WS01

MUSIC THERAPY AND NEUROSCIENCES: CLINICAL APPLICATIONS FOR CHILDREN AND ADULTS

C. Zamani
Music Therapy, Private Practice, Buenos Aires/ARGENTINA

Abstract: This workshop will involve theoretical and clinical framework of neurocognitive Music therapy applied to enhance socialization, communication and cognitive skills of children with ASD and neurodevelopmental disorders and adults with acquired brain injuries in neurorehabilitation. Audio visual material will be presented. Participants will be actively engaged in music therapy activities.

Description: Neurocognitive and behavioral interventions in Music Therapy have been extensively recognized to have a positive impact on the development, improvement and rehabilitation for individuals with neurodevelopmental and acquired neurological disorders. The workshop objectives are: 1) To present theoretical and methodological bases of the effect of the perception and production of music on the brain and mind of individuals. 2) To address the music therapy treatments developed by their authors in their clinical work with children with ASD and neurodevelopmental disorders and adults with brain injuries as TBI or CVA. 3) To actively engage the participants in music therapy activities. The methodology of this workshop is evidence based on the clinical practice of the authors. Practical clinical music therapy activities from a neurocognitive behavioral perspective will be shown via video material presenting the therapeutic approaches of the authors in longitudinal case studies. The different activities are designed to intervene and improve cognitive, communication and socialization areas of various clients who exhibit different neurological disorders. Multiple music therapy techniques such as: para-verbal techniques, dual dependent musical and rhythmic motor tasks; music therapy techniques for patients in low awareness states, aphasia, attention disorders will be developed engaging the participants during the workshop. Resources: audiovisual material Musical instruments (percussion, piano, guitar) Minimum participants: 10 Maximum participants: 40


Mini biography of presenter: Zamani is a clinical music therapist and a special education professor who works with children with neurodevelopmental disorders and ASD. She provides educational therapeutic programs in private practice and institutions.

Disclosure: No significant relationships.
PLANNING AND CONDUCTING RESEARCH PROJECTS WITHIN THE FIELD OF MUSIC THERAPY

B.M. Menke, M. Warth
School Of Therapeutic Sciences, SRH University Heidelberg, Heidelberg/GERMANY

Abstract: This workshop aims at conveying strategies for successful development and implementation of new research projects. Basic information on project management is presented and PhD students report on their personal experience. Participants plan a simulative research project within a supervised group and can exchange views on their own ideas and plans.

Description: “More research is needed” – hardly any current systematic review on topics related to music therapy goes without this claim to the research community. Many music therapists interested in research are highly motivated to comply with this requirement, but are vastly faced with great difficulties and challenges in the development and implementation of their new project ideas. Therefore, this workshop aims at conveying strategies to young researchers for both a successful implementation of their research projects and for dealing with typical upcoming challenges. Within the first step of the workshop, we present basic aspects of an effective project management that need to be considered when planning and conducting a scientific research project. These include: Acquisition of external funding, formalities and requirements, promotion, and networking. Special attention is drawn to problems specific to music therapy research, such as recruitment, interventions, ethical boundaries, and methodology. Within the second step, groups of workshop participants are given a certain problem formulation as part of a simulation exercise. Their task is to develop a practical project plan for conducting a research study. Results of the teams are presented and discussed in the plenum. Afterwards, current PhD students present their personal experiences and strategies in initializing their own projects and in dealing with upcoming difficulties. This part leads over to the fourth step, where participants are encouraged to share their own experiences and plans, to develop new ideas and to further expand the networks among young scientists within the field of music therapy.

Workshop outline: 1. Presentation I: Planning and conducting research projects (30 min.) 2. Group work: Simulation exercise (30 min.) 3. Presentation II: Case examples form PhD students (30 min.) 4. Exchange platform (30 min.)

References:

Mini biography of presenter: Barbara Menke, MA, is a researcher at the SRH University Heidelberg, Germany.

Disclosure: No significant relationships.
WS03

DIDACTIC STEPS OF DEVELOPING CLINICAL SKILLS IN MUSIC THERAPY UNIVERSITY PROGRAMS

T. Wosch
Faculty Applied Social Sciences, University of applied sciences of Wuerzburg and of Schweinfurt, Wuerzburg/GERMANY

Abstract: This workshop includes music therapy students and their teachers. In its first part it presents two models of developing clinical skills in music therapy university trainings. Afterwards all this is applied and discussed including other models and experiences of workshop participants. Finally workshop-outcomes are worked out and summarized.

Description: Bologna-process in Europe brought UK- and US-university-teaching-model to all the different university-systems of European countries. One benefit of this is the very clear identification and description of competencies students develop in each module of a program. Moreover, also the way of developing each competence is very clearly to describe. This includes also each step of developing a special skill, which is needed i.e. for clinical practice. Two examples for such step-by-step-models of developing skills are from UK Wigram's steps for developing clinical-improvisation-skills (Wigram 2004) and from US Wheeler's and colleagues' clinical training guide (Wheeler e.a. 2005). Wigram i.e. starts with very basic improvisation techniques, starting with one-note-improvisation, which are the basis for developing basic therapeutic skills, i.e. Mirroring, and again based on this develop skills of initiate transitions in clinical improvisations. Moreover, also general models exist for developing clinical skills of music therapy approaches or for a special field of clinical practice of music therapy. One model is the Milgram-Luterman developmental model (Luce 2005, Milgram-Luterman 2009). In five steps with phases of observation, experience and reflection music therapy students develop their clinical skills and competencies as music therapist. This model was modified by Wosch (Wosch 2010) including also different steps of observation and feedback. Both models will be presented in the workshop, including also practical exercises. After this first part will be discussed these models and all other models and needs, which can contribute all workshop participants, in the second part of the workshop. Finally all results of these discussions will be identified and summarized in the third part of the workshop as an intermediate outcome of worldwide discussion and experiences of didactic steps of developing clinical skills in music therapy university programs.


Mini biography of presenter: Thomas Wosch, professor of music therapy, research focuses microanalyses, music therapy assessment and music and emotion, he is head of MA music therapy, he teaches and is doing research worldwide

Disclosure: No significant relationships.
WS04

A SYSTEMATIC APPROACH FOR USING CLINICAL IMPROVISATION TECHNIQUES: WORKSHOP -PRESENTATION

C. Lefebvre, D. Carroll
Music Department, Université du Québec à Montréal, Montreal/CANADA

Abstract: A newly published guide for teaching and applying clinical improvisation techniques will be presented by the authors who are music therapy educators with over 25 years of teaching experience. This presentation will be followed by sequenced role-play exercises in which participants will explore the clinical application of these techniques.

Description: Improvisation plays a central role in music therapy clinical practice and the use of clinical improvisation is, in large part, what sets music therapists apart and makes our contribution to health care so unique. Teaching clinical musicianship can be a challenging and multifaceted task. Indeed, the need for a systematic approach to teaching clinical improvisation is clearly illustrated in a 2009 survey of board-certified music therapists in the United States (N=559) on the use of and instruction in clinical improvisation (Hiller, 2009). Results of this survey revealed that, while nearly all of the respondents use improvisation in their clinical work, many of them never received training in music improvisation nor in how to apply their musical resources with clinical intent. In this workshop, the presenters, both Canadian music therapy educators since 1985, will introduce a systematic process-oriented approach they developed for teaching clinical improvisation techniques. This will be followed by an experiential component during which participants will be invited to engage in a sequence of role-play exercises designed to practice the clinical application of these techniques. The taxonomy of clinical improvisation techniques, described by Kenneth Bruscia (1987, 535-557), provided the inspiration and starting point for developing a teaching guide for understanding and applying these techniques. The guide took shape within the context of clinical improvisational courses taught by the presenters. Ongoing student feedback and questions helped to refine this teaching tool (Carroll and Lefebvre, 2013). This guide not only includes strategies for developing clinical musicianship; it also provides a vocabulary for articulating the what, why, when and how of our unique role as music therapists in a language that could be understood by healthcare administrators and practitioners alike. This presentation will be of particular interest to music therapy students, clinicians, educators and supervisors, as well as other healthcare professionals.


Mini biography of presenter: DEBBIE CARROLL (submitter) Accomplished pianist, music therapy clinician, educator, supervisor and researcher, Dr. Debbie Carroll teaches at the Université du Québec à Montréal (UQÂM). She presents nationally and internationally.

Disclosure: No significant relationships.
WS05

CLASSICAL MUSIC, EASTERN & WESTERN, AS THERAPY

S. Dasgupta¹, G. Majumdar², S. Thakur³

¹Music Therapy, THAKUR’S MUSIC AND MOVEMENT THERAPY RESEARCH CENTRE, KOLKATA/INDIA, ²Music And Movement Therapy, THAKUR’S MUSIC AND MOVEMENT THERAPY RESEARCH CENTRE, KOLKATA/INDIA

Abstract: MUSIC IS A UNIVERSAL LANGUAGE. I WOULD LIKE TO CONDUCT A WORKSHOP ON HOW CLASSICAL MUSIC CAN BE APPLIED AS THERAPY LOCATING THE MULTI-CULTURAL ASPECTS OF MUSIC. I SHALL DEMONSTRATE HOW GESTURES AND VOICE MODULATIONS ARE RELATED TO THERAPY, ALSO HOW MUSIC CAN HELP IN ANXIETY AND DEPRESSION.

Description: Music is a universal phenomenon. There is no language more powerful than the language of music. Music crosses all cultural and linguistic barriers. A particular genre of music, for example classical music, which has the same basic approach although from different culture and country, can be applicable as music therapy. One can find people in India appreciating symphony by Bach and Beethoven and again a European enjoying Hindustani and Carnatic classical music of India. Music is based on rhythm, beats and tempo—these three are not dependant on any language. For example Indian Classical Dance can be performed with Beethoven’s symphony, similarly one can perform Ballet with Indian Classical Music—both will give peace of mind. Depression, Anxiety, Stress and several other mental ailments can be dealt with the application of Music Therapy. Especially since all people have different minds, mentalities and characteristics the types of music can also vary according to the patient or the client. I wish to conduct a workshop using Indian Classical Music and its most important component Ragas (A raga uses a series of five or more musical notes upon which it is constructed. The way the notes are approached and rendered in musical phrases and the mood they convey are more important in defining a raga than the notes themselves. In the Indian musical tradition, rāgas are associated with different times of the day, or with seasons) and voice modulation and body movements along with it. I would like to explain how this genre of Music can be applied as a Therapy to treat Anxiety and Depression in particular. At the same time I shall demonstrate that Western Classical Music can also be used with Indian style of gestures and the use of Nine Moods (according to Indian Dramaturgy) is also possible with it.

References:

Mini biography of presenter: Danseuse and Clinical Psychologist. Counselor and Music and Dance Movement Therapist. A Regular Presenter & Performer in Europe & India. Conducted several workshops on Therapy in India, Europe and Korea.

Disclosure: No significant relationships.
THE HILLS ARE ALIVE WITH THE SOUND OF UKULELES...

