How Societal Norms and Power Relations are Mediated Through Language:

A Critical Discourse Analysis in the Context of a Dissertation Project on Discrimination in Music Therapy

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Abstract

In this article, I will first briefly introduce my dissertation project, in which I undertook an analysis of German-language music therapy discourses from an anti-discriminatory stance. I addressed this topic in a participatory research group together with other music therapists and through the analysis of music therapy textbooks, drawing on theoretical approaches to discrimination from intersectionality and queer theory, which I will outline. I will then mainly focus on the procedure and the results of the text analysis, highlighting aspects such as valuations, exclusion, and othering, and how these are executed through language. In parallel, I will make suggestions based on my findings on how to support anti-discriminatory efforts in music therapy through the reflection of written as well as spoken language and appropriate changes to it.

Keywords: norms and power relations in music therapy; discrimination and anti-discrimination mediated through language; critical discourse analysis

Introduction

The topic of discrimination and anti-discrimination in music therapy has already been addressed by various authors in the last decade. There is a large variety of articles and books in English addressing discrimination in music therapy, applying, for example, different feminist perspectives (e.g., Edwards & Hadley, 2007; Halstead & Rolvsjord, 2015; Seabrook, 2019), perspectives of critical race theory (e.g., Hadley, 2013b), disability studies (e.g., Hadley, 2014; Kalenderidis, 2020; Metell, 2014; Rolvsjord, 2014), post-colonial studies (e.g., Comte, 2016), queer theory (e.g., Bain et al., 2016; Bain & Gumble,

2019), and anti-oppressive practice (e.g., Baines, 2013; Whitehead-Pleaux, 2017).

My motivation to specifically address German-language contexts in my dissertation (Fent, 2021) was that I assumed that the absence of anti-discriminatory texts in German-language music therapy literature might indicate that there is still not much reflection on this aspect in German-language music therapy practice, training, and research. With my research I wanted to support such efforts. Moreover, discrimination, as well as music therapy research and practice, are historically and locally situated, making it necessary to relate critique to specific circumstances.

I started out from the assumption that music therapy theory, clinical practice, and research are permeated by a given society's social norms (Hadley, 2013a). This leads to the perpetuation of stereotypical attributions and the marginalization of certain positions, persons, and groups. I further assumed that these norms and therefore also the exclusions they entail manifest (1) in the ways music therapists interact with their clients, as well as (2) in the ways music therapy is presented in texts. Hence, my research should address these two aspects in order to recognize and examine discrimination as well as subsequently offer suggestions on how to reflect on and reduce it – specifically in the German-language context.

To do so, I combined two distinct approaches which complement each other. First, I initiated a participatory research group of music therapists. All of them had completed their music therapy training in Vienna, Austria at different times, and were working as music therapists in different regions of Austria and Germany. The concept of the research group was based on the model of co-operative inquiry (Heron, 1996; Heron & Reason, 2001). Regarding the analysis of the data obtained in the course of the research group, I followed a grounded theory approach (Breuer et al., 2019). In the group, we examined the presuppositions and attributions with which we encounter clients in our professional practice as clinicians by jointly reflecting on our music therapy practice. Due to the power relation between music therapists and clients, this may be referred to as hegemonic self-reflection (Tißberger, 2017).

My second approach was the analysis of five German-language music therapy textbooks (Decker-Voigt et al., 2008/2020; Schmidt et al., 2020b; Stegemann, 2018; Stegemann & Fitzthum, 2014/2018; Stegemann & Weymann, 2019) in terms of critical discourse analysis (Reisigl, 2017a, 2017b; Reisigl & Wodak, 2001). This analysis aimed to work out the norms and values that the texts reflect, as well as to show which overarching social and global power relations are thereby reproduced and which individuals or groups are being marginalized. In all these books, representatives of the music therapy training course in Vienna functioned as (co-)authors or (co-)editors, often together with representatives from other music therapy training courses in German-speaking countries (Austria, Germany, and Switzerland).

My overall research question was as follows: In which way does discrimination manifest itself in music therapy and which alternative ways of thinking and acting can be developed by incorporating anti-discriminatory approaches?

