

RESEARCH | PEER REVIEWED

Music Therapists and Social Justice: Interacting With Institutions

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Abstract

In this article, I present a condensed form of research I undertook for a student assignment on how music therapists navigate working in institutions to promote social justice. My literature review highlights approaches in which music therapists integrate social justice into their work. Within the confines of this search, I did not find literature addressing how music therapists navigate a social justice agenda within institutions as their primary focus: this is the gap in the field in which I aimed to position my research. I interviewed five Nordoff and Robbins music therapists, coded my transcriptions, and developed categories and themes. Through the interviews, I found that my participants view allyship through music as valuable social justice promotion, as well as interactions beyond music including presentations, spontaneous conversations, and learning from staff. The extent to which these music therapists felt able to engage in social justice promotion was dependent on relationships within institutions, and they considered when it was less appropriate to speak out, often because of their privilege. I hope this research provides insight for the profession and prompts further exploration of how music therapists can promote social justice within institutions, particularly centring the experiences of those from marginalised groups.

Keywords: social justice; qualitative research; interviews; music therapy; power; institutions

In this article, I present a condensed form of research I undertook for a student assignment as part of the Nordoff and Robbins Master of Music Therapy programme in London, U.K. I was originally drawn to the Nordoff-Robbins approach because of what I understood to be its socio-political awareness. With more experience behind me, I am aware of more criticism of the approach and especially some more contentious aspects of its early development; I will elaborate further on this in my literature review below. That said,

throughout my training programme, I was struck by the frequent discussions between my peers, my tutors, and myself of justice, oppression and power: how we can put our power as music therapists at the service of empowering clients; how power structures impact clients and the institutions in which we work; and how we may be perpetuating oppressive power structures. This reinforced my belief that there is a responsibility for music therapists to work as activists and promote social justice through their work.

To add context to this belief, I wish to further situate my position as an author. I am writing from a place of significant privilege, which I choose to define here as systemic advantages based on aspects of an individual's identity: I am white, middle class, and educated to master's level, which grants me unearned social advantages and power (see Ahmed, 2012; McIntosh, 1989). While I have experienced some marginalisation as a queer woman (see Ahmed, 2006), I remain aware of my relative social power and the impact that this can have on my relationships with colleagues as well as clients. My desire to use this power to challenge oppressive social structures led me to build my student research project on the complexities of working for social justice as a music therapist.

Music therapists often work with people who are marginalised from and by society, whether through disability, illness, or other life experiences. I understand social justice in music therapy to comprise challenging the marginalisation that clients face, both on individual and structural levels: empowering clients to feel valued and capable; and advocating for social and structural changes that reduce oppression. This work can be made more complicated when it takes place in institutions with their own power structures and cultures, where the music therapist only works one or two days a week, as is the experience of myself and many other U.K. music therapists. I feel strongly that music therapists have the potential to contribute positively to the challenging of power structures of institutions where they work, and the way these institutions view their clients, but I wanted to know more about how this happens in practice and in context. I therefore chose to research how music therapists navigate the complexities of institutional relationships to promote social justice on a structural level, by asking the following research questions:

1. In what ways do music therapists feel able to promote social justice within the institutions in which they work?
2. In what ways are music therapists' perceptions of their work and its socio-political purpose impacted by the institutions in which they work?

Literature Review

I began my research by undertaking a literature review, in which I initially examined formulations of social justice across different fields (see for example Barry, 2005; Frederick, 2017; Miller, 1976; Nussbaum, 2000; Rawls, 1971). To acknowledge the context of my own training, I turned next to the writings of Nordoff and Robbins (2004/1971, 2007), who I felt are situated with a complex relationship to social justice. On the one hand, they use de-humanising language such as "handicapped," which may have been accepted language when their texts were originally published in the 1970s, but remains in the republished editions, and potentially enables stigmatising narratives to permeate their work (see Hadjineophytou, 2022). There has also been criticism of the way in which they suggest that race and ethnicity can be transcended, referring to cultural musical archetypes that we would now see as stereotypes (see Stige, 2001). Moreover, they seem to unreflexively wield power over their clients in potentially oppressive ways. To take one example, in their case study on Nunnu, they describe that Nunnu is "prone to be fearful, particularly of men" (2007, p. 210), but to prevent her from leaving the session, Robbins "[takes] her onto his lap" while Nunnu "struggles in silent determination" (p. 211), a physical exertion of power that seems insensitive to Nunnu's context. On the other hand,

