Qualitative Inquiries in Music Therapy 2011, Volume #6, pp. 1–33 Barcelona Publishers

THE IMPACT OF MUSIC THERAPISTS' MUSIC CULTURES ON THE DEVELOPMENT OF THEIR PROFESSIONAL FRAMEWORKS

Patricia J. Gonzalez, MMT, MT-BC

ABSTRACT

This qualitative study examines the impact of music therapists' music cultures on the development of their professional frameworks. While the impact that music has on a person's identity has been widely studied, research has yet to explore the impact of music culture on a music therapist's professional framework. Prior to becoming therapists, these professionals identified themselves as musicians. As musicians, they had musical relationships with people, institutions, and/or styles of music that resulted in each of them experiencing various music cultures. In an effort to explore the impact that these music cultures have on therapists' professional frameworks, a phenomenological inquiry was conducted with three music therapists from differing music cultural backgrounds, including jazz, rock-band, and classical. Results of the data analysis revealed that the therapists' experiences with their music cultures began as young children. During adolescence, the therapists appeared to rely upon music as a resource to help them maintain balanced lives. Further analysis uncovered a connection between the ways in which participants related to their music cultures and used music as a resource and the manner in which they presently work as therapists. Through learning more about the lived experiences of these therapists, this study provides the music therapy community a better understanding about the impact music cultures have on therapists' professional identities and foundations for clinical practice.

INTRODUCTION

The research study described in this paper originated from a personal journal I wrote as an emerging music therapist. When I was new to the profession, journaling raised my awareness of the relationship dynamics that occurred during my sessions. Over time, I noticed that my work with clients reminded me of a relationship I had with a mentor from my adolescence.

From the time I was a child to the age of 16, I grew up with an undiagnosed learning disability. My lack of awareness of my learning impairment prevented me from having access to the resources I needed to help me compensate for my learning problems. As a result, I emotionally struggled with feelings of failure. However, there was one

environment where I could experience feelings of achievement: my music culture. Playing the viola and being a member of a symphony provided me with the knowledge that I was capable of succeeding. Additionally, my music teachers and friends became a source of support and encouragement. Later in my adolescence, I felt drawn to become a more advanced musician. My symphony conductor recommended that I take lessons from an accomplished violist named Mr. Montoni. From the time I began lessons with him, my life as a musician changed significantly.

Journaling about these experiences provided me with awareness of how my musical relationship with Mr. Montoni enabled me to compensate for some of my learning problems and improve my self-esteem. This insight became a pivotal moment for me, both personally and professionally. For the first time, I recognized the ways that my teacher's mentoring set the foundation for my becoming a music therapist. These insights allowed me to connect my past experiences with images I had formed of the type of music therapist I wished to be. Specifically, I became aware of my desire to provide for my clients a musical environment of healing that was similar to the one I experienced with my viola teacher. Even though Mr. Montoni was not a therapist, the relationship that we shared in music provided me with life changing experiences. This insight about the health benefits I gained through our relationship helped me to conceptualize my clinical work in a new way. I now had an additional lens to use when viewing my counter-transference issues. In addition, I began to feel mission-focused in my career. This vision for what I hoped to achieve directed the goals I set for myself and enabled me to acquire employment in my areas of interest.

Once I felt more established in the field of music therapy, I developed a deep desire to research the impact that music cultures may have on other therapists' professional frameworks. Soon after, I enrolled in a music therapy graduate program with an ambition to begin the process of researching this interest area. The following research study was my master's thesis.

General Research Questions

The broad question guiding this research study explored the ways in which music therapists' music cultures influenced the development of their professional frameworks. *Music culture* refers to the acquisition of values, beliefs, and behaviors resulting from a person's musical relationships with a person, group, institution, and/or style of music. Various styles, or genres, of music— such as classical, country, gospel, blues, rock, jazz, and so on—define certain music cultures, which may be communicated and perpetuated interpersonally or via media technology. Each of these genres transmits meanings reflective of a particular music culture by having distinguishable aesthetic characteristics (i.e., instrumentation, theoretical underpinnings), predominant attitudes and rituals (i.e., activities associated with performing and/or teaching), leaders (i.e., past or present composers, arrangers, and performers), products (i.e., concerts, recordings, transcripts), and symbols (i.e., phrases, gestures, artifacts). Experiences within a music culture may contribute to and support a person's intellectual and social development and, in general, influence the decisions he or she makes. In this way, music culture may profoundly shape the ways in which a person lives his or her life.

Phenomenological inquiry was the primary method used to discover the influence of music cultures on the development of therapists' professional frameworks. I focused on understanding participants' experiences in their music cultures and clinical work. In so doing, the following subquestions were explored: What are music therapists' music cultural experiences growing up? How do therapists' music cultures impact the formation of their identities during their adolescence? What are their motivations for becoming music therapists? What are music therapists' experiences in maintaining their musician identities since becoming music therapists? Are there similarities between therapists' music cultures and their clinical approaches? What is the relationship between music therapists' roles with people in their music culture and the types of roles that therapists play in serving their clinical populations? In what ways, if at all, do music therapists maintain personal connections to their music cultures?

After the interviews, themes emerged from the data analysis that subsequently influenced the exploration of the following subquestions: In relation to music therapists' family upbringings, in what ways did music fulfill their human needs? How does the genre that dominated music therapists' education on an applied instrument relate to their life experiences? In what ways do music therapists' manners of relating to fellow musicians through eye contact compare to their life histories and work experiences as clinicians?

LITERATURE REVIEW

Music therapists typically receive intensive training as musicians prior to entering the profession of music therapy. From this training experience, the musicians form a *self-concept* or *self-image* that reflects the specific music domain that they chose, such as concert violinist, folk singer, or jazz musician (MacDonald, Hargreaves, & Miell, 2002). Upon entering the music therapy profession, such musicians take on an additional self-concept as a therapist. As a result, these emerging professionals face the challenge of forming a professional identity that combines the self-concept as a musician with the self-concept as a therapist. MacDonald, Hargreaves, and Miell (2002), refer to this integration of varied self-concepts as a professional's *self-identity*.

Various music therapy studies have examined the methods that supervisors utilize to support the development of their students' *frameworks*, defined as the combination of their concepts, values, and practices. By assisting students in developing their professional frameworks, supervisors impact the shaping of their students' professional identities as well. A review of such literature provides background for the current study.

Murphy and Wheeler (2005) describe a symposium of experiential learning that was presented at the 10th World Congress of Music Therapy. Many of the presenters recognized the value of encouraging emerging professionals to evaluate their individual music histories. For instance, Sekeles shared her rationale for including self-experiences as a component in her music therapy education program. She stated her belief that these experiences help students understand their imprinted musical memories, which then supports the development of their empathy skills. This type of educational program encourages music therapy students to participate in non-therapy musical activities, such as engaging in formal and non-formal music studies, participating in peer activities outside of the program, attending concerts and improvisation groups, enrolling in workshops on music, and giving concerts in therapeutic settings. Sekeles further emphasized that a program design that incorporates the above experiential components enables students to develop their musicality and therapeutic identities.

Scheiby, another music therapist who presented at this congress, discussed the experiential training in Analytical Music Therapy (AMT). This program design requires students to participate in individual music therapy sessions, group music therapy sessions and Intertherapy¹ sessions as well as maintain logs about their experiences (Murphy & Wheeler, 2005). Whereas Sekeles's program incorporates some non-therapy music components to help students connect to their identities, the AMT program focuses on providing students with music experiences as a client, therapist, and semi-supervisor. AMT therefore provides students with an environment for creating and expressing in music to further develop their professional frameworks.

Langdon (2001) describes the method of experiential music therapy group for peer supervision, suggesting that therapists participate in music improvisation groups in order to open their musical minds, release their tensions and burdens of the week, bring them to awareness about the present, and allow core concerns to unfold naturally. Langdon suggests that these improvisation groups meet music therapists' need for community in that they offer a place where therapists can share music freely with understanding peers. As a result, music therapists' emerging identities are supported. Furthermore, Langdon claims that continued self-exploration through participation in regular group music experiences helps therapists achieve a deeper sense of their music therapy work (Langdon, 2001).

Milgram-Luterman (1999) discusses a theory of music therapy expertise that explores the ways in which competent music therapists maintain knowledge and skills in music, therapy, and music therapy. The author further stresses that the goal of educating music therapists should move beyond the achievement of competencies and focus more on the development of expert music therapy thinking. Milgram-Luterman recommends that therapists acquire this advanced way of thinking through participating in active music experiences. By doing so, therapists are able to expand their self-image and therefore become more effective in their work.

These publications demonstrate a trend in the music therapy community in which educators and supervisors guide music therapy students and/or clinicians toward experiencing music through both therapeutic and non-therapy music activities. The types of activities described by these authors have the potential to be formative experiences that support the development of therapists' frameworks. However, the literature falls short in examining the ways that music therapists integrate their self-concepts into their professional identities, which brings us to the following questions: In what ways do past musical experiences with fellow therapists and/or a music community have on therapists' abilities to maintain a positive self-esteem?

¹ The term *Intertherapy* was coined by Mary Priestley in order to describe an aspect of the AMT training model, in which a student is supervised while she or he experiences both the role of a therapist and client (Eschen, 2002, p. 43).

Music Therapists' Identities

Miller and Shahriari (2006) share the belief that at the core of a person's identity is selfawareness. Many music therapists attempt to develop their self-awareness skills through participating in supervision and practicing self-care techniques such as meditation and journaling. Some of the benefits that are gained from these practices include enhancing the ability to attend to their biases (Farnan, 2001), and providing opportunities to examine their transference and counter-transference issues (Austin & Dvorkin, 2001; Bruscia, 2001; Langdon, 2001), become sensitive to their clients' needs (Bradt, 1997; Bruscia, 2001; Farnan, 2001; Quinn, 2005; Ruud, 1997), adapt their music therapy techniques so to communicate acceptance and respect of clients' cultural values (Bradt, 1997; Quinn, 2005; Ruud, 1997), know the limitations of their work (Bradt, 1997), and evaluate the intentions of their music interventions (Austin & Dvorkin, 2001; Bradt, 1997; Langdon, 2001). Therapists ultimately begin to examine the ways that past experiences impact their selfconcepts when they engage in self-awareness practices (MacDonald, Hargreaves, & Miell, 2002; Miller & Shahriari, 2006). By doing so, therapists are then able to use that knowledge as means to expand their professional frameworks.

