Being Together in Music:
Thoughts From a Philosophy Cafe Dialogue

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Abstract

In this paper shares and discusses questions that arose from music therapy sessions with an adolescent with severe multiple disabilities, with people not directly involved in the case. In the early sessions with this client, I wondered, "How can I make music with this client?" I intuitively felt that this question was not confined to the dyadic relationship between the client and myself as therapist, but was connected to the larger social structure and the various values and relationships within it. To share this question with those not directly involved in the case, I organized a small dialogue event using the Philosophy Cafe method. Through this, participants got a taste of each other's differing views and discovered new viewpoints together, thus enabling them to create a shared image of the word. This could serve as an example of how clinical music therapy practice can connect with the community surrounding it, and open up the case to society. Such dialogue also enables careful examination of the words and concepts used in the field of music therapy. This could lead to a review of the use of these words and concepts which had been developed from a modern, Western-centric perspective.

Keywords: *dialogue, philosophy cafe, culture and language*

Notes:
In publishing this article at the time of Russia's invasion of Ukraine, I would like to say this: I hope that we will be together through dialogue, not war.

Introduction

This paper is part of an ongoing case study covering seven years of individual music therapy sessions with an adolescent with severe multiple disabilities. In disclosing this article, consideration was given to the protection of personal information and privacy of the client, and consent was obtained from the client's family. In addition, this paper was written in such a way that individual participants in the dialogue could not be identified. In the early sessions, I wondered, "How can I make music with this client?" As I examined the clinical process in detail, I began to realize that my concern was con-

nected to a more universal question: "What does it mean for a client and a therapist, each with different backgrounds and values, to make music together?" In retrospect, I intuitively felt that this question should not remain between the client and myself. This is because the relationship between client and therapist is not simply confined to a dyadic interaction, but is linked to various relationships and values held within the larger social structure. I wanted to share this question with people who were not directly involved in the case, so I organized a small-scale, dialogue event.

This paper will consider the significance of sharing questions generated from practice with people who are not directly involved in the case. The structure of this paper is as follows. In section 1, an outline of the case and how I came up with the question is given. In section 2, the style of dialogue used in this event, the Philosophy Cafe, is outlined. Section 3 comprises a detailed description of how the dialogue progressed during the event. Section 4 reflects on the findings of this attempt and considers their significance. Finally, I touch on how such a dialogue attempt could contribute to the music therapy field.

1. Brief Case Overview[1] and my Initial Questions

The client (Cl.) is an adolescent with visual impairment, and both intellectual and physical disabilities. When Cl. was five years old, the present co-therapist (Co.) began private music therapy sessions, and I took over as the main therapist when he was twelve years old. Since then, we have held music therapy sessions once every other week for seven years until he graduated from a special needs school. The sessions included singing and improvisation activities, and followed a client-centered and resource-oriented approach that encouraged Cl. to follow his own developmental path.

In the early days of the sessions, I asked myself, "How can I make music with him?" At that time, Cl. had a certain repertoire of songs for children at play and popular songs for young people, which he had developed over about seven years with his previous music therapist. He sang these songs each time, but he was quick to say, "No!" or "The end!" to any new activity or suggestion. I considered various possibilities, including nervousness about the change of music therapist, Cl. expressing that the new activity did not fit his cognitive or psychological situation and needs, or the process of Cl. developing autonomy, but I was not sure at the time of the reason for these behaviors. I merely understood his behaviors at surface level; I felt rejected by him and felt it difficult to expand our activities. In addition, when we sang his repertoire together, I often found it difficult to grasp how his paralyzed body felt and expressed the music, and felt that I could not get into the flow of the music. It felt as if I was simply trying to sing along with him, and it was difficult to feel that I was making music with him. In short, I had a challenge to "be together with the client in music."

Through trial and error, I became aware of the gap between Cl. and myself in our intentions and perceptions of "music" (Table 1). On the one hand, Cl. seems to be familiar with sounds/music of short durations with clear beginnings and endings. On the other hand, I wanted to develop his repertoire and expand Cl.'s preferred sound phrases and pop song motifs. The intention was to facilitate the musical development I wanted to see as a music therapist, but behind that was my personal anxiety that I would not know what to do if the music ended too soon, or that I would not be competent or skilled enough as a therapist to just repeat Cl's. favorite songs/music. Thus, by focusing on the gaps in our "music," I realized my desires as a therapist and the true feelings hidden behind them. In other words, I became aware of the biases in my senses and thoughts.

