

ESSAY | PEER REVIEWED

## Living in “Turbulence”: Reflections on a Therapeutic Theatre Performance

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### Abstract

This paper explores a Black music therapist’s experience within *Turbulence*, a therapeutic performance piece developed by Black and brown creative arts therapists and theatre artists in the Greater New York City area. The author shares her own personal experiences and reactions as a participant, process actor, musician, and music therapist within this group process. An examination of the integration of music within the performance will also be shared, particularly in terms of how certain music traditions can be used to elevate the expression of those with identities that have been historically marginalized. Additionally, this paper explores how social identity-based affinity groups supported by a creative process can decrease feelings of isolation and bolster a sense of empowerment amongst BIPOC-identifying creative arts therapists.

**Keywords:** *BIPOC, Black, music therapy, creative arts, theatre, therapeutic performance, affinity space, performance activism, placemaking*

### Introduction

As a Black woman working in the greater New York City area, I have participated in multiple Black, Indigenous, People of Color (BIPOC) affinity spaces throughout my clinical training and professional career. The place and placemaking derived from intentionally centering social identity as a source of experience and meaning-making have been necessary for my professional development and personal growth. As a former student of two predominantly white institutions (PWI) and oftentimes predominantly white interdisciplinary teams, I’ve come to identify as an “outsider within” (Collins, 1986) due to the familiar experience of navigating predominantly white music therapy spaces. According to Black feminist theorist and writer Collins (1986), Black women in white patriarchal academic or professional settings are often deemed “outsiders” by virtue of their race and gender. However, their training, education, or labor provides a unique vantage point and access to knowledge about the dominant (white) group without ever gaining the power possessed by the members of the group. While Collins talks about the opportunities to creatively use this positionality to develop a distinct voice and stance amongst Black women, I have often experienced iso-

lation and misunderstanding due to this outsider status. My search for affinity spaces was an attempt at “placemaking,” a transformative process grounded in the needs of community, with the intention of creating a space for connection and collaboration (Project for Public Space, 2007). The act of placemaking speaks to the need of communities of color to create spaces that are by them and for them that have not previously existed. Even more specifically, Black placemaking “privileges the creative, celebratory, playful, pleasurable and poetic expressions of being black and being around other black people in the city” (Hunter et al., 2016, p. 32). *Turbulence*, then, could be perceived as the fruits of placemaking labor, resulting in a creative and ever-evolving space that provided support and nurturing for those who resided within.

In this paper, I seek to highlight the importance of social identity affinity spaces for professional development and personal growth amongst BIPOC creative arts therapists and investigate the benefits of utilizing an arts-based process in this work. My identity as a music therapist has contributed to my focus on the two musical pieces that were developed within the process and shared within the performance of *Turbulence*. While music was featured within this drama therapy process partly due to my presence within the group, it also points to the group’s openness and desire to highlight and elevate my unique contributions as a part of a womanist ethic of care (Collins, 1989). Thus, I seek to explore how music supported, enhanced, and deepened the expressive capacity of this storytelling experience. I seek to contribute to a more thorough understanding of the potential benefits of collaborations between drama therapists and music therapists. This paper functions as a self-case study, exploring the perspective of a music therapist who participated in a drama therapy-based therapeutic theatre process. I examine my social-location as a Black woman and the influence of Black music traditions on how music was developed and featured within this performance. In doing so, I intend to share the ways my understanding of racial identity in everyday life and my role as a music therapist were deepened and how empowerment and belonging can be gained from affinity spaces and processes.

### *Turbulence*: Process and Performance

In the fall of 2018, I received a call for participation in a theatre project and study with the New York University Program in Drama Therapy Theatre & Health Lab. In the initial communication, it was indicated that this project would be directed by drama therapist Britton Williams and would “involve storytelling, improvisation, and collaborating with NYC playwright Daaimah Mubashshir on the development of an original play” (N. Sajnani, personal communication, October 15, 2018). The project aimed to explore experiences of BIPOC clinicians and the performance of race and racism in clinical practice and education.