they worked with “the individuality of each child” (2004, p. 142) and were explicit that they were not aiming to “normalise” the children with whom they worked (p. 56). This worked radically against the social norms of the time that homogenised and marginalised children with learning disabilities. My review showed me that the approach developed by Nordoff and Robbins does not automatically challenge the inherent power dynamics in music therapy. Nevertheless, I understand the approach to be radical and political at its heart, offering a fertile background to my investigation of social justice in music therapy.

I then considered ways in which approaches to music therapy engage with social justice, through a number of theoretical perspectives. These included resource-oriented music therapy (Rolvjord, 2010) and music therapy built on a politics of *empowerment* (Procter, 2001; Rolvsjord, 2004), community music therapy, and culture-centred music therapy (Ansdell, 2002; Kenny & Stige, 2002; Pavlicevic & Ansdell, 2004; Ruud, 1998; Stige, 2002, 2003; Stige et al., 2010; Stige & Aarø, 2012; Vaillancourt, 2012). I assessed dialogues between music therapy and disability studies (see Hadley, 2014; see also Bruce, 2022; Metell, 2014; Pickard et al., 2020; Straus, 2014), post-ableist music therapy (Shaw, 2019; Shaw et al., 2022), and music therapy practices that affirm neurodiversity (Davies, 2022; Hadjineophytou, 2022; Pickard, 2019). I considered ways in which music therapy has embraced queer theory (Fansler et al., 2019; Gumble, 2020; Hardy & Monypenny, 2019; Leza, 2020; Scrine, 2019) as well as incorporating feminist perspectives (Curtis, 1990; Edwards & Hadley, 2007; Hadley, 2006; Hadley & Edwards, 2004; Hahna, 2013; Rolvsjord & Hadley, 2016). I also looked at anti-racism and multicultural competency in music therapy (Belgrave & Kim, 2020; Napoleon, 2021; Norris, 2020a, 2020b; Norris & Hadley, 2019).

Also relevant to this theme is music therapy as an anti-oppressive practice, described by Baines (2013b) as “a way of addressing the ‘problems’ that our clients present within the context of their sociopolitical reality and resourcing both ourselves and persons we serve to address social inequity toward the goal of creating a socially just future” (p.4; see also Baines, 2013a; Baines & Edwards, 2015, 2018; Pickard, 2023). Perhaps the most radical discussion of music therapy and oppression that I found comes in Whitehead-Pleaux and Tan’s (2016) book. It is comprised of a series of chapters written by individuals belonging to minority cultures and is interspersed with analyses of discrimination, oppression, privilege, and allyship. The authors draw on theories from beyond music therapy to ground their focus on the need for music therapists to reflect on their own identity, privilege, and role in perpetuating oppressive structures, working towards effective allyship that improves society for everyone (referenced texts on oppression, allyship, and social justice include Ayvazian, 2010; Bennett, 1993; Bishop, 2002; Broido & Reason, 2005; Collins, 1990; Edwards, 2006). While Whitehead-Pleaux and Tan highlight the need for shared working, this is focused on communities of music therapists, and not the additional complexities of navigating relationships between music therapists and other colleagues and institutions.

I moved on to survey the position of music therapists within institutions (see for example Annesley, 2014; Pavlicevic, 2003; Rickson & McFerran, 2014; Roman, 2016; Strange et al., 2017). After this I took a broader approach to consider the fields of social justice in healthcare (see for example Cole, 2007; Daniels, 1985; Danis, 2021; Kanagasigam et al., 2022; Rai et al., 2022; Villaran, 2022; Wheeler & Dodd, 2011) and education (see for example Ayers et al., 2009; Griffiths, 2003; Stovall, 2006), as common fields of work for music therapists.

