Since the late 1980s, music therapists have worked with individuals with various special needs. What is the picture today?

Where do SPED MTs work?

- VWOs, including Rainbow Centre, St Andrews' Autism Centre, Muscular Dystrophy Association Singapore,
- Hospitals (KKH, SGH)
- Private Practice

Ages of clients served: Range from 0-55 years of age, with more services targeting the age group 5-16.

Most common diagnoses of individuals receiving MT: Autism Spectrum Disorder, Developmental Disabilities and Delay, including Hearing Impairment, Cerebral Palsy, and Muscular Dystrophy.

Duration of MT session: on average, 30-45 minutes for individual sessions and 45-60 minutes for group sessions.

Fees: range from \$0-150. (no charges are imposed by the VWOs)



"Music therapy is powerful in the way that it can reach anyone of any age and any ability, as long as the child is engaged with music. When a favourite nursery rhyme is sung, a child with visual impairment and profound physical and cognitive disabilities is motivated to push himself up from a seating position, so that he has better lung control and is able to project his voice to be heard." - Jacqueline Chow

"A teenager with autism was frustrated as he was not allowed to see his mum (who was separated from Dad). He responded to music through his body and he verbalised his frustration. Music therapy sessions offered an outlet for his negative emotions. He was happier and more relaxed after therapy." - Clara Chong

"Lenon, 12, diagnosed with ASD, has a good ear and picks up tunes easily. On one occasion I'd sung "Wonderful" by Walter Stafford and alongside he played single notes on the piano. At the end of the session, Lenon sang aloud the last phrase, "Music can be won-der-ful!" What a beautiful moment it was!" - Germaine Yong

"A teenage patient was referred for music therapy to address her ability to cope with her complicated medical status. She chose the ukulele and began to play freely while spontaneously singing the following lyrics to the tune "Baby" by Justin Bieber, "make my platelets come back, Ohhh, make my platelets come back, Ohhh, make my platelets come back, Ohhh, I want to go home." Music was an outlet for her to express her frustrations with being isolated. The music gave her a chance to feel in control and proud of her musical creation." - Ashley Spears

Music Therapy provided a safe space for 6 year-old "J" to work on her social and communication skills. Previously an anxious and tense child who withdrew periodically, she presently smiled more, was more relaxed, and interacted more meaningfully with the therapist and withdrew less frequently during the session." - Ng Wang Feng

1) Germaine with a young client.

2) Jacqueline with her client Zhen Xi. - Photo courtesy of Rainbow Centre

3) WF with young adult clients. - Photo courtesy of Muscular Dystrophy Association Singapore

UPCOMING EVENTS

International Conference AMTS' 4th MT Day on Music Therapy Feb 22-24, 2013 Pondycherri, India

Introduction to Music Therapy Techniques in Neuro-disability Feb 28, 2013

London, UK

Developmental and Medical Benefits of Evidence-Based Music Music Therapy Therapy for Premature Infants in the NICU Mar 14-15, 2013 London, UK

Music Therapy as a Career 14 April, 2013 lib@Esplanade

Professional Lecture and International Symposium for Music and the Brain April 25-27, 2013

Seoul, Korea

Drumming: Level One Intensive May 3-5, 2013

39th Annual Conference of the Canadian Association of Music Therapy -**Expanding Horizons** May 9-11, 2013 Saskatchewan, Canada

Neurologic Music Therapy Training May 15-18, 2013 Toronto, Ontario, Canada

International Conference of Music Therapy based on

May 24-25, 2013 Seoul, Korea

Music Therapy Advances in Neurodisability: Innovations in Research & Practice Jun 7-8, 2013 London, UK

3rd International Conference on Music & Emotion June 11-15, 2013 Jyväskylä, Finland

22nd Conference of the 7-10 August, 2013 Rochester, New York, USA Neurological Evidence Association for Music

& Imagery - Imagining The World With Music At Our Core June 18-22, 2013

British Columbia, Canada

V. Latin American Congress of Music Therapy: Music, Nature and Community Jul 26-29, 2013 Sucre, Bolivia

9th European Congress of Music Therapy Oslo, Norway

Neurologic Music Therapy Training September 22-29, 2013 Enschede, Holland

1st Iberoamerican Congress on Research in Music Therapy: Developments and Updates on Music Therapy Oct 10-12, 2013 Oporto, Portugal

More details on AMTS' blog under MT events around the world MusicTherapy Times



Issue 7 | February 2013

Music Therapy as a career

2:30-5:00PM LIBRARY@ESPLANADE 14 APRIL 2013 ALL ARE WELCOME | NO REGISTRATION REQUIRED Therapy

In this Issue

- P.2 EVENT REPORTING IN PICTURES: Music Therapy Symposium 2012
- P.3 UP CLOSE AND PERSONAL WITH STACEY-JANE DOUGLAS Music Therapy FAO RESEARCH NUGGET: AUTISM
- P.4 MT AND INDIVIDUALS WITH SPECIAL NEEDS **UPCOMING MT EVENTS**



EDITOR'S NOTE

This issue is filled with exciting news! Our Music Therapy Symposium, whereby we invited Dr. Katrina McFerran and Elizabeth Schwartz, was a huge success, as we received much positive feedback. Although the path to making music therapy one of the mainstream therapies in Singapore is asperous, we are beginning to see a faint light in the tunnel with increased public awareness.