This project centered the growing understanding of BIPOC clinicians’ need for social identity affinity spaces (Green, 2018) within the “As Performance” therapeutic theatre series. Therapeutic theatre utilizes processes and products of performance to address psychological, physical, and social concerns and promote health and overall wellbeing. It is one approach used by drama therapists to support goals such as reminiscence, recovery, rehabilitation, and advocacy. In my experience in the process, therapeutic theatre allowed the group to acknowledge the significance of social identity, more deeply understand those positions, identify with one another over a shared lived experience, and express the feelings associated with those experiences in an embodied way. The “As Performance” process, while it can vary depending on the project, typically involves a drama therapist “working in partnership with an individual or community in a co-creative process over 12–20 weeks in which they share personal stories, determine collective themes, make aesthetic choices, develop a script, consider audiences, rehearse, perform, and then reconvene to reflect on the process in relation to their personal and collective goals” (NYU Steinhardt, 2019, n.d.).

While many people responded to the initial call, twenty people engaged in the entirety of the process and performance of *Turbulence*. Our group met weekly starting in

January 2019 but transitioned into more frequent rehearsal dates as we approached our Provincetown Playhouse performances in April 2019. Group members held several personal and social locations, ranging from students to working professionals, program directors, and faculty members. The majority of participants were drama therapy students or professional drama therapists; I was the only music therapist in the process. All participants identified with the identity of BPOC. No members who responded to this call were Indigenous-identifying, which is why “I” was removed from the BIPOC acronym in literature about *Turbulence’s* performance. I was one of 12 Black-identifying participants. While a spirit of equality and shared responsibility was apparent amongst all participants in this process, specific roles were delineated, including director, playwright, stage manager, and assistant stage manager. The rest of the group members had a performance-based role in the final production.

The “storytelling, improvisation, and collaborating” mentioned in the initial email became an integral part of the process and was abundantly clear early on (N. Sajani, personal communication, October 15, 2018). In our initial group meetings, our director, Britton, would lead us in different drama therapy group interventions to support our cohesion and build trust. These interventions included prompts to convey a current feeling state through a sound or movement; passing a sound or movement to another group member, who then transforms it before passing it again; using your body to act out grabbing a “theme” you want to take with you and hold on to; and engaging in improvisation-based activities that allowed us to roleplay various imagined scenarios or reenact lived experiences. Many of our meetings also involved the sharing of our experiences as BPOCs in the classroom and/or the workplace. Group members shared accounts of witnessing racism and experiencing it firsthand; questions around racial identity and the plight of being the “outsider within”; microaggressions and overt aggressions; the burden of explaining; and the longing for a space to be seen, heard, and understood. We were also invited to write down anecdotes, with the intention that the stories would be incorporated into the final script with the support of our playwright, Daaimah. The travel theme specifically grew from an experiential initiated by Britton. During an intervention, Britton called us to imagine our ideal world: a world free of racism, prejudice, and discrimination. We used our bodies and words to play out different scenarios around what this world might look like. Over time, we explored how we might get there, which ultimately led the group to use the ambiguous, transitional space of a fictional airport to explore these themes. The airport was somewhere in between where we are and where we want to go, perhaps the perfect place to unearth our motives for leaving in the first place.

The audience was as much a part of the performance as the process actors. Before the performance began, the flight guide entered the theatre lobby and assigned audience members seats, first seating people who held the most marginalized identities. This reversal of societal norms called audience members to immediately confront the abnormality of the encounter that would prioritize BIPOC individuals in public spaces. The audience participated in a variation of a privilege line, where the flight guide called them to consider if they had ever been racially profiled at an airport. They met a number of characters along the way, all nameless, sharing stories that highlighted experiences well-known to many BPOC individuals.