J. McIntyre, S. Cocking
Ukeophilia, Peninsula Music Services, Australia, Ingleside/ AUSTRALIA

Abstract: 'UkeOphilia' - for the love of ukes, is the name of a community based programme that teaches, services and performs using the ukulele. This workshop will introduce the programme and demonstrate how the ukulele can be used in the community to promote wellness and a sense of belonging.

Description: According to the Guinness Book of Records, the ukulele is the easiest instrument in the world to play. With that thought in mind and the desire to bring the effect of playing music to the community, 'UkeOphilia' - for the love of uke, was born. Under this banner, Steve Cocking and Joanne McIntyre began developing community programmes to bring the joy of playing the ukulele to as many people as possible. Programmes have been developed for all ages including 'UkeSkool' for primary school aged children and 'Uke'n'Breakfast' for business people wanting to play the ukulele. As well as the community programmes being developed, so to has the use of the ukulele in music therapy sessions with children with a disability and adolescents experiencing mental health issues. In these areas, the ukulele has been utilised to assist with mood disorders, lack of self-esteem, physical limitations and many other issues faced by these population groups. This workshop will be a practical hands-on workshop involving teaching the basics of the ukulele and introducing the idea of arrangements for community programmes and also music therapy groups. It will also cover areas such as ukulele maintenance, ukulele selection and video of how the ukulele can be used to bring communities together. There will also be a component of how the ukulele can be used in clinical settings and the responses it can illicit.


Mini biography of presenter: Joanne is a registered music therapist who utilises the ukulele in many aspects of her work. She has assisted in developing a community based programme to teach the ukulele.

Disclosure: No significant relationships.
WS07

RHYTHMFONETIC SYSTEM "TAKADIMI"

R. Misto
Aps, Armon Project, Padova/ITALY

Abstract: Rhythm-phonetic system Takadimi A set of techniques, of South Indian origin, with specific musical, music therapeutic, logopedic, psychomotor and pedagogical values. It's especially appropriate to facilitate and improve the faculties of attention, concentration, assimilation, storage and repetition: in this sense is aimed at fundamental aspects of the so-called "operational intelligence".

Description: From the practical point of view, Takadimi consists in articulating particular phonemes (which have the ability to loosen up and strengthen the muscles used in speech), accompanied by clapping and swaying motion of the whole body. It is very useful in working with hyper-active subjects, with little ability to remain on task for significant time. Improves the acquisition and practice of mathematical calculation, facilitates the strengthening of brain neuronal synapses favoring the connections between the two hemispheres. Generally improves mood and self-esteem and it's a valuable aid in school learning in general. Including a graduated scale of difficulty levels, has the great advantage of being applied to a wide range of users: from the pre-school children, students at various levels, to the holders of psychophysical deficit, the elderly people and so on. At a recreational level, in addition to ensuring a moment of leisure and entertainment, facilitates empathic exchange inducing socialization and opening channels to communicate through non-verbal. We start with a basic rhythm rather slow and then double it faster and faster: the conductor must master the articulation of phonemes and the different movements and clapping of hands and fingers, starting from very simple exercises and then developing a wide range of rhythmic structures which, including many odd formations, allows the improvement of psychomotor coordination, developing mental agility and emotional discharge. The cultural origin of the system (konakol) has its roots in Carnatic music of South India, and for thousands of years has been used in the Indian sub-continent both in strictly musical education (rhythmic solfeggio) that for therapeutic purposes. Even in modern European music today you can hear hints and references to this system of phonemes, which facilitates its use in a music therapeutic key everywhere, overcoming cultural differences.

References: Prof. Vemu Mukunda Musictherapy school "La Cittadella", Assisi CEOD Villaggio Sant’Antonio, Noventa Padovana (PD) Italy

Mini biography of presenter: Padua (Italy) 1954 Graduated in music therapy at Assisi studied with the Indian musician and musictherapist Vemu Mukunda graduating in Nada Yoga. Has studied elements of Indian classical music

Disclosure: No significant relationships.
TUNE IN: BUILD YOUR PROFESSION, YOUR CAREER AND YOUR COURAGE

J.L. Buchanan
President, JB Music Therapy, Calgary/CANADA

Abstract: As Music Therapy becomes more accepted into the mainstream public, interest is percolating as to how agencies and individuals can access it. This keynote is designed specifically for these therapists who are skilled and motivated by their profession and are seeking guidance to increase their profile, profession and clinical portfolio.

Description: YOU WILL LEARN HOW TO: • Effectively market yourself and your service • Demonstrate passion and commitment to your profession • Present your profession and your personal skill set in 5-minutes or less • Create an in-service that is artistic, engaging, and uplifting. • Techniques on how to get to know and understand your potential client and what they want to hear….not what you want to tell them. • Maintain critical relationships that will support your efforts in generating awareness and profile of our profession. • Understand what they mean when they say "we don't have any money". Jennifer will detail her key principles to help you position yourself well in the music therapy marketplace. This keynote will stay focused on the heart of the work - our clients - what we must do if we are going to motivate or ignite strong interest and passion into what we have to offer them. Music Therapy offers the community an extension to their health care and a boost to their learning. The Music Therapist is the interface between reams of music data and the untrained but motivated user. We have a warehouse of knowledge, not to mention we are perhaps some of the most well-trained relationship experts on the planet. Music Therapists should be the local nerve center for information pertaining to anything related to music and that means we need to be a hub of knowledge and experience. The world needs music therapists more than ever. Music Therapists are too important to be a dwindling voice in our culture. For the right music therapist, this is the chance of a lifetime.

References: all have heard my Keynote Presentations: Brian Lee - Custom Learning Systems - brian@customlearning.com Dr. Laurel Young (Professor of Music Therapy) - laurel.young68@gmail.com Erin Gross, MMT - erinmariannegross@gmail.com

Mini biography of presenter: Jennifer keynotes at healthcare/education conferences, has implemented hundreds of MT programs, 18 staff in total, President of CAMT, author of TUNE IN and Member of the Global Speaker's Federation.

Disclosure: No significant relationships.
WS09

FROM PRIMAL VOCALIZATION TO EXPERIENCE OF RAP

S. Uhlig
Creative Arts Therapies, HAN University for Applied Science, Nijmegen/NETHERLANDS

Abstract: The voice is our primary instrument in music therapy for expression and communication - from lullaby to rap. The focus of this workshop is on expressing, as well as listening to the nuances of acoustic symbols and multicultural elements that are inherent in authentic human sounds, and creating communicative dialogues.

Description: The experience of singing or rapping can be essential for a client’s process and it is also fundamental for the therapist’s professional development. Through vocalizing, singing and rapping, we enter into the integrative process of expression and the interactive process of communication. This workshop will offer exposure to human sounds, primal musical motifs and the understanding of them. We learn to interact with these sounds, building up our repertoire of sounds, and becoming ready to use them in therapy. Participants will experience a sequence of vocal exercises that can promote proficiency, sing alone and with others to enhance sensitivity of how the voice impacts human relationships on many levels, develop skill and freedom to use the body and voice in improvisation to communicate effectively with the client. Important for this practice are: developing awareness of the body as an instrument; experiencing the differences between forced and free voices; discovering not-beautiful voices and their effects; understanding (multi)cultural aspects; listening. The workshop offers group and partner work experiences: engages participants in vocal interaction with peers, developing versatility in hearing acoustic symbols and creating a dialogue spontaneously that is meaningful. The personal dynamics that emerge in this work enhance our ability to dialogue with our clients. Clinical examples are used to support and clarify the use of the dialoguing voice in a therapeutic setting. The multicultural aspect of the program offers exposure to human sounds and musical motifs that are primitive and often universal. We begin to understand the many sounds human beings can make and the symbolic messages they convey. We learn how to use primal motives, how to rhyme and to interact during the therapeutic dialogue of rap/singing while song lyrics might slowly develop.


Mini biography of presenter: Lecturer Music Therapy & Voice HAN University, Nijmegen; 20 years clinical experiences. Music Therapy education: BA (HAN 1993, NL); MA (New York University 2010, USA), PhD (VU University Amsterdam 2012->)

Disclosure: No significant relationships.
HOW AND WHY TO CHANGE FROM PRODUCT TO PROCESS IN MUSIC THERAPY

J.M. Dvorkin
Music Therapy, University of the Incarnate Word, San Antonio/UNITED STATES OF AMERICA

Abstract: This workshop will assist music therapists who are supervising or teaching music therapy students to increase their awareness of the process in music therapy; thus increasing the quality of the therapy relationship and substance of music therapy work. Teaching how to focus on process, rather than product, will be included.

Description: In the United States, the field of music therapy originally affiliated with the field of occupational therapy, due to the institutions in which music therapists were hired. Therefore, the ability to learn a song about how to function, or join a music group, etc. met the music therapy goal. Producing the music was the focus. This way of working can still be observed in schools, medical and mental centers. It is also frequently observed in the work of new Board Certified music therapists. A contributor to this way of working is the focus on what song, what key, what instrument, active or passive participation, etc. should be used with the patient. While these are essential decisions, the result of these decisions becomes the end of the work. The ultimate question becomes, "was my decisions right or wrong". The therapist then seeks other ways of answering these questions as their continuing education. Another contributor is the requirement of the accrediting association for music therapy programs to emphasize performance on which the student is experienced. This limits the time available to learn to use a variety of vocal and instrumental techniques that lead to the facility and fluency of music as a way to communicate. When the focus is on understanding the patient through the sharing of music, the music therapist is able to provide unique information to the treatment team. This emphasis on the process of the therapy: what happens during a session and between sessions as an indicator to the progress, or regress of the therapy. This workshop will present examples of each type of music therapy and how to move from a product to a process way of working. It will also address how to teach this way of working to students in music therapy training programs.


Mini biography of presenter: Dr Janice Dvorkin, Psy.D, ACMT, heads the Music Therapy program at the University of the Incarnate Word. She has published on "Emotional Development in Autistic Individuals" and "Borderline Personality Disorder".

Disclosure: No significant relationships.
WS11

GROOVING GLOBE GATHERD GEETS GOOD GOINGS

K. Elkind, A. Weiss
Drum Circles, Groovism Headquarters, Phoenix/UNITED STATES OF AMERICA

Abstract: Groovism prodies the rhythm for the global community to "Groove" together on. The virtual therapeutic value of millions of people Grooving together will create a healing energy unlike any other venue. The flag counter will inform fellow Groovists how many others, around the world, are Grooving together

Description: Having been recognized as a 501 c(3), helps establish our commitment to our mission of uniting humanity. Creating music & gatherings are human instincts, that are shared throughout the world. By experiencing drum circles, I have seen the positive results produced. From non-speaking alzheimers patients becoming vocal, to extremely withdrawn seniors becoming more sociable, The benefits of drumming will be proven on a global basis, by having a sufficient amount of people "Grooving" with The One Groove broadcast from ou website. The smaller community benefits will become apparent primarily, with larger populations becoming better at communicating the many needs that will be of benefit to the larger community. Measuring these benefits will be the most difficult to document, based on the variety of needs, from community to community. Initially we will have questionaires filled out by the participantts of our current drum circles. These will include the many seniors at the many retirement villages where drum circles are commonly enjoyed. As well as patients in other rehabilitation facilities. The current variety of drum circle participants will be the basis of future statistical gathering. This data will range from personal drum circle experience to the overall effect of the circles on the involved community. By emphasising the community's needs, this unique communication process will allow community needs to be brought to light, as well as finding resolutions to the issues. The implications of uniting on a global level has been foreseen by most prophets & many religions have predicted our technological ailities we now possess. Being present at the therapy workshop will further our cause & allow the virtual energy of our global community be available to the many musical therapists. The virtual power of millions of people Groovsing will be most healing!!