As I examined the clinical process in detail, I began to realize that my concern, "How can I make music with him?" was connected to a more universal question: "What does it mean for a client and a therapist, each with different backgrounds and values, to make music together?" I wanted to share this question with others and explore it further. More precisely, I felt a sense of urgency, as if I could not continue working without addressing this question. Usually, there are many ways to share questions and

Table 1
The "Music" Gap between Client and Me

The music that seems to be familiar to Cl.	The music I want (The true feelings behind it)
Short durations with clear beginnings and endings.	I want to stretch and develop this. • (If the music ends too soon, I do not know what to do.)
Dominant-tonic structure • Feeling of physical tension and relaxation. • Getting a thrill.	I want him to feel more than just tension and relaxation. • (I do not really like music with a strong dominant-tonic structure.) • (I am not used to sensing the physical sensation that Cl. Feels.)
Music with lyrics and melodies • Includes words and greeting expressions that Cl. can understand. • Includes onomatopoeia, calls, and other interesting characteristics of sound.	I want to treat music as sound, without being bound by lyrics. • (Rather than songs with lyrics, I prefer instrumental music, which I have been playing for a long time.)
Cl. wants to repeat what he knows. • Says "No" to things that are brought in from outside of Cl.'s intentions.	I want Cl. to try new things. • (I do not want to simply repeat the same things. I want to develop it in some way.)

problems generated from a case, such as case study meetings (where problems and solutions to a particular case are discussed), and peer supervision (where music therapists support each other in order to grow as professionals in their practice). However, I had a vague feeling that I needed to explore my question in a different way than simply seeking ways to improve the session or to find a direction to take as a professional. In retrospect, I intuitively felt that the distance and discomfort sensed with Cl. should not be ignored between Cl. and myself. This is because the relationship between client and therapist is not simply confined to a dyadic interaction, but is linked to various relationships and values held within the larger social structure. I wanted to open up my question to people with different positions and perspectives who were not directly involved in the case. Thus, I organized a small dialogue event.

2. Method of Dialogue: Philosophy Cafe

For the dialogue event, I adopted the Philosophy Cafe method. Philosophy Cafe is a place where people gather to talk, listen, and think on a single theme. The aim is to explore the theme together with one person facilitating the dialogue (Washida et al., 2014). It was initiated in 1992 by French philosopher Marc Sautet at the Café des Phares (Sautet, 1995), and its activities have since spread around the world. In Japan, it has been held in numerous places on various themes (see, for example, Washida et al., 2014, p. 323-339).

Characteristic of the dialogue in a Philosophy Cafe is that it aims for the discovery of questions and the renewal of questions, not at consensus building nor problem solving (Washida et al., 2014, p. iii). The questions formed here are not for the purpose of trying to find out what we do not know, but to re-question what we think we know by carefully exploring our preconceptions (Washida et al., 2014, p. 44). What is important is the process of inquiry itself, such as deepening our understanding of matters and each other, asking questions, exploring backgrounds and assumptions, and to do so collaboratively (Kajitani 2015, p. 102).

There is no standard or formulaic way to conduct a Philosophy Cafe. Basically, it is a one-time gathering of the people there. Participants do not need to introduce themselves and can come and go as they please. However, there are some basic rules participants are encouraged to follow in order to deepen their dialogue with others. According to Kajitani (2015), these rules are made to guarantee an atmosphere of *intellectual safety* and ensure respect for freedom of thought and speech (p. 102-106).

1. Participants can say whatever they want (even trivial things, things that are separate to the flow of conversation, etc.).
2. Participants should try not to talk about another participants' narrative in a way that negates them. Rather, explore the premise of how the narrative came to be.
3. It is acceptable to just listen and think, without saying anything.
4. It is important to pose questions to each other.
5. Participants should speak based on their own experience, not on what someone else has said or what is written in a book.
6. It is acceptable if participants cannot come to a conclusion or neatly collect the points discussed.
7. It is acceptable if participants begin to feel unclear or waver over something they were once sure of.

In a Philosophy Cafe, participants are expected to listen carefully to what others say on the theme, and to express the thoughts and feelings they have at that time, based on their own experiences. The narratives of the participants do not necessarily have to be coherent, nor do they have to be based on the narratives of the previous participants. It is acceptable to be interrupted, and it is acceptable to change one's mind or become unsure during the dialogue. In the Philosophy Cafe, such experiences that "shake up" what we take for granted are valued. In other words, it is important for each participant to become aware of their own accepted views, and to incorporate the viewpoints of others to see things from a new perspective. The facilitator acts as a kind of "traffic controller" who facilitates the dialogue by supporting the participants when they are speaking, asking the other participants if they are clear on what has been said, and creating links between the speaker's views. Sometimes the facilitator gets lost along with the participants as the dialogue progresses.