Thomas and Feldman (2007) propose that self-concepts, also known as *role identities*, have a direct impact on whether or not people are successful in their school-towork transition (STWT). The authors suggest that people attach meanings to their roles, resulting in some role identities becoming more salient than others (Ng & Feldman, 2007). These salient role identities subsequently serve many important functions: They provide people with overarching schemas through which they can respond to life events; they support a sense of direction to people's lives; and they offer guides for their behaviors when faced with uncertain situations (Ng & Feldman, 2007). For emerging music therapy professionals who are moving from one life stage as musicians to another as clinicians, their STWT requires them to attach meanings to both of these self-concepts. In response to this challenge, therapists may incorporate their musician and therapist roles and value them with equal importance. Despite this assertion, there is evidence in the suggesting that music therapy roles as more salient than their musician roles.

During the 10th World Congress of Music Therapy *Symposium on Experiential Learning*, it was noted that musicians need help in moving beyond the trauma of music training. Additionally, the discussion referred to a survey revealing that many music therapy professionals do not use music for self-healing purposes (Murphy & Wheeler, 2005). Jackson's (2008) survey showed a similar trend in which a majority of therapists do not partake in supervision, another type of self-care. This researcher's study revealed that two-thirds of music therapy professionals do not participate in supervision even though they regard it as an important component of their clinical work. This trend of not participating in self-care practices suggests that the music therapy community has awareness about therapeutic benefits of music but lacks a connection to the ways that music can support them in their own lives. This contrast raises the following theoretical questions: Do therapists avoid using music as part of their self-care practices because they have unresolved issues related to their musical past? If so, what impact does this avoidance have on therapists' self-concepts as musicians?

Miller and Shahriari (2006) recognize that people's efforts to discover themselves through music involve work that is emotionally and cognitively challenging. However, the

authors emphasize that this process is beneficial because learning about musical roots helps people identify the impact that other people have had on the development of their own identities. Once more, a theme emerges from the literature: Music experiences enable people to connect with their self-awareness or identities. Additionally, the literature indicates that people's experiences in their music cultures have a lasting impression on the how they live their lives.

Harris's (1998) examination of ways that children become socialized led her toward the development of a group socialization (GS) theory, in which she suggests that intra- and intergroup processes are responsible for the transmission of culture. This theory implies that peers, in addition to children's parents, influence the attitudes and behaviors of growing children and will likely have a long-term effect on ways in which they live their adult lives. GS theory suggests that life figures such as teachers or cultural groups have an impact on the development of people's identities and life behaviors. Relating GS theory to music therapists' lives, we can speculate that therapists' past experiences with their music cultures, such as those with music teachers or fellow musician peers, serve as significant influences on the development of their identities and manner of developing their professional frameworks.

Cultural Influences on Music Therapists' Identities

MacDonald, Hargreaves, and Miell (2002) claim that people develop a self-image by monitoring their behaviors and making social comparisons. The implication of this process is that social groups have a powerful influence on people's identities. Moreover, the authors claim that people typically compare what they expect themselves to do on the basis of their self-image. Consequently, people's identities are affected by both past experiences and their desires to achieve an ideal self-image. The authors further reference Carl Rogers's perspective that when these comparisons give rise to incongruity within the individual, psychological distress results. One of the ways that people experience this distress is through lowered self-esteem.

O'Connell (n.d.) defines *self-esteem* as a feeling of pride that a person feels as well as whether or not they believe they are worthy of receiving respect from themselves or others. The impact of music on development of positive self-esteem in children has received a considerable amount of attention in music education research (O'Connell, n.d.). However, O'Connell's review of the literature shows mixed results in that some studies demonstrate positive correlations between music and self-esteem while other studies reveal no correlation. Austin's (1990) investigation into the relationship between music and selfesteem revealed that self-esteem was found to be a significant predictor of fifth and sixth grade students' participation in music activities. These research studies on children's experiences in music and self-esteem can provide deeper insight into the ways that music therapists' childhood experiences impacted the development of their self-concepts as musicians. With a greater understanding about their self-esteem in relation to their musicianship, participants may gain greater knowledge of how music cultural experiences impact their work as a music therapist, as well as whether or not they use music activities to help them achieve positive self-esteem. While there is a shortage of literature examining these particular connections, there appears to be a growing number of resources available to music therapy professionals encouraging them to reflect upon their music cultural experiences.

Quinn (2005) claims that music therapists have varied *identities*—person, musician, professional, and/or researcher—all of which mold together to form an overall entity. This researcher's perception is in keeping with the theory that self-identity results from an integration of varied self-concepts. However, Quinn suggests that identities, or selfconcepts, work in balance to comprise a unique identity as a music therapist. This perspective does not recognize that some self-concepts may be more salient than others. Additionally, saying that everything is in balance does not acknowledge the possibility that incongruity could occur. Interestingly, Quinn's theory provides music therapists with a process for exploring experiences with their music cultures and, in so doing, actually promotes the balancing of music therapists' self-concepts. In the first stage of this process, Ouinn suggests that music therapists examine their musical autobiography by engaging in reflection. Next, she recommends that therapists create a chronological outline of significant musical events. The third stage encourages therapists to conduct interviews with people from their family and culture. The fourth stage recommends that therapists strengthen their terminology skills by researching their personal cultures, as well as psychological theories on identity. Finally, Quinn suggests that therapists compare their reflections, interviews, and process of learning with the literature to strengthen their conceptualizations of their identities. Quinn claims that this process will strengthen music therapists' abilities to identify their personal and musical selves. Through doing so, music therapists will gain a greater self-awareness that could enhance their therapeutic relationships with clients (Ouinn, 2005).

Upon review of the literature, there appears to be a need to learn more about the processes that music therapists go through as they integrate their self-concepts as musicians and therapists to form their professional identities. Therefore, the purpose of this study was to examine therapists' lived experiences within their music cultures, study therapists' experiences of integrating their varied self-concepts, and learn more about the ways in which their identities influenced the development of their professional frameworks. By studying their experiences in this way, I hoped to illuminate the impact that music culture has had on therapists' foundations for clinical practice.

DESIGN AND METHOD

Overall Approach and Rationale

I used phenomenological inquiry to study this topic because it (a) allowed me to capture participants' lived experiences from their personal perspectives, (b) enabled me to be reflective throughout the research process to discover the overall deeper meanings of participants' experiences, (c) supported my ability to openly view the various layers of cultural influences that participants encountered throughout their lives, and (d) allowed me to construct interpretations based on meanings derived from participants' lived experience. Additionally, phenomenology personally benefitted me by helping me gain insight and allowing me to discover if others shared my personal experiences.

In-depth interviews were utilized as the first stage in data gathering. In view of the fact that interviews could have led participants to conceptualize their frameworks in new

ways, I sought to capture participants' evolving insights. Therefore, following the interview, participants took part in a six-week private online discussion board where they were motivated to write about their experiences and encouraged to dialogue with other participants. The incorporation of this supplementary data source helped me gain deeper understandings about participants' experiences and led to the development of additional themes.

During this phenomenological study, I maintained a reflexive journal to bracket my thoughts; this was a process whereby I set aside my reactions and beliefs so as to enhance my ability to perceive my participants' perspectives. Bracketing supported my ability to allow themes to unfold naturally. Additionally, data analysis procedures were conducted by transcribing the interviews with participants and the discussion board. After themes emerged from the data analysis, I wrote interpretations on the meanings of therapists' lived experiences. Participants were then given a copy of these interpretations and asked to give feedback about my inferences. This process, also known as *member checking*, supported my ability to establish trustworthiness.

Participant Selection

Participants for this study were selected on the basis of their years of service (a minimum of five years), music cultural backgrounds, and whether they strongly identified with their music cultures as evidenced by their current participation in the performance or teaching of non-therapy music activities. In an effort to gain access to potential participants, a *snowball* sampling strategy was used. Initially, professional colleagues were contacted as a source for recruiting participants. Each recruiting source was asked questions that led to secondary recruiting sources. This process continued until participants were recruited for the study. Music therapists fitting the inclusion criteria were asked to volunteer for the study, information was shared with them about their rights as participants, and those willing to participate completed consent forms. This study was implemented in part to fulfill a requirement of a master's degree and accordingly I was working within a set timeframe. Therefore, my supervisor and I decided that three participants would be a fitting number of people to study.

Selection of participants was based on the genre that dominated their current music activity outside of their work as therapists. My first participant was Mai. Mai is a Guided Imagery and Music (GIM) therapist and actively plays French horn in a community symphony. My second participant was Milo, a music therapist who uses both improvisation and recreative methods in therapy and is also a member of a rock band. My third participant was Jassy, a Nordoff-Robbins music therapist and jazz bass performer. Since these therapists performed in different types of ensembles, I determined that three distinct cultures were represented: classical, rock, and jazz. The Results section highlights varied aspects of the participants' life stories as they relate to the focus of this study.

Data Gathering Methods

Two strategies were used for collecting data. The first was an individual in-depth interview with each participant. Audio recordings captured the entire interview, which was later transcribed. To prepare participants for the interview, therapists were asked to bring an artifact that represented an aspect of their music culture, such as a picture, recording, or sheet music. The second strategy used to collect data was an online discussion board (Db), where all three participants and I interacted by posting messages. In order to maintain confidentiality, the Db was closed to the public and only accessible to the participants, my research supervisor, and me. As the investigator, I made the Db topics directive toward specific themes that emerged from my initial data analysis. Confidentiality was maintained, and personal information shared in the interview was not revealed on the Db. Additionally, participants had the option to choose pseudonyms for themselves throughout their participation in the research study. These pseudonyms were also used in the transcriptions of their interviews. Some participants elected to continue using their pseudonyms during their participation in the Db. In addition to collecting data from participants, I maintained a reflexive journal during the research process so as to maintain a personal connection to the topic of inquiry, reflect on central themes, and connect to the nature of the therapists' lived experiences. By engaging in this process, I was able to collect my evolving ideas and reactions to data, which then supported my ability to make decisions about the direction in which I would guide future interviews and discussion board topics.