References: Andrew Eckar: tribal13th@gmail.com Frank Thompson: frank@azrhythmconnection.com John Fitzgerals: jfitzgerald @remo.com Ava Weiss: weiss.ava@gmail.com Tony Prince: theorigprince@yahoo.com

Mini biography of presenter: Ken Elkind, our founder has been playing drums since the age of 8. Suffering a near fatal accident, he went to the Venice Beach drum circle. The therapeuty felt phenomenal.

Disclosure: No significant relationships.
WS12

THROUGH MUSIC TO MOTION - MUSIC THERAPY FOR NEUROLOGICAL PATIENTS

M. Baumann¹, S. Mainka²
¹Klinik Für Frührehabilitation, Klinikum Bogenhausen, Munich/GERMANY, ²Musiktherapie, Parkinsonklinik Beelitz-Heilstätten, Beelitz-Heilstätten/GERMANY

Abstract: The workshop will provide a panorama from the seemingly non-reacting patient in an altered state of consciousness up to the mobile and independent patient who has problems with quality or fluency of motion. The theoretical background will be illustrated by clinical case studies and deepened by practical music experiences.

Description: In the clinical work with neurological patients we often encounter the phenomenon of motionlessness in various forms of appearance. In music therapy practice we experience very directly and immediately, how music can touch, encourage and enhance – it can stir up what is frozen. The workshop will provide a panorama from the seemingly non-reacting patient in an altered state of consciousness up to the mobile and independent patient who has problems with quality or fluency of motion. The theoretical background will be illustrated by clinical case studies and deepened by practical music experiences.

References:

Mini biography of presenter: Dipl.-Musiktherapeutin (FH), NMT, works for 20 years with neurological patients mainly in early rehabilitation in a communal hospital. Leader of the music therapy programme at the Freies Musikzentrum München.

Disclosure: No significant relationships.
GET YOUR GROOVE ON! IMPROVISATIONAL GROUP DRUMMING IN MENTAL HEALTH

D. Tague
Music Therapy, Shenandoah University, Winchester/UNITED STATES OF AMERICA

Abstract: This session will provide information on group drumming techniques, applications for therapy and group drumming leadership skills for use in the mental health setting. Emphasis is on group drumming techniques, applications for therapy and group drumming leadership skills with specific examples drawn from presenter’s research.

Description: This interactive workshop is adapted from a college level curriculum developed for music therapy students. The course objectives include introducing and practicing hand drum techniques and skills on instruments typically used in drum circle settings. The major emphasis of the course is to prepare therapy students to lead percussion activities in a variety of therapeutic settings with competence and confidence. Classroom activities are designed to allow students multiple opportunities to develop and facilitate drum circle activities and other percussion interventions appropriate for specific therapy populations. The current session adapted from this course will focus on providing functional sets of ideas and protocols that can be used to guide therapists in therapeutic drumming activities. Participants will learn through lecture, discussion and experiential activities. Participants will also take part in simulations that apply the ideas to different populations typical in a music therapy setting. Attendees will gain valuable ideas for activities and guidelines for using drumming and adapted drumming activities in a variety of settings with specific references to the mental health setting. A handout with an outline of ideas, suggestions for activities and pertinent bibliography will be provided.

Participants will take a pre and post test to evaluate self-confidence and certain drum facilitation skills. The goal of the workshop will be to increase the confidence of music therapists using drumming with clients and increase the likelihood that they will use drumming in their clinical practice. Pre and post testing will employ a Likert-type scale on a series of questions regarding drum circle facilitation and leadership skills.


**Mini biography of presenter:** Dr. Daniel Tague is an Assistant Professor of Music Therapy at Shenandoah University. He has worked with adolescents and adults with mental health needs in both research and clinical practice.

**Disclosure:** No significant relationships.
BUILDING COMMUNITY THROUGH FACILITY-WIDE PERFORMANCES IN A PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY.

B. Landless
Clinical Department: Music Therapy, Grafton Integrated Health Network, Berryville, Virginia/UNITED STATES OF AMERICA

Abstract: “I feel like I can do anything!” said an excited teenager after participating in a show. This is one benefit derived from using performance in a psychiatric treatment facility. The process of implementing facility-wide productions, grounded in the philosophy of community music therapy, will be demonstrated and discussed in depth.

Description: The field of music therapy includes many accepted methods, strategies, and techniques of treatment. Less recognized among these strategies is that of performance, especially performance on a large scale. Despite the possible benefits of using performance as a therapeutic intervention, it is not widely documented in the music therapy literature. This may be due to the fact that it is a controversial issue within the field. As community music therapy emerges as a readily accepted method, the strategy of performance is increasingly mentioned and should not be ignored. In this workshop presentation I will address the benefits that can be derived from the use of performance in music therapy, specifically with children and adolescents in a psychiatric residential treatment facility. In addition, I will present and demonstrate a protocol for developing a facility-wide production founded on community music therapy principles; including substantiating research and practice background that have led to the development of this protocol, an overview of the protocol, goals and objectives addressed throughout the process, possible outcomes, challenges and solutions that may be encountered during implementation; and modifications for different settings and populations. This protocol is furthermore based on nine years of experience of implementing up to two facility-wide productions per year. On average, 97% of the clients in residence have participated actively in these shows. Workshop attendees will also participate in practical demonstrations of how to implement some of the steps in this process. Emphasis will be placed on the importance of finding and maintaining a balance between addressing product and process goals throughout this process. We will also discuss the importance of keeping the ultimate goals of building community and increasing client competence in the areas of social skills, emotion regulation, self-confidence, and autonomy at the forefront of the process and the product at all times.

Preliminary abstract overview per January 2014

Preliminary abstract overview per January 2014

Preliminary abstract overview per January 2014


Mini biography of presenter: Bronwen Landless, MMT, MT-BC provides music therapy services, supervises interns and practicum students, and provides in-service trainings at a psychiatric residential treatment facility where she founded the music therapy program.

Disclosure: I plan to publish a clinical manual on this topic. I will utilize content from this manual during the presentation, and will also inform attendees that this publication will be available. Primary purpose of presentation is not, however, to promote manual.
WS16

IMPROVISATION AS "UNTHOUGHT KNOWN" - A CREATIVE TECHNIQUE IN MUSIC THERAPY SUPERVISION

E. Weymann
Institut Für Musiktherapie, Hochschule für Musik und Theater, Hamburg/GERMANY

Abstract: Group supervision with music therapists sometimes uses musical improvisation as a means of deeper understanding of a case. The narrative of the protagonist is followed by (solo-)improvisations and further reflections within the group. This technique will be introduced and demonstrated within a life supervision involving musical playing.

Description: In clinical supervision sessions creative techniques are used to combine with verbal processing. To music therapists it seems very obvious to use musical improvisation, as the therapists are familiar with this medium and they are skilled in detecting very fine differences and meaningful aspects within the music. In group supervision sessions with music therapists I follow the procedures which have been presented by Oscarsson (2011) on the WFMT-Conference in Seoul. After having talked for a while the person presenting a case is invited to play a solo-improvisation. This is followed by a group improvisation - like a resonance of the group members or like "the other side" to the narrative and the music played before. After this the group members reflect upon their experiences and talk about thoughts and fantasies concerning the case. This creative technique seems similar to other techniques in psychotherapy or clinical supervision like free association or familiar constellations: it tries to explore unconscious movements, thoughts and emotions. The improvisation reveals unmentioned thoughts or feelings; important aspects which have been left out come to appearance by means of the musical dynamics. The term of the "unthought known" was coined by psychoanalyst Christopher Bollas to represent experiences about which one is unable to think. After a short introduction to the technique and its theoretical and methodological implications we will perform a life supervision session, working on one or two cases of participants in a small in-group. Musical instruments will be provided. The workshop will conclude with an exchange of experience in the whole group.


Mini biography of presenter: Eckhard Weymann, Dr., music therapist, supervisor, is professor at University of music and drama, Hamburg, Germany. At the Institute of Musictherapy he works with music therapy students and professionals.

Disclosure: No significant relationships.
WS17

AN INTRODUCTION TO VOCAL PSYCHOTHERAPY: SONGS OF THE SELF

D. Austin
, New York/UNITED STATES OF AMERICA

Abstract: This workshop will introduce Vocal Psychotherapy, a new Model of music psychotherapy that incorporates breath work, natural sounds and vocal improvisation with verbal processing. Through recorded case examples and experiential exercises, I will illustrate how vocal improvisation can facilitate the therapeutic process and deepen the connection to self and other.

Description: This workshop will provide opportunities for participants to experience Vocal Psychotherapy and the power of the voice in facilitating a connection to oneself and others. We will explore the use of breath, tone and vocal improvisation through exercises and activities and learn some of the ways in which voicework can enable clients to gain access to their spontaneous, authentic selves. I will demonstrate how "Vocal Holding Techniques" and "Free Associative Singing" can be used in various stages of the therapeutic process to help clients access feelings, images and memories from the unconscious and integrate them into conscious awareness. Deep characterological change requires a controlled regression within a safe and caring therapeutic relationship. Then clients can remember, fully experience and make sense of the feelings, images and sensations that were overwhelming as a child, intolerable because of the loneliness, because no one was present to help the child contain, understand and digest the intense affects they experienced. Vocal psychotherapy provides clients with the opportunity for a reparative relationship. Within the safety of the client/therapist vocal space early needs to be seen, heard and truly understood can be met. Vocal Psychotherapy, a new voice-based model of music therapy, has been used successfully with populations around the world in China, Korea, Japan, Greece, Israel, Canada, United States and Brazil, proving that singing is indeed a universal language capable of uniting diverse cultures when words fail.


Mini biography of presenter: Diane Austin DA, ACMT, LCAT, the Director of the Music Psychotherapy Center in New York City is an adjunct associate professor in the music therapy department at New York University.

Disclosure: No significant relationships.
EXTENDING THE CULTURE OF FAMILY THROUGH MUSIC THERAPY: RESEARCH THROUGH LIVED EXPERIENCES

L. Magill¹, T. Merrill²
¹Education And Training Commission, World Federation of Music Therapy, Ontario/UNITED STATES OF AMERICA, ²Music Therapy, Eastern Michigan University, Ypsilanti/UNITED STATES OF AMERICA

Abstract: Family plays a significant role in cultures worldwide and families are often challenged with difficult life predicaments. Music therapy has been used to meet the needs of families in various communities. This presentation will review observational, qualitative research through lived experiences with families in North America, India and Nepal.