3. Dialogue in Practice

The Philosophy Cafe event took place after several years of working with CI. There were about ten participants who had responded to a call for applications. They included music therapists, musicians, and people interested in dialogue. We sat in a circle on the floor of a room and talked; the whole event lasted about two hours. In the first half of the event, I talked about my own case and the process that led me to ask the question. In the second half, all the participants engaged in a dialogue hosted by the facilitator. I also joined the dialogue as a participant. The facilitator was not a music therapist, but a practitioner of Philosophy Cafe. Since this dialogue event was not originally planned as part of the case study research, permission to share the case was obtained from Cl.'s family. As the purpose of the event was not to examine the case itself, I minimized the information given about Cl. and concentrated on sharing my own experiences of the processes I had questioned.

The following section details the dialogue that took place at the event. The account is a reconstruction made from audio recordings of the participants' remarks. In addition, the account also makes reference to the comments of the facilitator who organized the participants' remarks. The account is based on the remarks of the participants and facilitator in the dialogue, without any later interpretation or summary by myself. However, my words as one of the participants are included in the account.

The Flow of Dialogue

In the second half of the event, the participants began by listing keywords that came to their minds in relation to the case story explained in the first half. Participants then created a multitude of questions using those keywords. From those questions, the participants chose one as a theme for further discussion: "Is there a difference between *Tomo-ni-Kanjiru* (feeling with, to feel together) and *Yorisou* (being with, to be close together)?"

At first, the facilitator asked, "What experiences do you recall in response to the words *Tomo-ni-Kanjiru* (feeling with) and *Yorisou* (being with)?" Several participants shared what came to mind.

> I think *Tomo-ni-Kanjiru* (feeling with) is when a client and therapist are playing music together and they both spontaneously change their performances at the same time because they feel moved by each other.

> But you may not necessarily feel the same emotions at that point, and you may not need to.

> For example, if we eat something together and one says, "It tastes good," while another says, "It tastes bad," it is not about who is right or how we should feel. I think what is important, is to share the act of eating.

Through this discussion, it was suggested that it might be that *Tomo-ni-Kanjiru* (feeling with) requires a shared context or the act of experiencing something together, which is slightly different in nuance to empathy or understanding the other person.

Next, they shared their thoughts on the word *Yorisou* (being with).

> When I think about a newborn child and a mother, I wouldn't use the word *Yorisou* (being with) when they are completely united. I think it is because there are gaps between us that we feel the need to be close to each other.

> However, the person you are trying to *Yorisou* (be with) will not say *Yorisowareru*[2] (being drawn close to), they may even find it annoying.

From these conversations, it was suggested that it might be that *Yorisou* (being with) includes hierarchical relationships, where support and care is given to another person based on the premise of differences in position.

We then returned to the theme question, "Is there a difference between *Tomo-ni-Kanjiru* (feeling with) and *Yorisou* (being with)?" We also contemplated the questions, "If there is a difference, how do they differ?" and, "If there is no difference, what doesn't differ?"

> *Yorisou* (being with) has an intention (to be close to that person) and a purpose (to be close to that person because they have a problem), while *Tomo-ni-Kanjiru* (feeling with) is more spontaneous.

> A *Yorisou* (being with) relationship is hierarchical, while a *Tomo-ni-Kanjiru* (feeling with) relationship is parallel.

> In *Yorisou* (being with), the center of gravity is placed on the person who *Yorisowareru* (is being drawn close to), whereas I feel that *Tomo-ni-Kanjiru* (feeling with) requires effort on both sides.

Then, the following comment was made, which seemed to slightly change the meaning of the word *Yorisou* (being with) from what had been mentioned so far. A participant said,

> How about when a couple is looking at the natural scenery together, and although they don't say it out loud, they both feel "Ah, it's beautiful"? Isn't this also a kind of *Yorisou* (being with)?

With this remark, the atmosphere in the room changed, and the following comments were made.

It seems to me that this example of *Yorisou* (being with) has no hierarchical relationship.

If that's the case, then maybe it's not always necessary to have a hierarchical relationship in order to *Yorisou* (be with).

In addition, the following thought pattern emerged:

We music therapists may be overly familiar with the idea of *Yorisou* (being with) our clients, as if it were an occupational hazard.