I wrote my dissertation in the discipline of gender studies, merging my professional background as a music therapist with this specific scholarly perspective. Questions of power are inherent to gender studies in the German-language context, where gender studies in academia is an umbrella term for different approaches which have in common that they analyze societal power relations based on social categories such as gender, ethnicity, sexuality, or health, just as they critically question and deconstruct processes of categorization themselves (Dietze, Hornscheidt, et al., 2012).

In the following sections, I will introduce the theoretical framework of my research project and the methodology and procedure in the analysis of the textbooks. I will present the central findings of this analysis interwoven with resulting suggestions of ways in which discrimination in music therapy can be reduced by focusing on language. Given the focus

on language of this article I will not go into any depth regarding the collaborative research group outlined above.

Theoretical Framework

Discrimination manifests itself as racism, sexism, classism, heterosexism, ableism, ageism, and many more. It becomes obvious in different forms, such as stereotypical attributions, the withholding of certain positions and rights, or the non-recognition of a person's self-definition. To understand how discrimination emerges, I primarily drew on two approaches in my research, queer theory and intersectionality, which can complement each other in the definition and examination of discrimination (Dietze, Michaelis, & Haschemi Yekani, 2012). According to queer theory (Butler, 1990, 1993), discrimination can be explained by social norms that cause exclusion by marginalizing and making invisible those who do not conform to these norms. Intersectionality (Crenshaw, 1989; Hill Collins & Bilge, 2020) draws attention to different social categories such as gender, ethnicity, sexuality, age, or ability, which influence and mutually define each other. Societal power relations cause people to be either privileged or marginalized within social categories. Intersectional approaches point out that these positionings can never be seen independently of each other. Privileged positions and issues – for example, white, heterosexual, male, middle-class positions – function as an unmarked norm and are in consequence seen as universal. Queer theory cautions that social categories should not be taken as rigid or "natural," but should always be seen as constructed and contextual, which can be called an anti-essentialist view of social categories. Discrimination is therefore embedded in the respective societal structures in which all persons live and hold diverse privileged and marginalized positions. This makes continuous critical self-reflection all the more important to reveal discriminatory structures as well as our own discriminatory actions and to contribute to social change.

Underlying everything I have just outlined is a constructivist worldview, following the concept of social constructivism of Peter L. Berger and Thomas Luckmann (1966). Central points of their concept are that there is no observable objective truth because observing is always linked to interpreting, that reality is constructed through social interactions between people, and that these interactions are structured by the values and norms of their culture and society. Reality as a whole, and therefore also knowledge, science, and research are thus always situated (Haraway, 1988) and formed by their specific contexts. The actors involved as well as their interactions are shaped by power relations and norms, which attribute more or less value and credibility to individual persons based on their privileged or marginalized positions.[1]

Methodology and Procedure

As mentioned earlier, I combined several approaches in my dissertation project in order to cover different aspects of the topic. In the following, I will not elaborate on the participatory research group mentioned above, but only describe the textbook analysis in more detail.[2]

In general, regarding the context of my research, it should be stated that I was able to conduct it within the framework of a dissertation at a university. I consider this a privilege and hope to have used this privilege to critically question privileges in general and make a small contribution to the destabilization of discriminatory norms and societal power relations. This would not have been possible if I had not also always taken into account my positioning as an Austrian-born white lesbian cis-woman with an academic degree and a relatively secure financial situation who currently has no significant health problems.

For my textual analysis, from the vast number of German-language music therapy books and articles, I specifically selected those that were intended as textbooks because these are generally considered to possess a special authority (Messer, 2013). Hence, I considered them to be particularly influential. When analyzing the books, critical discourse studies, specifically, the discourse-historical approach (Reisigl, 2017a, 2017b; Reisigl & Wodak, 2001), was instrumental for me. From the beginning, the discourse-historical approach has been characterized by its socio-political commitment and thus very often addresses forms of discrimination such as racism, sexism, and xenophobia. The central question is how these are semiotically (i.e., in language, images, and sounds, but also in more interactive elements such as computer programs and games) embedded in discourse. The conclusion or goal of a critical discourse analysis of this type is the formulation of recommendations based on the critique in order to achieve more social justice in the respective field.