Description: Family plays a highly significant role in cultures worldwide. The concept of family is broad as it consists of a multitude of relationships that cross time, experiences and generations. In many cultures, it is common for 3 to 4 generations to be living together under one roof, and often relations have distant, long-lasting bonds which are built upon historical connections. Families tend to grow and change, especially as past, present and new ties become deeply intertwined. In many countries, families are sometimes challenged with difficult life and/or social predicaments involving poverty, illness and/or disaster, resulting in loss, separation or abandonment. Music therapy experiences in urban and remote areas in North America, India and Nepal have illuminated the special role that this modality can have in extending the culture of family in various settings. In work done with patients and families living with chronic and life-threatening illness, with children with autism and with male orphans in an orphanage in India, music therapy was found to be a motivating and expressive modality that supports and reinforces personal and inter-relationships. Additionally, in oncology, palliative and end of life settings, music therapy strategies have been observed to help build bridges of communication while fostering improved sense of meaning, feelings of empowerment and joy even as deeply-engrained familial roles are challenged and/or permanently changed. In music therapy in these conditions and cultures, music therapists explore techniques to meet the needs of individuals and families facing challenging life situations. This presentation will review observational and qualitative research conducted through lived experiences, as clinicians and educators, in North America, India and Nepal. The culture of family will be reviewed, including the multitude of relationships that it comprises. The impact of music therapy on interpersonal, family-based relationships will be reviewed and case examples will be presented.


Mini biography of presenter: Dr. Lucanne Magill, Seasons Hospice; Faculty, Chennai School of Music Therapy, Chair, Education/Training, WFMT; an editor, Voices. She specializes in oncology and palliative care practice, training, research and intercultural practice

Disclosure: No significant relationships.
WS20

RHYTHMIC MUSIC THERAPY IN PSYCHOSOMATIC AND PSYCHIATRIC REHABILITATION

C. Münzberg
Institute For Music Education, University of Music and Performing Arts Graz, Graz/AUSTRIA

Abstract: Rhythmic music therapy can be used besides the more common musicotherapeutic improvisation also with training aspects. This includes body activating rhythmic practice, psychodynamic oriented rhythmic roleplays and reflections on experiences of rhythm in the patients’ daily life. The concept is introduced as a clinical treatment approach.

Description: Rhythm-related musicotherapeutic offers have often proved themselves in hospitals for psychosomatic and psychiatric rehabilitation. Besides the more common rhythmically focused musicotherapeutic improvisation also training aspects can be used successfully. Rhythmic music therapy includes body activating practice of rhythms, psychodynamic and group dynamic oriented rhythmic roleplays and reflections on experiences of rhythm in the patients’ daily life and living environment, such as tempo, synchronisation or energising. The concept is introduced and discussed as a treatment approach in practical excercises for clinical psychosomatic and psychiatric rehabilitation.

References:

Mini biography of presenter: Dipl.-Music Therapist, Psychotherapist Group psychoanalyst OEAGG, D3G, Group training analyst D3G Training music therapist DMTG, OEBM Management team GRAMUTH, Inter-university course music therapy, University of Music and Performing Arts Graz

Disclosure: No significant relationships.
WS21

ACCULTURATIVE STRESS REDUCTION AND CULTURAL ADJUSTMENT IN MUSIC THERAPY

S. Kim
Music, Molloy College, Rockville Centre/UNITED STATES OF AMERICA

Abstract: Managing acculturative stress that comes with immigration experience is essential. Through case examples of immigrants in the US, theories of acculturation and acculturative stress are examined with a particular focus on how immigrant clients use music as a medium to better manage acculturative stress and to achieve cultural integrity during their cultural adjustments.

Description: Continual change in the racial and ethnic profile is projected. As we live in a global society, music therapists will most likely work with more diverse populations as well. Thus, it is critically important for therapists to be informed about multicultural considerations in their work and be able to utilize cross-cultural skills. Due to the complexity of modern society, the degree of stress that people experience daily has been greater than ever before and managing stress has been an important topic for the healthcare profession. Immigrants face many challenges during their cultural adjustment. They may experience another layer of stress—acculturative stress which they experience while they adjust to a new culture. Chronic acculturative stress can be detrimental to one’s well-being. It may also have a prolonged effect. This presentation will address the nature of acculturative stress and offer coping skills that use music. Utilizing evidence-based research, the prevalence and predictors of acculturative stress experienced by immigrants will be discussed. Also, the presenter will share her own clinical experiences in relation to the topic. The culture-specific meaning of health and illness and gender role will also be addressed through examining multicultural songs. Using music in coping and prevention strategies will be recommended.


Mini biography of presenter: Seung-A Kim is an Assistant Professor at Molloy College and an analytical music therapist at Agape School in N.Y., focusing on work with Korean-American families. Her specialties include Culturally Informed Music Therapy (CIMT), cross-cultural supervision

Disclosure: No significant relationships.
WS22

APPLICATION OF NEUROBIOLOGY RESEARCH TO A MUSIC THERAPY PROTOCOL FOR TRAUMA TREATMENT

G.A. Behrens
Fine And Performing Arts, Elizabethtown College, Elizabethtown, PA/UNITED STATES OF AMERICA

Abstract: The pervasive influence of trauma due to crises is receiving increasing importance among music therapists. This workshop involves attendees in interactive experiences and discussions that review neurobiology of trauma research, outlines four components supported by research, and reveals a new music therapy protocol for treatment based on the four components.

Description: Never before has it been more important to become trauma-informed as music therapists. The incidence of disasters, wars, acts of violence, and abuse across the world continues to escalate each year; therapists are observing an increase in the comorbidity of trauma with other diagnoses; and recent conclusions from research on the neurobiology of trauma are challenging how treatment is provided (van der Kolk, 1996, 2006; Perry, 2009). Despite the increasing incidence of trauma and the potentially unique benefits of music therapy, limited outcome data and treatment recommendations exist for music therapists working with clients dealing with unresolved trauma. This workshop will focus on these two needs, linking the neurobiology of trauma research to the components of a new protocol for developing music therapy experiences to meet the treatment needs of clients dealing with trauma. Through a series of experiences, participants will receive information on the neurobiology of trauma, the components to consider when developing individualized treatment, and the interactive content of a new protocol that uniquely connects the components with music therapy applications. As the protocol is based on neurobiological research, it can be applied across psychological approaches and cultures. After an introduction to trauma-informed concepts, attendees will participate in various experiential activities. They will literally walk through a floor model of how trauma influences the neurobiology of the brain. Based on concepts from three models—Perry (2009); Blaustein and Kinniburgh (2010); and Ziegler (2011a)—four components critical to developing treatment also will be presented while attendees apply concepts from the components to fit selected clients. Finally, the interaction of the four components—goals, treatment steps, strategies, and key domains—will be presented as an interactive music therapy protocol while the attendees design, present, and discuss music experiences that support the needs of their selected clients.


Mini biography of presenter: Gene Ann Behrens, Ph.D., MT-BC directs the music therapy program at Elizabethtown College. Stress trauma treatment is the focus of her research and presentations and international work for the WFMT.

Disclosure: No significant relationships.
WS23

MUSIC THERAPEUTIC IMPROVISATION AND SUPERVISION

H.U. Schmidt, T. Timmermann, J.M. Bosse
Leopold-mozart-zentrum, University of Augsburg, Augsburg/Germany

Abstract: Free improvisation as a typical way to get in contact with and to express inner feelings will be used as a very effective method in supervision of music therapists. The participants are invited to bring clinical cases and situations to work on.

Description: Supervision normally uses verbal forms of working through problematic cases and situations. For music therapists free improvisation is a typical way to get in contact with and to express inner feelings. Therefore they can also be a very effective method in supervision of music therapists. In this workshop participants are invited to present case studies. One person talks about a difficult situation with his or her patient(s). The group then improvises with musical instruments and voice about the feelings arising, followed by a verbal analysis. Important conclusions for the clinical work and further treatment will then be drawn from that experience.

References:

Mini biography of presenter: Professor at the University of Augsburg, Co-Director of MA program and Research Centre for Music and Health, doctor for psycho-somatic and psychotherapy at the university Hamburg

Disclosure: No significant relationships.
WS24

MUSIC IMAGERY RELAXATION (MIR), A TECHNIQUE BASED ON THE BONNY METHOD

M.M. Gimeno
Music, State University of New York at New Paltz, New Paltz/UNITED STATES OF AMERICA

Abstract: This workshop will introduce a music and imagery relaxation technique (MIR) for use with adults in medical settings. The fundamentals of this workshop are based on research done in adaptations of the BM. Participants will have the opportunity to learn through a short didactic presentation and two experiential exercises.

Description: Music Imagery Relaxation (MIR) is given at the hospital bedside with the purpose to provide greater calmness for a patient about to face surgery or potentially traumatic procedures. During the prelude, a therapeutic rapport is established by encouraging the patient to remember an experience that produced a feeling of wellbeing or enjoyment. The therapist draws these memories from the patient to create a sense of comfort for the patient and to develop a script for relaxation. The technique is client-centered and mirrors the regular Bonny Method session and includes: prelude, induction, music listening and postlude. Several authors have reported adaptations of the BM (Blake, 1994; Bruscia, & Grocke, 2002; Goldberg, 1998; Short, 1991; Summer, 2002; West 1994; Wigle & Kasayka, 1999). The literature on the adaptations of the BM describes some variations, such as duration of the music, selection of the music, and bodily position during music listening. Summer (2002) refers in her study to the importance of giving supportive therapy when clients need to be held in order to reinforce any positive feeling that might emerge during the session. Summer states that in supportive therapy, an induction should clearly present a self-affirmation rather than a conflict. Some investigators have examined the effects of receptive interventions, such as music listening and music and imagery, with cancer patients, reporting positive responses such as decreased nausea, anxiety, pain, and fatigue; and improved mood and quality of life. (Burns, 2001; Bonde, 2005; Gimeno, 2010). Participants in this workshop will hear a 20 minutes didactic presentation to understand the components of the technique and then will have two experiential exercises with a process period. Learning for this workshop will include (a) structure of the session; (b) data gathering to develop a script for relaxation; (c) understanding the therapeutic process; and (d) music selection.


Mini biography of presenter: Dr. Gimeno has a Master in Music Therapy and a doctorate in Counseling Psychology. She worked twenty years as a nurse in Barcelona and is trained in the Bonny Method.

Disclosure: No significant relationships.
WS25

RHYTHM IN A CHAOTIC WORLD - DYNAMIC BATUKADA WORKSHOP

R. Bar Even, S. Pridor
Music, Neve t’zé’elim, Ramot Hashavim/ISRAEL

Abstract: Dynamic batukada uses rhythm to achieve several goals. Key elements are: chaos, call and response, non Verbal communication, co-therapy and more. A main goal is to help clients to decrease anxiety by being in all of the phases and to move from one phase to another with joy and confidence.

