Global Perspectives on Addressing Systemic Issues in Music Therapy Curricula and Healthcare

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Abstract

The discipline of music therapy is practiced differently across the globe and over the years, in all regions of the world, the number of music therapy training programs has expanded. As such, there is a need to reflect on the differences between education and training programs, which vary according to the local culture, educational needs, theoretical background, and scope, among others. Music therapists work in a variety of environments including hospitals, community centres, regular or special education schools, speciality clinics, private practice, and long-term care homes, etc. Music therapists are tasked with navigating policies in their workplaces and balancing the needs of their clients/consumers/service users. This article written together by educators and a student aims to present brief highlights of the work of the authors whose collaboration resulted in a presentation at the European Congress of Music Therapy in June 2022. This presentation focused on the challenges and issues faced by the discipline of music therapy and health in general, based on the analysis of systemic issues in education and training, social issues, and significant issues such as multiculturalism, equity, and race around the world. These were identified as important

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issues for the authors who desired to raise awareness on these topics to further open ongoing dialogue. Our aim is to contribute to the establishment of dialogues between music therapy educators, allied health professionals, researchers, and students for the implementation of new courses and the updating of existing programs, expanding views on possible music therapy interventions in contemporary times.

**Keywords:** music therapy; ethics; cultural diversity; societal issues; education and training

### Introduction

The profession and practice of music therapy looks different depending on the region of the globe where one resides. Further, education and training programs vary significantly in terms of their history, theoretical background, scope, local culture, and education needs. In 2021, a small group of music therapy educators and a student representative from eight different countries representing three global regions, began dialoguing and working in smaller groups to examine and reflect upon the challenges and issues facing the discipline of music therapy and healthcare at large, and what implications these have on education and training. Further, the team analyzed systemic issues in education and training, broader societal issues, significant issues in healthcare settings (multiculturalism, equity, and race) in various regions throughout the globe, and ways in moving forward. There will always be tension between the global and local levels. As music therapists, we aspire toward meeting the need of the clients at a local level while also promoting music therapy at a global level. At the same time, we know that music therapy can neither be promoted nor answered from a “one size fits all” model. This paper presents brief highlights of the work of this team whose collaboration resulted in a presentation at the European Congress of Music Therapy (EMTC) in Scotland in June 2022.

We offer this short writing as our focus is on establishing a platform to dialogue about how music therapy educators, music therapy students, music therapists, supervisors, allied healthcare professionals, researchers, and policy-makers can be reflexive and respond to challenges. Improving education and training curricula relevant to the socio-political and cultural context, making necessary changes while considering contemporary issues such as access, unconscious bias, power, language, and diversity are briefly overviewed.

Given the premise of a global discussion it is essential all authors note their positionality to situate the assessments and collaboration.

Amy is a music therapist and registered psychotherapist in Canada, educator, supervisor and researcher with 25+ years experience working with service users with a focus in mental health, dementia and palliative care with advanced training in neurologic music therapy, the Bonny Method of Guided Imagery and cognitive behaviour therapy.

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Education and Training

**Lived Context and Lived Experience**

Music therapists’ training must be understood through lived context and lived experience. Lived context includes both the internal and external. Internal context represents our clients’ humanity (i.e., musical and relational being and potentials) and what we believe about them. The Indigenous value of noninterference has been an enduring concept representing “just letting [people] be, giving them the conditions, the resources, and believing by doing so they would find a good life” (Kenny & Hadley, 2013, p. 19). This foundation of internal context is aligned with resource-oriented approaches (Rolvsjord, 2014) and has direct implications to the external context of people thriving with adequate resources, access, and relational dynamics. This also relates to a focus on supporting resources and empowerment in music therapy training.

Focused within this frame is personal and collective lived experience. For human beings, experience is brought forth through each person’s creative impulse and capacity to flourish enacted through opportunities/affordances for interaction that their environment can offer them (Leitão, 2022; Segundo-Ortin, 2020; Stige, 2012). Our lived experience of both our personhood and aesthetics is therefore situated within (e.g., bodily, relational, environmental, sociocultural) contexts that offer these affordances, or alternatively, constraints.