Curtis (2012) writes, “Music therapists have been informally integrating [social justice] into their work, doing so independently and for a considerable time prior to any formal representation in the music therapy literature” (p. 209). My initial literature overview suggests that music therapy literature is now catching up with this statement, and music therapists from a range of approaches are engaged in both practical and theoretical

attempts to promote social justice. Social justice is also explored in the fields of healthcare and education. However, Curtis's statement is still relevant when considering literature concerning how music therapists or other professionals navigate a social justice agenda within institutions. There is some literature where this has been discussed (for example Shaw, 2019), but it has been secondary to other research focus areas, and I was able to find very little beyond this. Nevertheless, I felt certain that music therapists were reflecting on this issue and working with institutions in radical ways to promote social justice, even if they were not writing about it. This is what I wanted to find out more about, and the gap in the field in which I aimed to position my research.

Data Collection, Analysis, and Findings

I received ethical approval for this research from the Nordoff and Robbins Research Ethics Committee, after giving particular consideration to anonymising all identifying information of therapists, clients, and institutions. Participants provided written informed consent, and I repeated key information from the consent forms at the beginning of each interview to ensure participants were fully informed about study purposes and procedures.

I took a qualitative approach to my research, collecting data through semi-structured interviews with five qualified Nordoff and Robbins music therapists over Zoom (for interview schedule, see Appendix). I chose to interview only music therapists employed by Nordoff and Robbins in the U.K., as this was the most practical option during my studies. I realise that it limits my data, in particular resulting in data that emphasises co-creation as a central tenet of music therapy, which is not the case in all approaches. Future research would need to work with therapists from a range of training backgrounds. I used purposive sampling to invite participants to interview, a technique for identifying individuals who "are most likely to yield appropriate and useful information" (Kelly, 2010, p. 217), enabling me to interview music therapists who already had an interest in social justice. I did not ask participants in advance for Equality, Diversity and Inclusion (EDI) data, and only one of my interview questions asked about participants' own social context (see Appendix). While this led to fruitful discussions about privilege, I was not able to reflect in much detail on participants' positionality in relation to this discussion. I reflected further on my choices after completing the research, and I have summarised these reflections later in this text.

Once I had transcribed my interviews, I used a simple form of thematic analysis (Braun & Clarke, 2006). I manually coded the transcriptions, using emergent coding to draw codes from the text (Blair, 2015, p. 16). I used these codes to construct recurring categories, seeking to use my subjective interpretation of the data as "a resource rather than a problem" (Ansdell & Pavlicevic, 2001, p. 136; see also Braun & Clarke, 2022). I grouped my categories into four themes, through which I present the highlights of my data below. Table 1 provides an outline of the themes and subthemes.

Table 1. Themes and Subthemes Found in Interview Data.

Themes	Subthemes
Institutional dynamics	Staff relationships
	Presence beyond sessions
	Alignment of approach
Promoting social justice through music therapy	Witnessing music therapy
	Music changing perceptions

Themes	Subthemes
	Modelling an approach
Interactions that promote social justice	Training and presentations
	Conversations about social justice
	Learning from staff
Positionality and privilege: Choosing not to speak	Privilege and identity
	Choosing not to have the conversation
	Educating themselves
	The limitations of the role of music therapist

Theme 1: Institutional Dynamics

It became clear in all interviews that the integration of a music therapist within an institution is considered to be a key condition for social justice promotion.

Staff Relationships

Four participants noted that they felt more integrated within an institution the longer they had worked there. Belonging to a Multi-Disciplinary Team (MDT) was also highlighted as a contributor towards greater integration, with some participants mentioning the potential for shared working that this creates. Two participants commented on the difficulties of working in settings without a therapy team and another commented on the lack of a formal staff team in their refugee hostel setting. Certain inevitabilities of being an outsider were discussed, with everyone acknowledging the particular challenges of working in a setting one day a week (which is common for music therapists in the U.K.) compared to staff who are there full-time.

