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Music Therapists' Thoughts about their Future and the Direction of the Profession: An Explanatory Sequential Mixed Method Study

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Received 2 March 2023; Accepted 19 September 2023; Published 1 November 2023

Editor: Nami Yoshihara 吉原 奈美

Reviewers: Alberto Acebes, Bob Miller

Abstract

This research examines the responses of music therapists in the United States to two open-ended statements regarding their future plans (795 responses) and the direction of the profession (782 responses), along with responses to 12 Likert-type statements focused on participants' perceptions of the American Music Therapy Association. As part of a larger, multi-step survey, this mixed methods analysis provided a framework through which to investigate responses to each open-ended statement, which were further categorized by levels of work satisfaction (Meadows et al., 2022b) and then connected to response trends to the 12 Likert-type statements regarding the American Music Therapy Association. Analysis of these data suggest the vast majority of music therapists intend to stay in the field and undertake professional activities that support their growth and expanding their knowledge and work beyond music therapy. Future plans were, however, significantly impacted by the music therapist's level of work satisfaction, suggesting some systemic issues in the profession. Responses related to the direction of the field were far more mixed, inextricably connected to work satisfaction levels, and reflected in responses related to the American Music Therapy Association. Taken together, these findings suggest that while the majority of music therapists are focused on growing professionally, they have mixed perceptions about the direction of the field and faith in the American Music Therapy Association.

Keywords: future plans of music therapists; direction of the profession; levels of work satisfaction; American Music Therapy Association

Introduction

This article continues a line of inquiry focused on the work lives of music therapists in the United States. In the first of these articles (Meadows et al., 2022a), we focused on workplace and work satisfaction, stress, burnout and happiness, with survey data suggesting that music therapists were generally happy with their workplace and job conditions, experiencing moderate stress and low burnout. Building on findings from the first article, a second article (Meadows et al., 2022b) examined levels of work satisfaction and the relationship between work satisfaction, stress, burnout, happiness, and professional identity. Music therapists who reported high satisfaction indicated significantly higher levels of positive agreement with questions related to work satisfaction than did music therapists who reported moderate or low work satisfaction, and these differences were also significantly associated with stress, burnout, and happiness. The profiles of music therapists in each of these categories revealed important differences in the professional identities of music therapists, and when examined as a whole, provided insight into the occupational wellbeing of the profession.

Differences in work satisfaction and the relationship between work satisfaction and stress, burnout, happiness, and occupational wellbeing also raised questions about how music therapists imagined their futures and the future of the profession. To gain insight into both these aspects of music therapists' thinking, we asked survey respondents to complete two future-oriented phrases: 1) *When I think about the direction the profession is headed, the first thing that comes to mind is*, and 2) *In the next five years, I plan on*. Two Likert-type questions about perceptions of the American Music Therapy Association (AMTA) were also included to add to this understanding. We report the responses music therapists provided to both these phrases, combining this with responses to statements regarding AMTA, further differentiating these responses by levels of work satisfaction.

Background

Music therapists have considered “the future of music therapy” in a broad range of ways, divided thematically into four categories: 1. The future of the profession (e.g., Doyle, 1989), 2. The future of education and training (e.g., Standley, 1989), 3. Professional issues, and how they may be envisioned in the future (e.g., Sena Moore, 2015), and 4. The future of clinical practice (e.g., Dileo, 2016). In the United States, Darrow et al. (1985) were perhaps the first music therapists to publish reflections on the future of the profession, writing in the *American Music Teacher* about the expanding role of music therapy in healthcare settings: “The future of music therapy promises to be enhanced and increasingly diversified. Heretofore, remediation has been the primary goal of music therapy.... The field is presently expanding to include a variety of services to a host of populations” (p. 19), for which they give multiple examples that still resonate today such as “music as a relaxant for expectant mothers,” “music as a therapeutic activity for older persons,” and “music as a modifier of brain wave activity” (p. 19).

Reflecting on her extensive professional experience, Doyle (1989) considered the past, present and future of music therapy through questions such as “which model of therapeutic process do we use—behavioral or humanistic?” and “do we combine verbal therapy with the music, or should it be only the music that is attended to?” (p. 78). In critically reflecting on their career path, Doyle (1989) challenged reductionism and the urge to define music therapy in only one way, instead advocating for multiple understandings, considering the very essence of music therapy as inspiring, while liberating and nurturing the discovery process of each individual (p. 81). Michel (2000) took a different approach when considering the future of the profession. They identified four key themes they believed were essential to the growth of the profession—advancement of research, distribution of

helpful information, establishment of educational standards, and perfection of music techniques which aid medical treatment most effectively—discussing the history and current issues related to each theme. In doing so, Michel identified 12 key components that reflected their vision for the future of music therapy, which included 1. Differentiating music therapists from other practitioners who include music interventions in their work, 2. Training “therapeutic generalists with a very specific medium – music” (p. 76), 3. Working in preventative health and wellness, 4. Using protocols that are scientifically based, and 5. Including proportionally more male practitioners and persons of greater ethnic and cultural diversity.

In their comprehensive examination of the profession, Ferrer (2012; 2018) examined workforce trends, including salary and job creation trends, diversity, professional recognition, and challenges to the profession in order to garner a sense of the current status of the field. They described the ongoing challenges music therapists experienced in being recognized professionally, including stagnant salaries, lack of diversity, and challenges to professional recognition. Ferrer (2018) identified five strategies they believed were important to growing the profession: 1. increasing professional advocacy efforts, 2. recruiting diverse music therapists, 3. providing alternate routes to becoming a music therapist, 4. making changes to music therapy curricula to aid recruitment and retention, and 5. helping music therapists practice self-care and prevent burnout.

The future of education and training has also been considered in a range of ways. Standley (1989) identified a number of issues related to educational standards and professional designations, focusing on the importance of unifying the field (specifically unifying the American Association of Music Therapy [AAMT] and National Association of Music Therapy [NAMT]) and creating clear education and training standards and professional designations that reflected the completion of an academic program and internship (RMT), national certification (RMT-BC) and licensure (LMT) for professionals completing a Master’s degree in music therapy. In parallel with Standley’s recommendations, Maranto (1989) provided a summary of recommendations from the California Symposium on Music Therapy Education and Training, focusing on differentiating entry level and advanced practice standards, flexible approaches to clinical training, and quality assurance issues in education and training, with a shift in emphasis to competency-based education. These recommendations were instrumental in deliberations during the unification of the AAMT and NAMT, with many adopted by the newly formed American Music Therapy Association in 1996.

More recently, the Board of Directors of the AMTA, in partnership with the AMTA Assembly of Delegates, elected a commission (The Commission on the Education and Clinical Training of 21st Century Music Therapists) to envision the future of music therapy, with a particular emphasis on reimagining the education and training experiences of students studying music therapy in the United States. It focused on the following five tasks: 1. Identifying inconsistencies within degree programs to support clinical practice in a changing world, 2. Identifying inconsistencies among and between National Roster and University Affiliated Internship programs, 3. Recommending changes to enhance current education and clinical training practices, 4. Supporting the ongoing efforts to increase state recognition of the MT-BC credential, and 5. Supporting efforts to encourage diversity and inclusion in the profession (The Commission on the Education and Clinical Training of 21st Century Music Therapists, 2021, December). While the final report from the commission is not yet available, the scope of this work suggests concerns about the preparation of music therapy students for professional life in the United States, concerns regarding the recognition of the profession in educational and healthcare settings, and concerns about the long-term sustainability of the profession.

In discussing the history and significance of advocacy in the profession, Sena Moore (2015) suggested a number of recommendations for the future of advocacy efforts in the

United States. These recommendations focused on joint operations plans between professional organizations (AMTA and Certification Board for Music Therapists [CBMT]) in order to relieve some of the pressure on grassroots advocacy and focus on advocacy that increases state licensure efforts and national-level communications. While acknowledging that grassroots advocacy “will not dissolve once state recognition has been achieved” (p. 84), Sena Moore emphasized the importance of coordinated, national campaigns along with strong internal communications structures that are responsive to legislative and regulatory changes impacting music therapy practice.

