

Tribute

A tribute to Andrew O'Hanrahan

23 February 1959 - 25 July 2015

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Editorial note: A shorter version of this tribute first appeared in *Leading Note*, published by the British Association for Music Therapy, December 2015, pp.45-50.

Jonathan Perkins

My dear friend, Andrew O'Hanrahan, sadly died on July 25th 2015 after a determined but tragically short battle with a terribly aggressive cancer.

Andrew and I met in 2005 in a small room at Anglia Ruskin University, where we sat waiting to be interviewed for the music therapy course. We found common ground between us and discovered that we had both come along that day through hope – hope that being a music therapist was something we could believe in, be good at, and ultimately find employment in. However, with laughter, we admitted to each other that we didn't have the slightest clue what this music-therapy-thing was all about, we simply hoped for enjoyment and for new directions in life.

Andrew was a kind, loving, open, warm, empathic and deeply humoured man; harmonious traits for a therapist, whilst as a music therapist he gave his innate skill as an improviser. Indeed, he was an Improviser Extraordinaire, for his ability to improvise was not just limited to the notes on a piano or the strings of a guitar; it was how he met with life, it was who he was in his relationships, it was how he responded to and accepted and lived with the highs and the blows, and the tragedies and the challenges of his life; it was how he moved and existed in each and every moment and fibre of his beautiful soul.

To be a good improviser is to find harmony in disorder, it is to accept harmony and disorder. Andrew lived within this realm; for as his home was full of love, so too it was cluttered and disordered; and as he was an attentive listener and a wonderful friend, so too was his world full of music and noise; and as his later life was full of therapy appointments, piano tunings, school runs, family demands, socialising, and needing to be here, there and everywhere, so too did he leave in his wake a succession of broken down and written off cars, and this meant he could be seen cycling to and from therapy appointments with a guitar strapped to his back and African drums dangling from his handlebars.

During the therapy course, my daughter, dad and I took a two-week holiday in Wales in which Andrew and the youngest three of his five children joined us for the second week. It was a brilliant, musical and fun-filled holiday. The cottage is in the middle of nowhere in the middle of Wales, and takes an age to drive to, but is well worth each and every mile once you arrive and find Shetland ponies and sheep, valleys and hills and streams. As soon as the O'Hanrahans arrived we went for a walk to explore and discover these hills. And this being Wales, it rained and it blew, and Andrew being the relaxed dad that he was - the improviser extraordinaire of parenting - he allowed his kids to jump in streams and roll down hills, to build dams and to get thoroughly wet and muddy and feel truly alive in that beautiful moment.

And so we returned to our cottage, wet and cold

but happy. And seeking warmth Andrew began to unpack his car. He'd brought along what appeared to be the entire contents of a kitchen cupboard half opened pasta packets, stale digestives, squash, crisps, random tins and tea bags - along with four toothbrushes, a couple of guitars and some percussion instruments. And then it suddenly dawned on him and on his muddy, wet kids that he'd entirely forgotten to pack anyone's suitcase, or bring even a single change of clothes to that oh-sowet-and-windy-and-mud-filled part of Britain. And it was a beautiful and funny and apt thing; it reflected Andrew's innate sense of disorder and harmony; it highlighted him as the wonderful and eccentric father that he was, living in the moment of his children's happiness, and improvising and laughing at the consequences.

In remembering my dear friend, and recounting all of the very special traits that combined within him, the one defining part of him that I would like to hold on to and learn from and share would be his compassionate sense of humour. For whilst Andrew was the kindest of people, he could make the most direct and challenging observations of others, but because it was from a place of humour, compassion and love, he could do so without attacking; he had the ability to disarm a person of their bullshit without them reacting and feeling they needed to make a stink.



Photograph 1: Andrew O'Hanrahan as Jonathan Perkins' Best Man

I know that for however long I live, I shall always feel the emptiness of his absence. I always felt that we would to grow old together visiting music therapy conferences where we would gently mock the earnestness of such places. He was the kindest man I have ever known.

Amelia Oldfield

Andrew enrolled as a mature student on the music

therapy MA at Anglia Ruskin University in 2005. Since qualifying he worked as a music therapist in Cambridgeshire at the Croft Unit for Child and Family Psychiatry, at several special schools, and did some sessional work with adults with learning disabilities. In April 2015 he was diagnosed with cancer, which by then had already spread from his thyroid to his lungs. He died at the end of July.