In my understanding of the concept of discourse, Butler's (1990) statements on the performativity of discourses, which are essentially mediated by language, were crucial. According to theories of the performativity of language and all other means of communication, utterances do not describe the reality they contain, but they create this reality in the act of speaking (Austin, 1962). Whether this act succeeds depends on the position the speaker holds. If a person is not granted credibility due to their societal status, their utterances will be less powerful than those of persons in stronger positions. Hence, language always reflects societal power structures and norms and ensures their stability. If, on the other hand, it is deliberately used in an alternative way, it can help to destabilize them. This is achieved, for example, by the way or the frequency with which certain persons are represented in language, which contributes significantly to the perpetuation or destabilization of power relations and exclusions, as well as the discrimination that occurs as a result. Revealing these structures in language is thus a crucial first step in counteracting discrimination by finding more appropriate and inclusive ways of talking and writing.

These are the five textbooks, which I analyzed in varying depths:

- Decker-Voigt, H.-H., Oberegelsbacher, D., & Timmermann, T. (2020). *Lehrbuch Musiktherapie* (3rd ed.). Reinhardt. (Original work published in 2008).
- Stegemann, T., & Fitzthum, E. (Eds.). (2018). *Kurzlehrbuch Musiktherapie Teil I: Wiener Ringvorlesung Musiktherapie – Grundlagen und Anwendungsfelder* (2nd ed.). Praesens. (Original work published in 2014)
- Stegemann, T., & Weymann, E. (2019). *Ethik in der Musiktherapie: Grundlagen und Praxis*. Psychosozial-Verlag.
- Stegemann, T. (2018). *Was MusiktherapeutInnen über das Gehirn wissen sollten: Neurobiologie für die Praxis*. Reinhardt.
- Schmidt, H. U., Stegemann, T., & Spitzer, C. (Eds.). (2020). *Musiktherapie bei psychischen und psychosomatischen Störungen*. Elsevier.

What I focused on in my text analysis were the questions of which norms and values underlie the texts, which societal/global power relations and norms are reproduced through them, and how this has a disadvantaging effect on certain individuals or groups. Of course, many of the elements I was able to show in the texts have been mentioned in numerous articles dealing with discrimination in music therapy. Yet, showing these elements by reference to German-language texts enabled me to situate and substantiate the critique and find specific points where language use could be modified to be less discriminatory and show this by examples. All languages have their specific structures and peculiarities, the relevance of which I will point out in the following sections.

I conducted my analysis by determining three essential elements (Reisigl & Wodak, 2016):

- Nominations, that is, the naming of social actors or other significant elements in the text, such as musical or psychological phenomena or historical events. Guiding questions were: How are the people involved in music therapy named? What contexts does this point to? Which terms are used to refer to music? What other key terms are there, and what meanings do they carry?
- Predications, that is, traits, qualities and features attributed to actors, for example depending on their gender identity, age, origin, and other aspects.
- Perspectivations, that is, the question of which point of view the authors take.

This was done by using a selection of tools of analysis as described in the discourse-historical approach (Reisigl, 2017a, 2017b):

- The clarification of verbal strategies such as:
    - Activation and passivation: In German, for example, the term "Behandelnde" is often used for therapists and doctors (active form, the person who provides treatment) and the term "Behandelte" is used for clients (passive form, the person who receives treatment).
    - Abstraction: Often, for example, instead of talking about people, authors refer to symptoms that are being treated, behaviors that are being modified, and the like.
    - Collectivization or generalization: This occurs, for example, when people are grouped by one characteristic (for example, a diagnosis or their age) and other characteristics are disregarded.
- The determination of the viewpoints from which the texts are formulated:
    - One question here was, for example, whether and how the authors explicitly position themselves, and if not, which points of view become implicitly visible, for example by creating an "us" and a "them" (othering).
- Another approach was the examination of which social categories are brought to the fore, and which appear seldom or not at all, and the definition of which positions within these categories are presented as privileged.
- Also, it proved useful to examine what remained unmentioned in the texts (omissions). In the analyzed texts, for example, there was virtually no mention of the fact that there are other forms of relationships than heterosexual couples, or persons who define themselves beyond a gender binary. Such invisibility is also discrimination.

After having finished my analysis of the books, I started combining the results from the analysis of the data from the research group meetings and that of the text analysis, finding overarching themes that were apt to conflate all of the findings into the final results of my research. At the end of this process, five distinct topics emerged:

- Social categories – unmarked norms and exclusions;
- Valuations regarding music and musical interaction;
- Conceptualizations of clients and therapists;
- Valuations and norms in the professional and disciplinary environment; and
- Valuations regarding research.