The performance storyline centered two travelers who were detained when security intervened during an altercation with a disgruntled traveler. A support group emerged in the waiting area, where facilitators and group members alike freely shared their own painful experiences of racism, as well as their triumphs in developing a greater sense of self-confidence. Following a dissenter, who didn’t “believe in” or even think they “needed” therapy, a detained woman sings “Heart Song”—a wailing lament of unjust circumstance. The flight guide, also the performance’s narrator, ushered the audience along the journey, until shaken by the experiences of the travelers prompting him to share his own suffering. Amplifying the common experience of racism, the travelers moved throughout the airport with racialized “baggage” in tow, a metaphor for the emotional burden racial trauma brings to everyday life. *Turbulence* was performed in

three iterations throughout 2019: the Critical Pedagogy in Arts Therapies Conference at the Metropolitan Museum of Art (Manhattan, New York), Provincetown Playhouse (Greenwich Village, New York), and the North American Drama Therapy Association Fortieth Annual Conference (Philadelphia, Pennsylvania).

### Experiencing *Turbulence* as a Black Music Therapist

While the NYU Drama Therapy Program request for participants was inclusive of all creative arts therapists, the group was made up predominantly of practicing drama therapists or drama therapy students, and the structure of the process was influenced by the clinical expertise of the director, a drama therapist herself. As a Black music therapist, I felt a hurried, desperate longing to be in a space where I could hope to be truly seen, heard, and understood within my social location. I was lucky enough to have engaged in several drama therapy processes prior to joining the “As Performance Series” and to be a trained Austin Vocal Psychotherapist, a technique largely influenced by the tenets of psychodrama. Still, I was thrust into a new way of experiencing myself and my racial identity. The focus on embodiment involved in this process was new to me, but largely contributed to the long-lasting impact on my self-understanding. Embodied movement explored in drama therapy interventions centered my sensorial experience of racism and cellular memory through enactment. While energizing, it also challenged me greatly. I was not prepared for how moving my body and acting out racialized scenarios that I and others around me had experienced would tax me emotionally, unearthing painful feelings that I had learned to keep at bay, but that still resided within me. As the process crystallized into the performance of *Turbulence*, I felt the immense support of my co-creators in integrating my skill set into the work itself. This provided a unique opportunity to explore how music and drama may interact for the purpose of elevating and sharing a collective story. Music and music therapy concepts that were incorporated into the process were experimental and exploratory in nature. The song “Heart Song,” written by Britton Williams and featured within the piece, and the closing song experience, “I Hold,” co-created by the group were two significant expressions of our exploration. Embodying both the role of participant and witness, I was able to observe the many similarities between music therapy and drama therapy in terms of both philosophy and practice. In the following sections, I explore these similarities and the embodied meaning centered in the process in the use of breath and two songs, “Heart Song” and “I Hold.”

### Meeting in the Breath

The use of collective breath became a hallmark of our work together. Collective breath was initiated in moments where refocus was needed; it was called for at the end of an emotionally loaded moment of sharing; it was used throughout long rehearsal days when rejuvenation was warranted. The call to breathe deeply together, often initiated by our director, served as a grounding technique, bringing us back into our bodies, the here-and-now, and to each other. At this time, the world had witnessed and heard Eric Garner’s cry of “I can’t breathe” before he was murdered (Baker et al., 2015). The return to breath throughout our process may have functioned as an act of gratitude for our continued access to it, and an acknowledgment and honoring of those who had breath so unjustly taken away.

The connection to breath was one of several through lines between music therapy and drama therapy practice within this process. Connection to breath can support body awareness and regulation, foster connection and cohesion, and provide an opportunity for grounding. More specifically, entrainment is a well-established and widely utilized technique used by many music therapists in a myriad of contexts. Entrainment, by definition, refers to the “temporal locking process in which one system’s motion or signal frequency entrains the frequency of another system” (Thaut et al., 2015, p. 1). In music therapy practice, entrainment could come in the form of live music, offered vocally or instrumentally, matching the rate at which a patient or client is breathing or

moving, with the intention of meeting the person within their emotional or behavioral state. Rhythmic entrainment methods can deepen the capacity to “connect an individual with their own body rhythm and also connect them nonverbally with other individuals” (Bharathi et al., 2019, p. 185). The incorporation of elements of entrainment in the therapeutic theatre performance fostered feelings of relatedness, connectedness, and potentially support regulation. We inhaled and exhaled in tandem, using breath to meet ourselves and one another in the moment, to feel connected and unified in our sharing. In that way, entraining to one another through breath became an important resource within the group process.