Dileo (2016) invited 17 music therapists from around the world to describe how they “envisioned the future of music therapy theory, practice and research” (p. 12) in their specific areas of expertise. In summarizing the contributions of these authors, Dileo identified 19 strategies “to advance the discipline of music therapy in the future” (p. 158), examples of which include: 1. Theories that embrace the diversity of practice, including integrative theoretical models and hybrid models, 2. The need to develop music therapy strategies according to various stages of the therapeutic process, 3. A recognition of the importance of the daily music activities of clients, 4. The importance of interdisciplinary collaboration, 5. More and rigorous research is urgently needed, including larger sample sizes, and increased investigation of long-term and carry-over effects, 6. The development of music therapy manuals for research and clinical purposes, and 7. An increased focus on specific topics such as a) biomarkers and mechanisms for music therapy effectiveness, b) cost-effectiveness of music therapy, c) effects of music therapy on health-protection factors, and d) prevention of illness (pp. 158-160). While Dileo acknowledges that “it is impossible to predict how music therapy will evolve in the future” they hope that “by deliberately taking steps in the present to ensure that research, theory and practice are at optimal levels and poised for growth, the field of music therapy will indeed have the brightest future possible...” (p. 161).

While these authors and AMTA initiatives provide a range of perspectives related to professional challenges and their proposed solutions, along with envisioning the future of the profession, surprisingly little attention has been given to asking music therapists themselves about their own future(s) and how they see the future of the profession. Asking music therapists how they envision their future, and how they see the direction of the profession, may provide insight into the overall health of the field, and assist in identifying the shared concerns of music therapists as they go about their everyday professional lives. Survey responses may also help in understanding the extent to which music therapists intend to stay in the field and provide insight into the future training needs of survey respondents. We therefore invited music therapists to complete two open-ended phrases focused on their future and the future of the profession, with analysis of their responses framed around the following research questions:

Q1. In what ways do music therapists think about their future in the profession?

Q1A: What differences, if any, are revealed when these responses are examined by levels of work satisfaction?

Q2. In what ways do music therapists think about the direction of the profession?

Q2A: What differences, if any, are revealed when these responses are examined by levels of work satisfaction?

In addition, we posed twelve Likert-type questions about music therapists' perceptions of AMTA to provide additional insights into respondents' perceptions about the direction of the profession.

Categorizing, describing, and reflecting upon the responses of music therapists appears particularly timely given the significant changes taking place organizationally for the AMTA (Gooding, June 29th, 2022), the impact of COVID-19 on the health and wellbeing

of healthcare providers (Magee & Meadows, 2022), and a reassessment of the value and meaning of work reflected in “the great resignation” currently taking place in the United States (Davidson, 2022).

Method

Research Design

This study utilizes an explanatory sequential mixed methods design. Participants were invited to complete two qualitative questions about the direction of the profession of music therapy in the USA. These questions were posed as prompts that participants completed in their own words. In addition, participants completed two Likert-type questions, one in matrix format, about their perceptions of the AMTA. The qualitative data from the two prompts was first analyzed inductively and sorted into categories that were derived directly from the text (Hsieh & Shannon, 2005). In order to provide transparency regarding the prevalence and emotional valence for responses in each category, these qualitative responses were subsequently transformed into quantitative data (Saldaña, 2016). Frequencies and percentages presented in the transformed quantitative data were based on the entire set of responses for each question. Results for the Likert-type questions were analyzed using descriptive statistics and measures of central tendency. Quantitative and qualitative results were then compared to provide insight into the questions. This article is part of a multi-step study. Data in this article were part of a larger 25-question survey, the results of which have been previously published (Meadows et al., 2022a, 2022b). Further details on the survey construction can be found in (Meadows et al., 2022a).

Participants

Participants completed two open-ended phrase prompts and responded to two Likert-type questions. Out of a total of 1152 Board Certified music therapists, 795 participants completed the first phrase and 782 completed the second phrase. For the Likert-type questions, 989 participants completed the first question and 980 completed the second. Survey data were collected in October 2019.

Detailed demographic data, along with the workforce characteristics of survey participants, can be found in Meadows et al. (2022a). Survey participants were predominantly female (88.2%), and their age reflected a bimodal distribution, with most ages between 20 and 29 years (36.7%) and 30 and 39 years (30.3%). All seven regions of the American Music Therapy Association were represented, with the majority of participants from the mid-Atlantic (27.7%) and Great Lakes (24.7%) regions. Further, 56.83% of respondents were members of the American Music Therapy Association.

Ethical Approval

This study was reviewed by Shenandoah University Institutional Review Board (protocol #752) and was adjudicated as exempt from further review.

Survey Design

Two open-ended phrase prompts served as the focus of this article: 1) *When I think about the direction the profession is headed, the first thing that comes to mind is*, and 2) *In the next five years, I plan on*. Two additional Likert-type survey questions were posed to gain insight into music therapists' perceptions of their professional organization, the AMTA. The first question asked about AMTA membership and the second was presented as a matrix of 13

Likert-type statements that asked participants to indicate their level of agreement, on a five-point scale, for each statement. These statements asked respondents to indicate the extent to which AMTA understood and met their needs, was responsive to changes in the profession, was open and engaged, and was valued by the participant, among a range of statements. A complete list of these statements can be found in the Appendix.

Data Analysis

Qualitative content analysis was undertaken when analyzing the responses for both phrases as this method is aptly suited for analyzing large amounts of text data (Hsieh & Shannon, 2005; Schreier, 2013). In addition, qualitative content analysis is based on a factist perspective that assumes the data to be accurate and truthful accounts of reality as presented by the participants' experiences (Sandelowski, 2010), which is the focus of the kind of information gathered for this research. This method also permits the researcher to analyze the data qualitatively through inductive or deductive processes while also noting the frequency of specific responses in each category (Gbrich, 2007). Noting the frequency of responses within categories was essential to reporting transparency.

Each question was analyzed twice. First, responses to each question were coded, grouped thematically, and organized separately to provide an overall portrait of these music therapists' thoughts about each of these future-oriented phrases. Second, responses to each phrase were then grouped into quartiles according to work satisfaction levels (Meadows et al., 2022b): high (1st quartile), moderate (2nd and 3rd quartiles), and low (4th quartile). Responses were analyzed a second time within the quartile groups using the categories established in the whole-sample analysis. Due to the complexity of this study and data that included both frequency (quantitative) and thematic (qualitative) information, both inductive and deductive approaches were used in the data analysis (Elo & Kyngäs, 2008; Hsieh & Shannon, 2005). In a first step, the first author was immersed in the data and obtained a "sense of the whole" for each question. Following this step, the first author began to construct categories of responses to the data (Elo & Kyngäs, 2008). At this point, an inductive process was implemented to create categories because the text was comprised of a wide range of narrative responses to each question. Coding methods for responses within the categories focused on pattern coding to compare the similarities, differences, and frequencies of responses (Saldaña, 2016, p. 236) and on values coding to identify attitudes, values, and beliefs (Saldaña, 2016, p. 131). For the second research question related to the participants' perspectives of the direction of the field of music therapy, simultaneous coding was also applied to analyze the valence of each code (negative, positive, mixed, imperative need, and neutral), thereby indicating the range and complexity of responses (Saldaña, 2016, p. 83).

As a clearer picture of categories of responses emerged through a process of matching and identifying commonalities (Saldaña, 2016), the first and second authors defined categories and set boundaries for them, checking the fit for each narrative response within each category. In a deductive process, these newly constructed categories were tested until all responses could be assigned to a category. These categories were verified by the second author and questions arising from data interpretation were discussed. The ensuing discussions resulted in adjusting some categories to change the definitions; data were analyzed again, and the process of verification and discussion continued until all the data were determined by both authors to be meaningfully and accurately described by the category to which they were assigned.