Presence Beyond Sessions

Three participants said that building a physical presence beyond the therapy room was one way in which they tried to integrate themselves. This might include holding group sessions in a public space, interacting with staff as much as possible, or running extra events beyond session delivery.

Alignment of Approach

The position of the music therapist within an institution was also impacted by the alignment, or lack thereof, between the therapist’s approach (referring both to the Nordoff-Robbins approach, and the therapist’s individual interpretation of this) and the ethos of the institution. For one participant, it was a “privilege” to work in a school sharing the same outlook; another participant highlighted the benefits of working with a charity that used similar language to them, which focused on strengths rather than deficits; another talked about a “click” in terms of approach with a charity who “accompany” their service users. For one participant, it was practically helpful when school staff appreciated their approach, as it increased how supportive they could be in sessions. The same participant found it frustrating when other staff members did not understand their approach, and three highlighted the challenge of working in schools that expected music therapy to work towards functional targets in a way that focused on social conformity. One participant described the uncertainty of whether a music therapy service would fit in at a refugee day

centre where all other services were practical, related to “fundamental needs for survival.”

All participants reflected on the complexities of building relationships with institutions as a part-time music therapist, suggesting that the stronger these relationships, the better the conditions for working together to promote social justice.

Theme 2: Promoting Social Justice Through Music Therapy

The participants gave a unanimous response to my first research question, that they felt able to promote social justice through sharing music therapy with staff: “I think the most positive thing I can do is [...] letting the work speak for itself.” The shared Nordoff-Robbins training background of all participants is likely to have contributed to the unanimity of sharing extracts of work, which may not be so common in other approaches.

Witnessing Music Therapy

Four participants shared stories about the significance of staff witnessing music therapy, and this enabling them to understand the process more easily than through verbal description, with one finding that “the meaning of the work [is] translated to people somehow through being able to witness it,” and another saying, “I think it was vital that [...] the way [the client] was in music therapy was witnessed.” For one participant, volunteers at a refugee day centre “understood very intuitively” through witnessing music therapy taking place that it was “co-created and shared.” Three participants referred to school staff supporting in sessions as a positive way of sharing the value of music therapy, and two talked about sharing extracts more widely with school staff.

Music Changing Perceptions

Four participants noted that staff members’ perceptions of clients could be changed through music therapy. For a pupil with possible Attention Deficit Hyperactivity Disorder, witnessing him in music therapy helped his teacher see that his behaviours were not “malicious” but an expression of his need to channel his impulsivity and creativity, and that he would benefit from a diagnosis to help him access education. Three participants explained that they were often asked to work with clients who were viewed as “problems” or “challenging,” and that through music therapy these perceptions could be challenged: “In music you see a totally different side of them.” One participant gave an example of a child with profound and multiple learning disabilities who had been diagnosed as deaf. Through music therapy, it became clear that the child was able to hear but had faced barriers to responding in other situations. Participants viewed such challenges to perceptions of marginalised individuals as acts of social justice. Music therapy can “bring people into greater understanding of the potential of a person that they might not have fully recognised.” In some cases, as detailed above, changes in perception also lead to beneficial practical changes in an individual’s life.

Modelling an Approach

Three participants talked about their power to model an inclusive approach, and the potential for this to impact staff. One participant noticed staff echoing a client’s vocalisations within a session, in the way that the music therapist might. Another noticed an increase in staff singing to pupils, and music becoming part of “the fabric of the school.” One talked about a group session in a classroom as an opportunity to “convey this different way of listening to people and valuing them.”

All five participants emphasised the social justice potential of sharing music therapy with staff: “Your allyship is [...] through music and not through words.”

Theme 3: Interactions That Promote Social Justice

One participant explained that they did not feel satisfied limiting their social justice promotion to within music therapy work, not wanting to be complicit in clients experiencing oppression beyond their music therapy sessions. A variety of ways to promote social justice beyond the music therapy work were discussed by all participants.

Training and Presentations

Three participants emphasised the opportunity to give presentations or training sessions as a potential time to share ideas not only about what happens in music therapy, but also about social justice questions. Two participants specifically mentioned neurodiversity as an area that they had brought out in presentations.