Description: Batucada is a substyle of samba and refers to an African influenced Brazilian percussive style. It involves a large variety of percussion instruments, such as drums, bells, shakers and more. The term “Dynamic Batukada” was originated by us, in order to distinguish the difference from the traditional Brazilian Batucada: the therapeutic aspect creates a more flexible and dynamic approach towards musical instructions and use of a variety of instruments. The model uses rhythm in order to achieve several goals, personal and interpersonal such as: motor and psychomotor skills, sublimation, outlet, balancing between obeying rules and freedom of expression, increasing self confidence and sense of belonging, practicing non verbal communication and more. The Use of drums and percussion instruments only, makes this workshop “user friendly” also for those who are not trained musicians. Main motives in the workshop are: the Chaos phase, freedom vs. rules, call & response, solo vs. accompaniment, etc. One of the main goals is to help individuals in the group decrease anxiety by developing the ability to be in each one of the phases, and to move from phase to phase with a sense of joy and confidence. The model also introduces the rooles and meanings of the thearapiests: The "Guiding Signal " and the "Grounding Keeper ". The first is the one who usually leads the group to new musical ideas, and marks the transformation from phase to phase , and the other mostly focuses on giving the group a stable beat that gives confidence, and musically " shows the way back home". In the last 6 years this model was successfully used in a variety of groups: Adolescnts with emotional prblems and PTSD, Paraplegic soldiers, kindergarden children, deaf and blind adults, people with parkinson, Therapiests, students and stuff members in Mental institute.


Mini biography of presenter: Roey Bar-Even & Shay Pridor Both are: Musicians and music therapist, . Work at “ Neve t’zé’elim”- a residential treatment center for adolescents with psychological problems and PTSD.

Disclosure: No significant relationships.
WS26

RAP MUSIC THERAPY (WORKSHOP)

L. Hakvoort
Music Therapy, ArtEZ School of Music, Enschede/NETHERLANDS

Abstract: Hip-hop music is very popular among adolescents and (young) adults and therefor an important key to motivate them to participate in treatment. This workshop will hand the participants practical and basic skills to apply rap and hip hop as a musical tool for behavioral and emotional change.

Description: Besides being American slang for ‘talking’, the word “Rap” refers to “rhythmic spoken (rhymed) text” and is suggested to be an acronym for “Rhythm And Poem.” Rap is one of the (major) elements of hip-hop music, which currently forms an important part of our musical culture. Sometimes, hip-hop music is perceived as “bad music” due to the fact that it combines explicit texts with very strong beats. Nevertheless, this music can be a very good starting point for a therapeutic treatment. Rap Music Therapy is a music therapy approach with the emphasis on the musical elements of rap music, such as its specific rhythm, dynamics and expression. Rap Music Therapy aims to bypass text analysis of rap songs, to prevent engage clients in musically addressing their challenges. Treatment goals that are targeted with this approach are related to improving self-esteem, self-confidence, a (better) expression of emotions, as well as behavioral change, anger-management and stress-regulation. Rap Music Therapy consists of 7 steps: (1) performing a rap technically; (2) mastering the rap song musically; (3) recording; (4) expressing one’s own lyrics; (5) composing one’s own accompany; (6) creating one’s own rap song; (7) termination or continuation of Rap Music Therapy. These steps can easily be adjusted to the expertise and limitations of the client as well as the music therapist. Although the Rap Music Therapy approach is developed mainly within the context of forensic psychiatry, it can also be useful for other client populations with motivation problems and for whom hip-hop and rap compose important parts of clients’ musical interests. This workshop is intended for music therapist with limited expertise or skills with rap and hip hop, but realize the potential of rap in their treatment. It will provide the participants with first experience of to a Rap Music Therapy approach.

References: Laurien Hakvoort is senior lecturer in music therapy at ArtEZ school of music in Enschede. Laurien worked as music therapist in forensic psychiatry, Oostvaarderskliniek. She holds a private practice, .

Mini biography of presenter: Laurien Hakvoort is senior lecturer in music therapy at ArtEZ school of music in Enschede. Laurien worked as music therapist in forensic psychiatry, Oostvaarderskliniek. She holds a private practice, Muzis.

Disclosure: No significant relationships.
WS27

CORE TECHNIQUES THAT CAN DEEPEN MUSIC THERAPY SESSIONS ACROSS CULTURES

Y.L. White
Ceo, Voices Together, Chapel Hill/UNITED STATES OF AMERICA

Abstract: While music has been called a universal language, music therapy techniques can seem to be directed at particular populations and/or cultures. There are broad core elements of successful music therapy techniques that allow them to be adapted across populations and cultures. We will explore three core elements in this workshop.

Description: In this hands-on workshop, participants will explore and experience three core elements that are vital to any music therapy practice across cultures and populations. These core elements will not only deepen each therapist’s sessions but will increase outcomes and generalizations which again are important to all music therapists regardless of where they practice and what population they serve. In this workshop we will lay out the three elements clearly and support this approach through our proprietary music therapy techniques using a fully experiential format. We will borrow from one of the approaches our programming is based on called The EVA™ Approach. The Experience As we lay out each core element, we will take each participant through an interactive experience using our program technique songs to demonstrate, experience and process the new methods as a group. Three core elements: 1. **Engage** In order for a therapist to be fully engaged with a client, there has to be an element of discovery, self-awareness and connection in each moment. We will explore how to integrate our own personal strengths and challenges into each session as they become the key to powerful moments in therapy. 2. **Validate**; “Open The Space” a non-directive approach for all populations As we learn to let go of control and truly offer non-directive therapeutic moments, each client’s unique experience is allowed to surface and be validated. This is key to each client’s ability to build the tools to participate in their own growth, self-regulation and self-advocacy. 3. **Assume Competency** Expectation of response: In order to see a client within a framework of their potential verses their behavior or challenges, we need to work from an assumption of competency. We will demonstrate how small but powerful changes in a music therapist’s method can positively alter results.


Mini biography of presenter: Yasmine White, MT-BC, CEO and founder of Voices Together, an award winning non-profit music therapy organization based in North Carolina. Having developed a proprietary program, she presents and trains statewide.

Disclosure: No significant relationships.
WS28

MUSIC BEFORE MEDICINE

B.G. Davidson, S. Wu
Musical Therapy, Shen Wu Music of Life Foundation, Rowland Heights/UNITED STATES OF AMERICA

Abstract: Ancient Chinese medicine texts, the I-Ching and The Yellow Emperor's Internal Medicine, explain that our internal organs have intrinsic frequencies. Through resonance, musical sound waves of the Five-Tones can vibrate the body's five major organ systems, thus correcting their imbalance to gain smooth flow of qi for vigor and longevity.

Description: Music, herbal medicine, and Qigong (qi energy exercises) shared the spotlight as the fundamentals of traditional Chinese medicine in ancient times. Music was considered to be the most important and the foremost of the three; hence the character for "music" was created before and placed above the character for "herb" to form the character for "medicine". However, with the increase in efficacy of herbal medicine, and a series of unfortunate incidents in Chinese history, the use of music as medicine vanished completely for thousands of years. But Master Shen Wu, a master Qigong practitioner, re-discovered the therapeutic effects of music by studying the ancient texts. He also discovered that playing the Five-Tones while practicing Qigong, qi flow amplified quickly. He then combined the two powerful healing therapies of music and Qigong to form his Music Qigong Therapy. Now music is restored to its rightful stature as a healing therapy. Classical Music has calming qualities. But if the music is composed according to the Five-Tones Theory its therapeutic efficiencies increased dramatically. Five-Tones: metal-tone, wood-tone, water-tone, fire-tone, earth-tone correspond, respectively, to the five internal organs—Lung, Liver, Kidney, Heart, Spleen. The Five-Tones can resonate the five organs in our body, thus correcting their imbalance and allowing the body to resume its natural state of good qi flow thus good health. Qigong exercises are gentle, simple exercises used to gain qi from the universe and thus to increase the body's qi. Qigong exercises are extremely effective, easy to learn, and take only a few minutes to practice; all of which make Qigong an excellent way to gain and maintain excellent health. Whether you are in excellent health and wish to maintain it, or in poor health and wish to gain excellent health, you can benefit from the unique therapies of Music Qigong.

References: To apply and test the discoveries of resonant frequencies of the Five-Tone and Qigong, Master Shen Wu sets out to help ailing cancer patients in local hospitals. To Master Wu’s astonishment, cancers of all types are no match to the music of the five tones and Qigong. Music Qigong is able to indiscriminately help patients with brain cancer, uterus cancer, oral cancer, lung cancer, nasal cancer and breast cancer. Music Qigong is also able to reduce the size of tumors in the brain, pancreas and lymph nodes. Many success stories and cases are documented at http://joltv.us/english/doctors.htm. Below are some of the highlights… Master Shen Wu working with Dr. Finkler, a Gynecologic Oncology Cancer Specialist, at Walt Disney Memorial Cancer Institute to heal many cancer patients.http://joltv.us/english/finkler.htm
September 9, 1999

To Whom It May Concern:

During the calendar year 1998 and early 1999, the division of gynecologic oncology at the Walt Disney Memorial Cancer Institute at Florida Hospital collaborated with Master Wu in a nonrandomized, uncontrolled trial on evaluating the effects of Qi Gong therapy in patients with end-stage cancer and pain. The purpose of this short-term trial was to evaluate whether Qi Gong therapy had any beneficial effects with regards to reducing pain associated with terminal pelvic cancer. Approximately 15 patients were enrolled in this trial and underwent Qi Gong therapy with Master Wu on an as needed basis in an attempt to reduce narcotic requirements associated with their terminal malignancy. During the course of this trial, it became quite apparent that all of the patients studied had marked reduction in their narcotic requirement. In several patients, narcotics were able to be discontinued totally and pain relief continued with Qi Gong therapy alone. Although this was a nonrandomized, uncontrolled trial, it is interesting to note that the life expectancy of the majority of patients with terminal malignancies turned out to be far greater than one would have expected with standard conventional therapies alone.

The study showed such promising effects of Qi Gong therapy that we are presently planning a large-scale prospectively controlled trial in an effort to try to reproduce these results on a larger scale. It has certainly been a pleasure working with Master Wu and his team and we look forward to future collaborative efforts in our attempt to define a role for Qi Gong therapy in the management of the cancer patient.