This relates to clients/consumers/service users as well as current and future therapists. Individuals participate in situated music experiences (i.e., within a certain time, place, or session) while they are having everyday experiences as situated persons within their lived contexts (Leonard & dos Santos, in press). As music therapists, we must relationally support clients’ music as we honor their experience and are responsive to their contexts. While doing so, because aesthetic potentials within therapy are participatory in nature and clients’ affordances are impacted by the way we hold space, we must also understand our own lived experience and context.

Ethical education, training, and practice require a foundational standpoint of situated experience instead of simply holding music and people as tools to use or objects to be acted upon (Suarez, 2014). Every student and every teacher enter their training with prior experience of how it is to be in the world through their situated frames of reference. The experience of being who you are emerges from an inside perspective while being shaped in the music therapy training, which is both cognitively- and bodily-oriented (see self-experience below). Therefore, teaching and clinical practice need to be reflexive practices holding space for thoughts, analogies and symbols emerging from lived experiences.

**Equitable Practice and Self-Experience**

Inclusive and equitable therapeutic practice starts with the curriculum. Music therapists
have advocated for lived experience to shape practice that may de-center hegemonies of researcher gaze or the clinical “expert” (Leonard, 2020; Rolvsord, 2014), understanding how clients/consumers/service users are experts with self-determined agency. Therapists are importantly framing practice through lived experience with an understanding of their sociocultural identities (Hadley, 2021). This supports the reflexive ways they examine their practice, position themselves, and frame role relationships to walk alongside clients (Devlin, 2018; dos Santos, 2022; Fisher & Leonard, 2022). This type of reflexivity can also support therapy taking on an entirely different meaning and trajectory when lived context is considered deeply (Scrine, 2021; Stige & Aarø, 2012). Music therapists’ training must therefore support cultural situatedness, relational responsiveness, and disruptions of oppression and colonialism (Colonialism and Music Therapy Interlocutors [CAMTI], 2022; dos Santos, 2022; Hadley, 2021). The critical reflection needed for this work is rooted in self-awareness (Hadley & Norris, 2016) and points to the importance of self-experience within our training.

Understanding the need for situatedness of music therapy knowledge and practice, the development of therapists through self-experience becomes just as important as that of knowledge and skills. Students need to learn techniques and procedures for knowing and taking care of themselves. Self-experience means the need to know yourself to know others. Knowing oneself is a prerequisite to working with clients/consumers/service users in different settings for certain types of approaches. Self-experience might importantly happen through musical means. One example might be writing up a personal Musical Life panorama as described by Frohne-Hagemann (1998), promoting identity development as a music therapist. Another important support for self-experience is affinity group membership, especially for students and professionals who have been marginalized within society and the profession (Jack-Vilmer, 2022). Meaningful outcomes in such spaces include a sense of belonging, authenticity, and reduced pressure to culturally assimilate, which can also promote job satisfaction and prevent burnout.

While developing through self-experience, there is an important nuance that one can never understand another on the basis of oneself. However, music therapists can build capacity through their own self-work to support “selfing” through relationships and music within music therapy (dos Santos, 2022; Garred, 2006). This knowing through dialogical self-experience means that the “other” is always new to the therapist and cannot be known through categorization. Self-care is also an important aspect of self-experience for training music therapists as health care providers (Meadows et al., 2022; Trondalen, 2016). Burnout is a challenge for many music therapists working alone and music therapists also experience more burnout than other mental health professionals (Gooding, 2019).

**Music as a Right and an Obligation**

Everybody is born musical and relational. This has implications for musical engagement and ethics both in the training and in the music therapy practice (Trondalen, 2023). According to the Universal Declaration of Human Rights (UN, 1948), everybody has the right to participate in cultural life and enjoy art (including music).

We recognize the power of active engagement of participants in music and the affordances it creates for agency and growth. Music therapy is not only lovely and joyful; it is a human right, but we must realize that to support more equitable service provision, advocacy needs to continue to happen to ensure increased access to music therapy services. This means that training programs should be committed to working politically to offer music therapy to everybody who should have access (Fancourt & Finn, 2019).

We also know training programs are always under external pressure due to economic, political, competitive, and ethical issues within a training system. We encourage that educators instill in their music therapy students the impetus to strive for ideal practices
for clients/consumers/service users and society. Dileo (2021) affirms that “competence is the cornerstone of being an ethical music therapist. Competence is both an aspiration as well as a legal and ethical mandate. Therapists strive to achieve and maintain a high level of competence, as those who come to us for our help trust in our competence” (p. 409). The World Federation of Music Therapy Code of Ethics (WFMT, 2022) shares that it is an ethical responsibility to continually develop competencies. With that, we turn our attention to some broader societal issues impacting our discipline.