Findings

I will now summarize the results of the text analysis and provide some examples, connect them to already existing literature on the respective topics, and draw conclusions on how to reduce discrimination through changes in clinical practice, training, and research of music therapy.

At this point, I would like to emphasize that my analysis focused on a clearly defined aspect of the texts, but that I in no way meant to question the music therapy expertise of the authors in general. Likewise, when I identify places in the texts where I consider discrimination to be reproduced, I do not want to imply that the authors intended to do so. Language is contextual, and so terms that are common in some contexts, such as medical contexts, and are therefore used unquestioned there, may be perceived as pejorative or stigmatizing in other contexts, or may be rejected by those referred to in this way. It is therefore impossible to never say something or to never act in such a way that it can be experienced by someone as discriminatory. In this respect I also include myself, of course. I believe that admitting without reproach that our privileged and marginalized social positions make us more or less sensitive to specific discrimination can make sure that reflection on one's actions is possible and beneficial and is not warded off.

Social Categories – Unmarked Norms and Exclusions

My focus on social categories throughout my research has enabled me to determine the unmarked norms that are present in music therapy theory and practice and that determine which individuals are privileged and which are marginalized. This is shown, for example, in which persons are mentioned and which are omitted, and what is considered as "normal" and what represents a "deviance."

For example, unlike in English, in German, every word referring to humans has a male and a female form. Whereas in English the word "therapist" may refer to a person of any gender, in German there is a male form (*Therapeut*) and a female form (*Therapeutin*). This poses two problems. First, offering exactly two gendered forms establishes the gender binary that still structures most societies, also in language. Wanting to include persons with other gender identities, such as trans, non-binary, or queer, requires a certain amount of creativity and is often overtly opposed by persons who claim that such efforts would "destroy" the language.[3] Second, apart from the representation of other gender identities than male or female, it has been an unquestioned habit in German for a very long time (and continues to be in many contexts) to use the male plural form for a group of persons, even if persons of different genders are in that group, a practice which could also be found especially in one of the books I analyzed (Decker-Voigt et al., 2008/2020). This not only makes it unclear whether a group really only consists of men, it also erases all individuals with other gender identities from that group in the perception of the reader or listener. In this way, the social supremacy of men that still characterizes many societies is reinforced. Although this practice has been criticized by feminists since the early 1980s (Pusch, 1984, 1990), it is still widespread. Research has clearly shown that even if the writers' intention might be to include all persons within a male plural form of a noun, it makes the recipients think of male persons in the first place (Schröter et al., 2012; Stahlberg & Sczesny, 2001), thus making persons of other genders invisible. This is especially harmful in contexts where women are traditionally underrepresented (in socially highly esteemed and well-paid jobs and in leadership positions), as it stabilizes this inequality.

Another aspect I was able to show in my analysis with regard to gender was that many texts reconstructed gender stereotypes and reinforced societal gender imbalances. Grammatically, men were often presented as active; they were the acting subjects in texts, whereas women were often presented passively, in a grammatical sense but also in the way their interactions were described (especially in Decker-Voigt et al., 2008/2020). This

strategy attributes to men characteristics such as initiative and activity, to women characteristics such as receptivity and passivity. Interestingly, the same imbalance appeared in many texts' representation of therapists and clients, presenting therapists as grammatically active and as providing treatment to clients, who in turn receive treatment. Grammatical manifestations of this kind counteract endeavors in music therapy to destabilize the hierarchy between therapists and clients and to empower clients (Rolvsjord, 2004, 2010). This strategy in the texts showed that a grammatically active presentation of certain persons as well as the characteristics they are being attributed reflect their current societal power position.

Another key element found in the texts was othering, i.e., establishing certain ways of living as a norm, whereas other ways are marked as "other." This could be observed, for example, with regard to the social category of ethnicity, when Timmermann (2020a) collectively referred to cultures other than European as "ethnic" (*ethnisch* in the German original, Timmermann, 2020a, p. 85). European culture (used in the singular in this text) was thereby presented as neutral with respect to ethnicity and thus universalized. In the case of persons, othering occurred here in that ethnic or cultural belongings of persons were only mentioned if they were not identical to those of the author.