Data Analysis Procedures

Phase I: Interviews

Interview questions were organized in a manner that reflected participants' lives from childhood to the present. This life span approach was used in all the interviews as well as with the design of the Db topics.

Following the completion of the interviews, verbatim transcripts were created in Microsoft (MS) Excel. MS Excel was a useful tool in analyzing data because it offered me a variety ways to document and organize them. The following graphic demonstrates the first set of columns created in Excel to record interview material:

ID	Audio	Interviewer	Audio	Interviewee	Analytical	Personal	Supervisor's
	Time	Question/Response	Time	Response	Thoughts	Reactions	Comments

A new text segment was created in a cell under the corresponding column each time a person finished responding on the audio recording. These text segments were accompanied with the time they occurred on the audio track. Also, each row was given an identification number so that this information could be tracked to its original location in the event that it was copied to another worksheet within the Excel document. For organizational purposes, separate worksheets within the same Excel document were created for each interview.

Once all three interviews were completed, I read the transcripts a second time and added an eighth column titled "Line-by-Line Coding" followed by a ninth column "Notes." Charmaz (2006) identifies line-by-line coding as a useful process during the first phase of a qualitative analysis (p. 50). This method helped me to capture the overall meaning of the participants' experiences and alerted me to some of my preconceptions. By condensing the interview material into short meaningful statements, I was able to begin contemplating analytic categories. I recorded in the "Notes" column any and all material

that I believed may later develop into categories and, as a result, meaning units were derived.

Phase II: Discussion Board

After the interviews, the second phase of data collection began: the discussion board. I composed the first post based on the meaning units that emerged from the line-by-line coding of the interviews as well as from the reflexive journal I maintained. Rather than share my perspective about the meaning units that surfaced from my initial analysis, I chose to create a Db topic that would stimulate discussion. Therefore, I created a lead post with which I suspected one participant would totally agree and another participant might disagree. The intention behind this strategy was to prompt the emergence of varied perspectives and see what differences would be revealed among participants. As a result, three distinct viewpoints surfaced.

The manner in which the Db worked was as follows: Participants were able to publish a response to my lead post by threading a reply message. Within each post, participants could reply specifically to participants' messages or they could respond to the lead post. A new lead post was introduced to the group every two weeks, totaling three posts over the course of the Db period. The second and third posts were reflective of the interview analysis and reflexive journal, as well as the responses that participants made on the Db.

The entire Db was transcribed into the same Excel document as the interviews. Each post was transcribed into separate worksheets. Participants' responses to lead posts were transcribed in a tree formation. In this formation, a participant's reply along with the subsequent comments was regarded as a unit. These units branched from the lead post. For analytic purposes, it was important to keep these units together so the meaning of participants' expressions would not be interrupted.

Key statements were highlighted from the Db transcripts and analytical and personal reactions were recorded in the same manner as the interviews. During the final phase of the analysis, the three lead posts from the Db developed into five meaning units of exploration into the therapists' experiences. Later in the analysis, these units were related to text segments from the interviews.

Phase III: Analysis

Microsoft Excel has many features that improved my ability to sort, locate, and compare data. One Excel tool that I used extensively was the auto-filter. Auto-filter enables people to sort columns of data according to key words or by ascending or descending alphabetization. When I transcribed my interviews, I created several columns with the anticipation of using this filter feature. After I completed my Db, I returned to my interviews and added the following columns:

Descriptive-	"Sub-	Life	Professional	Notes	Db Section
Category	Category"	Phase	Implications		

The "Descriptive-Category" column served the function of allowing me to assign general meanings to participants' experiences. Accompanying the "Descriptive-Category" was a "Sub-Category" column. In the latter column, more specific associations were documented. (See Appendix.)

Once the columns were established, I read the interviews a third time and began assigning descriptive-categories and sub-categories to each text segment. At that time, I also made note of which life phase these events corresponded with and made comments about possible professional implications.

Next, I highlighted the most important key statements from each of the interviews. Once these text segments were determined to be significant for further analysis, I copied those cells into a final worksheet titled "Coding." Within this coding worksheet, I was able to use the auto-filter feature to view all three participants' experiences next to each other. The final phase of the analysis involved linking the significant interview statements from the coding worksheet to one of the five meaning units that emerged from the Db. In this study, I used the category system as a way to view relationships between participants' experiences, gain deeper insight into their lives, and explore raw data through varied lenses. Since generating new theories and creating a report was not the aim of this study, categories were not further refined or distilled.

Once meaning units were established from both data sources, I transformed these meanings into the distilled essence of participants' experiences. During this time, I found myself viewing the data in the same sequential order as it occurred. For instance, when I analyzed the interviews, I used my first interview as an entry point for the second, followed by both of those interviews leading toward the third. Since I continuously analyzed data as it was received, this entry point helped me understand the ways in which my conceptualizations developed. After this process, summary statements from interviews, significant segments from Db entries, and the distilled essence were sent to each of the participants for member checking.

RESULTS

I begin this section with a brief review of the life phase of adolescence; this is the period during which the study participants were individuating from their parents and forming their unique identities. Relevant literature helps us understand their experiences of developing autonomous paths, relying on their cultures for guidance, and forming resilience to negative influences around them. I then describe the parental functions that music served for the participants during adolescence: surrogate, auxiliary, and supplemental. Third, I discuss the participants' use of music culture as a resource. Finally, I describe the links between this use of music culture and the participants' clinical frameworks—that is, the manners in which they presently work as music therapists.

Adolescence and Identity Formation

During the analysis of the data, the life phase of adolescence seemed to set the foundation for participants' future identities as music therapists. Specifically, the ways in which participants related to their parents and home life directly corresponded to the ways in which they related to their respective music cultures.

Adolescence represents a time when children become adults by individuating from parents, excelling in a trade, and starting to formulate personal identities. During these formative years, the relationship between children and their parents greatly impacts the type of people they grow up to become, which life paths they choose, and how they achieve their ambitions. Child development research has shown connections between parents' child-rearing practices and the influence of these practices on the emotional and social development of their children (Berk, 2008; Shucksmith, Hendry, & Glendinning, 1995). While negative environmental influences are often thought to result in poor self-concept, many children in these circumstances persevere as they age by discovering strengths within themselves.

Resilience refers to the process that adolescents go through to overcome the "negative effects of risk exposure", cope with traumatic experiences, and avoid "negative trajectories associated with risks" (Fergus & Zimmerman, 2005, p. 399). The factors that support adolescents' abilities to overcome negative influences include the *assets* that reside within themselves and the *resources* that exist in their environments (p. 399). Adolescents are able to nourish their needs when they discover their internal assets and external resources.

When the participants in this study were adolescents, they too made the shift that enabled them to discover internal assets and external resources beyond their parents. The distinctive aspect of their experiences was their use of music as a tool to connect themselves to both of these supports. As such, music took on a powerful role and function in establishing a foundation for an emotionally balanced life, which in-turn helped the participants overcome, achieve, and persevere.

The Parental Functions of Music

The process of adolescents utilizing their assets and resources to meet personal needs can be viewed as shift from parental nurturing to self-nurturing behavior. During the process of individuation, many adolescents begin to meet some of the needs that were not fulfilled by their care-taker(s). Participants' use of music provided a means for self-nurturing. In particular, this nurturing relation to music began to take on a parental function. The extent to which each participant relied on music in adolescence to fulfill her or his nurturing needs varied significantly.

Three distinctive types of *parental functions of music* emerged from the data analysis. The first relationship was a *surrogate* one where in the absence of parents, music became the primary nurturer. The second parental function was *auxiliary*, where music acted like a co-parent by filling in the gaps of unmet needs by the actual parents. The third type was *supplemental* where music was an addition to the nurturance the parents provided. For each participant, music served a distinct parental function.

Surrogate Parental Function

During adolescence, Milo had a strong attraction to using music to nurture and lull himself and to connect to the world. The absence of parents and an adoption of a new life with his caring aunt appear to have created such needs. Mirroring the dynamic prominent in his life, music served a surrogate parental function during Milo's adolescence in the manner described below.

Milo began his adolescence coping with many losses, including divorce, the death of his mother, and psychological abuse and neglect from his father, which led to a permanent separation from him. During this period, Milo's Aunt Teresa took on a motherly role and became a surrogate parent for him. Aunt Teresa lovingly nurtured any and all of Milo's creative endeavors. In particular, when Milo was interested in playing the guitar, his aunt purchased it for him. Like a nurturing parent, playing the guitar reassured Milo that it was okay to try new things. As his skills developed on the guitar, music became an expressive tool that provided for him a safe cathartic experience that was "free of judgment and/or punishment."

Difficulty sleeping soon emerged as a product of his losses and trauma. After receiving his first CD player, Milo began engaging in music on a deeper level by creating a private musical space in the closet so he could listen to music nightly. Like a parent, music eased the struggle by providing him with a way to be lulled. Music offered Milo a healthy path "into, through, and out of the chaos" while simultaneously "promising and delivering a sense of order."

Another difficult aspect of Milo's adolescence was coping with isolation. In a community where gangs were prominent, it was difficult for Milo to establish new friendships. To protect himself, Milo turned to the metal music² culture as a resource. Metal music typically reflects the "power struggles" that youth experience in their culture (Rafalovich & Schneider, 2003, p. 2). The music consists of dramatic amplifications, distorted electric sounds, intense rhythms, vigorous scales and strong vocals. By seeking friendships in a genre that explores what Milo says to be youth's "naked aggression and/ or unending despair", he found a peer group that he could affiliate with emotionally. This genre served a parental function in that it gave Milo a space where he could be held in his anger and freed to experience and express his rage.

Besides listening, Milo went deeper into the music by participating in bands with peers, going to metal/punk concerts, and developing a way to "speak" through his guitar playing. Metal music became a passageway out of isolation toward a life where he experienced the outside world.