Data were analyzed as a whole and then again by levels of satisfaction (low, moderate, and high) based on previous analysis of the whole survey (Meadows et al., 2022b). The steps for data analysis were repeated by both authors for each level, as there were distinctly different responses and valences that emerged when data were organized into

levels of satisfaction, compared to the analysis of the whole data set. Once all narrative responses and valences had been included in a category, they were tallied for frequency and verified numerically to ensure each response had been included. Thus, the qualitative categories were also transformed into quantitative data of frequencies and percentages.

Analysis of the questions about AMTA was based on the Likert-scale type responses and data were reported in terms of measures of central tendency and percentages.

Methods for ensuring trustworthiness

Throughout the inductive and deductive processes, categorical analysis was reviewed independently by the second author. The first and second authors engaged in ongoing discussions throughout the process of data analysis to ensure that categories were adjusted when specific statements did not adequately “fit” the category, and that all responses were checked and re-checked until a consensus was reached. This same process was implemented for each question. Frequency counting was verified multiple times by checking for agreement between the number of responses in each category and at each level of satisfaction with the overall number of responses in each level and as a whole.

Results

Music therapists living and working in the United States were asked to provide written responses to two open-ended phrases related to their future(s) and the direction of the profession. Responses to two Likert-type questions concerning AMTA were also analyzed and then combined and organized thematically to reflect the perspectives of music therapists who experienced differing levels of work satisfaction.

In the Next Five Years: Future Plans

When responses to each future-oriented phrase were examined as a whole, a complex picture emerged, one that reflected important differences between the ways music therapists saw their own future(s) and how they perceived the direction of the field. When music therapists reported their plans for the next five years (*In the next five years, I plan on*), 73% responded in ways that reflected their intention to *stay* in the field ($n=581$), while 10.6% intended to *leave* the field ($n=84$) and a further 11.8% were *undecided* about their future ($n=93$). Reflecting a different intention, 4.6% anticipated that they would *retire* ($n=37$).

Participants who indicated they were *staying* in the field responded in ways that included plans for *continuing* or *growing*. Typical responses in these categories were: *Continuing as a hospice music therapist*, and *Completing my masters in MT and continuing to aid the growth of our practice*. When music therapists indicated they were *leaving* the field they gave clear indications they had imminent plans to leave, such as: *Becoming a recreational therapist and accepting a position where I earn a sustainable wage*, and *Switching careers if I can*. Music therapists who indicated they were *undecided* included comments indicating they were reevaluating their commitment to the profession or were unsure about staying: *I will renew my certification, but am unsure of how long I will remain in the field*, and *Finding out if I can afford to stay in the field or not*. Participants who clearly stated they had plans to retire indicated their intentions in the following kinds of ways: *Easing into retirement*, and *I hope to find another part time job and retire*.

In the Next Five Years: Future Plans by Level of Work Satisfaction

When responses to these phrases were examined by work satisfaction levels, clear differences emerged, particularly for those music therapists who experienced low work

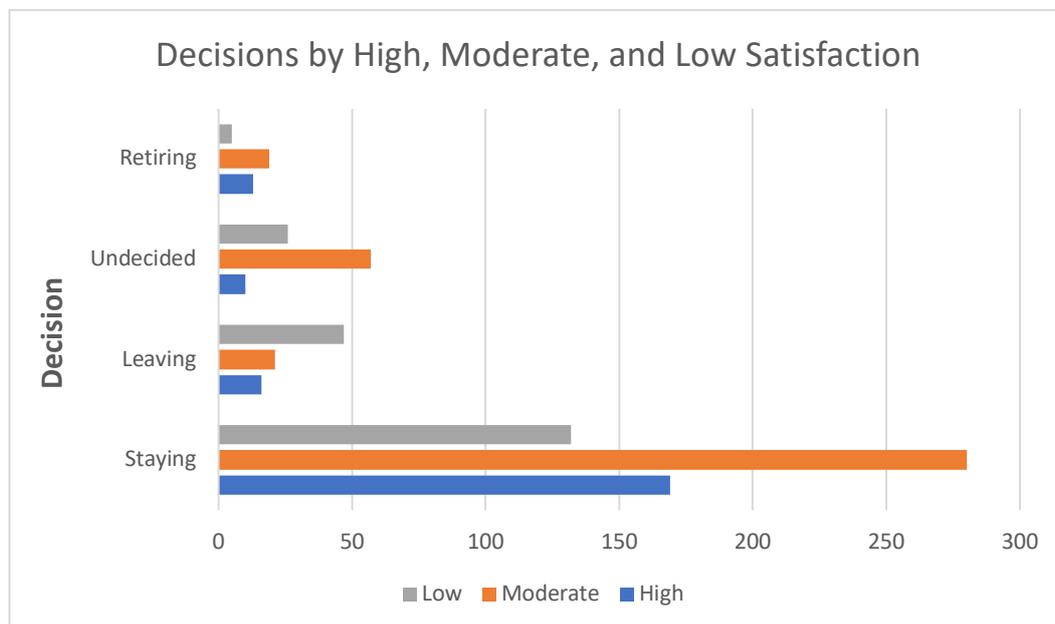
satisfaction (see Table 1). Music therapists who reported high work satisfaction were most likely to have plans to *stay* in the field ($n=169$; 81.3%), when compared to music therapists who were moderately satisfied ($n=280$; 74.3%) and those who reported low work satisfaction ($n=132$, 62.9%). Significantly, 22.4% ($n=47$) of music therapists who reported low work satisfaction also reported plans to *leave* the field, compared to only 7.7% of music therapists who reported high satisfaction ($n=16$) and 5.6% who reported moderate satisfaction ($n=21$).

Table 1. Levels of Work Satisfaction and Future Plans.

Future Plans	High		Moderate		Low	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Staying	169	81.3	280	74.3	132	62.9
Leaving	16	7.7	21	5.6	47	22.4
Undecided	10	4.8	57	15.1	26	12.4
Retiring	13	6.2	19	5.0	5	2.3

Some music therapists reported that they were *undecided* about their future ($n=93$, 11.8%). Surprisingly, the highest percentage of music therapists who were *undecided* were found in the moderate work satisfaction group ($n=57$, 15.1%), followed by music therapists who reported low work satisfaction ($n=26$, 12.4%), while those who reported high work satisfaction had the lowest percentage of *undecided* responses ($n=10$, 4.8%). Figure 1 provides a comparison of each of these intentions.

Figure 1. Levels of Work Satisfaction and Future Plans.



In the Next Five Years: Professional Goals

In addition to indicating their intentions to stay in or leave the field, survey respondents also described a variety of professional goals. The primary goals reported by these music therapists related to *growing* ($n=395$, 49.6%), *continuing in the same way* ($n=163$, 20.5%), or *expanding their practice and/or education and training beyond music therapy* ($n=142$, 17.9%).

Growing was characterized by plans to develop oneself professionally and contribute to the field. Examples of comments in this category included: *Take on a more leadership role,*

focus on diversity and inclusion in the field and the people we serve, along with responses that included personal plans for growth: *Hopefully, moving away from clinical work and into administration/balancing my career with marriage and a family*. These plans for growing often included educational aspirations: *Getting my Master's degree and training in NICU, or Completing my PhD and possibly heading in academia*.

When music therapists indicated they were *continuing in the same way*, they expressed an intention to keep things as they were, with many of these comments succinct and to the point: *Sticking it out*, or *Continuing where I am*. Respondents also indicated a specific way in which they planned to *continue*, such as *Hang in there and try to keep music therapy in my school district. Special education is changing and cycling, so I need to be able to be flexible as well* or they identified plans for specific change that would make continuing more feasible: *If I can find a job with benefits and a better salary, I have every intention of staying in the field*.