Heterosexuality was largely established as a norm in the analyzed books, in that whenever there was any mention of desire, or to become a couple or start a family, only heterosexual desire (Decker-Voigt, 2020c), heterosexual couples (Oberegelsbacher, 2020a), and heterosexual parents (Fitzthum, 2018; Oberegelsbacher, 2020a) were mentioned, without the addition that this is merely one possible variant.

A social category that was not mentioned in the books, but was very present in the discussions of the research group, is that of class or educational background. The absence of this aspect in the analyzed literature suggests that this is still a largely invisible privilege of music therapists in the German-speaking world.

In summary, only one of the analyzed books (Stegemann & Weymann, 2019) addressed the impact of one's own social positioning. The authors also emphasized the need to reflect on the societal power relations from which it derives.

While the discriminatory use of language reinforces the discrimination of individuals and groups, deliberate and inclusive use of language can counteract it. As already outlined, gender is a specifically difficult topic in German as it offers only two options for persons, male and female, and thus reinforces a binary view of gender. In addition, male plural forms are still widely used to address persons of all genders. Here, creative solutions and experimentation are needed as well as an attitude that sees them as a welcome wake-up call and not as "the destruction of the language," or as an annoying chore.

When supporting societal change through language, a crucial question is which groups, individuals, and identity options are represented in language. Furthermore, this must be done in a balanced way. If, for example, the goal is to recognize the existence of other gender identities than male or female, it is not helpful to only deal with them, for example, in one specific chapter in a book. This would reinforce their othering. In contrast, a large variety of gender identities should be presented or at least implied whenever gender is mentioned – on the part of both the clients and the therapists to avoid othering. The same applies to other marginalized social groups like, for example, migrants, BIPOC persons, LGBTIQ+ persons, persons with disabilities, or persons with low education.

Valuations Regarding Music and Musical Interaction

Music represents a central element in music therapy. Here, the text analysis in particular showed how different types of music are seen and portrayed and what significance is attributed to music in the therapeutic process.

In the textbooks, Eurocentric views could be found where Western art music was

constructed as an unmarked norm and other musical traditions and forms were othered (e.g., Timmermann, 2020a, 2020b). This occurred, for example, when one author (Decker-Voigt, 2020b) indicated that electronic musical instruments are only used "in special fields of music therapy practice" (in the German original "[i]n speziellen Musiktherapie-Praxisfeldern", Decker-Voigt, 2020b, p. 54). In this way, it is suggested that acoustic instruments, which primarily characterize classical music, are universal. Instruments which are mainly found in popular music, on the other hand, are only indicated in "special" cases or fields.

Suggestions to counteract these imbalances, for example in study programs, would incorporate a variety of musical traditions into the curriculum more strongly, as also called for by Stegemann and Weymann (2019). In order to avoid othering, however, their standing and the form in which they are integrated into the training would have to be consciously reflected.

Conceptualizations of Clients and Therapists

A key issue in that respect is the power imbalance in the relationship between therapists and clients and how this is consolidated or destabilized in the texts, namely by who is portrayed as active, who is portrayed as passive, and to whom which characteristics are ascribed.

In the texts, the strategy of othering could also be found concerning clients (e.g., in Oberegelsbacher, 2020b). Certain aspects, such as illness or disability, were only mentioned with regard to clients, thus constructing therapists as being free of them. This might also lead to a pathologization of clients, setting an impairment or an illness as their main characteristic. This is the same mechanism which Rolvsjord (2014), for example, has already pointed out. Changing these conventions in the language would hopefully also initiate and support changes in the attitude of music therapists.

Here, another aspect comes in that I was able to observe in my analysis. Disclosing oneself as an author is rather unusual in academic texts in German. Texts are not written in the first-person form (using "I" as an author), and even if researchers do refer to themselves, they do this by saying, for example, "the author," referring to themselves in the third person, thus implying a supra-individual entity authoring the texts. This stems from a view of research that requires it to be necessarily objective, so the person of the author seems irrelevant (I will further elaborate on this point later in this text). In the analyzed books, most authors consistently did not, but some did use first-person forms (e.g., Smetana, 2018). The latter also makes a crucial difference between the positions assigned to clients and therapists. Being visible as a person and not as an impersonal entity makes the authoring therapist tangible and thus reduces the power imbalance between therapist and client in language. This practice and the resulting production of inequality was even more surprising to me, as several authors in the analyzed books saw the respectful encounter between clients and therapists and their equal participation in the therapeutic process as an important maxim of music therapy, which they also viewed as a crucial difference between music therapy and medical treatment (Decker-Voigt, 2020a; Schmidt et al., 2020a). Some pointed out that music therapy could contribute to a shift in the medical view of clients by focusing on its specific strengths in a holistic and resource- and process-oriented approach (Schmidt et al., 2020a). This specificity and in these authors' view the advantage of music therapy could in future be made visible in texts to make it more powerful and sustainable, for example by making the therapist's and author's position explicit through referring to themselves in the first person and also sharing personal opinions explicitly marked as such (Smetana, 2018) or by addressing the client's share in the success of the therapy (Mössler, 2018; Rüegg, 2018).