### “Heart Song”: Music Composition

Britton Williams, *Turbulence’s* director, made clear her awareness of the presence of a music therapist in this process, and expressed an interest in integrating music into the play. An opportunity for music seemed to present itself in a scene where my character, “Traveler A,” was held in an unspecified part of the airport after being profiled by two “interrogators,” or airport police, who inserted themselves in an argument amongst travelers. Traveler A is told to “calm down” and “cooperate,” words that took the form of both micro- and macro-aggressions as they were privately and publicly hurled at a Black woman who was soon after detained. “Traveler A” is found in a room, alone, separated from her partner and fearful of what may come. For the emotionally charged moment, Britton composed “Heart Song.” In the section below, I will explore my roles within the preparation and performance of “Heart Song.” I reflect on a variety of roles inhabited, which include music therapist, musician, and process actor presented in Table 1.

Link to audio: [“Heart Song”](#):

(Audio from performance on April 11th, 2019, Provincetown Playhouse, New York University, New York, NY)

Within music therapy practice, composition is a widely utilized technique. Gardstrom & Sorel (2015) state that the client is centrally involved in the process of the composition, and thus “is called upon to generate and refine personal opinions, ideas, fantasies, and so forth, and to put them into a workable musical and/or lyrical structure” (p. 122). In turn, “the therapist’s role is to provide varying levels of technical assistance and interpersonal and emotional support during the compositional process.” The authors go on to distinguish the use of composition within a group context, stating that the therapist may “serve as a facilitator or mediator, helping the members to recognize and pursue their common aim and reconcile differences that may arise in the creative process” (p. 123).

There had been numerous opportunities for verbal processing during group check ins, after an experiential or drama therapy exercise, and even a call to submit a piece of writing that would be incorporated into the script. “Heart Song” was a combination of the stories the participants had shared, many different yet familiar moments felt over several lifetimes. Britton, as the songwriter, took on the role of the “therapist,” interpreting thoughts and feelings that had been expressed by the group, and used her clinical musicianship to create a composition outside of the group meeting. The “therapist” synthesized and clarified the ideas of the group, creating a composition that operated as a unifier of lived experiences.

### The Influence of African American Spirituals

Britton taught “Heart Song” to me through modeling during a break in rehearsal. She sang it in a way that was repetitive and lilting, containing mostly descending intervals and melodic lines that followed a similar contour. While I was able to learn this song through this version of rote teaching, Britton’s piece was then translated through my own musical reference points. To me, through the lens of my experiences as a singer and musician, this song was evocative, in form and feeling, of African American Spirituals.

**Table 1**  
 “Heart Song” (Music and Lyrics by Britton Williams)

Lyrics	Music Therapist Response/ Musician	Process Actor
<p><b>This waiting’s the worst</b>  <b>But it’s not the first time</b></p>	<p>The opening interval within the primary musical phrase of this song is a major 3rd. This interval is consonant and stable, and is the hallmark of Brahms’ Lullaby, or “Lullaby and Goodnight.” Britton’s musical choice here might have implied what her purpose for this song was: a musical offering intended to soothe and calm the actors and audience members alike.</p>	<p>With this opening phrase, I tried my best to orient to the current circumstance of the individual’s experience that I was portraying. She is being unjustly detained in the airport but remarks that this is certainly not her first time being scrutinized in this way.</p>
<p><b>So tired, I’m hurt,</b>  <b>This constant life grind</b></p>	<p>The same melodic phrase is repeated here, with new text, continuing in the lulling pattern.</p>	<p>I felt the defeat and fatigue in this story, the result of repeated race-based traumatic experiences.</p>
<p><b>Separated so long</b>  <b>And I’m worried that this song</b>  <b>Will turn out to be goodbye</b></p>	<p>This is the B section, the first time a new melodic pattern is introduced. There’s a shift in the content as well. These lyrics are clear and pointed.</p>	<p>I felt this viscerally, the reality that death could befall a Black person during any degree of conflict with police or other authority figures.</p>
<p><b>You have no idea just how many tears</b>  <b>I’ve cried in this life</b>  <b>So much</b>  <b>That they’re all dry</b></p>	<p>This is a return to the initial melody, or the A section. I added some embellishment on “so much” (00:46). I felt that the addition allowed this section to feel more preparatory, as it would lead to what I considered to be the musical climax of the piece.</p>	<p>I have had many experiences when I felt as though people who did not identify as Black not only did not understand me or my experience but didn’t hear me or believe me when I shared it with them. “You have no idea” stuck out to me, the defeat in being unable to describe the feeling of accumulated racial trauma.</p>
<p><b>If I scream out</b>  <b>If I yell</b>  <b>Would you even hear me?</b>  <b>In this world so caught up in the color it sees.</b></p>	<p>On “if I scream out” (00:50), I wanted to evoke the feeling of a real scream or a yell. What evolved was a wail, which ties directly to a characteristic musical element of African American Spirituals.</p>	<p>The act of scream-singing these words was oftentimes very emotionally overwhelming. I would often tear up, feeling an intense mixture of pain, anger, and catharsis.</p>