In the relatively short amount of time that he practised as a music therapist he made a strong impact on all those around him, not only on his clients but also on his colleagues. At his funeral there must have been over 250 people present, many of whom were music therapists and colleagues he had known in the last ten years of his life. The following is an only slightly altered version of the speech I gave at his funeral.

Everyone loved Andrew. He was warm, kind, clever, and often very funny. He was a wonderful listener and always gave you the impression that what you had to say was interesting, exciting and important. He was also an excellent musician, a very good pianist and a good guitar player, so perhaps it is not surprising that he became such an outstanding music therapist.

Even though we tend to have a wide mix of students from varying backgrounds on the music therapy MA at Anglia Ruskin University, Andrew was pretty unusual. He had started out as a rock musician, had trained and worked as a piano tuner and had then become a social worker, and had several years of experience working with the elderly. In addition, he was looking after his five children, and Kitty, his youngest, was only two when he started training. In spite of this wealth of life experience that he brought to the course, Andrew was humble and modest, always seeing other peoples' strengths and making positive comments to fellow students, but rarely recognising or dwelling in any way on his own talents, or past experience.

During the training, Andrew was one of a group of four students whom I saw every week for a two-hour music therapy clinical supervision session. Students would bring DVD excerpts of clinical music therapy sessions they had had on their placements to this group. I remember Andrew showing excerpts of sessions with a young woman with severe cerebral palsy with whom he was playing the guitar and conga drums. Both Andrew and his patient were having fun and were at ease with one another, and it was immediately obvious to me that Andrew was one of those few people who completely naturally and intuitively can use improvised music-making in creative ways to

connect with people. My main task was to help Andrew to recognise his own abilities.

There were, however, some aspects of the training that were challenging for Andrew. When I was guiding him through his MA dissertation, I remember him turning up to supervision sessions with no paper or anything to write with, and appearing surprised when I suggested he might want to make some notes. After a few weeks he proudly showed me a dog-eared folder containing a few scrunched up pieces of paper — he clearly wanted me to know that he was making an effort... Luckily, the main thrust of his thesis was about his clinical family music therapy work during his placement at the Croft, and he excelled at this.

After qualifying as a music therapist, Andrew worked part-time with adults with profound learning difficulties. My music therapy colleague, Dawn Loombe, supervised this work. She writes:

"I particularly recall one piece of work, where Andrew used just his voice and his guitar to connect with a very troubled young man. The man was non-verbal and on this day, particularly anxious, shouting loudly as he wandered around, unable to settle. I will always remember Andrew's calm, gentle approach and the way he used his guitar and simple vocalising to encourage the man to calm and eventually to come to sit with him on the sofa. They 'sang' and played guitar together for some time in a very natural way; there was humour, the sharing of the guitar, and just being together. This was the first of many similar sessions. Andrew was humble, and in his work as a music therapist he just didn't know how good he was and how much difference he made to the people with whom he worked."



Photograph 2: Family Music Therapy Roundtable at the World 2014 Music Therapy Conference in Krems, Austria. From left to right: Tali Gottfried (Israel); Kirsi Tuomi (Finland); Andrew O'Hanrahan (UK) Barbara Griessmeier (Germany) and Amelia Oldfield (UK)

Andrew started to work at the Croft Unit for Child and Family Psychiatry as a music therapist in 2008. My colleagues from the Croft have contributed to the next section. Andrew adored his work at the Croft and would willingly take on any task even if it were only remotely connected to music therapy. Many members of the team will remember how last Christmas he pushed the piano from the music therapy room to the other end of the unit during the Croft Christmas lunch, and how we all sang Christmas songs while Andrew played.

He probably worked more than twice as many hours than he was paid for, and I remember that on a number of occasions several of us on the team had to tell him he was having some time off, and more or less order him to take a break. Of course he was loved and respected by the entire team, and also sometimes rather too much by some of the mothers staying residentially on the unit. However, even though he appeared very relaxed and easy going, Andrew was actually very good at recognising if a parent or a child on the unit was in danger of becoming too attached to him, and was very sensitive and professional about setting appropriate boundaries.

Andrew's enthusiasm and excitement about working with families at the Croft was infectious. As my colleague Jo Holmes, psychiatrist, remarked:

"There were times when I was pulling out my hair because some manager or other was being unreasonable, or I was being oppressed by a tricky parent, and Andrew would just remind me of what a privilege it is to work with such a great team, doing important work."