Whereas some adolescents may rely primarily on their parents for nurturance, it appears that Milo relied strongly on his music culture to help him work through his emotions, struggles, and conflicts. In this way, music served a surrogate parental function during Milo's adolescence.

Auxiliary Parental Function

Mai remembers using music as a way to state her place within the family. As a teenager, Mai and her siblings were not allowed to "rock the boat" which created a "calm atmosphere that was not to be disturbed." The living room in her home was a musical space with a stereo system and piano, but the piano was Mai's. She stated, "I really owned

² *Metal music* is a broad term for a genre that stemmed from rock music. Metal music is made up of many sub-genres, such as heavy metal, thrash metal, death metal, and gothic metal, to name a few.

it." Mai distinguished herself within the family by playing piano. Accordingly, in a home that felt reserved, music became a "free space" for Mai.

As a child, Mai accepted the family rules without question. During adolescence, things changed. She said, "as a teenager, it seemed that everything I felt, desired, experienced was beyond the limits of our family life." The repression she experienced was also present in the way music was played at home; only the pianissimo dynamic was acceptable. Mai "needed to be at a louder dynamic" and used music as a way to meet this need. Thus, as an adolescent, Mai felt as though she developed a *false self*³ that aimed to please her parents so that she would fit in at home and gain their "unconditional acceptance" of her strong emotions. Her *true self* was the self she often referred to as her "wild self" and primarily represented the life she had outside of the home.

Mai found musical outlets that enabled her to express her true self, including dancing and listening to music groups like The Rolling Stones in her bedroom. In addition, Mai learned how to play the French horn. "my horn was my identification in music." Soon after, Mai joined the school orchestra and became part of a community where music was a shared experience with others. In many ways, this music culture offered Mai a place where she could be free to be her authentic self. Playing horn in an orchestra signified that Mai no longer needed to hide her loud dynamic. Whereas at home Mai stood out as the only performer—the only musician—, she now experienced being part of an orchestra. Music gave Mai a pathway out of restriction and some aspects of her isolation. By being a member of a music culture, Mai was free to be herself with others.

Mai refers to the role that music played during her adolescence as that of a "third parent" who understood, loved, and wanted her to express strong feeling. For Mai, music served an auxiliary parental function in the ways that it allowed her to hold onto her "core energy" in a way her parents could not. As a third parent, music showed her that there was something more to life than being reserved. Music permitted Mai to do what she was restricted from doing at home, which was being loud. By playing piano, experiencing wild music privately, and playing horn as member of a community, Mai had an outlet. Mai had a resource. Mai had a way to experience and be her true self.

Supplemental Parental Function

For Jassy, both parents strongly influenced the formation of identity. From his father, Jassy found a great love for sports and from his mother, a passion for the arts. Jassy's mother was an artist and her mediums included painting, dancing, and playing piano. During his entire childhood, his mother's music was prominent in the home. For Jassy, music was a shared experience with his mother. Jassy engaged in this musical space with his mother by watching, listening, playing games, and later practicing piano with her.

³ The *false self* is a term from David Winnicott's 1965 developmental schema and refers to the personality that develops in children when they realize that their parent is not "good-enough." In this theory, children become more autonomous when good-enough parents provide a "holding environment." Without this environment, children's psyches create a false self so as to meet ego needs. In the most extreme case, children completely hide their *true self* and the false self "appears authentic" to others, yet this adaptation causes the children to feel restrained by their environment (de Mojilla, 2005).

When Jassy turned six years old, he began learning classical piano. This was a time when Jassy's mother was by his side, nurturing his attitude toward music. He stated, "My mother was a huge influence on me—realizing how important it is to practice, finishing pieces, performance attitude, and believing in myself that whatever I wanted to do I could do." Even though Jassy sometimes wanted to go outside and play sports with friends instead of practice piano, his mother's nurturance helped him focus. Once he finished practicing and was on the field, Jassy was able to "channel" any anger he had through hitting a ball or tackling a friend. Both sports and music "absorbed" Jassy's life.

Prior to entering adolescence, Jassy already experienced engaging in music with his community. In response to the artistic culture around him, Jassy picked up the drums, guitar, bass, and began to sing. Additionally, Jassy was exposed to several genres of music, and he developed a great interest in the sounds of his neighborhood.

Both of Jassy's parents promoted his participation in his interest in the British Invasion music culture by setting up gigs for his band. "My parents supported my interest in music one hundred percent, and I credit them for letting me pursue artistic freedom and choice in pursuing my musical aspirations."

The dynamic of Jassy's home life was to keep emotions "close to your chest." In response, music became Jassy's "verbal emotional outlet" or resource. Music offered Jassy a way to freely explore cultural differences, connect intimately with others, and recognize a world greater than his small community. Moreover, music was an "emotional release" for Jassy where he could say what he wanted to say.

Jassy felt a "sense of balance" from both his parents' enthusiastic support of his artistic endeavors and from his music culture. Jassy's relationships with music, sports, church, family, school and peers, all had a "reciprocal relationship" with one another. Each of these influences felt "joyful", and accordingly Jassy experienced "a sense of order." Additionally, Jassy credits these influences as shaping his life path and in "no way" did music ever feel as though it replaced his parents. Instead, music was an addition to the nurturance of his parents; thus, music served a supplemental parental function during Jassy's adolescence.

Music Culture as a Resource

The aesthetic qualities inherent in music give it power to affect people on various emotional, spiritual, cognitive, and physical levels. Each experience in music and its related culture has the capacity to enrich people's lives. What makes these musical experiences important to the formation of identities is the manner in which people engage, relate, and associate meaning to music. Throughout the data analysis, it became evident that participants relied on music as both an asset that helped them access their inner capabilities as well as an external resource to connect them to external support systems.

Resource by definition has several meanings, such as the following: (a) a source of aid or support that people are drawn to use when needed; (b) a natural feature or phenomenon that enhances the quality of human life; (c) a source of information or expertise; (d) a possibility of relief or recovery; (e) a means of spending one's leisure time; and (f) an ability to meet and handle a situation (Resource, 2010). The results pertaining to the ways in which participants used music as a resource will be viewed through the lens of the above definitions.

Mai's Use of Music as a Resource

Growing up, Mai was an intuitive child and sensed that her mother coped with depression. Since expression of strong emotions was not practiced in her home, Mai turned to music as a means to provide support for her mother in an acceptable way. Mai became a supportive presence to her mother by playing classical music on the piano. In doing this, Mai created an environment where she could comfort her mother and offer her relief from daily stress without the use of words.

As an emerging adult, Mai strongly identified with classical music and felt an "ownership" of it. In response, Mai choose to pursue a career in music performance. While in college, Mai's uncle died. As part of her mourning, she turned to classical music. She selected a lush piece of music to play on the horn and repeated it over and over again. During this repetition, Mai connected to her sadness. Music gave Mai a place where she could be held in the pain. When she repeated the piece, Mai gained more insight into her feelings and developed a deeper understanding about her loss. Mai found a means to be relieved from anguish. Mai found a source of comfort in music.

Over time, the culture surrounding a music performance degree caused Mai to feel that she no longer was capable of being a professional horn player. After four years of music school, Mai found a new direction for herself and transferred to a new school to study music therapy. During her music therapy studies, Mai strongly identified with her horn professor and his love of music. This mentor helped Mai accept her abilities at a time when she was mourning the loss of her identity as a performer. As a result of his guidance, Mai's self-esteem as a performer improved. Although Mai is unsure why she continued to play the horn, it appears that it was such a natural part of her life and that to not play would hamper her happiness and/or quality of life.

During her senior year, Mai learned about GIM and was drawn to the model's use of classical music. After graduating, Mai began studying GIM. Mai strongly identified with her trainer's conservative and wild side. This trainer mentored Mai and supported her ability to handle a training process that at times was extremely uncomfortable. The relationship she had with her mentor supported Mai's ability to recognize that there was more to music therapy than what was taught during her undergraduate training.

While in graduate school, Mai found a new support system in the music therapy program. This community helped Mai learn new ways to be emotionally expressive in music. By learning how to improvise and relate to people through genuine eye contact, Mai gained an ability to share a musical space with people on an intimate level. This support system served as a resource, providing Mai with a safe environment within which she could leave her comfort zone and be expressive.

In addition to the mentors and graduate school resources, Mai also relied on her husband, Tom. Mai met her husband in high school; they were "horn buddies" in the orchestra. As they matured into adulthood, Mai and Tom continued to create music together and listen to operas. Once they became parents, Mai and Tom raised their child in an expressive home. Mai's musical relationship with her husband was described as a significant source of support, acceptance, creativity, and love.

Milo's Use of Music as a Resource

From a very young age, music felt like "candy" to Milo. He was naturally drawn to sing and perform his music for crowds. These musical experiences were a source of joy in Milo's life and represent his early ambition toward becoming a performer.

During childhood, music led Milo to mentors that emulated the role of siblings. First there was his neighbor, Aiden—a child seven years older than he was and the mentor who influenced Milo to become a "pop culture consumer." In adolescence, Milo's cousins broadened his exposure to various musical rock and punk genres. His mentors served as a source of information for Milo. As a result, Milo's passion for music flourished.

Milo's relationship to the guitar that his aunt provided gave him a language to express the intensity of emotions that he was experiencing. His relationship to his guitar was symbolic of what he was dealing with in his life. While initially intimidated by fear, over time Milo began a process of "testing the waters" and taking one step at a time. Seeking a voice for the feelings that he could not articulate verbally, Milo found his voice in music.

During a time when Milo began making unhealthy choices, his attraction to new genres provided him with healing. When he first became involved in the metal music culture, Milo became involved with drugs, and his use developed to the point where he needed support to overcome his addiction. In conjunction with his participation in Narcotics Anonymous, Milo made several life changes. He stopped hanging around his metal friends and expanded his musical horizons to include more genres. He became more of a "hippy" and started listening to jam band artists like the Grateful Dead and Phish. This rock genre has a strong emphasis on musical improvisations where boundaries are crossed into other genres, yet the music remains unified by the band's rhythmic groove. Similar to how the music explored new territories, Milo was crossing into new ways of living his life. He was not "shunning" the metal music culture; rather, he was allowing other music to come to the forefront. Jam band music often includes songs about boundlessness and free self-exploration, resembling a process of healing.

