωτοφανής αύξηση παρουσιάζει προκλήσεις για τους οργανισμούς της δημόσιας υγείας, τις οικογένειες και τις κοινότητες που θα επωφελούνταν από τη λήψη προληπτικών μέτρων για την αντιμετώπιση αυτού του αυξανόμενου πληθυσμού (National Institute of Health, 2016). Ορισμένοι ηλικιωμένοι μπορεί να στραφούν στη μουσική για την επίτευξη ενός πλήρους, υγιούς τρόπου ζωής. Σε αυτή τη μελέτη, η συγγραφέας επιδίωξε να διερευνήσει τις στάσεις των επαγγελματικά ενεργών μουσικοθεραπευτών σχετικά με: (α) την προσωπική τους ευεξία, (β) την προσωπική τους φιλοσοφία για την ευεξία συμπεριλαμβανομένων των παρεμβάσεων ευεξίας σε μουσικοθεραπευτικά προγράμματα που στοχεύουν στην επιτυχημένη γήρανση, και (γ) το πώς εντάχθηκε στην εκπαίδευσή τους η ευεξία για την επιτυχή γήρανση. Ένα ερωτηματολόγιο 32 ερωτήσεων στάλθηκε σε 207 επαγγελματικά ενεργούς, πιστοποιημένους μουσικοθεραπευτές στη νοτιοανατολική περιοχή των Ηνωμένων Πολιτειών. Το ποσοστό επιστροφής ήταν 32% (N = 67). Παρόλο που μόνο το 19% των συμμετεχόντων δήλωσαν ότι αισθάνονται ικανοποιημένοι από την εκπαιδευτική τους προετοιμασία για να εργαστούν στον χώρο της ευεξίας, το 63% εξέφρασε την πεποίθηση ότι η μελέτη της ευεξίας για την επιτυχή γήρανση σχετίζεται με την πρακτική της μουσικοθεραπείας. Ισχυροί συσχετισμοί εντοπίστηκαν ανάμεσα στους υγιείς τρόπους ζωής και τις διάφορες προσωπικές φιλοσοφίες αναφορικά με την ευεξία και τη μουσικοθεραπεία. Στο μέλλον πολλοί μουσικοθεραπευτές θα βρεθούν να εργάζονται με ηλικιωμένες ομάδες πληθυσμού. Η συνεχής επαναξιολόγηση των προγραμμάτων σπουδών μουσικοθεραπείας από επαγγελματίες, εκπαιδευτικούς και επιβλέποντες με επίκεντρο την ευεξία για την επιτυχή γήρανση απαιτεί ιδιαίτερη προσοχή.

ΛΕΞΕΙΣ ΚΛΕΙΔΙΑ

μουσικοθεραπεία, ευεξία, εκπαιδευτικό πρόγραμμα, γήρανση