We all enjoyed having Andrew at the Croft. He would have the reception team in stitches telling them about his latest hilarious holiday disasters, and our house keeper, Gerrie, adored him and always made sure she cooked something special for him. My male colleagues at the Croft will particularly miss him. As one remarked: "There is always safety in numbers...". Perhaps the fact that Andrew had survived difficult times himself meant that he could embrace his own individuality and encourage colleagues and clients to do the same. He had an amazing way of cutting to the heart of things, without any fuss, as well as a knack of being able to say very difficult things in a way that people never seemed to feel threatened by. Even when the rest of the team felt at their wits' end, he never lost the strength of his compassion for the positions our families at the Croft found themselves in.

Sharing a desk with Andrew at the Croft sometimes brought surprises. On one occasion when I took over the desk after he had been working there earlier in the week, I noticed the surface was a little sticky. When I lifted the computer keyboard, brown goo oozed onto my lap; apparently two days previously he had spilt a cup of coffee all over the desk just before rushing back to Cambridge to collect Kitty from school, and the clear-up job had been a little rapid....

Andrew was always keen to learn more about music therapy and we both enjoyed attending and presenting at conferences, both in the UK and abroad. He also enjoyed finding out about new aspects of different cultures although when we were in Finland he was quite firm about the fact that he was British, and could not possibly take all his clothes off in front of other male strangers in the sauna. This resolve lasted about ten minutes when his Finnish colleagues brought the beer into the sauna. He obviously adapted quite quickly because days later he and another colleague disappeared from a restaurant on an island we had been taken to, to go skinny-dipping in a nearby lake. They were trying to be discreet about this venture, but unfortunately Andrew cut his leg quite badly on some rocks when he came out of the lake, and staggered back into the restaurant dripping blood as well as water, and urgently needing some plasters.



Photograph 3: In between conference venues at Jyväskylä, Finland, Nordic Music Therapy Conference, 2012. Andrew O'Hanrahan and Amelia Oldfield

In the last eighteen months Andrew and I have had to face a review in the NHS where we were initially told that all the arts therapy posts in the Trust were to be cut. In our meetings with the 'cutting gang' Andrew was amazingly honest and outspoken, telling one of the most senior managers in a large

public meeting that his comments were "crass". After much negotiation and hours writing documents and emails we both retained slightly reduced jobs at the Croft; I will always remain grateful for his support, humour and resilience during this dreadful process.

In spite of this horrible review Andrew seemed to gain new confidence in his skills as a music therapist over the past few years. At the Croft he developed new ways of integrating theraplay techniques into his family music therapy work, and started a music therapy group for the parents. In addition to working at the Croft, he began working in a special school, one day a week, where he very much enjoyed having a music therapy student on clinical placement with him. He felt that the process of having a student helped him to be clear about what he was doing and why.

He was asked to run several music therapy workshops in different venues, and found he enjoyed doing this, although he had initially been nervous about it. Just before he became ill the school offered him another day's work which I know he was delighted about. His career as a music therapist was blossoming.

I have had many emails and phone calls from colleagues who have been shocked and saddened by the news of Andrew's death. As one of my music therapy colleagues put it: "I have lovely, smiley memories of him....ruffled, passionate and fun...."

Music therapy colleagues have already paid tribute to Andrew in various ways. He was remembered at the round table on family work at the Nordic Conference in Oslo just a few days after he died, and we had a minute's silence in his memory at the beginning of the recent dementia conference at Anglia Ruskin University.

Returning to the Croft after the summer break has been tough, as everything there reminds me of his unfailing enthusiasm and excitement about his work. Interesting though — I've picked up some of his ideas and introduced small changes in my work. I now make a point of eating with the children and the families once a week, and have found that all my short-term cases (rather than only some) consist of families rather than individual children. I wonder what he would make of this? Actually, I know the answer: he'd want to be here — doing the family music therapy.

Hayley Hind

Andrew was one of life's treasures. I knew him as a colleague, fellow musician and friend. He had such energy and passion and was always ready with a

word of support or encouragement. Andrew saw the very best in people and situations but wasn't afraid to speak out when the situation demanded it. As a clinician, his work was thoughtful and sensitive and he cared deeply about the families he worked with.