When music therapists indicated they were *expanding their practice and/or education and training beyond music therapy* ($n = 142, 17.9\%$) they included intentions such as: *Obtaining a second master's degree in clinical mental health counseling and combining it with music therapy modalities*, or *Starting my own business with my partner, applying music therapy and life coaching to queer couples and queer relationship work*. For others, expansion was related to developing their clinical practice distinct from music therapy, such as: *Pursuing a PhD in clinical or health psychology*.

When responses in this category (*expanding their practice and/or education and training beyond music therapy*) were examined as a whole, just over half of these music therapists (50.7%) indicated an intention to leave the field. For example: *Pursuing a more financially stable career path with a healthier work-life balance*, and *Just received a master's in another program which I am currently looking for employment*. Others (12.7%) were attempting to integrate a part time practice with another career: *Working part time*, or *Leaving the profession to pursue growth of family/Music Together*, or *Continuing with a small music therapy contract caseload while attempting to start a new business unrelated to music therapy*. While some respondents in this category (36.6%) indicated plans for expansion and growth, they were unsure if they would remain in the field: *Pursuing study in counseling to be better qualified as a therapist, and to access increased respect and higher salaries*, or *I plan to complete a PhD in counseling education and supervision, and work on research that will benefit several professions*.

In the Next Five Years: Professional Goals by Level of Work Satisfaction

Responses in each of these goal areas varied by level of work satisfaction. Music therapists reporting high work satisfaction also reported the highest number of responses related to *growing* ($n = 117, 56.2\%$) and the lowest number related to *expanding beyond music therapy* (9.6%). Music therapists reporting moderate work satisfaction also reported a high number of responses related to *growing* (50.1%), while also reporting responses related to *expanding beyond music therapy* (18.4%). Music therapists who reported low work satisfaction reported the highest number of responses related to *expanding beyond music therapy* (25.2%) while also reporting the lowest number of responses related to *growing* (42.4%). Interestingly, there was little variation in responses related to *continuing* across levels of work satisfaction, which comprised 21.6% of music therapists who reported high satisfaction, 21.0% who reported moderate satisfaction and 18.5% who reported low satisfaction. Table 2 provides a summary.

Table 2. Level of Work Satisfaction and Five-Year Goal.

Goal	High (%)	Moderate (%)	Low (%)	All (%)
Continuing	21.6	21.0	18.5	20.5
Expanding beyond Music Therapy	9.6	18.4	25.2	17.9
Growing	56.2	50.1	42.4	49.6
Personal	2.4	0	1.5	1.0
Reevaluating	1.5	5.0	7.6	4.8
Retiring	6.3	5.0	2.4	4.6
Returning	0	0.5	0	0.3
Unsure	2.4	0	2.4	1.3

The Direction of the Profession

While most music therapists were generally positive about their personal plans for the next five years, respondents were far less positive when asked about the direction of the profession. Of the 782 music therapists who responded to this question, 33% ($n=259$) reported a negative perception, 28% reported a positive perception ($n=217$), 27.5% identified an imperative (i.e., a need, expressed neutrally) ($n=215$), and 11.6% reported a mixed perception of where the profession is headed ($n=91$). Each of these categories will be briefly described, with terms in italics reflecting sub-themes for the category.

Negative perceptions about the direction of the profession (33% of responses)

When participants expressed a negative perception about the direction of the profession, they shared *concerns* ($n=69$, 8.8%) that were expressed with a negative valence such as *challenges*, *confusion* and *disappointment* ($n=44$, 5.6%). The nature of the difficulties they perceived included *salaries* and *reimbursement* for music therapy sessions, and the ability to *sustain* oneself in the profession ($n=40$, 5.1%). For some respondents, this included concerns about their ability to *survive* financially. Respondents ($n=42$, 5.4%) also expressed that they felt the profession was *stagnant* and that they had experienced *regression* and *limitations*. Some participants were also concerned that current music therapy *education* was not adequate for the requirements of the workplace, or that there was not enough *research* that was helpful to clinicians ($n=21$, 2.7%), while others found issues around *diversity*, and the *divisions* and *politics* ($n=26$, 3.3%) in the field had a negative impact on their perceptions of the direction of the field. Negative responses were also associated with the need for constant *advocacy*, with little accompanying *recognition* ($n=15$, 1.9%), as well as general *anxiety* ($n=15$, 1.9%) about the direction of our profession and the *challenges* the profession faces ($n=13$, 1.7%).

Positive perceptions about the direction of the profession (28% of responses)

When participants expressed a positive comment about the direction of the profession, it was often related to *growth* ($n=85$, 10.9%). This was accompanied by feelings of *hope* and expectations about the *potential* of the field which, these respondents ($n=46$, 5.9%) believed, will bring new *opportunities*, creating personal *excitement*. Some participants ($n=39$, 5%) had a positive perspective about the impact of *advocacy* and believed that the field was making strides in being *recognized*, while others ($n=18$, 2.3%) cited *research* as being effective.

Imperatives for the profession (27.5% of responses)

Some participants expressed an imperative—something that they considered was vital for the well-being of the profession—although they did not express this with a specific valence (positive or negative). The greatest expressed imperative ($n=52$, 6.6%) was the need for *change* or alternatively, participants indicated *uncertainty* about the profession while also expressing an immediate need for change. Responses in this category also included the need for *advocacy* and *recognition* ($n=22$, 2.8%), continued *education* and *research* ($n=20$, 2.6%), and *licensure* and *certification* ($n=19$, 2.4%).

Mixed perceptions about the direction of the profession (11.6% of responses)

Some participants viewed the direction of the profession as a mix of positive and negative perceptions. Responses in this category typically included simultaneous feelings of hope and concern expressed with words such as *growth* ($n=17$, 2.1%), *hope*, *potential*, *opportunity*, and *excitement* ($n=17$, 2.1%) along with *concerns*, *challenges*, *confusion*, and *disappointment* ($n=18$, 2%).

Responses that were distributed across different valences

While most response categories had a primary valence, either negative, positive, or mixed, some response categories were distributed more evenly across different valences. That is, this category included all valences—positive, negative, mixed, and an imperative. While the frequency of responses for any one valence was not high, taken as a whole, they provide insight into the divergence of responses across valences. For example, while the majority felt positively about *advocacy* and *recognition* ($n=39$, 5%), others expressed the imperative that advocacy efforts continue ($n=22$, 2.8%); this was contrasted by mixed ($n=8$, 1%) or negative ($n=15$, 1.9%) feelings about the effectiveness of *advocacy* and *recognition*. The sum of frequencies across valences increased the percentage of respondents that were concerned primarily with *advocacy* and *recognition* to 10.7%. Similarly, divergent perceptions were expressed about *education* and *research*, with responses ranging from negative ($n=21$, 2.7%) and the need for change ($n=20$, 2.6%), to positive ($n=18$, 2.3%) and mixed ($n=3$, 0.4%). This suggests overall concerns about the current state of both *education* and *research* (8.0%), as well as *advocacy* and *recognition* (10.7%).