**Broader Societal Issues**

All professions are impacted by societal issues. Training, practice, and research, as core components of any profession, are also influenced by the changes that are taking place in the world we live in. Figure 1 (Norris, 2022) outlines some of these issues and how they impact individuals, such as access to education, the availability of healthcare in the area, politics, values, and norms. Where is the balance between updating curriculum and the maintenance of standards in the music therapy training programs, and how often should it be revised to reflect societal changes? While acknowledging there are many issues, we will focus on two issues which are currently of high relevance and sensitivity: diversity and cultural humility.

**Figure 1.** Broader Societal Issues (Norris, 2022).

Demographics all over the world are progressively more diverse and this implies that music therapists are increasingly working with individuals with varying cultural backgrounds. According to Dileo (2000), “Culture refers to those beliefs, actions and behaviors associated with sex, age, location of residence, educational status, social economic status, history, formal and informal affiliations, nationality, ethnic group, language, race, religion, disability, illness, developmental handicap, life style, and sexual orientation” (p. 149). Kim and Whitehead-Pleaux (2015) state that “for music therapists culture has a particularly significant meaning because the work entails understanding the
self and the client” (p. 51). Music and culture are closely interrelated. Cultural-informed music therapy is characterized by openness and humility (Kim & Whitehead-Pleaux, 2015). The value and use of music may have different meanings according to cultures, belief systems, and certainly it may impact the level of presence of music therapy. It is essential that music therapists approach working with individuals with curiosity to learn about how that person sees health, wellness, and the role of music in healthcare. Ethical commitment to service as the foundation of our practice can be reinforced by engaging in cultural humility as a lifelong and active process (Edwards, 2022). Trainees of music therapy should be tasked with exploring and analyzing their intersectional experience as a lifelong commitment to understand their power and privilege, using this to advocate for music therapy service provision; as well as to continually examine any unconscious biases. Further, an anti-oppressive practice framework needs to be woven into all aspects of the curricula, not simply left as token conversations or lectures (Baines, 2021). It leaves us with questions to reflect on such as: How can cultural humility, and diversity be encouraged and enabled in music therapy training? What are the barriers to this? Essential to an inclusive teaching practice is to ensure all stakeholders are part of these conversations; brief comments are shared from the student perspective below.

The Student Perspective

Often missing from discussions surrounding education and training is the student voice. Two students from the University for Music and Performing Arts in Vienna that were part of our group were tasked with sharing their perspectives and reflections from work with the ConnAction of Music Therapy Students (CMTS). Key concerns were connection, scholarship, and exchange programs. They summarize their thoughts below.

It was challenging to narrow our ideas down to the few points we thought were most important. Reflecting on the experiences from the European Music Therapy Conference (EMTC) and the talks with other students during that week, we included some points in our presentation and their contributions.

Connection

Students are looking to connect with other students. As students who began the music therapy program in the middle of the pandemic, we experienced the desire to meet and exchange perspectives, concerns, and questions with other students. It was only in the following year that we had the opportunity to fully connect and get to know each other. While this may seem like a small example, it is also true in bigger contexts. A few days before the official beginning of the EMTC there was a student meeting. For many it was the first interaction with international students. It was very intriguing to learn from the others and quite surprising how different our programs were. At this meeting we also heard the student perspective from the Nordic countries and learned how they began a student conference in 2017 not only to learn from other professionals, but also from each other by sharing their papers at the end of their studies. The CMTS was inspired by this and tried to build a European and International network for students. Even though the aim of the CMTS is to include international students, at present only German-speaking students are involved. During the pandemic few activities were organized by the CMTS and the hope is to build a new and broader community to organize events in the future.

Financial Aid

Becoming a music therapist can be challenging in many ways. Finances may be one thing preventing people from studying and/or influences their studies on different levels. For
example, in the program in Vienna, self-experience is required. However, self-experience is not mandatory in many programs, and those who pursue their own therapy have to pay for it themselves. Another example are university fees and tuition which vary drastically around the globe. In a lot of ways music therapy education is not easily accessible for everybody. Perhaps a larger variety of scholarships could be helpful for people to overcome this specific hurdle.