Sincerely yours,

Neil J. Finkler, MD
NJF/nya

Master Shen Wu with Dr. Katta, a Hematology and Oncology specialist, in healing a brain tumor patient. http://joltv.us/english/katta.htm
Master Shen Wu treated a Neurologist with Malignant Melanoma with music qigong. http://joltv.us/english/tod.htm Master Shen Wu helped cured an end-stage patient with CML (Chronic myeloid leukemia) in UCLA with Dr. Hank Yang, MD, Ph.D. http://joltv.us/english/yang.htm A cancer patient that received Music Qigong treatment from Master Shen Wu found that his pain was alleviated and no longer needed morphine. http://joltv.us/english/ken.htm Master Shen Wu also applied Music Qigong to patients with hearing impairments. After the treatment, his hearing got better. http://joltv.us/english/deaf.htm After working with patients, doctors, and conducting clinical trials, Master Wu found that this method can only aid a limited number of people. But Master Shen Wu wanted to help more people get rid of pain and suffering from disease and cancer. And the only way to achieve this is through resonance. With five-tone sound waves vibrating to a broader audience, more people can be helped at one time. This can be done in big concert halls. During a concert, Master Wu would play the five tones with various instruments to help cure audiences through resonance. So
Master Shen Wu started the healing concerts. Every year Master Shen Wu takes part in many non-profit activities in concerts. For example, in 2005, China Central Television (CCTV) reported the concert, which was sponsored by twelve Chinese Ministries and Commissions, to help AIDS patients. Master Wu donated 10,000 <Life Music, Music before Therapy> DVDs and donated contributions collected in America to the AIDS patients. For more, see: http://joltv.us/XIN%20JIA%20PO%20AI.htm Testimonies from patients who benefit from Master Wu’s music in healing concerts in Malaysia. See: http://joltv.us/2008/2008malaysia.htm Celebration after the ten-thousand people concert with Stars of Singapore and Taiwan, one of Master Shen Wu’s worldwide non-profit activities. http://joltv.us/XIN%20JIA%20PO%20ZHAO%20XXX.htm Training classes started in Malaysia University in 2011. http://joltv.us/2012fongyo/ma%20mu%20lu.htm
Mini biography of presenter: Master Shen Wu, founder of Music Qigong, re-discovered the therapeutic effects of music by studying the ancient texts. Through resonance, music and Qigong becomes powerful healing therapies.

Disclosure: No significant relationships.
WS29

ORGANOLOGY OF MUSICAL INSTRUMENTS - UNIVERSAL PRINCIPLES AND CULTURAL DIVERSITY

A.C. Hammer
Direction, Svaram Musical Instruments, Auroville/INDIA

Abstract: In the context of the emergence of Music Therapy worldwide and in different cultures it is important to understand the common universal principles of the morphology of musical instrument, their construction, shape and materials, so to better be able to discern within their cultural diversity, common correlations and specific usages.

Description: In ancient cultures the origin of musical instruments is often described in legends and myths in terms of the supernatural, the magic and mysterious and they are presented as an essential aid and tool for the progress, health and well-being of the individual and the community. Depending on geographical and cultural circumstances and the availability of certain materials a rich diversity of musical instruments has developed over the course of time, yet it is interesting to observe that there are only a few core-archetypes of instruments to be found throughout all the cultures of humanity. What then are the significations of these archetypes, and how do they relate to therapeutic applications of music? What are the tested timeless principles behind instruments, what their cultural specifications and limitations? What are the necessary innovations to provide for the present growing need in Music Therapy? These questions will be explored in an interactive way, through live demonstration of selected instruments and their use, with the aim to be able to discern between universalities of musical instruments and their cultural diversities, specific characteristics and applications.


Mini biography of presenter: Aurelio (A.C.Hammer) is specialized in organology, the study of musical instruments, their universality and cultural diversity. He is founder of Svaram, South India, presents internationally and practices sound healing modalities.

Disclosure: No significant relationships.
WS30

SINGIN’ AND SWINGIN’: AN EXPLORATION OF GOSPEL MUSIC FOR THE MUSIC THERAPIST

D.M. Cox
Music, University of Dayton, Dayton/UNITED STATES OF AMERICA

Abstract: Gospel music is a dramatic, highly expressive music, capable of reaching deep into the hearts and souls of both hearers and performers. In the proposed session, participants will actively explore performance practices associated with this vital American genre by learning examples of gospel songs. They will also consider clinical applications.

Description: In the session, Singin’ and Swingin’: An Exploration of Gospel Music For The Music Therapist, participants will: 1.) discuss ways which an understanding of gospel music can enhance their work. This will include the ability of gospel music to encourage spontaneous involvement manifested through hand-clapping, foot-stomping, finger-popping, bodily movements and dance as well as verbal and nonverbal interjections. Inherent in gospel music is its ability to transcend time and space and transform listeners and participants. 2). explore the history of gospel music as a vital American genre. The clinician will help therapists differentiate between the spiritual and gospel genres by seating them historically and culturally. Singing examples of each will further solidify their differences while highlighting their connectedness. 3). explore the use of rhythm and movement in gospel music. This will include an exploration of clapping and ‘rocking’ as fundamental ingredients in creating the layered rhythms associated with gospel music. 4). sing several songs which the therapist can later use. A large percentage of the workshop will be spent in practical acquisition of literature. The participants will form a gospel ensemble and learn several songs using the aural/oral tradition. 5). be given a discography for future use in selecting appropriate gospel songs for their client population.

References: Dr. Susan Gardstrom University of Dayton Department of Music 300 College Park Dayton, OH 45469 sgardstrom1@udayton.edu Dr. Linda Walker Kent State University 533 Rellum Drive Kent, Oh 42240 lwalker@kent.edu Dr. Kathy Bullock Berea College 1020 Moonlight Drive Berea, KY 40404 bullockka@berea.edu

Mini biography of presenter: A much-sought workshop leader Dr. Donna Cox, Professor of Music (University of Dayton), has presented workshops at professional conferences across the US and in various parts of the world.

Disclosure: No significant relationships.
THE HASIDIC PRACTICE OF NIGGUN SINGING

A.M. Saltiel
Und Supervision, Praxis für Psychotherapie, Graz/AUSTRIA

Abstract:
In the Hasidic tradition a religious act is considered invalid if it is not accompanied by enthusiasm and joy. Hasidim use psycho-spiritual techniques such as singing repetitive niggunim, special wordless melodies, in order to allow one's internal essence to resonate as the melodies unfold.

Description: “The tongue is the pen of the heart, but melody (niggun) is the quill of the soul”–Rabbi Shneor Zalman of Ladi The singing of niggunim is a spiritual practice of the Hasidim, a mystical renewal movement within Judaism that has its beginnings in the 18th century in what is now western Ukraine. The Hassidic centers of learning of our time trace their origins to Rabbi Israel ben Eliezer (c. 1700-1760), who sought to apply the principles and practices of the Kabbalah in everyday life. One of his main teachings is the importance of "lightening the heart" or "elevating the soul" before proceeding with religious practice. Different tunes are used to evoke different inner states, which correspond to the names or archetypal qualities of the Divine. In this workshop, we start with simple vocal exercises and then sing niggunim together to experience the effect of the tunes on the body, feelings and mind.

References:

Mini biography of presenter: Aron Saltiel, singer, storyteller and psychotherapist in private practice, has studied Jewish and Islamic musical traditions, conducted ethnomusicological fieldwork and pursued concert and teaching careers. He lives in Graz, Austria.

Disclosure: No significant relationships.
WS32

MUSITHERAPY AND DRUM CIRCLE.

K.H. Glinka
Music Therapy, self employed, Quilmes, Pcia de Bs As/ARGENTINA

Abstract: I graduated in Musictherapy from University of El Salvador, Buenos Aires, Argentina. The proposed workshop is based on my thesis: Musictherapy and Drum Circles, which is an approach to Group Musictherapy. Both the drum circle technique and Group Musictherapy lead to promote health and wellness.

Description: A drum circle brings people together to make music in a celebration mood by using the tools of improvisation and the skills of the participants as well as the musical sensitvity of the music therapist (the facilitator). Some of the health indicators of drumming are: resilience, creativity, synergy, empowerment, cooperation, empathy and here and now state. Such features are also found in a primary health framework. Arthur Hull, father, mentor and world leader of the modern facilitated Drum Circle Movement, says that it is a useful tool of integration for a contemporary fragmented society. What is the essential contribution of this experience to the field of health? Anthroposophy has given me a deeper and broader idea of man than that of existential humanism. Writers such as Steiner, Bühler and Husemann let us conceive a dynamic coexistence of binary and ternary rhythms that leads to a state of physiological health. This rythmical organization of the human body (heart and lungs) echoes with a steady pulsation of vitality in two and three: binary rythm is related to cautiousness, will power, earth and water; ternary rythm is related to air, fire, fluency and Spirit. Whenever these rythms take turns, people flow smoothly through both ends. However, if they are stuck in one of them, there will be crystallization and pathology. It is based on Hull’s guidelines and consists of two songs: one with binary rythm and the other with ternary rythm. Participants will improvise, expressing what they feel, rather than following a complex set of rules, creating a new rythm and a much deeper musical relationship.


Disclosure: No significant relationships.
WS33

TO STILL THE MIND WITH MUSIC

H. Liang
Administration, Taipei Inner connection Music association, Hsin-Tien dist. New Taipei City/TAIWAN

Abstract: This practice stills our minds by listening to music, with the help of the essentials of traditional Chinese idea of meditation and Taichi body-relaxing. During the session, participants undergo stages from listening to being aware of their own listening, appreciate the state of soundless serenity through listening to the sound.

Description: Step 1. Listen Participants are told to relax, follow the rhythm of the music, with eyes closed. Music causes some effects on brainwave, autonomic nerve, and the balance between mind and body. Then they will be asked to observe their own emotions and anything what so ever flowing out from their minds. Step 2. Tuning the Heart Participants now concentrate on their heart beats, feel the vibration, let the music flow into their hearts. Then they are told to thank the gracious giving of mother earth, feel the very same vibration of it, picture their minds to be as broad as the universe. Step 3. Tuning the Body This set of body movement is the warm-up of Taichi, the purpose is to relax the major body parts: neck, shoulders, elbows, wrists, fingers, waist, hip joints, knee joints, ankles. Participants are asked to turn their attention entirely from outer world back to their own bodies. Step 4. Meditating Remaining in the state reached in Step 3, participants are told to sit down, concentrating on their own bodies for 15 minutes, without any nuance movements. After the guiding of the preceding steps, it will be easier for them to enter the state of meditation, in which their attention turn from the outer world back to the inner universe, profoundly appreciating the serenity, with their bodies relaxed.

References:

Mini biography of presenter: Chairperson of Taipei Inner connection Music association. This workshop has been operating for four years, mainly for high schools and college faculties and students in Taiwan.

Disclosure: No significant relationships.
WS34

HOLISTIC APPROACH IN MT AND ITS SPECIFIC FEATURES IN CHILDREN GROUP THERAPY

S. Drlíčková, M. Friedlová
Department Of Psychology, Palacký University Olomouc, Olomouc/CZECH REPUBLIC

Abstract: The seminar focuses on the system of holistic music therapy perceiving each individual from the point of view of indivisible biopsychosocial unity and its use in children group therapy. The workshop includes theoretic topics as well as practical examples: Tuvan exercise, MT orchestra and a short relaxation plus video recording.