(The two words are not opposites.) I think it is because we try to *Yorisou* (be with) that we are able to *Tomo-ni-Kanjiru* (feel with).

I think that *Tomo-ni-Kanjiru* (feeling with) and *Yorisou* (being with) are two different ways of describing different aspects (e,g., senses and actions) within the same situation.

In a questionnaire to the participants after the event, the following comments were made:

It was moving to experience changes in the weight and color of words (during the dialogue process).

I realized that I have my own biased thoughts and images associated with a word; it is precisely because I am biased that I may be able to make deep and significant discoveries and realizations by talking with others.

It was interesting to see how people's values and views differ depending on their experiences and roles.

4. What we Have Learned From our Attempt at Dialogue

So far, I have described the attempt to share questions arising from music therapy sessions in a dialogue with participants who were not directly involved in the case. In this section, I will discuss what we were doing through the dialogue and what significance it has.

Various Differences Within the Case and its Context

First, I would like to consider what the dialogue here was about. The main issue which came to light through this attempt was the diversity of people and the differences that divide them[3].

In today's society, there are diverse people and diverse ways of living. There are various differences in society depending on factors such as race, ability, work, housing, gender, sexuality, and so on. Differences act to segment and group people by various human characteristics. For example, disease/health, disability/ability, abnormal/normal, minority/majority, female/male, victim/offender, etc. One will see a completely different landscape depending on where you draw the line and where you stand. Differences may sometimes cause isolation, fragmentation and difficulties in our life. In order to change the relationships between people on both sides who are separated by these differences, it is of course important to hear the voices of the disadvantaged side and to guarantee their rights to participate in society. However, at the same time, it is also necessary to take the viewpoints of people from diverse standpoints into account and to consider the differences together.

Thinking about the case from the perspective of differences, there are many differences that separate Cl. and myself, such as different roles in therapy and care (client/therapist, receiver/giver), different experiences with music, as well as differences in age and gender. Of course, there will be many more complex differences that will not surface in the music therapy session. In light of this, asking "What does it mean for a client and therapist, each with different backgrounds and values, to play music togeth-

er?" seems to raise awareness of the various differences that surround music therapy sessions and their contexts. Therefore, engaging in dialogue on this question with people who are not directly involved in the case can be said to be a way for diverse people, with different roles and experiences, to bring their perspectives and to think together about the differences that exist.

Dialogue on Differences

So, how were the differences dealt with in the actual dialogue? I will discuss this point in relation to the way the dialogue was conducted, which seemed to be a key characteristic of this event.

One of the characteristics of the dialogue held was that the participants did not directly talk about the question that generated from the case, but rather they formulated new questions based on the keywords that arose from the case, and conducted dialogue on those themes. If the participants were to talk directly about the question that generated from the case, the differences and power imbalance involved in the case would be brought directly into the dialogue. Those involved in music therapy may speak about how this case should be developed from the perspective of their professional expertise, while those not involved in music therapy may simply listen to the discussion on topics previously unknown to them. Or some participants who consider themselves able-bodied may discuss how to respect the intentions and rights of people with disabilities. Here, however, the theme of the dialogue was derived from the case, but was replaced by a more universal question posed by the participants: "Is there a difference between *Tomo-ni-Kanjiru* (feeling with) and *Yorisou* (being with)?" By doing so, the participants were asked not to think about the case from a spectator's standpoint, but to think about "What does it mean to be with others for you?" In other words, this setting may have provided an opportunity for participants to put aside the titles and attributes of their profession, and to participate in the dialogue whilst thinking about the differences between people in light of their own experiences.

Another characteristic of the dialogue was the style of the Philosophy Cafe, in which people carefully communicated their differences. The philosopher Kiyokazu Washida (2013), who pioneered the practice of Philosophy Cafe in Japan, says that the essence of communication in dialogue is "to feel the differences between one another more deeply and in more detail". Reflecting on this in the context of the dialogue event, the participants talked about *Tomo-ni-Kanjiru* (feeling with) and *Yorisou* (being with) in their own way, from different experiences and perspectives. Each narrative was fragmented as each comment did not necessarily connect to or follow on from the previous one. However, as the participants exchanged their perspectives and experiences, they began to realize that there could be such a way of looking at things, and the images associated with specific words gradually changed. It seemed that a shared image of the words was created as participants got a taste of each other's differing views and discovered new viewpoints together. However, holding this dialogue does not mean that the differences between people disappeared. Rather, the very process of looking at *Tomo-ni-Kanjiru* (feeling with) and *Yorisou* (being with) from different viewpoints enabled a redrawing of the lines that separate people over and over again, which may have led to the creation of new relationships between participants. Participants in the dialogue can take their experiences home and continue to think about them in their daily lives, which may have a ripple effect on those they come into contact with.