As an emerging adult, concert scenes in his music culture gave Milo the opportunity to meet and form relationships with famous artists. After meeting these performers, Milo felt a connection to them. No longer were each of these artists a persona; instead, Milo was able to meet the person behind the music and learn more about the art. Milo strongly identified with artists' emotions in music. His first guitar teacher instilled a fascination in Milo to speak through his fingers. This passion motivated Milo to learn more about artists' processes. Additionally, Milo was experienced at projecting himself into music, which facilitated his ability to attain a sense of relief from his life. Meeting these artists became a source from which Milo could gain expertise at speaking a language of pure emotion.

When Milo embarked on a second major life transition—college—, he reverted to infusing humor into his music. During this time, Milo's music was shared, and his music became popular among classmates. After graduating, Milo returned to playing in bands. This music culture became a major outlet for Milo. By way of being in music with friends, Milo forged intimate relationships. His band experiences were a resource that provided a sense of belonging to a community, happiness, and permission to be his authentic self.

Jassy's Use of Music as a Resource

Starting from a young age, music became a resource that enhanced Jassy's abilities to connect with people. Playing the bass guitar enabled Jassy to find an interactive way to spend his leisure time, experience the sounds around him, and relate to fellow band members. Jassy's neighborhood, friends, and music teachers also affected his "musical shape", providing a space where Jassy was free to express his emotions.

During his childhood, Jassy always watched bass players perform and his observations became a source of information that taught Jassy ways that he could play the bass. When Jassy entered high school, he became attracted to the double bass. After picking up this instrument, Jassy joined the orchestra. This music culture was the opposite of that to which he was accustomed. In his band, Jassy was always free to improvise and was not tied down to playing specific notes. In comparison, the orchestra demanded that Jassy conform to the structure, focus on the music, and listen to the direction of the conductor. Having both extremes present in his musical life created a "nice balance." Therefore, music continued to support feelings of joy and happiness.

After being on the road as a professional bass player, Jassy began wanting to musically connect with people on a deeper level and experience "reciprocity" between himself and his audience. While these desires emerged, Jassy had friendships that were influential in motivating him to pursue an arts-based degree. Also, Jassy began counseling with a verbal therapist. Eventually he was introduced to music therapy, and it became evident that this career would be a good life direction for him.

Jassy's experiences with art, close friends, mentors, and music therapy peers assisted him in developing an ability to experience music on a deeper level. This support system was a source that helped Jassy connect emotionally to music. Jassy went from engaging in music on a "surface level" to really experiencing the "colourings" of music. Music became a resource that mobilized Jassy's ability to be present in the "here and now", be in the music, and connect with people on deeper, more emotional levels.

Music Therapists' Foundations for Clinical Practice

As stated previously, music nurtured each participant during adolescence. Even though there was a spectrum of intensity of these nurturing experiences, participants had one thing in common: Each participant turned to music to assist him or her in expressing emotions. Prior to becoming adults, the participants were naturally drawn to use music as a way to create and/or maintain balance in their lives. Accordingly, the groundwork for the ways that music can promote health was instilled in participants.

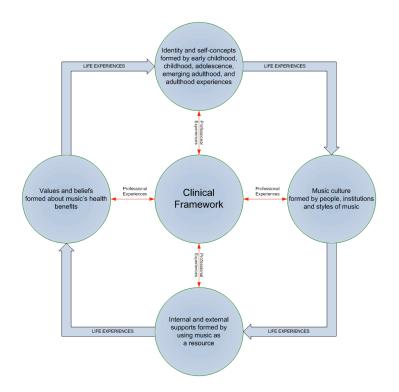


Figure 1. Foundations for Clinical Practice

The data analysis revealed that there were many parallels between the ways in which participants related to their music cultures and used music as a resource and the manner in which they presently work as therapists. (See Figure 1.) The following section demonstrates the various links found during the data analysis.

Foundations for Mai's Clinical Framework

When asked to select an artifact that represented her connection to music, Mai chose her living room. Coincidentally, Mai's living room was the location of the interview, with music-related items having primacy in the space. After hearing Mai express her connection to her home as a child, I had an impression that this space strongly resembled her childhood home. Specifically, both spaces had stereo systems where recorded music could be enjoyed by the family. Also, Mai's instruments were present, allowing her to share her music with others. It appears that some of the music traditions she grew up with continue to be part of her life today.

Throughout the interview and discussion board, Mai metaphorically related to the word *home*. "I was really at home when we all laid down and closed our eyes and listened to music—I felt really at home." Also, Mai described her work as a therapist by relating it to her home in the following way:

GIM is very much like the configuration of my living room at home. Which is me in the music, strong music—you know, becoming really alive and lively. Then my family like a guide, sitting there supporting me and supporting my relationship with music. Upon examination of all of Mai's usages of the word, it appears that *home* for Mai means that she has sense of support, belonging, connection, ownership and safety. Mai's selection of this artifact seems fitting for our discussion on the ways that Mai formed her clinical framework, for there is evidence that Mai's beliefs and values for the therapeutic uses of music originated in her home. Therefore, what Mai holds to be true about music is reflected in her framework.

Presently, Mai teaches music therapy and continues to be a GIM therapist. In the GIM approach, travelers image to music while in an "expanded state of consciousness" for the purposes of "healing and "self-development" (Bruscia, 2002, p. 3). These interventions typically involve guides using classical music recordings. In preparation for therapy sessions, guides create listening programs and/or select an existing program for their travelers. The GIM approach falls under the client-centered ⁴ orientation, where therapists support clients' "abilities to be themselves" (p. 3).

When considering all the skill sets needed to be a GIM therapist, Mai's music cultural experiences strongly resemble this approach. First, GIM uses recorded music, and Mai has had life experiences in which she used recorded music as a resource to connect to her wild self. Often, people have misconceptions that GIM is about finding a way to be calm, yet the opposite also holds true. Travelers are offered ways to be themselves, wild, in the music. Mai's sensitivity about being an authentic self in music makes her skilled at supporting this connection in clients.

Second, GIM uses classical music, and Mai is a classical musician. Her experiences in this genre originated with her parents listening to classical music. Mai then played classical piano and French horn. Later, she performed in orchestras and played duets with her husband. These intimate musical experiences as a musician helped Mai gain an ability to stay connected to the recorded music while her clients travel. Also, Mai's history of being in the music, as both a performer and listener, heightens her ability to appropriately select music that speaks to the emotional needs of her clients.

Third, Mai has an ability to convey love/nurturance through music without the reliance on eye-contact. This ability may be partly due to her visual impairment, in that she learned at an early age to compensate for her vision by relying on other senses. Therefore, Mai's skill to image and experience music in a variety of ways strengthens her capacity to guide travelers. Also, Mai has a strong understanding about the ways to communicate love to people without direct eye-contact. The family dynamic of not expressing strong emotions contributed to this awareness. Still, Mai found a way to use music as a way to express emotion in the family. In particular, Mai as a child soothed her mother's stress by playing piano. Additionally, Mai's experiences as a performer in an orchestra gives her insight to the ways in which musicians who are not looking at each other, but rather at the conductor and the music, can synchronize harmoniously to create music. In GIM, most of the therapeutic work occurs when the traveler's eyes are closed. Yet, both the guide and traveler are still in the music together. Knowledge about how to be present to people

⁴ Client-Centered Psychotherapy, also known as Rogerian Psychotherapy, was developed by Carl Rogers in the 1940s. In this non-directive approach, therapists are non-judgmental, empathic, and show "unconditional positive regard" for their clients. Therapists relinquish control of the therapeutic process, believing that clients have the capacity to make their own decisions about their life paths (Rogers, 1993).

without the reliance on eye-contact is key to helping clients feel safe in the music. Mai's skill to nurture without eye-contact increases her ability to support clients' willingness to experience the music. Through facilitating this allowance, Mai supports her clients as they strive to discover their authentic selves.

Fourth, Mai has experience emotionally connecting to music. When Mai turned to playing a piece of music repeatedly, this process helped her mourn the loss of her uncle. Also, Mai discovered the power that music has in helping people be held in pain. At that time, music became a source of comfort for Mai because it allowed her to stay in the pain and express the emotion, and it furthered her understanding about loss. The work involved in GIM falls under these same practices; the music intervention offers people an opportunity to discover their emotions, stay and be held in their emotions, evolve in those emotions through imaging (i.e., visual, kinesthetic, emotional, or auditory), and permitted to fully experience those emotions.

In reference to Mai's devotion to teaching music therapy, roots to this passion can be found in her life quest toward finding a career path that would enable her to maintain a deep connection to music. As an emerging adult, Mai's passion for classical music caused her to seek a career path in performance. Unfortunately, some of Mai's self-concepts as a performer were challenged when she realized that her peers did not love music the same way she did. Furthermore, her horn professor at the performance school worked diligently on technique rather than on the enjoyment of music. This lack of connecting with others caused Mai to experience isolation. In spite of this, Mai showed resilience to these negative influences when she chose a music therapy school where she could maintain her musicianship. The mentors that followed—her new horn professor and GIM trainer—both loved music and were committed to the enjoyment of the experience. Thanks to these mentors, Mai gained an additional support network that helped her overcome some of her self-concepts related to being a performer. Later, music therapy was pivotal in helping her gain acceptance of the loss she felt from not becoming a performer. Today, as a professor, Mai strongly values connecting students to their instruments with the goal that they maintain an enjoyment for playing. Similar to when she was a child, the music that Mai loved allowed her to stay connected to her true self. By focusing students on their connection to music, Mai supports students' abilities to identify with their true selves. As a result, Mai supports students' understanding of therapists' use of their musicianship.