**Exchange Program Collaborations**

Many students spoke about their wish to do a semester abroad. Unfortunately, it is not as easy as it sounds. As curricula are very different in every university, it is hard to find a comparable place to go to on top of the possible language barrier. One idea we can offer educators and training facilities is to consider creating exchange programs between universities and encourage students to do a placement or internship there. These experiences could take place during school holidays and would be in addition to regular course work.

We also suggest the possibility of sending students to a different university for a few weeks as a way to build more international collaborations in music therapy education. Every training program has a different research focus and specialities, and being exposed to professionals could further help the students to find their own identity as a therapist and to broaden their horizons.

**Moving Forward/ Implications**

The implications of factors and systemic issues identified in this presentation spans across music therapy education and training, clinical practice, and research. As we look forward to the future development of the profession of music therapy, important questions that lie ahead may be: How do we navigate the differences and systemic issues that exist in the field and move forward together? How do we envision the future of music therapy to be in this globalized context that would honor the multiple voices/experiences/narratives that people have? There are multiple perspectives and ways forward to answer these questions. Below are some thoughts proposed by the presenters.

**Bridging the Cultural Gap: Towards a Multicultural Orientation**

There appears to be a need for an expanded understanding of music therapy in order to be more inclusive and culturally responsive while maintaining and upholding foundational elements and standards in music therapy training and practice (Gombert, 2020). Foundational elements include items such as those found in a code of ethics: confidentiality, informed consent, and beneficence, for example. This calls for a high level of reflexivity into lived experiences (Keith, 2017). While standpoints of cultural competency have been important, an evolving journey into cultural humility also plays an increasingly significant role in developing such reflexiveness (Edwards, 2022). With the increased likelihood of working with individuals from varied cultural backgrounds via telehealth during the pandemic, this seems to be a pertinent area of focus in order to continue to provide culturally appropriate services to individuals with multiple cultural identities responsibly, competently, and ethically. Cultural exchange opportunities between students and professionals and the immersion in another culture are critical ways to learn about another culture, and further stimulates and enhances our ability to critically self-reflect. Knowledge and understanding of multicultural issues, current music therapy trends and practices around the globe, and acquisition of cultural humility is particularly pertinent in this era and is gained through experience rather than coursework in the
classrooms (Banzon & Leonard, 2023; McFerran et al., 2023; Young, 2016). Engaging in the process of acculturation will assist and enhance the ability to adapt to local professional scenes and to assimilate and practice locally (Brown, 2002; Kim, 2015).

As a global organization, the World Federation of Music Therapy (WFMT) plays a role in fostering and modeling what is envisioned for the future of the field. For example, the WFMT’s Education and Certification Commission offers a set of education guidelines that are intentionally culturally sensitive and inclusive to provide a framework for uniformity in music therapy training and education (WFMT, 2023). Furthermore, the WFMT Assembly of Student Delegates, a globally representing body of student voices, works together to promote the exchange of ideas and information among students around the globe. Student scholarships are also provided to help increase students’ accessibility to World Congresses where rich exchanges of knowledge and expertise happen among students and professionals from around the world, however the funding is significantly limited.

**Ecological Framing**

To move forward in inclusive and culturally responsive ways within a globalized context, it is important to understand health through “ecological wholeness” (Bruscia, 2014; Seabrook, 2020). This concept recognizes all the facets that make up an individual’s experience and the contexts in which they live. This includes contexts such as relationships, society, culture, and the environment. Ecological framings have implications at various levels and types of systems that interact with and ideally influence each other, shaping practices and policies (Crooke, 2015). Examples of large-scale societal systems providing meaning to music therapy scope of practice are those related to climate change or global health concerns such as COVID-19 (Agres et al., 2021; Seabrook, 2020). Macrosystems might also include historical contexts such as colonialism that have ongoing impacts within music therapy and society at large (CAMTI, 2022). At local and community levels, these contexts may inform shifts in music practice such as those noted by Scrine (2021). This example shows how understanding the sociocultural environment can shift therapeutic values, in this case from an orientation centered around individual resilience toward personal and collective resistance. While certain music therapy approaches such as Community Music Therapy have explicit ecological foundations (Stige & Aarø, 2011), Crooke (2015) notes that music therapy as a whole is grounded in “musicking affected by ecological models” (para. 13). Ecological meanings can represent how we understand all music therapy practice through more holistic, relational, and contextual ways. Kenny’s (2014) view of an ecology of being is one example situating the individual in such a way. Moving forward, how might we better understand personhood, aesthetics, music experience, knowledge, and our clinical practice within sociocultural contexts, and support the reflexivity of music therapists through ecological wholeness?