In the analyzed texts, "disorder-oriented" attributions could be found very often, when,

for example, the aspect by which persons were grouped in the first place was their diagnosis, thus constructing a kind of uniformity of those persons and neglecting all other aspects that influence their experiences (e.g., Timmermann, 2020c). In this way, clients are also de-individualized by a fragmentary view that focuses on physical and psychological functioning. The development of disorder-oriented concepts in music therapy is, however, necessary for the promotion of music therapy in a medically dominated environment in which it is mostly situated in Austria, which might result in an inner conflict for music therapists who want to see the whole person of the client but still have to focus on symptoms and deficits in order to be taken seriously in their professional environment. Addressing this issue more openly in music therapy training and encouraging individual ways to master this balancing act would also have the effect of strengthening a holistic view of clients and reducing pathologization.

Valuations and Norms in the Professional and Disciplinary Environment

Music therapists are confronted with different values and norms in their professional environment. These determine, for example, how the cooperation between clients and therapists takes place in a certain setting. But they also lead to values and hierarchies within the treatment team and thus sometimes cause music therapists and music therapy itself to find themselves in a marginalized position, which was an issue we discussed in the participatory research group (Fent, 2021). Within the hierarchy of the healthcare sector, the medical profession can be seen as being at the top (Slunecko, 2017b). One aspect of language in the context of hierarchies in the health sector is the question of different languages used in multi-professional teams. Here, there are not only different professions but also different paradigms as well as varying approaches to health and well-being and to the quality of therapeutic relationships. Also at the level of small units like teams in a hospital ward, hierarchies lead to the privileging of certain approaches, namely medical ones (generally speaking), talking about clients mainly in terms of their diagnosis and symptoms, and marginalizing other approaches, namely psychotherapeutic ones, which take into account a larger variety of factors that influence a person's well-being and thus also link its improvement to other aspects than the mere reduction of the severity of symptoms (Slunecko, 2017b). In my analysis of the books, the strategy to deal with this dilemma in music therapy I found most frequently was to adopt medical language in order to be taken seriously and be respected in a medically dominated environment (e.g., Stegemann, 2018). Also in this respect, clearly addressing this dilemma in multi-disciplinary contexts and advocating for the specificities of music therapy far more often could help to reduce this power imbalance.

In this regard, it could be crucial for music therapy to be aware of its peculiarities and strengths and maintain them in a health care system that privileges other paradigms (Schmidt et al., 2020a), also by applying suitable research methodology that does justice to them (Sonntag, 2011), and by writing and talking about all this accordingly, as well as advocating it confidently. This could support a paradigm shift in psychiatry, which is also being demanded by some representatives of medical professions (Maio, 2018; Schmidt et al., 2020a), by promoting a holistic approach to human well-being.

Valuations Regarding Research

In the analysis of the textbooks, it became apparent that positivist research and quantitative methods are valued more highly than other research paradigms and methods (e.g., Gold & Stegemann, 2018). This is of importance as the dominance of positivist research in health research might be said to privilege certain approaches to health and marginalize others (Kriz, 2019; Slunecko, 2017a). It privileges forms of medical treatment

whose effectiveness can be shown by such research, but marginalizes psychotherapeutic approaches, where the relationship between the actors is of great relevance, but which cannot be captured by such methods. Within psychotherapy, it privileges highly manualized procedures in comparison to less manualized ones (Kriz, 2019).