Mai's commitment to a career in which she could maintain an intimate connection to music greatly influenced the formation of Mai's clinical framework. Initially, Mai was trained in a cognitive-behavioral approach, which resulted in disillusionment. Once she learned about GIM, Mai felt called to broaden her education and earn this certification. Becoming a GIM therapist felt natural to Mai. As a GIM fellow, Mai began integrating imagery into her work with psychiatric clients. Mai moved beyond her education to allow her beliefs, values and experiences in using music as a resource to inform her work. Soon after, Mai began working as a music therapist and entered a graduate music therapy program that reflected her values in music. Graduate school challenged Mai's musicianship. For example, new intervention styles challenged Mai to learn how to be openly expressive with other people—a dynamic with which she was not familiar due to her family culture. With the support of the music therapy program, Mai became more comfortable improvising and developed an ability to relate more intimately with people through this interactive manner. In response to these positive influences, Mai's framework evolved. She shared,

I had children draw, you know their fears, they had a dream or they were scared of something and I would have them draw it, and then we would play it and take out instruments and play it...and make up arias about what they were scared of...and repeat it over and over again. You know, they were scared of monsters and we'd make up a monster song and they'd kill me. And I was the monster and they'd sing another song about, you know, their survival or whatever. So it was filled with some use of imagery and story and improvisation.

This reference to her intervention style as an emerging music therapy professional exemplifies Mai's ability to allow various influences to inform her work. Just as Mai worked out some of her existential issues by using repeated music, Mai gained an understanding about the ways that repeated music can help children work through their fears. Mai's exposure to genres such as arias gave her the insight into the emotional content that arises from experiencing this type of music. Additionally, Mai's expanded ability to relate to people intimately during improvisations helped her provide the nurturance the children needed so that they would feel safe to express and cope with their fears.

After completing her education, Mai's intervention style did not follow one orientation. Instead, Mai combined her beliefs and values about music, knowledge of using music as a resource, skill sets as a musician, and experiences in music and music therapy to inform her interventions. As a result, Mai understood on various levels that the interventions she provides for clients are appropriate because she knows the potential value that clients can gain from those experiences. In other words, Mai's life experiences in music inform her practice. As such, Mai sustains control over the music she provides because she lives a life wherein she maintains an understanding about what it takes to be in the music, to be part of the music, and to open oneself up to the music.

Foundations for Milo's Clinical Framework

Milo's artifact representation of his connection to his music culture was the notebook he formed with his first guitar teacher. Milo considers it a "notebook of me becoming a musician." The notebook consisted of the theory notes from his teacher, personal notes about songs Milo wanted to learn, tabs of songs he was working on, and drawings reflective of his music culture. This music notebook was a huge part of Milo's creativity during his adolescence and growth toward becoming a musician.

The artifact that Milo selected resembles the type of journaling he did as a young child watching MTV. From a young age, Milo was committed to accessing the inner workings of music and, as such, he was on a quest to understand music and artists' intents. By learning about music in this way, Milo gained a way to express his emotions during times when he did not have the words to articulate his feelings. This journaling process was part of Milo's absorption of the music, becoming the music, and expanding from the music. Milo's artifact selection relates to his clinical framework formation in that it

signifies Milo's connection to how learning music and being creative in it can lead toward self-discovery.

Today, Milo's music therapy framework is comprised of a variety of methods in which he engages his clients, including improvisation and re-creative experiences (Bruscia, 1998). His undergraduate education exposed him to these methods. Improvisation and re-creative methods support clients' abilities to access their innate abilities and potentials. Active music making offers clients opportunities to realize their strengths, which may allow them to generalize realizations to their everyday lives. The following description explores how Milo's life experiences in music relate to his present clinical framework.

Therapists who use the improvisation method need advanced musical skills in order to be successful in their work. To be an effective improviser, an artist must understand the inner workings of music, such as theory, harmony, rhythm, timbre, and history. The roots of Milo's improvisation development can be traced back to his first guitar teacher. This teacher focused Milo on developing awareness about the ways in which the technical aspects of playing affect the overall aesthetic experience. Additionally, Milo's absorption of several musical genres—via listening to recordings, going to concerts, and playing music—gave him insight into the ways that musical styles emulate and contrast each other. This expansive knowledge about music genres now enables Milo's flexibility during improvisation and accordingly promotes his ability to offer clients music experiences wherein they can change, explore new territories, and be boundless in the music.

Re-creative music therapy methods involve therapists retaining an expansive repertoire of pre-composed music. Since he was young, Milo had an interest in learning about songs. As a child, Milo wrote verbatim the lyrics to MTV videos. During his adolescence, Milo's notebook helped him understand, play, and memorize songs. Additionally, being a guitarist in a band necessitated that Milo memorize music. From childhood to now, Milo continues to build his repertoire so he can provide clients music that is reflective of their music cultures. Maintaining an expansive repertoire enhances Milo's capacity to use clients' music as an access point for their therapeutic work. Milo's talent in recreating songs in a manner that has pleasing aesthetic value further facilitates clients' emotional connections to music. In this way, Milo conveys genuineness to his clients.

Milo presently works with adult psychiatric patients who are incarcerated. His clients live in isolation from the rest of the world. During his life, Milo dealt with both isolation issues and feelings of powerlessness. Because he had those experiences, Milo has a strong ability to empathize with his clients' struggles. Milo's skill in seeing his clients' points of views enables him to regard them as humans, not as "animals." Milo's empathy informs his music selections, which facilitates his ability to effectively meet clients' therapeutic needs. Milo offers his clients the same opportunity as he had to use music as a tool to connect to the outside world.

The therapeutic process involved in aiding clients' sense of connection with others is multifaceted. The formation of Milo's value in attending to this focus can be related to his earlier life experiences in several ways: Since Milo is a performer in a band, he recognizes the positive influence received from the relational dynamics that exist between band-members. With that insight, Milo knows the power of being in music with another person and how this relationship can promote health. Next, Milo has awareness about the ways in which instruments relate, synchronize, and support each other. In therapy situations, Milo's knowledge about this interaction supports his ability to musically compliment and challenge clients. In many ways, Milo's music therapy interventions offer clients opportunities to be contributing members of a community and no longer alone. Milo does this by meeting clients through their preferred genres, sounds, and mediums. This musical interaction helps Milo normalize an unnatural environment and encourages a sense of safety. When Milo offers this type of atmosphere in prison, clients are more likely to take risks, be open, and connect with others in music.

Another way that Milo's music therapy methods help clients feel connected to the world and others can be found in the manner in which music evokes people's memories. For Milo, songs stimulate strong visual memories wherein he mentally returns to the place and time he first experienced the music. Considering the extreme losses that Milo endured at an early age, being able to recall memories helps him stay connected to the people he misses. Since Milo's clients are incarcerated, they too miss the people and places they care about. Currently, Milo's framework uses music to help clients connect to their losses. Over time, a song experienced in therapy also becomes a memory in and of itself, a snapshot of life in that moment. Through the music therapy process, Milo offers clients a place where they can therapeutically revisit memories. Thus, Milo's clinical framework provides clients an access point for which they can feel connected to a time, person or place.

Improvisation and re-creative music therapy methods helps clients realize their musical talents, which then facilitates their abilities to express themselves. Milo avidly credits music as being an essential element in helping him express his emotions during times of emotional chaos. Once his first guitar teacher unknowingly instilled in Milo a lifetime goal to "speak through your fingers", the guitar became his voice. This new voice helped Milo contain his anger, rage, sadness, and despair. By musicking⁵, Milo gained an acceptable outlet to convey his intense emotions. In his work, Milo similarly offers incarcerated psychiatric patients an acceptable outlet to share emotions. Once fundamental to his own development, Milo's clinical framework provides his clients with the freedom to speak through their music.

Milo's therapeutic methods also help clients cope with transitions. Throughout his life, Milo used music as a resource to make his life experiences emotionally manageable. As a therapist, Milo provides creative musical experiences that challenge clients to let go of their rigidities and try new ways of relating. By meeting clients where they are, as well as by broadening clients' musical tastes, Milo offers them avenues of expression that can help them shape their lives.

Foundations for Jassy's Clinical Framework

Jassy selected his first piano book as his cultural artifact. This book reflected its age, as the front cover was missing, the first page was barely hanging on, and the binding was supported with tape. As a child, Jassy remembers memorizing all of the pieces and performing the songs for his grandmother and mother. Often, his family made song

⁵ *Musicking* is a term used by Christopher Small and conveys the theory that music is a verb, not a noun. This theory defines music as an activity in which all participants of a music experience–whether creating, composing, dancing, or listening–are actively engaged (Small, 1998).

requests, and he would rise to the occasion and perform. Jassy's artifact reaffirms his connection to music at a young age, as well as the ways that his mother nurtured his musicianship and inspired his love for performing. The symbolism of this artifact has similarities to Jassy's clinical framework in that his method of practice nurtures clients' use of musicianship to shape their abilities to achieve a healthy life.

Jassy went to a music therapy program that was humanistic. Therapists from this orientation focus on people's potential for growth. After Jassy completed his masters, he continued his education in the Nordoff-Robbins (NR) music therapy approach. Within this approach, therapists primarily rely on mutual improvisation as a way to promote self-actualization (Nordoff & Robbins, 2007). NR therapists support creative musical expression by providing a variety of musical styles. Also, therapists focus on developing clients' musical skills so as to broaden their musical vocabulary and enhance their music explorations.

When he was a child, Jassy had his mother by his side, nurturing his musicianship. From then on, music was a shared experience wherein Jassy had leaders such as his mother, cherished teachers, a neighborhood of artists, and band mates. In many ways, the NR team system complements the ways in which Jassy learned from his music culture. Distinct from other approaches, NR music therapists are trained in dyads and often continue to work in dyads throughout their careers. When working with a client, one therapist chooses to be the role of lead therapist and the other becomes the co-therapist. Typically, therapists maintain the same role for a particular client. However, at times, therapists will shift roles during sessions, such as when they work in group settings. In each type of situation, therapists work as teams to create environments that nurture clients' emotional needs. In his present clinical work, Jassy pairs up with creative arts therapists. By collaborating with movement, drama, and art therapists, Jassy's clinical framework continuously evolves and his awareness about therapy expands.

Jassy's attraction to NR also reflects his early experiences with evaluating music. Evidence of Jassy's ability to evaluate his work can be traced back to the time he participated in his high school orchestra. Listening to audio recordings of songs he was performing, Jassy developed sensitivities to the different of interpretations between the recording and the school conductor. Later, when Jassy made the decision to become a professional performer, he devoted his attention to the technical aspects of his playing, concentrating on reading music and understanding theory, harmony and rhythm. Furthermore, Jassy went beyond the information provided in the text-book and applied the theories to the music he created with his jazz band.