**Honoring and Sustaining Culture**

Ecological wholeness in music therapy exists in relation to culture and everyday embodied action. However, this does not mean merely learning competence around cultural codes, rules, categories, and language. Rather, it means to be rooted in culture while being in relationship with cultural others, co-creating situated and culturally sustained aesthetics and meanings. With culturally sustaining pedagogies and practices (CSPs), centering communities is an essential focus and a departure from colonial histories and logics of Western education and practice, where growth and change have depended upon cultural eradication or assimilation (Paris, 2021).

CSPs were coined and initially conceptualized by Django Paris and built upon traditions of culturally relevant pedagogy and other asset-based pedagogies (Ladson-Billings, 1995;
Paris, 2012; Paris & Alim, 2017). The values within CSPs also importantly connect to many other practices that support culturally-situated knowledges. These practices honor the lifeways of communities, such as through their own resources, assets, values, and cultural (i.e., linguistic and aesthetic) practices. Due to colonization, there is often a focus on historically marginalized communities of color, with intersections such as gender and class, as well as sustaining other contested identities (i.e., queer and disabled) and lived experiences. “In the context of deeply-entrenched, structural racial and economic inequalities, CSP is necessarily and fundamentally a critical, anti-racist, anti-colonial framework that rejects the white settler capitalist gaze and the kindred cisgenderpatriarchal, English-monolingual, ableist, classist, xenophobic, and other hegemonic gazes” (Alim et al., 2020, p. 261). Disrupting disempowering relations through cultural approaches is a collective work for all music therapists.

Within music therapy literature, CSPs and culturally-situated knowledge help us to ask questions such as whose stories matter, how do we teach, and what musical identities can thrive in music therapy? Among specific mentions of CSP are Norris’ (2021) in-depth discussion of the importance of honoring her own cultural experience as a foundation of culturally sustaining practice that “honors the human dignity of BIPOC communities” (p. 30). Fisher and Leonard (2022) presented ideas of CSPs within music therapy clinical practice and education of disrupting narratives of damage as defining the basis of music therapy. Viega et al. (2022) explained how Hip-Hop practitioners globally engage communities in culturally sustaining ways that “current structures of music therapy education and training do not fully support” (p. 355). Beyond these specific mentions, CSPs connect to a burgeoning body of literature in music therapy that centers cultural practices and lifeways as a focus to sustain in all aspects of our education and training. Music therapy scholars from across the world are collectively shifting the field towards culturally-contextual conversations by asking “Whose voices? Whose knowledge?” instead of merely what knowledge is important (Ikuno et al., 2021).

CSPs also have a lens that empowers youth, encourages intergenerational connections, and values ecological sustainability and decolonial justice. Therefore “sustaining” is understood as embedded with ecological, technological, developmental, and relational meanings to practice. As we continue to ask what music therapy looks like in the future, we must ask how we are honoring and sustaining culture. The challenge is of course to ensure we are building new ways of developing competency skills with the understanding that some standardization is needed to accomplish this. The idea of sustaining the cultural assets, resources, and practices of individuals and communities as a basis for education, training, and practice supports an important grounding for all music therapy work.

**Conclusion**

This article has offered some global perspectives on systemic issues in music therapy curricula and healthcare, aiming at further dialogues. We suggest there is a need for various music therapy educators, music therapists, supervisors, allied healthcare professionals, researchers, and policymakers to be responsive and challenged while responding to calls at an individual and social level. Contemporary issues such as access, unconscious bias, power, language and diversity are vital in such a response. Furthermore, education and training focused on lived context and experience, equitable practice and self-experience while addressing music as a right of everyone. Broader societal issues were underpinned by arguing the importance of society and community, pointing to both interpersonal and individual levels. Moreover, the student perspectives include the need for financial aid and exchange program collaborations, not least due to building networks on an international level.
After these brief perspectives, we offered steps for moving forward as we argue for bridging the cultural gap towards a multicultural orientation. Such a call and implication of multicultural exposure needs a high level of reflexivity into lived experiences, ecological framing, and culturally sustaining practices.

About the Authors

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