Summary of Sub-Themes across Categories

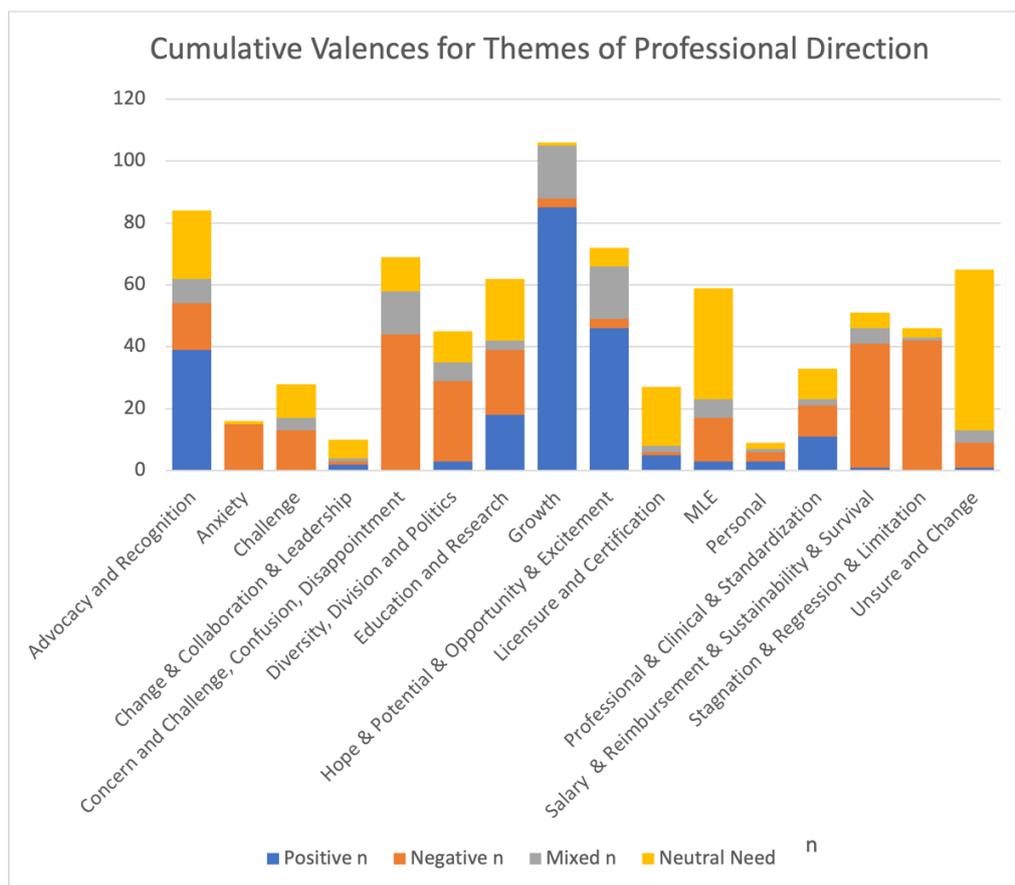
Each of these sub-themes was then collated across categories (growth, advocacy, challenge, etc.) and valences (positive, negative, mixed, imperative), with the total number of responses in each sub-theme summarized in Table 3. Note the juxtaposition of positive responses (*growth*, *hope*, *potential*, *opportunity* and *excitement*) with concerns (*challenge*, *confusion*, *disappointment*) and the range of topics in the consciousness of music therapists when thinking about the direction of the profession.

Table 3. The Direction of the Profession: Total Number of Responses in each Category.

The Direction of the Profession	n	%
Growth	106	13.6
Advocacy & Recognition	84	10.7
Hope & Potential & Opportunity & Excitement	72	9.2
Concern & Challenge & Confusion & Disappointment	69	8.8
Unsure & Change	65	8.3
Education & Research	62	7.9
MLE	59	7.5
Salary & Reimbursement & Sustainability & Survival	51	6.5
Stagnation & Regression & Limitation	46	5.9
Diversity & Division & Politics	45	5.8
Professional & Clinical & Standardization	33	4.2
Challenge	28	3.5
Licensure & Certification	27	3.5
Anxiety	16	2.0
Change & Collaboration & Leadership	10	1.3
Personal	9	1.0

Viewed from a different perspective, Figure 2 provides a visual representation of each sub-theme by type of response (positive, negative, mixed, neutral), providing an overview of the type of response in each sub-theme.

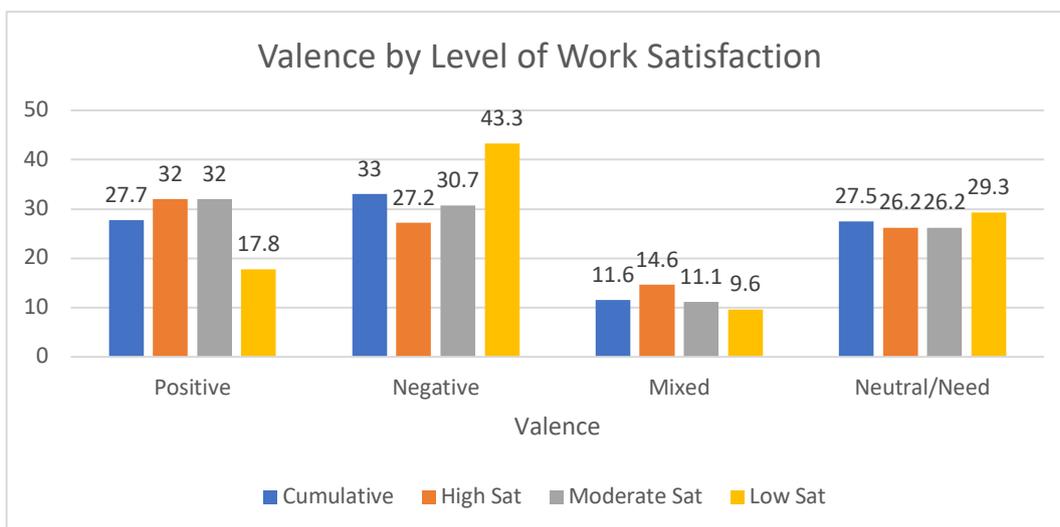
Figure 2. Distribution of Sub-themes and Valances when Considering the Direction of the Profession.



Direction of the Profession by Level of Work Satisfaction

In addition to examining the responses of music therapists as a whole, we also examined their responses by levels of work satisfaction, with clear differences emerging between music therapists who reported high ($n=206$), moderate ($n=368$), and low work satisfaction ($n=208$). Music therapists who reported high work satisfaction reported positive perceptions about the future direction of the field ($n=66$, 32.0%) with the same frequency as music therapists with moderate work satisfaction ($n=118$, 32.0%), though these positive comments were markedly higher than music therapists who reported low work satisfaction ($n=37$, 17.8%). Music therapists who reported high or moderate work satisfaction also reported negative perceptions about the future direction of the field at similar response levels: 27.2% ($n=56$) of respondents reporting high work satisfaction had negative perceptions about the direction of the field, and this was only slightly higher ($n=113$, 30.7%) for those with moderate work satisfaction. Not surprisingly, music therapists with low work satisfaction reported the highest frequency of negative perceptions ($n=90$, 43.3%) regarding the direction of the field. Figure 3 provides a summary of responses in each of the major categories of response, which are then described in detail below.

Figure 3. Valence of Responses by Level of Work Satisfaction.



High work satisfaction

Music therapists who reported high work satisfaction had marginally more positive perceptions regarding the direction of the field ($n=66$, 32.0%) than negative ($n=56$, 27.2%). This was followed in frequency by mixed perceptions ($n=30$, 14.6%), an imperative (i.e., need) for the profession ($n=28$, 13.6%) and a neutral comment not related to a need ($n=26$, 12.6 %).

Positive perceptions about the direction of the profession

Growth ($n=35$, 17%) was the most frequent positive response regarding the future of the profession for participants with high work satisfaction. *Hope* and *potential* for the field ($n=11$, 5.3%), along with a positive perspective regarding the effectiveness of *advocacy* and *recognition* ($n=11$, 5.3%), comprised the most common positive responses for this group.

Negative perceptions about the direction of the profession

Negative responses were distributed among several categories, with the highest frequency

being issues of *concern* and *challenge* ($n=16$, 7.8%) followed by negative perceptions related to current *education* and *research* ($n=11$, 5.3%), along with concerns about *stagnation* and *regression* ($n=10$, 4.9%). Another group of responses ($n=7$, 3.4%) addressed the negative impact of issues related to *diversity*, music therapy *identity*, and *division* within the profession.