As we mark the beginning of 2013, it is also a season of "farewell and welcomes". We wish our member Susanne Heinze "All the best!" as she returns to Germany. and at the same time, we welcome our newest Associate and Professional members: Stacey-Jane Douglas from the U.K., Irene LoCoco from Argentina, and Eugenia Tan, a fellow Singaporean.

At the same time, don't forget to check out our research nugget, and the Up Close and Personal Interview with newest Associate member Stacey.



Patsy Tan, PhD, MT-BC Neurologic Music Therapist NICU-Music Therapist

PRESIDENT'S SEOUL SUMMIT REPORT

In October 2012, AMTS was invited to join the World Music Therapy Associations' Presidents' Summit, "Bridging Nations and Ideas" in Seoul, Korea. Organized by the Korean MT Association, it involved participants from twelve countries. Eight of the countries with established associations included Korea, China, Japan, Singapore, Austria, the Czech Republic, Norway and the U.K. There was representation from the Philippines, Indonesia and Qatar, and a report from India. Although MT may be newly developing in SE Asia, it is a well-established profession with governmental legislation, regulation concerning professional practice, and funding in other parts of the Pacific, Europe and the West. As major milestones by AMTS were shared (two MT symposiums and three MT Community Awareness Days), there was affirmation about these being real and tangible accomplishments that our small group of

passionate professionals had achieved in the five years since our founding. Exciting developments are taking place locally and around the world. There is no better time to celebrate Music Therapy!



Melanie Kwan, MMT, LCAT, MT-BC President, AMTS

The Editorial Team: Christal Chiang, M.Ed., MT-BC | Jacqueline Chow, BMusThy (Hons), RMT | Ng Wang Feng, MMT, MT-BC | Patsy Tan, PhD, MT-BC Layout: DC Graphic Design

EVENT REPORTING IN PICTURES: MUSIC THERAPY SYMPOSIUM 2012 (AUG 31 - SEPT 4)



1) Ms. Elizabeth Schwartz from the USA 2) Dr. Katrina McFerran from Australia 3 & 7) Classroom teachers engaged in music activities 4) AMTS members with our keynote speakers 5 & 8) AMTS members WF and Patchawan share early childhood music activities 6) Dr. McFerran (L) demonstrates Music Therapy interventions for child with Autism Read more aboout the Music Therapy Symposium - http://singaporemusictherapy.blogspot.sg/2012/09/feedback-2012-music-and-special-child.html

What is the Association for Music Therapy (MT)? Music Therapy, Singapore (AMTS)?

Formed in September 2007 by 11 professional music therapists, AMTS seeks to raise public awareness of music therapy as an allied healthcare profession with a Code of Ethics and Standards of Clinical Practice. The association also maintains a registry of locally-based professionals. To date, we have more than 20 registered professional members.

Who can benefit from

Individuals and groups with various impairments and conditions at all ages, from prematurely-born infants to the elderly may benefit from MT interventions. Music therapists apply music toward restoring, maintaining or improving health and wellbeing, and their coping with disability and disease. One does not need any music background to participate in sessions.

to assess suitability and to design music interventions to address functional objectives.

Who are Music Therapists?

Credentialed professionals who graduate with a degree from an clinical programme Is there scientific basis in overseas. As credentials vary from country to country, the following are recognized: MTA (Canada), RMT (Australia), RMth (New Zealand), SRMT/ HPC (U.K.), and MT-BC (U.S.A.). Please email us at musictherapy.sg@gmail.com Music therapists are trained to verify credentials.

What about the Music?

Music Therapists use clientpreferred music, so any type of music may be is usually provided live. The focus is on the process and relationship rather than on performance.

Music Therapy?

Yes, MT is supported by quantitative and qualitative research, including randomized controlled trials on it. Please email us to (RCT). There is ongoing international research with music therapists publishing in scholarly journals, including the Cochrane

Collaboration. While the "gold standard" is used in western medicine to collect clinical evidence through RCTs, e.g. effects of prescription drugs, it is not easily transplanted and applied to humanistic clinical practice.

Is there a local Music Therapy training available in Singapore?

Not yet, we are still working indicate interest in getting local training.