Description: Holistic music therapy presented in the workshop perceives each individual from the point of view of indivisible biopsychosocial unity. It supports the endeavour to return to the simple order of things. Within this model we work with good quality music instruments, both in material and sound, with pure intonation. Mainly folk instruments are used - of Central European origin, ethnic, medieval, percussions. In the holistic music therapy model the music is always acoustic. An indispensable part of the system is sensitive work with breath and voice. Special breathing and singing techniques are used that have their roots in the music of native peoples and in Moravian folk music. The workshop describes experience with group therapy for children in the system of holistic music therapy and presents specific music therapy models. In this system, active and receptive methods of work are used and chosen based on the clients' needs and the therapeutic aim determined. Music therapy models are created so that they may be used, if slightly altered, for children with mental, physical, sensory, speech and combined handicaps. Workshop includes both theoretic and practical parts: Theoretic part - the system of holistic music therapy, group music therapy, active and receptive forms of therapy in children Practical part - Tuvan exercise, music therapy orchestra, short relaxation Video - short examples from active and receptive music therapy sessions and music therapy concerts with children


Mini biography of presenter: S. Drlíčková is a music therapist with holistic approach to clients who has long experience especially in group MT for handicapped children. She prefers and uses instruments with pure intonation.

Disclosure: No significant relationships.
WS35

ZINTHU ZA ALIYENSE (SOMETHING FOR EVERYONE). MUSIC THERAPY IN RURAL MALAWI

P.J. Winter¹, A. Blanks², J. Jones³
¹Music Therapy, Radford University, Radford, Virginia/UNITED STATES OF AMERICA, ²Special Education, Radford University, Radford, Virginia/UNITED STATES OF AMERICA, ³School Of Teacher Education, Radford University, Virginia/UNITED STATES OF AMERICA

Abstract: This is an exploration of a transdisciplinary collaboration incorporating music therapy, special education, and literacy in 20 primary schools in rural Malawi. The project culminated with professional development workshops for educators addressing the importance of community music, classroom adaptation, and literacy best practices to support accessibility for children with disabilities.

Description: Published research on music therapy in Africa is very limited. Oosthuizen, H, Foché, S. & Torrance, K. (2007) discussed a community music therapy program in Cape Town, South Africa, Pavlicevic (2002) also explored a CoMT program in South Africa, and there is a report of CoMT at a refugee camp in Kenya (Akombo, 2002). Africa as a continent is severely underserved by the music therapy community in spite of the strong cultural and community traditions around the use of music for healing. At this time there have been no published reports of the use of CoMT or music therapy in Malawi. This project was an exploration of the incidences of disabilities in 20 primary schools in rural Malawi, the use of music as an integral part of the educational community, and the impact of cultural musical traditions for providing accessibility to children with disabilities diagnoses. Through a transdisciplinary approach to education and training, professional development workshops were provided to primary school educators from 20 rural schools. These workshops combined music therapy concepts, special education approaches, and literacy best practices in an effort to offer additional support for providing access to children with diverse educational needs. This presentation will be an overview of the presenters’ experiences as observers in the classrooms, an overview of cultural and traditional beliefs about disabilities, and the process by which the presenters developed and implemented the professional development workshops. The music therapy approaches were largely drawn from the community music therapy literature and reflect an emphasis toward empowering the community to provide accessibility to all children as well as the importance of sustainability of the techniques and approaches offered to the educators. Implications for further research will also be discussed.


Mini biography of presenter: Patricia Winter Ph.D., MT-BC, Allyster Blanks Ph.D., and Jennifer Jones, Ph.D. are professors at Radford University in music therapy, special education and literacy respectively.

Disclosure: No significant relationships.
BEING IN THE "HEAR" AND NOW: MUSIC-MAKING AS MINDFULNESS PRACTICE

F. Halverson-Ramos
Private Practice, SoundWell Music Therapy, Longmont/UNITED STATES OF AMERICA

Abstract: Research shows that mindfulness has a variety of health benefits. While traditionally associated with meditation practices, mindfulness can also be experienced through music-making. In this presentation, participants will deepen their understanding of mindfulness through music-based activities and examine possible implications for themselves and clients.

Description: Mindfulness can be understood as a state of being in which one experiences moment-to-moment awareness from an internal place of non-judgement. Increasingly, research in mindfulness is showing that such a state of mind can have a highly beneficial affect on one’s sense of well-being. Benefits of mindfulness include: reduced rumination, stress reduction, improved working memory, greater focus, less emotional reactivity, more cognitive flexibility, greater relationship satisfaction, self-insight, morality, intuition and fear modulation. Traditionally, mindfulness practice has been associated with meditation practices, but music can also be used as a form of mindfulness practice. In this educational, experiential, process-oriented presentation, participants will deepen their understanding of mindfulness through music-based mindfulness activities.


Mini biography of presenter: Faith Halverson-Ramos, MA, LPC, MT-BC is a board certified music therapist and Licensed Professional Counselor in Colorado. Mindfulness practice is foundational to her work as a music psychotherapist.

Disclosure: No significant relationships.
WS37

THE BODY TAMBURA - IMPACTS AND APPLICATION OF A VIBROACOUSTIC STRING INSTRUMENT

K. Eckbauer1, O. Zeigert2
1N/a, N/A, Vienna/AUSTRIA, 2, /AUSTRIA

Abstract: This workshop will focused on the potential of the body tambura. This 28-stringed instrument is used in active and receptive music therapy. Beside theoretical informations, there will be a practical application of the body tambura. The participants will be part of an active voice improvisation and a receptive sound experience.

Description: This relatively new body instrument is widely unknown outside of german-speaking regions. Description and practical use of the body tambura in active and receptive music therapy was the main topic of the master thesis of two graduates of the University of Music and Performing Arts Vienna, Department of Music Therapy (supervised by PD Mag. Dr. Gerhard Tucek and Univ.-Prof. Dr.med Thomas Stegemann). The body tambura, holding 28 strings, stimulates the multimodal sensory perception as well as self-awareness of the recipients. The unique sound and the easy portability are two main features of this instrument which make it distinguished from other body instruments e.g. the body monochord. This workshop based on self-experience is organized in the following three parts. In the beginning, a short explanation of the theoretical background will be provided. First results of scientific research are to be presented. These results indicate an effective benefit of using the body tambura in clinical practice. Research on the constitutional potential of the instrument and its other impacts in biopsychosocial context has just begun. During the main part active and receptive aspects of the body tambura will be shown to the participants. The active part will be done by voice-improvisation, supported by the harmonic sound-spectrum of the body tambura. In the receptive part, the participants are going to lie on mats and get the opportunity to listen to the monochrome sound and experience its effects. Subsequent to the main part the impressions can be shared. Finally, there will be an open space for questions and public discussion. If so desired, playing the body tambura can be "experienced" vibroacoustically in pairs (with the instrument resting on the body of the recipient). The participants should be aware that the use of their own voice is welcome, but not obligatory. Furthermore, comfortable clothes are recommended.


Mini biography of presenter: Katrin Eckbauer MA, graduate of University of Music and Performing Arts Vienna, Department of Music Therapy; Three years experience with the body tambura combined with voicework; Multisensory stimulation with adults.

Disclosure: No significant relationships.
WS38

MUSICAL TECHNIQUES OF ENGAGEMENT

S. Gardstrom¹, J. Hiller¹, L. Mchugh¹, D. Phillips²
¹Music Therapy, University of Dayton, Dayton/UNITED STATES OF AMERICA, ², , Dayton/UNITED STATES OF AMERICA

Abstract: The success of our work is predicated, in large measure, on clients’ engagement in the music therapy process. Low levels of engagement compromise the process and high levels may increase the potential for more meaningful therapeutic gains. This workshop includes models of client engagement and various musical techniques of engagement.

Description: The success of our work as music therapy clinicians is predicated, in large measure, on the level of our clients’ engagement in the music therapy process. We believe that low levels of engagement compromise the clinical process, whereas high levels of engagement increase the potential for a more satisfying process, as well as for greater and more meaningful therapeutic gains for our clients. As music therapists—whether we are facilitating listening experiences or leading a client in vocal or instrumental performance, composition, or improvisation—we are in a position to positively influence levels of client engagement. Without a clear understanding of the nature of engagement and the techniques that promote it, we will undoubtedly miss opportunities to do so, thereby compromising client growth, development, and wellbeing. In music-related literature, one can find studies that aim to identify and explore the concept of engagement with pediatric and adult medical patients (O’Callaghan & Colegrove, 1998; Robb et al., 2007; Toolan & Coleman, 1995; Whitehead-Pleaux et al., 2007) and individuals with developmental and learning disabilities (Stamenovic, 2009; Toolan & Coleman, 1995). There are also some published studies pertaining to engagement among residents with Alzheimer’s Disease and Related Dementias (ADRD) (Harrison et al., 2010; Mathews, Clair & Kosloski, 2000). By and large, the reports that do exist have as their focus the verbal and nonmusical actions or techniques of the therapist, such as gesture, facial affect, proximity, touch, and so forth. A deepening of client engagement requires concerted attention to the fine details, or nuances, of our own actions as we facilitate music experiences. The purpose of this workshop is to expand therapists’ conscious awareness and effective use of musical techniques of engagement. Discussions, video footage, modeling, and practice with peer feedback will be used to reinforce conceptual and practical applications of these techniques.

Mini biography of presenter: Dr. Susan Gardstrom, MT-BC, is the Coordinator of Music Therapy at the University of Dayton. Susan is a frequent presenter and workshop leader at state, regional, and national conferences.

Disclosure: No significant relationships.
WS39

MUSIC THERAPY ASSESSMENT FOR AWARENESS WITH DISORDERS OF CONSCIOUSNESS (MATADOC): ASSESSMENT PROTOCOL

W. Magee¹, E. Alexiou², G. Lenton-Smith³
¹Music Therapy, Temple University, Philadelphia/UNITED STATES OF AMERICA, ²Royal Hospital for Neuro-disability, London/UNITED KINGDOM, ³Ealing Music Therapy, /UNITED KINGDOM

Abstract: We provide a workshop with demonstrations of a protocol that has been standardized for use with patients with disorders of consciousness: the Music Therapy Assessment Tool for Awareness with Disorders of Consciousness (MATADOC). Through live demonstrations and video presentations, participants will gain an understanding of the procedures of the MATADOC.

Description: Music therapy with people with disorders of consciousness (DOC) has a long history (Boyle and Greer, 1983). However, the music therapy approaches and methods used with this population are diverse, with most clinical practice based in expert opinion rather than evidence (Magee, 2005). Although a growing evidence base from neuroscience is relevant to music therapy with this population, it is often difficult to integrate the findings from basic research into interventions that are therapeutic and clinically relevant (O’Kelly & Magee, 2013). We present a practical workshop on the assessment and treatment protocol used in the Music Therapy Assessment Tool for Awareness in Disorders of Consciousness (MATADOC). The MATADOC has been standardized as valid and reliable for use with adults with DOC and has diagnostic power with this population (Magee et al., in press). Its validation with a pediatric DOC population is underway, and it has relevance for other, as yet untested, populations such as advanced dementia, profound and multiple learning difficulties and advanced neurological illness where consciousness is compromised. Developed and refined in clinical practice over a 17 year period to align with interdisciplinary practice (Magee, 2007), the MATADOC protocol assesses behaviours that are essential for demonstrating awareness across the auditory, visual, communication and arousal domains. The protocol uses a range of musical stimuli, including single auditory stimuli, complex musical sounds, and musical activities to measure a broad range of functional non-musical behaviours (Magee, Lenton-Smith & Daveson, 2012). This workshop will offer participants an insight into the clinical methods used in the MATADOC assessment as well as the science underpinning the methods used. Participants will gain some skills in using the MATADOC protocol interventions with patients with disorders of consciousness. Skills developed in this workshop can be furthered through specialist training and competency development.