NR therapists engage in session analysis practices where they index significant session developments, transcribe musical elements explored with clients, evaluate video or audio recordings of sessions, consult with a team member or supervisor, and assess their personal responses (Turry & Marcus, 2005). This examination process enables therapists to view their sessions from various perspectives, gain insights as to how their music affects others, explore their personal unconscious influences, and attune to their behavioral patterns (Turry, 1998). By examining their work in this way, NR therapists become aware of their interpersonal relationships and as a result are more attentive to their intentions with clients.

Jassy's attention to detail as a performer has significant applicability to being a NR therapist. Being a NR therapist necessitates that therapists have skill sets to concentrate,

review, revise, and learn about their work. Jassy's life experiences as a performer set the foundation for his strong ability to partake in this type of clinical analysis process. Furthermore, being educated in the NR analysis process enhanced Jassy's ability to evaluate his work from varied perspectives and use that information to inform his practice in future sessions.

NR therapists approach their work with intention, meaning that every clinical intervention used has a carefully considered rationale. In order to achieve this type of clinical practice, therapists have expansive musical skills so they can modify their interventions based on clients' in-the-moment needs. Jassy's years of experience as a performing musician strengthened his understanding about the emotional qualities related to scales, modes, idioms, tempo, dynamics, and meter. As a therapist, these musical skills help Jassy resonate with clients' emotional states, motivate their responsiveness, and support their abilities to achieve new ways of relating.

The NR approach promotes the emergence of a therapeutic relationship in which clients are able to work on their ways of relating to people through their interactions with music therapists. Jassy's experiences performing in jazz ensembles set the foundation for the relationship dynamics that he would later encounter as a therapist. For instance, he understands the type of energy that can be felt from fellow musicians' gazes and how that eye contact promotes connection with others. This manner of relating through eye contact also helps musicians stay "alert" and "ready" in the music. Similarly, NR therapists challenge clients to stay in the moment, respond, and react to the music. Clients' responses signify therapeutic milestones, such as becoming more assertive, being flexible, expanding sensitivity, or coping with change. The changes that occur in relating to the therapist have the capacity to help clients generalize this new way of relating to their everyday lives.

Last, the NR approach aims to access the music child within their clients (Nordoff & Robbins, 2007). Nordoff and Robbins's concept of the "music child" references the inborn musicality inherent in all people, such as their sensitivities to the order and relationship between tonal and rhythmic movement. From the time Jassy was a boy holding on to his mother's leg as she played stride piano, Jassy understood the relationship between rhythm, tones, movement, and energy. Jassy's commitment to advancing his musicianship broadened his ability to express his emotions musically. Personal relationships, psychology, the arts, college, and the discovery of the intrinsic qualities inherent in music enhanced Jassy's ability to convey an emotional mood through his playing. Being a musician allowed Jassy to emotionally nurture himself by expressing what he was unable to share in his personal life. Today, Jassy's clinical framework focuses on using music in the same way. Jassy's skills as a musician and clinician support clients' discoveries of their "voice." Once found, Jassy nurtures the "music child" within his clients. He finds that the term *music therapist* hardly embraces the roles he plays in helping clients access their "music child." Instead, Jassy identifies himself as a "musician therapist."

Relation between Participants' Self-Concepts as Musicians and Therapists

During the discussion board, Jassy shared with the group his identification with the term *musician therapist*. The ensuing discussion between the three participants revealed unique interpretations and identification with the term. Further data analysis showed strong

correlations between how musicianship informed all three therapists' clinical work as well as how their clinical work improved their skills as performers. Exploring the correlation in more detail, Jassy posed the following question to Mai and Milo during the discussion board: "If you only had one profession to choose would it be a music therapist or a performing musician?" In essence, this question asked participants to determine which self-concept is more salient. Jassy and Milo selected performing musician while Mai chose music therapist.

Mai's preference for being a music therapist was centered on a personal issue, coping with the belief that she was not a good enough musician. Over time, these thoughts caused Mai to experience performance anxiety, which eventually led toward her giving up playing horn in the orchestra for some time. After she worked through her personal issues in therapy, Mai began considering performance to be a "secondary" activity in her life. Mai's primary ways of relating to music include listening, dancing, and drawing to music for enjoyment. Also, Mai stated that she "grows as a person" through the process of "being a therapist." Within the therapist role, Mai finds fulfillment in witnessing clients' growth process, which then positively influences her personal life journey.

Although her identification as therapist is primary, Mai considers maintaining her personal musicianship as essential to being a good therapist. By maintaining her personal musicianship, Mai feels she is able to allow her personal relations to music to stay "active" and "strong" while she provides therapy. Today, Mai plays horn in the orchestra with the pure intension of having fun. As a performer, she lets go of her "caretaker" role and allows the experiences in orchestra to "fulfill" her "musical needs." Engaging in these practices enables Mai to not seek this type of musical fulfillment from her clients.

Milo's passion for performing on stage motivates his stronger identification as a performing musician. Milo finds that he must balance his clinical work by playing his own music. He wrote,

I'll come home from work with tired hands and throbbing blisters and almost immediately pick up my guitar to play my own music. Even if it's for a few minutes, I find that it helps me re-connect with my own Self and set aside whatever happened in sessions so I can be present with my own life.

During music therapy sessions, Milo finds it important to "separate" musically from clients to prevent his tendency to perform from overpowering the session. Initially, this separation may appear as though Milo cuts himself off from engaging with clients. After further examination, it became evident that Milo has a heightened understanding about the ways that performing for others evokes personal material in him. Since Milo does not have experience being a client in music therapy or additional training in an approach that focuses on ways to gauge musicianship in therapy, Milo's choice to maintain this boundary helps him work within his abilities as a therapist.

Like Milo, Jassy prefers identifying with the term *performing musician*. Jassy's personal experience with music therapy generated his desire to continue being a performer upon entering the therapy profession. This involvement helped Jassy become a "better musician" in that he realized to a greater depth the "subtle nuances of the moods in music." These nuances supported his ability to access his "emotional plain" more easily. As a result, Jassy developed an ability to convey "truer feelings" in his music.

In his work with clients, Jassy feels that he connects on various musical levels. Sometimes, Jassy feels that he is part of clients' experiences and will acknowledge that clients become part of his musical experiences. While performing, Jassy will play with the same musical intensity he would with colleagues when clients' musicianship is of the same caliber. Generally, the intensity with which Jassy plays music directly reflects the musicality of his clients and, as such, Jassy creates comfortable environments that keep them "engaged in music making."

DISCUSSION

The results of the study suggest that therapists' music cultural experiences do have an impact on their professional identities. The examination of therapists' adolescence revealed the ways in which music became part of participants' identities. The process of individuating from parents revealed the degree which participants relied on music to fulfill unmet needs. It was realized that the intensity with which music nurtured participants during adolescence was reflective of the dynamics of their home lives.

During the data analysis, surrogate, auxiliary, and supplemental parental functions of music surfaced. This spectrum was a direct result of participants sharing their varied experiences during the discussion board. After further examination, it became apparent that the participants' need for music to nurture was not indicative of the ways in which they currently use music to nurture their clients. Instead, it appears that the family dynamics present in participants' lives during adolescence influenced the degree to which music was relied upon as a resource to help them be resilient to the influences that prevented them from being their authentic selves.

In Milo's situation, he no longer had parents, and in that absence music became a strong resource to help him achieve a balanced life. Within this surrogate parental function of music, mentors and peers in his music culture became greatly influential in the formation of Milo's identity. Milo's story corresponds with the research on resilience theory in that when adolescents are faced with difficult home life dynamics due to loss, neglect, or abuse, other social networks become increasingly important in helping them find order in their lives (Fergus & Zimmerman, 2005). Social networks help adolescents' experiences within their cultures support their abilities to overcome hardships and/or negative influences.

In comparison, Mai's parents were present during her adolescence, but she felt restricted in her home life. In response, she developed a false self and used music as a resource to gain freedom to be her true self and feel balanced.

Further along the spectrum was Jassy. Jassy found a majority of his nurturance in his parents and community, so he did not rely heavily on music to nurture his needs. Instead, music was a huge part of the lives of the people who were nurturing him. Therefore, this community of shared music experiences supported Jassy's identity formation, and he felt that music was an additional element that helped him maintain a balanced life.

The degree to which the participants needed music appears to have influenced the ways that they relied on music as a resource. It seems that the one element participants had in common was the way music helped them express what they were unable to express

verbally. Participants' young age, the family dynamics, and life events may have contributed to their difficulty in being able to articulate, connect, and verbalize their emotional experiences. In order to find resolution, participants were naturally drawn to use music as a resource to help them achieve emotional balance. This finding has useful implications for the ways in which music therapy professionals understand themselves, as well as how they understand their clients' abilities in musicking.

Prior to becoming therapists, participants had histories of using music as a resource to achieve a balanced life. As such, it can be presumed that clients have the same capabilities. For that reason, therapists cannot assume they are the only experts in the ways that music can positively benefit clients' quality of life. If they do, music therapy professionals risk limiting their understandings about the health benefits of music to their personal experiences only. This idea that people have natural capacities to use music as resources complements the body of literature that suggests mutuality in therapeutic relationships (Rolvsjord, 2004). By learning about clients' uses of music, music therapy professionals may gain new insights into the ways that they can further support clients' connections to their inner resources, which can then impact clients' quality of life.

Impact of Therapists' Music Cultures on their Current Clinical Frameworks

The findings of the study suggest that the manners in which participants responded to their family dynamics influenced how they relied on music and how they behaved within their music cultures. This dynamic was evident in how the participants used music as a resource. For instance, when Mai could not be wild in the home, she danced to the Rolling Stones so she could experience being wild. When Milo did not have an environment to experience the rage he felt in connection to the traumatic losses in his life, he relied on the metal music culture to give voice to his anger. When Jassy was unable to express his emotions freely at home, he allowed his instruments to say it for him. These types of experiences contributed to the formation of participants' values and beliefs about the power of music. In response, participants' connections to music during their adolescence strengthened so much that as they emerged into adulthood, their self-concepts broadened to include being a musician. In many ways, musicking empowered participants' lives. This empowerment set the groundwork for the manner in which participants believed music benefits health. As a result, participants' future educational experiences in music therapy were either in keeping with the values they held true or conflicted with their beliefs.