A spiritual is defined as an African American folk song that emerged during the enslavement of African people in the American South. It served as a way to express the enslaved Africans new Africanized Christian faith, their sorrows and hopes, and convey hidden messages that would support their escape from slavery (Floyd, 1997; Library of Congress, n.d.). Spirituals were often passed down orally, and Britton taught me this song in a way that was true to that tradition. It was not written down or transcribed; I could not rely on the external experience of reading music to learn and share this song, so the song had to become a part of me in order for me to reproduce it. This musical embodiment added to the emotional intensity of this process. The reliance on sharing stories through voice and song is deeply ingrained in the Black music tradition, so much so that it naturally emerged in how Britton shared her song with me.

True to the spiritual form, “Heart Song” was performed a cappella, save for body percussion. While rhythm is traditionally set in the form of clapping or stomping (Li-

brary of Congress, n.d.), a heartbeat sound was created by the participants of the performance to create the song's rhythmic foundation. Depending on the venue of the performance, the way the thumping was generated morphed and changed. It was once a stomping on the group, then a thumping of a fist on the chest, until it transformed to a slapping of the stage itself, rattling the walls of the conference venue. Many music therapists rely on the musical element of rhythm to act as a container for a musical process, as it can create predictability and even promote regulation for the client. The way rhythm was utilized in "Heart Song" certainly created a container—one that was strong enough to hold the painful history that the song ushered into each space where it was sung. Once again, entrainment manifested within this process, as we rhythmically matched one another's beat, meeting in the emotion of the story and supporting its telling.

"Heart Song," within the canon of African American spirituals, can be more specifically, categorized as a "sorrow song," which is typically characterized as being "intense, slow, and melancholic" (Library of Congress, n.d.). Famous examples of sorrow songs include "Sometimes I feel like a motherless child" and "Nobody knows de trouble I've seen," as they contain laments of loss and pain. W.E.B. Du Bois, a civil rights activist, leader, Pan-Africanist, and scholar, among many other titles (Johnson, 2018) wrote "Of Sorrow Songs" in his seminal text *The Souls of Black Folk* (1903):

THEY that walked in darkness sang songs in the olden days—Sorrow Songs—for they were weary at heart. And so before each thought that I have written in this book I have set a phrase, a haunting echo of these weird old songs in which the soul of the black slave spoke to men. Ever since I was a child these songs have stirred me strangely. They came out of the South unknown to me, one by one, and yet at once I knew them as of me and of mine. (p. 250)

He goes on to say:

... by fateful chance the Negro folk-song—the rhythmic cry of the slave—stands today not simply as the sole American music, but as the most beautiful expression of human experience born this side the seas. It has been neglected, it has been, and is, half despised, and above all it has been persistently mistaken and misunderstood; but notwithstanding, it still remains as the singular spiritual heritage of the nation and the greatest gift of the Negro people. (p. 251)

A strong advocate for the preservation of sorrow songs and spirituals as a representation of the past and present experiences of Black people, Du Bois (1903) acknowledged the emotional component of these songs, implying that they emerged from the heart and had the capacity to stir those who heard them. He makes clear though, that this is the music "of an unhappy people, of the children of disappointment; they tell of death and suffering and unvoiced longing toward a truer world, of misty wanderings and hidden ways" (p. 253).