Mini biography of presenter: Dr. Wendy Magee, Gemma Lenton-Smith and Eirini Alexiou were all involved in the research that standardized the MATADOC. All are experienced clinicians in working with adults with disorders of consciousness.

Disclosure: No significant relationships.
WS40

ACROSS TEH BORDERS - SINGING INSIDE AND OUTSIDE THE MUSIC THERAPEUTIC SETTING

M.R. Mühlbauer  
Institut For Cultural Ans Social Anthropology, University of vienna, Vienna/AUSTRIA

Abstract: Music therapy gets influenced by cultural changes and phenomena and vice versa influences the cultural activities by its work and research. My contribution about “singing” regarded as a phenomenon of healing, empowerment and spirituality within parts of the German and Austrian culture gives an example of this cultural interaction.

Description: The river is flowing, an Indian song for Empowerment is the first song of the book „Chanten – Dipping into the healing world of singing“ (2008) by the German music therapist Wolfgang Bossinger “This chant was given to people from the west by Sun Bear, a medicine man of the people of the Chippewa (Ojibwa)” (Bossinger/Friederich, 2008, S.14). The same song will be found in the book “Songs of the heart – Spiritual Songs und Mantras” (1995) of the Austrian musician and leader of rituals and vision quests Gerhard Lipold twenty years before. “All versions of the mentioned Indian songs (...) are to a certain extend adopted to our habits of listening” (Lipold, 1995, S.12). And we will find this song again in a slightly different version in: “Come together songs – Vol. 1” (1997) by Hagara Feinbier a German music teacher. This song is just one example of many other songs, chants, mantras, etc. from many different cultures all over the world to be heard and sung in work-shops, concerts or other singing events of the mentioned three authors and many others around them. All the songs have one in common: they are sung in large groups, without notes, very often repeated and improvised, in combination with dancing without performance character but for a spiritual or healing purpose. Is there a cultural ground of reason, why this special form of singing practice and this special assemblage of songs of different spiritual and healing traditions can be found inside and outside the music therapeutic setting in Austria and German? Who influences whom and how and why does this influence work? Results out of my PhD research in cultural and social anthropology and music ethnology on “singing and healing” based on a fieldwork in and around Vienna.

References: Univ.Prof. Dr. Bernhard Hadolt; University of Vienna, Institut for cultural and social anthropology; (medical anthropology) Priv.Doz. Dr. Gerhard Tucek, University of Vienna, Institut for cultural and social anthropology; (music therapy) Univ. Prof. Dr. Regine Allgayer- Kaufmann, University of Vienna, Institut for music sciences; (music ethnology) Ass.Prof. Dr. August Schmidhofer, University of Vienna, Institut for music sciences; (music ethnology and music healing)


Disclosure: No significant relationships.
WS41

GUIDED SONGWRITING WORKSHOP

E.K. O'Brien
Music Therapy, The Royal Melbourne Hospital, Melbourne/AUSTRALIA

Abstract: GOLM is a specialized published music therapy songwriting protocol that follows a series of stages to create an original song with the patient (O'Brien, 2006). Participants will have the opportunity to role play the stages of GOLM and create an original song as a group experiencing the method.

Description: GOLM is a specialized published music therapy songwriting protocol that follows a series of stages to create an original song with the patient (O'Brien, 2006). These stages may be dynamic and move between one another throughout the songwriting process. The song is newly composed with original lyrics and original music. The method is underpinned by therapeutic intent, which is evident in each stage of GOLM process being validated by the patient/participant. GOLM requires specific specialised training in order to provide the participant with a comprehensive experience. GOLM was formulated by extensive study into writing songs with cancer patients in the principal researchers masters research (O'Brien, 2005). To date the workshop presenter has written over 350 songs, an opera (2005), a musical (2006), and a cabaret show (2008) with cancer patients using this method. GOLM is also the subject of O'Brien's recently completed PhD research. GOLM can be used with voice and any other accompanying instrument. For this workshop participants will have the opportunity to role play the stages of GOLM and create an original song as a group experiencing the method. It is expected that the participants are skilled in guitar and voice in order to participate in this session. (Maximum participants 30)

References:

Mini biography of presenter: Emma O'Brien has pioneered methods in guided facilitated songwriting across music genres and her work was the subject of the multi award winning SBS/reel documentary, ‘Opera Therapy’ (2005).

Disclosure: No significant relationships.
WS42

MUSIC THERAPY IN THE SOCIAL WORK

G.J. Fierus
Musiktherapie, Musiklabor-Netzwerk, Velbert/GERMANY

Abstract: A qualitative study explores the possibilities of music therapy in social work and looks at the use of music in group work. The work from different fields of practice was compared. Exercises can be presented.

Description: Warm-up, relaxation and activation

References:

Mini biography of presenter: Social worker in assisted living, social psychiatric center Velbert
Education Diplom-Sozialarbeiter
dipl. Musiktherapeut PhD student (Deutsche Sporthochschule Köln)

Disclosure: No significant relationships.
WS43

MUSIC THERAPY WITH HOMELESS YOUTH.

J. Peyrin
Music Program, DANS LA RUE, MONTREAL/CANADA

Abstract: This presentation will cover various aspects of a music therapy intervention (relaxation, improvisation using percussion instruments, song-writing and recording) that is adapted to the contextual factors linked to homelessness and social challenges. Participants will hear music created by some of these teens.

Description: Firstly, I would like to begin on a general note by presenting the structure of the "DANS LA RUE", by evoking the centre's social mission and by presenting the various issues affecting this clientele (including: family and social exclusion, drug addiction, psychiatric disorders, suicide). Then, we shall define the role of music therapy by describing the diverse kinds of interventions adapted to this population. An individualized framework is established with each youth who joins in the therapeutic approach of this music program, whether it be: - Within sessions of “psycho-musical” relaxation proposed to youth experiencing mental and physical stress; - In active music therapy around a "drum circle" dedicated to the improvisation and the expression of oneself in context of open group; - By means of music recorded during studio sessions (texts, songs or improvisations). We shall approach more exactly the project of the first musical compilation released on spring, 2013, involving young people benefiting from our services with professional artists and we shall see how this kind of project with therapeutic aim can be developed with other populations in difficulties.


Mini biography of presenter: Julien studied music therapy at Université Paul Valéry (Montpellier, France) and also at UQAM (Montreal, Québec). He has worked since 2008 for DANS LA RUE and for Montreal Youth Center.

Disclosure: No significant relationships.
ANTHROPOSOHBaric BASED MUSIC THERAPY

M. Bissegger1, D. Dorfmeister2, S. Dambacher2, E. Helmert3, A. Ranger3, J. Vagedes3
1Music Therapy, Filderklinik, Filderstadt/GERMANY, 2Filderklinik, Filderstadt/GERMANY, 3Arcim Institute, ARCIM Institute (Academic Research in Complementary and Integrative Medicine), Filderstadt/GERMANY

Abstract: Anthroposophic Music Therapy has been developed from Dr. Rudolf Steiner’s anthroposophical understanding of the human being. The workshop will present an introduction to this anthroposophic knowledge and its relation to music therapy. Practical experiences of this therapy will be given and current research on its effectiveness will be presented.

Description: Anthroposophic Music Therapy is based on Rudolf Steiner’s research and teachings about the full nature of the human being [1]. It takes into account the threefold human organisation’s nerve-sense activity, its polar opposite metabolic-limb activity and its intermediate rhythmic systems of breathing and heartbeat. Through melody, harmony, rhythm and sound, music opens inner realms of experience and appeals to emotions through which we can already grasp what we cannot understand merely with our heads [2, 3]. Music works on the breathing and the heartbeat (the rhythmic system), harmonizing upwards and downwards: in the nerve-sense system it provides greater clarity and alertness; in the metabolic-limb system it balances and stimulates [4]. Emphasis on the rhythmic or melodic, the selection of the instrument and the duration of therapy are chosen according to the nature and severity of the disease [5, 6]. Music therapists use different instruments as "acoustic medications" – using percussion, stringed and wind instruments and especially the human voice, the most versatile of acoustic instruments. Children and adults can benefit from music therapy for a variety of diseases. Unhealthy infants can also receive music therapy in the form of the mother’s voice (under the therapist’s guidance), or the therapist’s voice, accompanied with a harp or lyre [7]. Further, music therapy is successfully used for many medical conditions, such as psychosomatic disorders like depression, anxiety and fatigue [8], and for heart and circulatory diseases [9]. A guiding principle for this therapy is to lead the patient out of psychological isolation by stimulating their latent vitality and ability for self-regulation. During the workshop, subjects will receive, and actively participate in, practical applications of this therapy. Also, current research involving the pentatonic scale, live versus digitalised music, the effects of single intervals, sound-bed therapy with cancer patients, among other themes, will be presented.


Mini biography of presenter: Monica Bissegger is an anthroposophic music therapist and works at Filderklinik (Filderstadt), Germany.

Disclosure: No significant relationships.
THE INDIVIDUAL MUSIC-CENTERED ASSESSMENT PROFILE (IMCAP-ND) IN SELF-ASSESSMENT

J.E. Asch, G.S. Ortiz
The Rebecca Center For Music Therapy, Molloy College, Rockville Centre/UNITED STATES OF AMERICA

Abstract: Self-assessment is crucial within any stage of a music therapist’s development. It offers one a method through which to enhance his/her clinical skills and competence. The IMCAP-ND rating scales will be utilized to draw insight into the therapist’s musical-clinical tendencies, informing the clinical process within the therapeutic relationship.

Description: The Individual Music-Centered Assessment Profile for Neurodevelopmental Disorders of Relating and Communicating (IMCAP-NDRC) (Carpente, 2009), is a music-centered based music therapy assessment profiling system targeting specific musical areas as they pertain to the child’s ability to engage, relate and communicate in the context of interactive musical play. The aim of the therapist is to assess a child’s level of musical awareness and his/her capacity for musical engagement and relatedness. This is examined through the use of improvised music that takes into account his/her unique responses and interests within the context of musical play. As the child takes part in creating music, the therapist can then assess his/her social emotional development across five domains of musical responsiveness: 1) Musical Attention, 2) Musical Affect, 3) Adaption to Musical-Play, 4) Musical Engagement, and 5) Musical Interrelatedness. This presentation will focus on the therapist utilizing the IMCAP-ND to draw insight into his/her own musical-clinical tendencies that occur within context of the therapeutic relationship. The presentation will focus on evaluating these factors within the context of musical-play, helping to inform the clinical process. An examination of the therapist and client IMCAP-ND rating scales will also be presented as a means to gain deeper insight into the processes emerging within the therapeutic relationship.

References:

Mini biography of presenter: Gabriela Ortiz, MS, MT-BC, NRMT, is a clinicin, supervisor, and researcher at The Rebecca Center for Music Therapy. She is an adjunct professor at Molloy College in New York.

Disclosure: No significant relationships.