He was also a person of tremendous fun. I have fond memories of conference dinners where his humour, warmth, capacity to tell a good story and drink lots of beer always made it an entertaining evening. At the World Congress in Krems in July 2014, he was so full of life and fun; my abiding memory of him at that conference is of someone who was happy, laughing, loved his family and had so much to look forward to.



Photograph 4: Andrew O'Hanrahan and Hayley Hind in Krems, 2014

As both friend and colleague, Andrew was a wonderful listener and made everyone feel attended to and important. As his illness progressed he never lost hope or optimism and his determination in the face of his illness was quite something to witness. He retained an astonishing capacity to think about others and he continued to be passionate about music and his work.

Andrew lived his life passionately and generously and he will be hugely missed by the many people whose lives he touched.

Emily Corke

I worked with Andrew at Highfield School for just over a year and we shared the job of music therapist for the school. Although we were at the school on different days we met frequently to discuss our work. Andrew was encouraging and supportive and it was always a meeting full of laughter and joy. I remember going to a training day at Highfield and one of the speakers had to cancel

with only an hour's notice. When the staff asked if anyone could fill in for that hour Andrew's hand shot up and volunteered to put on a music therapy presentation. Unlike Andrew who rose to the challenge, I shrunk back and asked him to take the lead. Andrew's ability to communicate the value of music therapy to others with ease and confidence, without needing time to prepare was a gift I greatly admired. He led a wonderful improvisation with staff and then presented some of his work. He was eloquent, confident and relaxed, and the staff greatly benefited from what Andrew shared, it was inspiring and impressive! It is clear that Andrew had great passion about music therapy and was driven by his compassion for the pupils. He was willing to take risks and was a great advocate for the profession. It was a joy to share the job of music therapist with Andrew at Highfield and he will be greatly missed not just by me but the pupils and staff at Highfield.



Photograph 5: In between presentations at the Krems Conference with Nicky Haire and Philippa Derrington

Ruth Oreschnick

It's hard to think about summing up such a vitally alive person as Andrew. He was a fantastic colleague, and a wonderfully humorous friend. As so many people said at his funeral - he had the knack of making you feel as though you mattered to him, that he valued your friendship and that you could have the most wonderful amount of fun together.

He carried a belief of people's innate worth into his music therapy work, trusting that the children and families in his sessions had something to give. And that music therapy could help them find a way to believe in their own capabilities. Somehow, with Andrew, the business of living became more alive.

Andrew was unpretentious. He was passionate, honest and able to talk about the more difficult

aspects of situations. He wasn't much interested in formalities - he was far too busy getting to know who someone really was, and engaging with that to let niceties get in the way.

He was also the most generously supportive of people. When I moved to India for work, he rang me up frequently to make sure that I was OK, to find out about Delhi: what was it like; how was the music therapy work going; was it colourful; what did it sound like? His patience during power cuts, and my sometimes irascible shouting at the temperamental telephone while he was on the other end of it were typical of his generosity and humour.

When Andrew became ill in April of last year, he talked about how much he missed being able to work as a music therapist, and how much it meant to him. He tried to keep working for as long as possible. His love of families, his own included, drove him to keep going and it was a blow when he finally had to stop. It was a testament to him that so many of his colleagues, friends and families of clients went to his funeral.



Photograph 6: Andrew in Jyväskylä, 2012

As I write this I imagine Andrew laughing and then saying – "for God's sake, Ruth – what about my punk band in the late 70's, the Rolling Stones, my wonderful children and family, whisky, floral shirts, Chopin...". This list would go on for some time. As I said it's hard to sum up the very vitally alive essence of Andrew in words. Perhaps enough to

say that it was a huge privilege to have been his friend, and to have shared in some of that vitality for a while.

Nicky Haire and Philippa Derrington

Andrew, along with so many others, we'll miss many things about you but above all we'll miss your cheeky smile and permanent twinkle, your hoarse laugh, your fun, your self-deprecating but sound, down-to-earth point of view, your joy in music therapy work, your brightly coloured shirts and slightly ruffled look, your lightness in challenging situations, your positive but realistic stance about difficult work, your generosity, charm, humour and lively, irreverent spirit.

Here's to you.

Suggested citation:

Perkins, J. Oldfield, A., Hind, H., Corke, E., Oreschnick, R., Haire, N., & Derrington, P. (2017). A tribute to Andrew O'Hanrahan (23 February 1959 – 25 July 2015). *Approaches: An Interdisciplinary Journal of Music Therapy*, *9*(1), 177-182.