Mixed perceptions about the direction of the profession

Mixed positive and negative comments were distributed with lower frequencies among several categories of response. These participants had mixed feelings about *hope* and *potential* for the future ($n=7$, 3.4%), while at the same time negatively characterizing problems related to *diversity*, music therapy *identity*, and *division* ($n=5$, 2.4%). Other categories that had mixed positive and negative responses included *growth* ($n=4$, 1.9%), which was accompanied by a variety of *concerns* and *challenges* ($n=4$, 1.9%).

Neutral comments

Some participants ($n=15$, 7.3%) felt *unsure* about the future of the profession or stated that the profession needed to *change*. These responses did not have a discernable valence.

Imperative for the profession

The most commonly reported imperatives for the profession were related to the *Master's Level Entry* ($n=10$, 4.9%) and *licensure* ($n=4$, 1.9%), along with other *concerns* and *challenges* ($n=5$, 2.4%) that were expressed as needs.

Responses distributed across different valences

Responses related to *hope* and *potential* ($n=20$, 9.7%) were distributed primarily in positive ($n=11$, 5.3%) and mixed ($n=7$, 3.4%) valences, reflecting the differing perspectives of respondents. *Advocacy* and *recognition* ($n=19$, 9.2%) were concerns that were perceived as mostly positively ($n=11$, 5.3%), though they also included mixed, negative, and imperative responses ($n=8$, 3.9%). Issues related to *diversity*, music therapy *identity*, and *division* ($n=17$, 8.3%) were perceived as having a mostly negative or mixed impact on the field ($n=12$, 5.8%), while other comments ($n=5$, 2.4%) saw *diversity*, *identity*, and *division* issues as imperatives to be addressed. The final category of importance for this group was *education* and *research* ($n=17$, 8.3%) which had a mixed ($n=3$, 1.5%) or negative ($n=11$, 5.3%) valence for some, and was an imperative ($n=3$, 1.5%) for others.

Moderate work satisfaction

Music therapists who reported moderate work satisfaction had marginally more positive perceptions regarding the direction of the field ($n=118$, 32.0%) than negative perceptions ($n=113$, 30.7%). This was followed in frequency by an imperative (i.e., need) ($n=28$, 13.6%), neutral comments not related to a need ($n=26$, 12.6%), and finally mixed perceptions of the direction of the profession ($n=30$, 14.6%).

Positive perceptions about the direction of the profession

The highest frequencies of positive responses concerned *growth* ($n=36$, 9.8%) and *hope* ($n=22$, 6.0%), along with a positive view about the effectiveness of *advocacy* and *recognition* ($n=21$, 5.7%) and positive perceptions about current *research* ($n=11$, 3.0%).

Negative perceptions about the direction of the profession

The highest frequencies of negative responses were in the categories of *salary* and

sustainability ($n=18$, 4.9%) which were connected to *stagnation* and *regression* ($n=18$, 4.9%). Additionally, *anxiety* ($n=16$, 4.3%) and concerns about *politics* and *division* within the profession ($n=13$, 3.5%) increased some participants' *concerns* and *confusion* ($n=8$, 2.2%) about the future of the profession.

Neutral comments

When participants provided a neutral comment, it was primarily related to feeling *unsure* about the future of the profession ($n=26$, 7.1%).

Imperative for the profession

When participants identified an imperative (i.e., need) for the profession, they focused on *Master's Level Entry* ($n=21$, 5.7%), expressing the belief that this topic had a major impact on the future of the profession.

Low work satisfaction

Music therapists who reported low work satisfaction included considerably more negative comments about the direction of the field ($n=90$, 43.3%) than positive comments ($n=37$, 17.8%), along with a small number of mixed comments ($n=20$, 9.6%). Importantly, a higher number of comments related to an imperative (i.e., need) ($n=61$, 29.3%) were voiced by this group.

Negative perceptions about the direction of the profession

Negative perceptions about the direction of the profession were distributed over a range of topics. These included myriad *concerns* and *disappointments* ($n=20$, 9.6%) about where the profession is headed, along with feelings of *stagnation* and *limitation* ($n=14$, 6.7%) and worries about the ability of the profession to *survive* ($n=13$, 6.3%). Additional negative comments related to *salaries* and *reimbursement* ($n=8$, 3.8%), various other *challenges* ($n=7$, 3.4%), issues of *division* and *diversity* in the profession ($n=6$, 2.9%) and the MLE decision ($n=5$, 2.4%).

Positive perceptions about the direction of the profession

The most reported positive comments were found in the category of the potential for *growth* for the profession ($n=14$, 6.7%). Positive comments related to current *research* ($n=7$, 3.4%) and *advocacy* ($n=3$, 1.4%) were also reported.

Imperative for the profession

A small number of participants identified an imperative for the profession to address. The primary areas identified were *education* ($n=9$, 4.3%) and *advocacy* ($n=8$, 3.8%).

Responses that were distributed across different valences

Several response categories were distributed across different valences. *Concern* and *disappointment* included mixed ($n=5$, 2.4%) and neutral ($n=3$, 1.4%) responses along with negative ($n=20$, 9.6%) responses. Being *unsure* about the future included negative ($n=5$, 2.4%) and imperative ($n=11$, 5.3%) responses, while *advocacy* was perceived as either an imperative ($n=8$, 3.8%), positive ($n=7$, 3.4%), negative ($n=4$, 1.9%), or mixed ($n=3$, 1.4%) valence. While *growth* was perceived positively by most respondents ($n=14$, 6.7%), it also included mixed ($n=5$, 2.4%), negative ($n=1$, 0.5%) and neutral ($n=1$, 0.5%) valences.

Perceptions About AMTA as a Professional Organization

Two questions, one in matrix format, were posed to gain insight into music therapists' perceptions of their professional organization, AMTA, and a summary of these responses follows. Of the 989 respondents, 56.83% indicated they were members of AMTA and 43.17% indicated they were not. The majority (66.66%) valued the work AMTA did to further the profession with government and other professional organizations, and a majority (65.52%) also valued the work AMTA did in the community. However, there were a number of areas where respondents perceived a need for organizational improvement. In response to the general statement "AMTA serves the profession well," 53.35% somewhat or completely agreed, while 20.43% neither agreed nor disagreed and 21.76% somewhat or completely disagreed. When this question was asked from a personal perspective ("AMTA understands my needs"), responses were distributed evenly across all three valences, with 36.92% somewhat or completely agreeing, 28.92% neutral, and 34.16% somewhat or completely disagreeing. A similar distribution was observed again when respondents were asked about the extent to which AMTA was preparing for the future ("AMTA has a plan for the future that I believe in"). In response, 34.56% somewhat or completely agreed, while 28.92% were unsure or neutral, and 26.99% somewhat or completely disagreed. Almost half (49.02%) reported that AMTA somewhat or completely understood the profession as a whole, while 28.66% somewhat or completely disagreed and 22.31% were neutral. Similarly, exactly half (50.0%) somewhat or completely agreed that AMTA was responsive to changes in the profession, while 26.89% somewhat or completely disagreed and 23.11% were neutral. Finally, when asked if AMTA membership was good value for the money, 28.58% somewhat or completely agreed, while 45.82% somewhat or completely disagreed and 21.6% were neutral.

Discussion

Future Plans for the Next Five Years

The most striking aspect of the results is their complexity. The vast majority of music therapists (73%) stated that they intended to stay in the field, with their responses imbued with an enthusiasm that suggests a workforce that is passionate about improving their knowledge, skills, and the profession as a whole through *growth* (49.6%) and by *expanding their knowledge and work beyond music therapy* (17.9%). A second group (20.5%) expressed their intentions to *continue* their careers without indicating immediate professional growth, while a smaller group were *unsure* or *reevaluating* their work lives (6.1%). Taken as a whole, these data suggest music therapists are dedicated professionals who are enthusiastically committed to the profession, providing a sense of optimism for the future. However, when responses are examined by levels of work satisfaction, increased complexity emerges, with individual differences in response categories providing important insights into differences in the experiences, hopes, and challenges of music therapists in each of these groups.