Milo and Jassy were fortunate that their education in music therapy was aligned with the ways that they valued music. Unfortunately for Mai, her undergraduate education did not agree with how she felt music could be therapeutic. The undergraduate education program left Mai feeling disillusioned about music therapy. In spite of this, Mai completed the degree and found new hope when she learned about GIM. From that point on, Mai acquired education in keeping with her values. The music therapy education that Mai received in graduate school pushed her to relate to music in new ways and as a result, her beliefs about music broadened. Similarly, Milo and Jassy were awakened to the ways in which their musicianship could bring about positive changes in clients.

The above series of events demonstrates the ways that participants' music cultures influenced the formations of their clinical frameworks. The findings suggest that participants gravitated toward approaches and interventions that mirrored the relational

dynamics they were accustomed to in their music cultures. This relationship was apparent in the roles that participants served in their music cultures, how they expressed themselves in music, and the intimate bonds formed through musicking with others.

Issues and Implications

The interview portion of the study motivated participants to reflect on their life experiences in music as they relate to their work as therapists. Later, when they joined the discussion board, this reflection process became a shared experience. The Db offered participants some of the same types of benefits that other people gain from participating in online forums, such as a chance to share their personal stories, a sense of community, gained insight from varying perspectives, new ways of thinking, and deeper connections to their values and beliefs. This finding suggests that when therapists examine their life experiences in their music cultures and relate those experiences to their clinical frameworks, they gain a powerful resource that can help them develop deeper insight into their work. Supervision resources and guides based on the themes of this study may further enhance music therapy professionals' abilities to identify their areas of weakness and areas of strength. This awareness may influence music therapy professionals to take active measures in maintaining and/or expanding their clinical frameworks.

In summary, the aim of this study was to allow phenomenological inquiry to bring forth the impact that music culture has on the development of music therapists' professional frameworks with the aim of challenging present assumptions about the ways in which therapists form such frameworks. I hope that the results presented in the study contribute to the research as an informative tool to guide future music therapy professionals as they emerge in the profession. Additionally, the study aimed to support established music therapists by offering them strategies to explore their motivations as clinicians, as well as foster their personal connections to musicking.

REFERENCES

- Arnett, J. J. (2000). Emerging Adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55(5), 469-80.
- Association of Imagery and Music (n.d.). *General information*. Retrieved March 3, 2010, from http://www.ami-bonnymethod.org/general information.asp
- Austin, D., & Dvorkin, J. M. (2001). Peer supervision in music therapy. In M. Forinash (eds.), *Music therapy supervision* (pp. 219-230). Gilsum, NH: Barcelona.
- Austin, J. (1990). The relationship of music self-esteem to degree of participation in school and out-of-school music activities among upper elementary students. *Contributions to Music Education*, *17*, 20-31.
- Berk, L.E. (2008). *Exploring lifespan development*. Boston, MA: Pearson Education, Inc.
- Bradt, J. (1997). Ethical issues in multicultural counseling: Implications for the field of music therapy. *The Arts in Psychotherapy*, 24(1), 137-143.
- Bruscia, K. (1998). Defining music therapy. Gilsum, NH: Barcelona.
- Bruscia, K. (2001). A model of supervision derived from apprenticeship training. In M. Forinash (Ed.), *Music therapy supervision* (pp. 281-298). Gilsum, NH: Barcelona.
- Bruscia, K. (2002). A manual for introductory (level one) training in Guided Imagery and Music. Class manual. Philadelphia, PA: Temple University, Department of Music Therapy.
- Charmaz, K. (2006). Constructing grounded theory: A practical guide through qualitative analysis. Thousand Oaks, CA: Sage Publications.
- de Mijolla, A. (Ed.). (2006). International dictionary of psychoanalysis. Retrieved from http://www.enotes.com/psychoanalysis-encyclopedia/ false-self
- Eschen, J. T. (2002). Analytical music therapy. London: Jessica Kingsley.
- Farnan, L. A. (2001). Competency-based approach to intern supervision. In M. Forinash (eds.), *Music therapy supervision* (pp. 117-134). Gilsum, NH: Barcelona.
- Fergus, S., & Zimmerman, M.A. (2005). Adolescent resilience: A framework for understanding healthy development in the face of risk. *Annual Review of Public Health 26*, 399-419.
- Harris, J. R. (1998). *The nurture assumption: Why children turn out the way they do.* New York: Free Press.
- Jackson, N. A. (2008). Professional music therapy supervision: A survey. *Journal of Music Therapy*, 45(2), 192-216.
- Langdon, G. S. (2001). Experiential music therapy group as a method of professional supervision. In M. Forinash (Ed.), *Music therapy supervision* (pp. 211-218). Gilsum, NH: Barcelona.
- MacDonald, R. A., Hargreaves, D. J., & Miell, D. (2002). *Musical identities*. Oxford, New York: Oxford University Press.
- Milgram-Luterman, J. (1999). Toward a disposition of music therapy expertise as expansion of the self. *Canadian Journal of Music Therapy*, 6(2), 24-38.
- Miller, T. E., & Shahriari, A. (2006). *World music: A global journey*. New York, NY: Taylor & Francis Group.
- Murphy, K., & Wheeler, B. (2005). Symposium on experiential learning in music therapy report of the symposium sponsored by the World Federation of Music

Therapy Commission on Education, Training, and Accreditation. *Music Therapy Perspectives*, 23(2) 2005, 138-143.

- Ng, T. W. H, & Feldman, D. C. (2007). The school-to-work transition: A role identity perspective. *Journal of Vocational Behavior*, 71(1), 114-134.
- Nordoff, P., & Robbins, C. (2007). Creative music therapy: A guide to fostering clinical musicianship. (2nd ed.). Gilsum, NH: Barcelona.
- O'Connell, D. S. (n.d.). *The Impact of music education on aspects of the child's self.* Retrieved November 12, 2008, from University of North Carolina at Greensboro Web site: http://www.uncg.edu/mus/SoundsOfLearning/ChildsSelf.pdf
- Quinn, S. L. (2005). *Identity: Importance of knowing and listening to self.* Retrieved from http://www.musictherapy.ca/docs/confproc/2005/SusanQuinn.pdf
- Rafalovich, A., & Schneider, A. (2003). Metal music as the politics of youth culture. Paper presented at the annual meeting of the American Sociological Association, Atlanta Hilton Hotel, Atlanta, GA. Retrieved from http://www.allacademic.com/meta/p107807_index.html
- Resource. (2010). In *Merriam-Webster online dictionary*. Retrieved from http://www.merriam-webster.com/dictionary/resource
- Rogers, N. (1993). *The creative connection: Expressive arts as healing*. Palo Alto, California: Science & Behavioral Books Inc.
- Rolvsjord, R. (2004). Therapy as empowerment: Clinical and political implications of empowerment philosophy in mental health practices of music therapy. *Nordic Journal of Music Therapy*, *13*(2), 99-111.
- Ruud, E. (1997). Music and the quality of life. *Nordic Journal of Music Therapy*, 6(2), 86-97.
- Shucksmith, J., Hendry, L.B., & Glendinning, A. (1995). Models of parenting: Implications for adolescent well-being within different types of family contexts. *Journal of Adolescence 18*, 253-70.
- Small, C. (1998). *Musicking: The meaning of performing and listening*. Hanover, NH: Wesleyan University Press.
- Turry, A. (1998). Transference and countertransference in Nordoff-Robbins music therapy. In K. Bruscia, (Ed.), *The dynamics of music psychotherapy*, (pp. 161-212). Gilsum, NH: Barcelona.
- Turry, A., & Marcus, D. (2005). Teamwork: Therapist and cotherapist in the Nordoff-Robbins approach to music therapy. *Music Therapy Perspectives*, 23(1), 53-69.

APPENDIX

Descriptive Categories and Sub-Categories

DESCRIPTIVE CATEGORY	Sub-Category
SHARED MUSIC EXPERIENCES	Significant other (1); Development of intimate relationship within music culture (1); Conflicts with parents (1); Family (1, 2); Peers (2)
PERSONAL MUSICAL EXPERIENCES	Kinesthetic (1); Nurtured (1, 2); Connection with others (1, 2, 3); Having Fun (1, 2); Entering someone's world (1); Holding (1, 2); Absorbing (2); Memories (2); Spirituality (2); de Mijolla, A. (Ed.). (2006). International dictionary of psychoanalysis. Retrieved from http://www.enotes.com/psychoanalysis- encyclopedia/ false-self Access the music (2); Coping (2); Block (2, 3); Internal Process (2)
SELF-CONCEPTS IN MUSIC	Music culture (1); Musicianship's effect on others (1, 2); Perception of music's function (1, 2); Identity (1, 2, 3); Performer (2)
FRAMEWORK	Compassion (1, 2); Maintain musicianship (1); Education (1, 3); Professional Split (1); Intervention (1, 2, 3); Theoretical Identity (1); Core Values (1); Supervision (1); Support system (1); Teaching (1, 3); Perceptions (1); experiences as client (1); Identity (3); Population (3)
CONNECTION TO MUSIC	Experiences the Repressed Self (1); Individuate from Parents (1); Identify with passions (1, 3); Attraction (1, 3); Transmute emotion (1, 2, 3); Energy (1); Timbre (1, 2, 3)
MUSIC CULTURE	Instrumental Choice (1, 3); Performance; Listening Preference (1, 2); Spirituality (1); Peers (1, 2, 3); Family (1, 3); Mentors (1, 2, 3); Performances (2); Creativity (2); Rejection (2); Community (3); Musicianship (3)

The numbers represent which participant was given this sub-category:

- Number 1 was Mai, the first participant interviewed
- Number 2 was Milo, the second person interviewed
- Number 3 was Jassy, the third person interviewed