UP CLOSE AND PERSONAL WITH STACEY-JANE DOUGLAS



Stacey is one of our newest Associate members with 10 years of clinical experience in the U.K. The Editorial team (WF) initiated an email interview with her. We will feature more new AMTS members in our upcoming special online edition of "Up Close and Personal." Do visit our blog for updates.

WF: What brings you to Singapore, Stacey?

SJD: After ten years of working as a Music Therapist/Teacher and Musician in the UK, I decided that I wanted to travel and to learn more about the big wide world! I decided that I would move to Asia in 2009, where I first set up a Music Appreciation program at Zhejiang Yuexiu University of Foreign Languages for Language Learners in China. In 2012, I came to Singapore where I currently teach Music at ISS International School. I have found that my Music Therapy training and experience have been invaluable to my teaching.

WF: Where did you train as a music therapist? Please tell us more about your music therapy clinical work with children with history of trauma and abuse. I trained at Anglia University as a Music Therapist with Helen Odell Miller and Amelia Oldfield. My work contract at Northway School in North London remains the most poignant working period for me... It was here that I came into contact with the aspect of treating children who were experiencing difficulties due to being adopted/ fostered, abused and also displaying high learning needs.

WF: Please share with us a case example where music therapy made a difference.

"Ken" was referred as he was lacking confidence in class and he was experiencing severe distress due to the experience of an abusive mother. Ken was at that time living with his father who was experiencing severe financial and housing problems.

When I first met and assessed him he appeared fragile and pale. His playing of the percussion instruments was tentative and he seemed to be very self-conscious where he would often start to giggle nervously. Phrases and rhythms created by Ken were always left unfinished or were often left stranded in mid flow. When I played an instrument such as the guitar or began to sing, Ken appeared to be sensitive and quite unsure of continuing to play. Hence I at times pondered as to how and whether I should play with him. This led me to think about how he experienced connections and bonds with others. It seemed to touch upon his fragility and vulnerability.

I decided to work with Ken on a one-to-one basis. Over the weeks, we began to build a musical relationship. Most notably, Ken started to use his voice where he would cry and whimper which could often become more pronounced throughout the sessions. He would often start to bark and use his body to move around the room like a dog. At times, I would provide a holding and more containing structure

on the piano and/or guitar and in other instances, I would use my voice where our vocal dialogues seemed to serve as the basis for sustained connection.

The sessions were quite intense and often transferred feelings of confusion and anguish to me. As I began to build connections with Ken's care team, I later found that Ken had experienced the trauma of being locked up in a room by his mother for punishment. Also it was mentioned that the family might have had a dog at one stage that Ken was sad to lose. Thus, it appeared that his dog-like expression was enabling him to really explore primal and difficult feelings and it also helped me to understand some of the transferred feelings and the projections involved.

My sessions continued with Ken until he left the primary school. In thinking back to these sessions, it appeared that he was able to come into contact with the primal experiences of rejection, loss and abandonment. Despite his fragility, he was able to share his vulnerability and to explore the process through his music.

I feel that Music Therapy should always have a place in schools as it can provide an avenue of support for those who need it. I was lucky to have worked with an educational team that truly valued the purpose of Music Therapy within education.

MT & CHILDREN WITH AUTISM: "IN SEARCH OF SHARED TIME"

This column aims to highlight an interesting topic or question that has been addressed by recent scientific research.

By Susanne Heinze, DMtG, Associate member

As generally observed, it is the emotional and consequentially, the social development that is the main aim of therapeutic treatment in children with Autism. During their work and observational research, German Professor Karin Schumacher and French Development Psychologist Claudine Calvet found out that synchronous moments have a special importance for children with autism and their emotional development.

Music therapy uses specific interventions in order to encourage the ability to perceive rhythm, intensity and form, which is important to ensure that synchronous moments can occur. Through emerging synchronous moments, important experiences from early childhood can be learned such as awareness of one's own body, the experience of joint attention and the experience of an interpersonal relationship.

In the moment when a dialogue arises, synchronous moments are not just important for emotional development, but also for the development of social skills.

Schumacher, K. & Calvet-Kruppa, C. (2007). The "AQR-Instrument" (Assessment of the Quality of Relationship) - An observation instrument to assess the Quality of Relationship. In: Wosch, Th. & Wigram, T. (eds.), Microanalysis in Music Therapy: Methods, techniques and applications for clinicians, researchers, educators and students. p. 79-91, Jessica Kingsley Publishers Ltd: London,

Schumacher, K. & Calvet-Kruppa, C. (2008). Synchronisation/Synchronization - Musiktherapie bei Kindern mit Autismus: Music therapy with Children in the Autistic spectrum. In collaboration with Manfred Hüneke and Petra Kugel. DVD-Box, Göttingen: Vandenhoeck & Ruprecht.