Future plans: Differences in levels of satisfaction for staying or leaving

Levels of work satisfaction played a significant role in revealing participants' intentions about staying in or leaving the field. While 81.3% of music therapists with high work satisfaction and 74.3% of those with moderate satisfaction were likely to stay in the field, only 62.9% of those reporting low satisfaction intended to stay. Differences in work satisfaction levels were also evident in responses from music therapists who were undecided about whether to stay or leave, with the highest percentage of undecided music therapists in the moderate satisfaction group (15.1%) followed by the low satisfaction

group (12.4%). Contrastingly, only 4.8% of highly satisfied music therapists were undecided.

Significantly, when the *undecided* and *leaving* categories were combined, 34.8% of responses from music therapists with low work satisfaction tallied in this combined category. This is certainly a sobering statistic, especially when compared to music therapists who reported high (12.5% combined) and moderate (20.7% combined) satisfaction, highlighting the impact of music therapists' work lives on their future plans. The relationship between music therapists' experiences of low job satisfaction and their plans to leave or reevaluate staying in the profession is supported by recent research by Branson (2023), who found that there were three factors that impacted the decision to leave the profession: job satisfaction, feelings of isolation, and a burden of advocacy. These concerns provide a focus for AMTA regarding advocacy and support for members. This could include, but is not limited to, targeted efforts to improve salaries and work conditions for music therapists who experience low work satisfaction, and parallel considerations among education and training programs about how to support their graduates in navigating workplace challenges, including an understanding of the impact of workplace culture on the everyday duties and experiences of music therapists.

Professional Goals in the Next Five Years

Professional goals aspired to by music therapists were revealed in the following categories: *growing*, *continuing*, *expanding beyond music therapy*, *reevaluating*, *retiring*, *unsure*, *personal*, and *returning* (see Table 2). The first three categories comprised 88% of responses, demonstrating participants' positive commitment to the field. *Growing* was overall the most prevalent category, indicative of almost half the respondents (49.6%), with *continuing* (20.5%) and *expanding beyond music therapy* (17.9%) accounting for a further 38.4% of responses.

Not surprisingly, music therapists who reported high work satisfaction also reported the highest percentage of responses related to *growing* (56.2%), typified by comments related to plans for expansion or development such as: *Expanding my business, opening a new location, and providing more jobs for awesome music therapists!*, or *Expanding access to NICU music therapy*, and *Pursuing further education*. However, the relatively small decrease in responses related to *growing* communicated by moderately satisfied (50.1%) and low satisfied (42.4%) music therapists suggests a remarkably resilient workforce who, despite the challenges they perceive in their workplaces, are still motivated to grow.

Music therapists who reported they were *continuing* tended to do so at similar rates across all three levels of satisfaction (see Table 2). For example, this included statements such as: *Remaining a music therapist at this time, hopefully staying full time in hospice work where I feel most fulfilled*, *Continuing to be a clinician's voice in AMTA and for the field*, and *Continuing to be a music therapist* and were illustrative of a shared intention amongst music therapists to sustain their current practice.

Work satisfaction levels also impacted music therapists' intentions to *expand beyond music therapy* with only 9.6% of music therapists reporting high satisfaction intending to expand beyond music therapy, compared with 18.4% moderately satisfied music therapists, and 25.2% of music therapists who reported low satisfaction. These responses provide insights into respondents as a whole. While the majority of music therapists intended to grow, nearly a fifth of moderately satisfied music therapists and a quarter of low satisfied music therapists sought to do this by *expanding beyond music therapy*.

Challenges identified in professional goals

Individual comments shared by respondents in the *expanding beyond music therapy* category

provided additional evidence of this intention, with at least half of the responses indicating clear plans to leave the field. Examples included *Going back to school in a new career path*, and *Maintaining my certification, but seeking a different career*, while other comments indicated a path forward into another field with the hopes of maintaining some music therapy practice: *Trying to transition to a business involving media sales and some private practice*, or *Furthering my career as a health coach, music therapy a few times a week*, or *Doing music therapy as a side job*, and *Continuing with small music therapy contract caseload while attempting to start a new business unrelated to music therapy*.

Taken as a whole, these responses suggest that these music therapists were striving to create better circumstances in their lives, and that a career in music therapy did not adequately meet their needs. Further, disappointment in their career was palpable in some responses, such as the following: *Leaving the field. I can't support my family with a career as a music therapist*, or *Not going back to MT*. Again, finances often played a role in this decision, demonstrated in the following comments: *Becoming a recreational therapist or accepting a position where I earn a sustainable wage*, and *Finding a financially stable situation*.

The theme of financial struggle was reiterated in other categories as well. For example, among the music therapists who reported that they were *continuing*, statements they provided suggested their choice was often a compromise motivated by financial needs that took precedence over their professional growth. This was exemplified by comments such as the following: *Still being at my job to provide health insurance for my family*, or *Adding more hours to my work week so that I can make a better salary*, or put simply, *Working and Surviving*.

Other comments in this category illuminated other stressors that impacted work satisfaction. For example, respondents shared concerns about finding fulltime positions, and these concerns often intersected with concerns about financial security: *Continuing to plug away at my job and continue working a second almost full-time job in order to make ends meet*, and *Diversifying my work load so that I don't have "all my eggs in one basket" since there aren't any FT positions in my area*. Finally, another group of music therapists suggested that *continuing* involved a struggle of some sort, reflected in comments such as: *Try to stay the course, hang in there*, or *Staying within the field as much as possible*, and *Surviving, trying to stay in the profession to push for change*.

When these responses are examined as a whole, they reveal the myriad ways that music therapists aspire to create better futures for themselves. Most of the music therapists who participated reported work experiences and related opportunities that allowed them to thrive, while others were hopeful about creating the change they needed to be fulfilled in their chosen profession. In contrast, only a small number of music therapists had firm plans to leave the profession, this being primarily related to experiencing low work satisfaction. And while one might be reassured that 73% of music therapists planned on staying in the field by *growing*, *expanding*, and *continuing* their work, some music therapists reported plans to remain in music therapy because this was their first chosen career and they felt that they had few other options, having spent much time and money on their education. Indicative of this struggle were comments made by a number of music therapists who intended to complete a graduate degree, but planned to do so in another field, often expressing the need not only for better salaries and benefits, but also as a means of garnering appropriate professional and personal respect. Even within the *growing* category, music therapists expressed dissatisfaction with their current situations, though they remained fully committed to their profession. The experience of leaving the profession of music therapy was examined by Branson (2023) who described a developmental process of steps taken when leaving the profession. Branson found that after becoming dissatisfied with a job, coping with the challenges, and searching for a new and better job, the next step was to weigh other options, including graduate school, often in another profession (2023). This attempt to cope and find ways to make the profession work was evident in

this study as well in the categories of *expanding beyond music therapy* and *reevaluating*.

Taken together, this data suggests that while the profession provides opportunities for growth for many music therapists, this is not experienced equally, especially for those music therapists who report low work satisfaction. These music therapists shared persistent problems with work opportunities, salaries, and benefits in their music therapy position, to the extent that they were searching for creative ways to use their education, training, and skills in other fields. These problems were prevalent enough to hint at systemic problems that go beyond the personal experiences of some music therapists, and may have deeper roots in the ways that the profession is perceived by other health care and education professions, and perhaps even the health insurance industry itself. Kern and Tague (2017) articulated similar concerns in their international survey of music therapists, also reporting that while music therapists were optimistic about their work, many felt underpaid:

Due to ongoing challenges related to recognition and government regulation of the field as an evidence-based and well-funded healthcare profession, most individuals work part-time music therapy jobs and feel underpaid. Yet, many music therapists have a positive outlook on the field's future (p. 255).