Unvoiced, hidden longing permeates through the text of "Heart Song," and I utilized musical elements of African American spirituals to heighten and elevate the lyrical content. On "if I scream out" (00:50), my exclamation, resembling a wail or holler, held the painful reality that the song portrayed. It recalled the ways in which many families are separated and caged at the US border, where Black immigrants have a greater risk of deportation and have statistically longer lengths of time in solitary confinement than non-Black immigrants (Raices, n.d.). It indexed the isolating loneliness of the instances in my life where I have felt othered by the words or actions of others, painful reminders of my outsider status and desire for belonging. And, at its core, it recalled the originators of these songs, slaves torn from their homes, gods, and families, brought to a strange land that exploited them and stripped them of their humanity. Music became a vehicle for conveying the depth of the Black experience—a particular melody, a slight vocal inflection, that moved a song from simply being heard, to being felt.

And still, despite the suffering they conveyed, these songs were longed to be heard. Du Bois (1903) states that “through all the sorrow of the Sorrow Songs there breathes a hope—a faith in the ultimate justice of things” (p. 261). Can emotive, musical sharing beget justice? Or at the very least, understanding? In a way, I did feel my character calling for that. A desire to have her story known, with the far-off dream of some kind of reckoning. This experience was a reminder that, as music therapists, it is our obligation to understand the original function of music that presents itself within clinical spaces, as songs carry with them the rich traditions they were born out of. The fact that a sorrow song developed so organically reminds me of the resiliency of Black music, and, as Du Bois implies, the stories that reside in the souls of Black folk, past and present. It also implied an intergenerational knowledge that resided within myself, a historical context for how I experience and participate in music.

### Closing Song: “I Hold”

“I Hold,” like much of the script, evolved from experiences shared amongst participants throughout the process, and was very much a culmination of the story within the performance itself. “I Hold” initially was intended to function as a spoken poem but was ultimately set to music. Throughout the process, we discussed how music had the capacity to metaphorically “hold” intense emotional sharing. As a result, “I Hold” acted as a clear example of the ways in which music and drama therapy interacted with, supported, and elevated one another within this process. Each participant spoke or sang what they “carried” or “held,” which included a number of inner and outer resources. Participants acknowledged the strength of their ancestors, the pride felt for their lineage, and the joy in the expression of their true selves. In the performance, participants formed a half circle, their backs to the audience, with each participant stepping out and facing the ensemble to deliver their line of the poem. All the while, the ensemble echoed “I hold,” a sort of musical reflection and validation of each offering.

A main melodic theme of the musical phrase “I hold” was a descending major third. It is worth noting that “Heart Song” featured a main melodic theme that was characterized by an ascending major third. Steiner (1983) aligns the interval of a third with a connection to breath and inner being. It would make sense, then, that the use of the third is an important aspect of tonal vocal holding, a technique developed by Dr. Joanne Loewy (1995). When using this technique, music therapists match the rate, pitch, and timbre of any cries or sounds elicited by the infant or child. The intention is to hold or frame their child’s vocalizations to provide familiarity and comfort. In practice, tonal vocal holding can help provide soothing and calming in moments of agitation and stress and promote the ability to self-regulate. The way the voice can be used for holding in music therapy practice felt present in our sharing of “I Hold.”