Significance of Dialogue for Me

In retrospect, the dialogue event was one of the turning points that lead me to deepen the concerns and issues I had in my case into the "question." At the time, I was not sure why I needed to have such a dialogue, or how the experience of the dialogue related to my clinical practice, so I would like to reflect on it here.

As mentioned above, the problems I faced "being with Cl. in music" were so urgent, that if I did not tackle this question, I would not be able to continue as a music ther-

apist. There was my belief as a music therapist that it was important to be with Cl. in music, but also a sense of inferiority and guilt about the difficulties I felt in doing so. As shown in *Table 1: The "music" gap between Cl. and I* , it was my dichotomous way of looking at the differences between Cl. and myself which led to me feeling pushed into a corner.

In the dialogue, however, I was able to put aside the case, to listen to the careful examination of the words *Tomo-ni-Kanjiru* (feeling with) and *Yorisou* (being with), and to think together with the participants. Through the dialogue process, I felt that I was gradually unraveling my own obsession with "being with," as previously hidden ways of looking at things were brought to light, and connections between one aspect and another were discovered. It was an experience that freed my perspective from "this or that" and I felt immersed in the realization that "it could be like this." This led me to transform my pseudo-question, "How should we be together in music?" to the real question, "What does it mean to be together in music?" In other words, I can now explore the question, "What does it mean to be together in music?" in a more straightforward away.

The significance of this dialogue for me was that I was allowed by others to ask my question (and I allowed myself to ask the question in this way) and I was given the opportunity to develop the question further. I think this was possible because I was able to think together with others in a place where we felt safe to talk about our ideas[4]. Since then, the musical-therapeutic collaboration between the client, co-therapist, and me has developed in a unique way. Of course, this happened throughout the course of a long clinical process, and may not be causally related to the Philosophy Cafe. My trial and error about being together with the clients is still going on. But now I realize that the basis of being together is not, as I used to do, to deny oneself for the sake of the other, but to neither deny the other nor oneself.

5. Concluding Remarks

Finally, I would like to mention how the findings from this attempt at dialogue can contribute to the development of the music therapy profession. This paper may provide a particularly useful perspective for the field of Community Music Therapy, which focuses on the relationship between the individual and society, and attempts to bring about change in the community as a whole. It could form part of a methodology for a Community Music Therapy process that attempts to involve everyone democratically to decide what to do, how to do it, how it will go, and what to do next (Ansdell & Stige, 2016, p. 604). In addition, this may also resonate with approaches such as feminist perspectives in music therapy, resource-oriented music therapy, or the recovery model in music therapy. Such dialogue also enables careful examination of the words and concepts used in the field of music therapy. This could lead to a review/rethink of the use of these words and concepts which had been developed from a modern, Western-centric perspective.

This was just one attempt to share the question that generated from the case. In order to shift the lines that separate people and change their relationships, it seems necessary to continue the dialogue at all levels and contexts of clinical practice and research.

About the Author

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Notes

1. For some of the initial processes in this case, see Miyake (2014).

2. *Yorisowareru* is the passive form of *Yorisou*, but we do not actually use the word in this way. As it is an unnatural usage of the word, such a way of thinking may also be unnatural for a Japanese speaker.

3. I was involved as a researcher in a social inclusion and expressive activities project. This provided many insights regarding perspective on diversity and boundaries (See Miyake, Nagatsu, & Ijiri, 2016).

4. Currently, Rika Ikuno and I co-lead "Kokonowa Dialogue Circle for Studying Musical-Clinical Practices," a peer dialogue group for music therapists to initiate and nurture research questions starting from their own clinical experiences. Here, we talk about each other's clinical practice more directly than I did in the Philosophy Cafe featured in this article, but we share the same basic stance of dialogue. The discussion with the peers in "Kokonowa" has been very helpful in writing the reflection section of this article. I would like to express my sincere gratitude to the members of "Kokonowa," and in particular to Rika Ikuno, Yoko Fuse, Takako Ito, and Simon Gilbertson for their discussions at the independent symposium in Japanese Music Therapy Association (JMTA) in 2021. "Kokonowa Dialogue Circle for Studying Musical-Clinical Practices": https://nlnmhd.wixsite.com/website/blank-28

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