The Direction of the Profession

Music therapists' perceptions regarding the direction of the profession provide further insight into the strengths and challenges of the field as a whole. While the majority of music therapists viewed their own futures positively, with *growth* and *expanding beyond music therapy* being the largest categories of response, they perceived the direction of the profession quite differently. Only one-third of music therapists viewed the direction of the profession positively, with another third holding a primarily negative view, and a further third reporting an imperative for some change in the profession. Respondents shared concerns about *advocacy* and *recognition* (10.7%), *education* and *research* (7.9%), the *masters level entry* decision (7.5%), and issues related to *diversity*, *internal divisions*, and *politics* (5.8%). Furthermore, while 22.8% of respondents identified *growth*, *hope*, *excitement*, and *opportunity* when thinking about the future of the profession, this often included a negative valence related to *challenges*, *confusion*, *disappointment*, *salaries*, *survival*, *sustainability*, *stagnation*, and *limitation*. Comments within each of these codes suggest that for many music therapists, despite their skills and motivation, it has been difficult for them to survive, let alone, thrive.

The Direction of the profession: Differences in levels of satisfaction

Work satisfaction levels also had a significant impact of music therapists' perceptions about the direction of the profession. While 32% of music therapists reporting high and moderate satisfaction included positive comments, this was only the case among 17.8% of music therapists reporting low satisfaction. In parallel, 43.3% of music therapists reporting low satisfaction included a negative comment about the direction of the profession, in consort with 30.7% of moderately satisfied and 27.2% of highly satisfied music therapists. Mixed valences, where both positive and negative statements were juxtaposed, revealed fewer differences among the three groups, with music therapists reporting high satisfaction having the highest percentage of mixed responses (14.6%), followed by those reporting moderate satisfaction (11.1%), while the low satisfaction group had the fewest number of mixed responses (9.6%).

Taken together, these data provide further indication of the juxtaposition of experiences music therapists have professionally. While many are happy and thriving in their careers, experiencing high work satisfaction, those music therapists reporting moderate work

satisfaction appear to be experiencing professional challenges while maintaining a commitment to the profession, while a third group, comprised primarily of music therapists reporting low work satisfaction, are experiencing ongoing professional challenges and limitations that suggest a future of questionable sustainability.

Perceptions About AMTA

The direction of the profession of music therapy in the USA very much depends on AMTA and the collective choices organizational leaders make to move the field forward, with survey respondents providing insights into essential issues they believe will impact their futures. And while it is important to note that survey data were collected in October 2019, before the outbreak of COVID-19, responses appear prescient in predicting the existential precariousness and divisions that have beset the AMTA since 2019. While respondents reported valuing the work AMTA does to further the profession, there were a number of areas where participants perceived the need for organizational change. Only half of respondents (50.0%) agreed that AMTA was responsive to changes in the profession, and even fewer respondents—just over one-third (36.92%)—perceived that AMTA understood their needs. In contrast, more than half of respondents did not feel AMTA understood their needs, and only half perceived the field was being well served by AMTA in terms of their responsiveness to change. Furthermore, about two-thirds of respondents perceived their professional future as uncertain, and only about one third (34.56%) agreed that AMTA had a plan for the future they believed in. These findings may provide some insight into the low levels of AMTA membership reported by music therapists (only 56.83% of participants were AMTA members), and the ongoing sense of uncertainty about the financial future of AMTA.

Limitations and Recommendations for Future Research

Survey data were collected in October 2019 and as such, may not accurately reflect the responses of music therapists in the United States today. However, there is nothing to suggest that these responses are not representative, given the difficulties that AMTA has experienced in the last few years. In addition, this study occurred before COVID-19, and it is not known how, if at all, the pandemic has impacted music therapy jobs and professional opportunities. Future studies may look at similar questions to determine what changes, if any, have occurred in the music therapy profession, both in the USA and in other countries.

Music therapists at all levels of satisfaction in this study brought up concerns with challenges related to job opportunities, salaries and benefits, professional limitations, and the constant need to advocate for professional recognition. These concerns were supported by Branson's (2023) study which found similar struggles with salaries, lack of opportunities for advancement, and issues of recognition among participants who had left the profession. Further research might examine early career music therapists to understand their particular challenges. Research is also needed to identify the number of new professionals who leave the profession of music therapy in various countries where the profession has been established. It would be interesting to know what other professions such as nursing, occupational therapy, child life, and social work, as examples, are experiencing in terms of challenges, entry level salaries, and career attrition.

Conclusion

At an individual level, music therapists are remarkably optimistic about their own futures, primarily oriented to growing professionally and advancing the field as a whole. This

optimism is significantly impacted by the level of work satisfaction a music therapist experiences, with music therapists who experience low work satisfaction reporting major challenges to their work lives and their propensity to continue in the field. This juxtaposition of experiences suggests a collective response that simultaneously celebrates the optimism reported by the vast majority of music therapists while also addressing underlying issues experienced by approximately one quarter of music therapists, who report struggles that impact their ability to sustain themselves—let alone grow and thrive.

Contrastingly, music therapists reported less optimism about the direction of the field, and this appears to be connected to their perceptions of AMTA, which the majority of music therapists reported do not understand their needs or have a plan for the future they believe in. Further, the number of music therapists who report uncertainty about their futures, and sought to advance their careers by completing degrees in, or moving into, other fields, reflects ongoing organizational issues regarding advocacy, professional recognition, and salaries that allow music therapists to feel professionally valued and to meet their financial needs. Financial sustainability is an ongoing issue experienced by music therapists (see also Meadows et al., 2022a), and must be addressed systemically in order to sustain and advance the field.

Finally, these data add to the current experiences of many music therapists in the United States, who informally report that they feel the profession is at a crossroads. At one level, the field is advancing, with many music therapists reporting meaningful and satisfying work lives that provide a level of optimism that is both heartening and exciting. Simultaneously, underlying workforce challenges, expressed in particular by music therapists who experience low work satisfaction, point to systemic issues in the field that have been ignored for too long. The confluence of these underlying workforce issues, the sociopolitical upheaval experienced in the United States in the past few years, and the significant challenges experienced by AMTA during COVID-19, have all intersected to bring us to this moment of organizational uncertainty, which provides the association with an opportunity to rebuild in ways that allow the voices of music therapists to be heard and understood.

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Appendix

Music Therapists' Perceptions of AMTA

	COMPLETELY AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	COMPLETELY DISAGREE	TOTAL
AMTA serves the profession well.	17.77% 174	39.94% 391	20.43% 200	17.26% 169	4.60% 45	979
AMTA is responsive to changes in the profession.	14.42% 141	35.58% 348	23.11% 226	19.94% 195	6.95% 68	978
AMTA understands my needs.	9.13% 89	27.79% 271	28.92% 282	24.62% 240	9.54% 93	975
AMTA supports me professionally.	14.17% 138	33.37% 325	26.49% 258	17.04% 166	8.93% 87	974
AMTA understands the needs of the profession as a whole.	14.94% 146	34.08% 333	22.31% 218	21.19% 207	7.47% 73	977
AMTA has a plan for the future that I believe in.	11.25% 110	23.31% 228	38.45% 376	18.61% 182	8.38% 82	978
I am proud of AMTA.	19.40% 189	29.06% 283	32.14% 313	12.94% 126	6.47% 63	974
I value the work AMTA does in the music therapy community.	27.94% 273	37.56% 367	23.23% 227	7.68% 75	3.58% 35	977
I value the work the AMTA does to further the music therapy profession with government, health insurance, and other professional organizations.	31.08% 304	35.58% 348	21.06% 206	6.95% 68	5.32% 52	978
AMTA leadership is open and engaged.	13.72% 134	26.82% 262	38.79% 379	13.92% 136	6.76% 66	977
AMTA membership is good value for money.	10.03% 98	19.55% 191	21.60% 211	27.12% 265	21.70% 212	977
I plan on renewing/initiating my AMTA membership next year.	33.13% 324	19.84% 194	19.22% 188	10.12% 99	17.69% 173	978
I would recommend AMTA membership to my colleagues.	25.49% 249	20.88% 204	29.48% 288	12.28% 120	11.87% 116	977