Link to Audio: [“I Hold”](#):

(Audio from performance on April 11th, 2019, Provincetown Playhouse, New York University, New York, NY)

### Lyrics

Like a river flowing down the stream  
 I carry with me the bones and the untold tales of those before me.  
 I carry the dance, rhythms, and hymns that encapsulate and lift me.  
 I hold the strength, courage, and wisdom of my ancestors that guide me through  
 this walk of life.  
 I hold Black girl joy and magic that sits deep in my spirit.  
 I hold the fragrant aroma of good old homemade soup that took my grandmother  
 half a day to make.  
 I hold the tears that tell the story of the pain yet nurtures the wounds.  
 I hold the pride in saying that we are young, gifted, and Black.



I hold the reflection in the mirror that says stand tall like the royalty you come from,  
 the royalty you are.  
 I hold the belly laughs, smiles, and embraces that my village brings for every celebration of life.  
 I hold the joy and the beauty that comes with knowing that my design is divine  
 I hold community and interconnectivity; we must lift as we climb and leave no one behind.  
 I hold permission for vulnerability.  
 I hold constant evolution.  
 I hold my truth forever woven into the melody of my life.  
 I hold my head high and I rise  
 And though turbulent winds will try to knock me down I will pull from the strength within me and those who Stand with me  
 For this is priceless, could never be duplicated, sold, or left behind.  
 This I carry.  
 All this, we carry

To provide support for the lines of the poem, I established a “holding” pattern on the guitar, using two chords that alternated. The manner in which musical holding was utilized here was adapted from Diane Austin’s (2008) technique “vocal holding,” which involves the “intentional use of two chords within the music experience” (p. 146).

Austin describes the musical elements of her technique:

... this improvisational structure is usually limited to two chords in order to establish a predictable, secure musical and psychological container that will enable the client to relinquish some of the mind's control, sink down into her body and allow her spontaneous self to emerge... The steady, consistent harmonic underpinning, the rhythmic grounding and the therapist's singing encouragement and support the client's vocalization. Within this strong yet flexible musical container the client can explore new ways of being, experience the freedom of play and creative self-expression and allow feelings and images to emerge (Austin, 1996, 1998, 1999). The client's voice, feelings, and emerging aspects of the self are all held within this musical matrix. (p.147)

As we explored how best to utilize music in the closing moment, I engaged the group in a musical exploration, offering two holding chords and modeling some vocalizations and short phrases that the group echoed back. Initially, I offered C7 to F7, but the group, including myself, felt as though it was too “Westernized.” This was another interesting moment that reminded me of how each music therapist’s musical reference points can be translated through their clinical musicianship. Was this a byproduct of my own classical music training, which was a requirement for me to be admitted to a music therapy program in the first place? So many music therapy programs are housed within traditional music schools within predominantly white institutions, but I now found myself offering music that did not reflect the needs of the group I was supposedly trained to be able to support through music. I was forced to reckon with my own need to unlearn. The group’s experience of “Westernized” meant “white” and “dominant,” identifiers that have historically hidden and silenced the needs, experiences, and music of the BPOC participants in this process. How could I offer musical holding that featured a harmonic structure more representative of the music cultures within our group? We found our way to Em and Fmaj7, a pattern that the group was able to connect to and rest within. I’m not sure exactly why this chord pattern felt more representative of the group’s experience. Perhaps the combination of a minor and a major 7 chord created a sense of flexibility and ambiguity that allowed the feeling of the piece, via the text, to more clearly emerge.

## Personal Reflections

The initial call for participation in *Turbulence* offered all who responded an opportunity for placemaking. It developed into what I hoped it would be: a space for processing

racialized experiences with people who had similar lived experiences to myself. My desire for this space was born out of an “outsider within” status I experienced in my academic and professional life. The supportive environment allowed me to reckon with this position and uncover the power I could potentially have to make change within my profession.

My position as a music therapist allowed me to further explore music’s capacity for storytelling and conveying difficult emotions within a therapeutic theatre process. It became an example of the role music can play in performance activism and the elevation of stories that have been historically hidden and excluded. It offered the group members and audience a different way of relating to the material shared within this dramatic performance. It was a reminder of the significance of music in my life, and how music therapy concepts might find a function within a drama therapy process. The process of writing this paper allowed me to understand the historical context of how and why the music developed the way that it did, highlighting the intergenerational knowledge housed within Black music traditions.