The above-mentioned convention of using impersonal forms in academic texts results from and simultaneously underpins the objectivity of research that a positivist paradigm demands, claiming supra-individual validity of the presented results in two aspects. First, any researcher would generate the same results when presented with the same data, and second, the findings can be applied to all persons in a certain group. The first assertion can be countered by the situatedness of knowledge (Haraway, 1988) already outlined: no two researchers would achieve the same results in the same research situation in a constructivist view due to their different backgrounds. The second assertion implicates an essentialist view of humans: in health research, persons are often grouped by their diagnosis. According to an intersectional view, the dimension of health, as represented in a diagnosis, is only one aspect of a person's identity, and reducing persons to their diagnosis means ignoring all other aspects that form their experiences. Thus, mere diagnosis orientation might entail the contrary of what it aims for. By focusing on one sole aspect of a person and neglecting all others it might hinder individualized treatment more than fostering it. Furthermore, diagnostic manuals and assessment methods originate from specific societal contexts and therefore reproduce their power relations and norms (Shuttleworth, 2006).

A suggestion that could be made at this point is that authors declare their positionality (which is not common in research articles in German language) and make their position explicit also grammatically, for example by using first-person pronouns for themselves in a first step. Additionally, a stronger involvement of researchers from the field of social sciences and humanities in music therapy research could be beneficial to enable a stronger consideration of human subjectivity and social contexts as well as a critical view of one's discipline (Malich & Keller, 2020).

Conclusion

In this article, I was only able to provide a small insight into my dissertation project. Through some examples I have strived to show how societal norms and power relations and the discrimination they entail are embedded in and sustained by language in German-language music therapy textbooks. I have outlined some selected suggestions on how also a change in language could bring forth a change of societal realities in this context.

The effort to bring about social change is the responsibility of every individual. Professions such as music therapy, whose primary goal is to support people in realizing a life that is satisfying for them, inevitably need to address the social circumstances that make life satisfaction more attainable for some people than for others. Central to this is a reflection on the complicity of music therapy in the context of social inequality, discrimination, and oppression (Hadley, 2013a). I am fortunate to find a climate at the Department of Music Therapy of my university in which these reflections are welcomed and used as an incentive to take stronger steps against discrimination in our own profession.

The crucial question for me remains how such considerations can find their way into broader forums and not remain within a small circle of interested readers or only in the academic realm. In that respect, I would suggest including these reflections even more in all areas of music therapy: in training, in professional development, in research; at universities and training institutions, but also at the places where music therapists work.

Furthermore, I regard it as highly important to find ways to communicate these findings in such a way that they do not appear to be devaluating or blaming. Acknowledging that

everyone is affected by the societal norms they live within and that no-one is immune to making discriminatory statements or taking discriminatory actions should be a first step to getting into and staying in dialogue with each other. In this way, it should be easier to accept if certain statements or actions are experienced as discriminatory by others.

Moreover, language, as well as societal circumstances, continuously change, and different persons' identities and belongings might be fluid and differ from context to context. Intersectionality teaches us that it is always worth taking a second look: If a person is privileged in one category, they may well be marginalized in others, maybe less visible ones in a given context, and vice versa. Recognizing and acknowledging our privileges could keep us from making snap judgments and one-sided accusations. Listening to each other and being open to change should help us pursue the most important goal of all: to bring about increased social justice.

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[1] It should be noted here that queer theory is usually assigned to deconstructivism. Constructivism and deconstructivism should not be seen as opposites (Degele, 2008), because they share the common basic assumption that there is no reality that is prior to the processes of observation and cognition. However, the focus is different in the two approaches: Constructivist approaches in gender studies aim at the analytical reconstruction of social constructions of gender, ethnicity, etc., that is, at understanding how these are produced and naturalized through social interactions (Degele, 2008). Deconstructivist approaches are more interested in the discourses in which these construction processes are interactively embedded (Babka & Posselt, 2016). Therefore, I do not view the integration of queer theory as a contradiction of my basic constructivist orientation, but rather believe that it adds an essential aspect to it.

[2] For a comprehensive presentation, see Fent (2021).

[3] There are different strategies that aim at signalizing to the reader that gender is not meant in a binary way and thus showing that all gender identities are being considered and addressed. For example, an underscore can be used (Therapeut_in), an asterisk (Therapeut*innen), or a colon (Therapeut:innen). The latter has the advantage of being barrier-free, as screen readers will then also "speak" the noun appropriately.