

English 180, First Place; Instructor, Nicole Hagstrom-Schmidt

Music Therapy Solutions

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American Music Therapy Association

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Dear Amelia Furma,

As a freshman music therapy student at Western Illinois University and a member of American Music Therapy Association, I am passionate about music therapy, and how important it is to gain credibility in this profession. Because music therapy is a new field, founding the MT-BC credential as recently as 1983, it is crucial that students and professionals in training improve the awareness and credibility of this field. I am also concerned that there are music therapists that are unqualified based on their personality. I fear that if we continue the program the way it is currently structured, there will be unqualified music therapists that carry the MT-BC credential in their name.

Music therapy students, especially first year students, do not know how to explain our profession and why they are studying music therapy. Typically when one asks a music therapy student why they want to be a music therapist they say it's because they love music and want to help people. This is a good start, but not all music lovers who want to help people should become therapists.

It takes a special type of person to be a therapist. Many students initially choose to become music therapy majors because they think it will be easier than seeking a music performance or music education degree. This is far from true. Professor Crowe, music therapy professor at Arizona State University states, “Music therapy is a mental health, special education profession where we engage clients in active music-making to help achieve non-musical goals” (Davis 1).

Students need to be mindful of how much hard work and dedication goes into being a music therapy major. Music therapy is not just a music degree, it is a psychology, music, and science degree combined all into one. A certain personality is necessary to become a successful therapist. In the article, “Client Perception of Counselor Personality,” Dugald Arbuckle explains that there are certain characteristics that are preferred by a client. These personality traits include understanding, sympathetic attitudes, friendliness, stability, patience, common sense, and objectivity. He says, “We generally see in others that we want to see, what we see is our reality” (Arbuckle 93). Other desirable counselor traits are tolerance, warmth, interest, patience, and sincerity (95). On top of having outstanding music skills, music therapists need to have these desirable personality traits in order to be successful. Otherwise clients may not feel comfortable opening up to a therapist that is judgmental or seems intolerable.

In Western Illinois University’s small community of about forty music therapy majors, I see students all the time who, according to research by Arbuckle and Davis, do not have the personality of a therapist. Most notably, they are not comfortable working with all types of people. Many first year students have already chosen the population of clientele they would like to work with. Often times music therapists do not get to choose the population they will work with; often the population chooses the therapist. You may think you like one population or age range but really it all depends on how well you and the population work together. It is

unconscionable to be so close minded. Being close minded is not a good personality trait to have if you want to be a successful music therapist. A therapist must have the patience and understanding to work with different types of people from all walks of life.

Also, it worries me when I hear about third through fifth year students who are still co-leading. Co-leading is practicing music therapy with a partner. Each teammate is responsible for the goals of half of the clients in group therapy. At Western Illinois University, to be on the typical track in the music therapy program a student would be able to observe their freshman year, co-lead their sophomore year, and lead sessions on their own as a junior and senior. It is concerning that there are students who graduate and never are comfortable enough to lead a session on their own. How can we, as an organization, make it so that we are certain that all students have chosen the correct major which best fits their personality?

One possible solution would be to require a personality test as an entry requirement to a university music therapy program. This would ensure that all therapists in the future are charismatic, nonjudgmental, and secure enough to be successful as a music therapist. Hayoung A. Lim explains that the Music Therapy Career Aptitude Test (MTCAT) could improve the qualifications and requirements for music therapy majors. This aptitude test measures freshman and sophomore music therapy students on their self-awareness as it relates to the music therapy career, value in human development, interest in general therapy, and aptitude for being a professional music therapist. This test is highly accurate (Cronbach's Coefficient Alpha = 0.8) and the correlation between the scores of students and music therapy professionals was found to be significantly high (Lim 395). If music therapy students are required to take this aptitude test early in their music therapy career it may decrease the likelihood of students who are in a music therapy program when it does not fit their personality.

When students and many young professionals do not have a prepared statement when asked the question, “What is music therapy?” they seem unaware and not credible. It is crucial for every student to write and rehearse a speech to display their knowledge in a way that the common person would understand. As music therapists we are constantly explaining ourselves to doctors, nurses, teachers, social workers, and the family members of our clients. If we cannot prove why our services are important, we lose credibility and in some cases, lose a potential job. Dr. Cindy Ropp, EdD, MT-BC, director of Music Therapy, and Associate Professor of Music Therapy at Illinois State University, suggests that each music therapy student and music therapist should have prepared a speech, or speeches. She suggests that each music therapist has a ten second elevator speech, a one minute speech, and a ten minute speech (Ropp). An elevator speech would be used when you are in an elevator of a hospital, nursing home, or other care facility and someone asks you why you are carrying a guitar and a djembe. A one minute speech is if someone asks you more questions after you have given them your elevator speech. A ten minute speech is used if someone asks you to explain what you do for a living at a career conference of Individualized Education Programs (IEP) meeting at the last minute. This is to ensure what we can be ready to explain our field and our job credibly at any given time. If we can adequately explain ourselves then we are also being given the opportunity to spread awareness of all the great things music therapy can accomplish.

Another potential solution to increase awareness and credibility in the field of music therapy is to offer a Credibility and Awareness class in addition to the Introduction to Music Therapy class. Or, instead of an additional class we could change the two credit hour Introduction to Music Therapy course to a three credit hour course and add the aspects of the importance of credibility and awareness to the course. According to “A Career in Music Therapy,” on American Music

Therapy Association's official website, the current required Music Therapy courses cover: foundations and Principles, Assessment and Evaluation, Methods and Techniques, Pre-Internship and Internship Courses, Psychology of Music, Music Therapy Research, Influence of Music on Behavior, Music Therapy with Various Populations. Credibility and awareness are not clearly covered in the current required curriculum. Music Therapy Research covers aspects of credibility and Pre-Internship courses likely cover awareness but these classes are taken very late in the degree programs hence why so many underclassmen music therapy students are unaware of what they are getting themselves into until they are just about to graduate. This causes huge problems including the anxiety that goes along with trying to change your major as an upperclassman. If an underclassman prepares a speech like Dr. Ropp suggests, the student will learn to talk like a professional. If one has prepared a speech her awareness on the subject improves as well as her credibility. These types of speeches could be taught in a Credibility and Awareness class.

It is extremely important that all music therapy students and young professionals know how to carry themselves in a professional manor. Because we are such a young profession, we must be prepared to explain ourselves at all times and know how to spread awareness about the music therapy field. The American Music Therapy Association should encourage all first year students to write an elevator speech so that they are always prepared to answer the question, "What is music therapy?" AMTA should also consider adding a Credibility and Awareness course to the standard music therapy curriculum. This will ensure all music therapists in the future know how to present themselves in a professional matter. The Music Therapy Career Aptitude Test (MTCAT) should be considered as an entry requirement so that the only students studying music therapy are students who have the personality traits to be successful. I appreciate you

considering these ideas for improvement, and I look forward to hearing what other suggestion you have to improve the credibility of the music therapy field.

Sincerely,

Kristen Mahannah

Works Cited

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