I experienced a wide range of emotions during this process. As mentioned earlier in this paper, the new experience of both musical and dramatic embodiment practices proved to be very emotionally taxing. Movement-based activities that examined such racially charged material excavated many memories and forced me to confront them. Despite this challenge, I emerged from this process with a deepened understanding of myself and those experiences. I was given the opportunity to see my story reflected in others, and then amplified through dramatization. I experienced connectedness with the group when I witnessed the stories of others, seeing the nuance in their journeys, which both converged with and differed from my own. I left the *Turbulence* process with a recognition of the resilience within myself and my ancestry. I felt the capacity of expressive arts and performance to advance social justice—how performance activism and storytelling can be felt in the heart of those who witness it, much like the sorrow songs of African American spirituals, still echoing through our history. Since this process ended, I have assumed an adjunct faculty position in the music therapy department of a historically Black university, have developed a cultural humility workshop with a colleague, and translated that workshop into a formalized course-offering in two graduate music therapy programs. There is no doubt in my mind that the level of support I felt in this process energized me in my professional life, calling me to see the value of my lived experiences, and then place them at the forefront of my work as a music therapist.

## Conclusion

A case can be made for increased opportunities for participation in social identity affinity spaces for creative arts therapists who have identities that have been historically marginalized. The act of placemaking can ameliorate feelings of isolation and foster a sense of belonging that can impact the clinician’s everyday life. The flexibility of placemaking allows the community to prioritize its needs, as seen within *Turbulence*: the specific conditions of the space, the material explored, the norms established, and the content and structure of the performance, were the product of the unique lived experiences and stories of the process’s participants. This affinity space freed us as participants from the burden of defending or justifying ourselves or our feelings, due to the undercurrent of similar lived experience.

It is my sincere hope that the impact of *Turbulence* will allow for many more spaces to be created for BIPOC creative arts therapists to gather and create fellowship. Affinity spaces such as this hold the possibility of addressing feelings of isolation amongst BIPOCs who are in their training or working professionally; it can foster connection around shared experience; it can deepen self-understanding through a creative process. Even more specifically, I hope that more music therapists might open themselves up to immersive experiences with different creative arts modalities. There is knowledge to be gained through modalities’ similarities and differences, and opportunities for col-

laboration that elevate all who are involved. It is truly a disservice to BIPOC creative arts therapists and students that more experiences like this are not readily available, especially in professions where they may be the minority and experience feelings of isolation or othering.

My identity as the “outsider within” brought me to this group, but my participation in it allowed me to see what Collins hoped Black women in that position would uncover: an opportunity to create a unique space for myself and to lean upon my community and the strength I garnered from it to continue making space for myself and others like me. As my castmate Mary Morris would often say, “ubuntu,” a Zulu phrase meaning, “I am because you are,” or, “a person is a person through other people” (Ifejika, 2006). I am because of my community. In this process, I was connected with, reflected back, lifted up, and my experiences as a Black woman were consistently honored. I was seen, heard, understood, and, above all else, held.

### A Note on Consent

Britton Williams, director and principal investigator of *Turbulence*, and the study performance participants provided consent for the synthesis of the author’s experience and the distribution of the original music created for and performed in the play *Turbulence* for this article. The author would like to thank her fellow participants in *Turbulence* for their unwavering support and constant source of inspiration. She would like to thank *Turbulence*’s director, Britton Williams, for a consistent model of humility and kindness, and votes of confidence that made all the difference.

### About the author

Jasmine Edwards is a music therapist working within a pediatric hospital in New York City. Jasmine has a bachelor’s degree in music therapy from Florida State University, and her master’s degree in music therapy from New York University. She has experience working in private practice, outpatient, school-based, and medical settings, and is trained in NICU-MT, First Sounds: Rhythm, Breath, Lullaby, and Austin Vocal Psychotherapy. Jasmine has a vested interest in bringing discussions of power, privilege, and oppression into music therapy training and education. She also serves as an adjunct faculty member at Howard University, New York University, and Nazareth College. Jasmine identifies as a Black woman.

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