Conversations About Social Justice

Participants noted that they also had spontaneous conversations about social justice issues. For one participant, these conversations happened around reasons for referral. In a care home where institutionalisation was a big concern, they would explain to staff why they wanted to work with individuals who were less obviously ill but not given other opportunities to thrive. Two participants gave examples of talking to senior leadership in schools about where staff sourced their training, signposting training that was grounded in lived experience of autism. One participant gave an example of a patient in a hospital setting who was an asylum seeker and was discussed differently from other patients, with doubt over his right to treatment. They joined others on the MDT who continued to speak up about the patient's right to equitable healthcare, researched relevant policies, and reminded others of the patient's humanity.

Learning From Staff

A significant thread in all the interviews concerned ways in which music therapists could learn from staff. Four participants talked about learning from the expertise that staff had about their clients. This included learning how to respectfully communicate with non-speaking individuals or wheelchair-users and learning about the wider impact of the issues faced by clients. Participants valued the lived experience of staff. In a refugee day centre, many volunteers were refugees. Some school and charity staff were parents or siblings of individuals with complex needs. All participants emphasised humility and keeping their minds "as open as possible" and "opening yourself up to the learning process."

This theme offered answers to both of my research questions. Participants use training and presentations, signposting training opportunities and discussions with staff as opportunities to share social justice ideas. Participants also learn from the expertise and lived experience of staff in their institutions as part of self-reflection and working to minimise the oppression they perpetuate.

Theme 4: Positionality and Privilege: Choosing Not to Speak

All participants said that they were aware of their privilege and how it impacted when it felt appropriate to speak out about social justice issues.

Privilege and Identity

All participants spoke about the privilege of being middle class. Two of the participants highlighted other aspects of their identity that minimised their appearance of "poshness." One mentioned their accent which does not sound British, and another mentioned their

“foreign-sounding” name. One participant noticed their privilege as a non-disabled person, while another highlighted the significance of not sharing life experiences with other staff members, such as not having an autistic child. Three participants mentioned the power they have through being seen as an expert, and the consequent privilege of being heard.

Choosing Not to Have the Conversation

Four of the participants highlighted careful reflections around when not to have conversations about social justice, and awareness of their privilege played a significant role. The privilege of doing a job they loved and having time to focus on individual clients was contrasted with many staff in schools, care homes and a refugee hostel with lower-paid jobs, often too busy “getting through the day” and stretched beyond capacity. Participants were keenly aware of not wanting to appear self-righteous and with an assumption of superiority. One participant spoke about a school context, where staff “really want to do good in the world” but are not necessarily “politically-oriented.” Two participants also recognised when it was more important to listen and leave space for others to speak from their own lived experience.

Educating Themselves

Three participants highlighted the importance of continuing to educate themselves. This included ensuring their training and education came from people with lived experience. One participant told a story of how, when they interrogated their own practice with an autistic client, they noticed how their assumptions were preventing them from listening openly. The importance of constantly educating themselves was discussed partly as an important attitude in order not to perpetuate oppression, and partly to put participants in a stronger position to have conversations with others to work for social change.

Limitations of the Role of Music Therapist

Three participants talked about the limitations of their role. Two participants highlighted that it was difficult to know the wider impact of their input, especially when only working somewhere one day per week. All three considered how little they feel able to achieve as music therapists in the context of the bigger social systems that their clients, and they, are part of.

All participants explored the complex factors impacting how and when music therapists can work with their institutions to promote social justice. The privilege of being educated to a high level as music therapists, along with other areas of privilege experienced by my participants and other music therapists, suggests that it can be valuable to consider when it is less appropriate to initiate conversations about social justice.

Concluding Discussion: “Nothing About Us Without Us”

One participant told a story of a client who wrote a rap in their sessions and performed it in front of his school. This gave him a valuable opportunity to change others’ perceptions of him, rather than the music therapist communicating on his behalf. This led the participant to reflect on the phrase “nothing about us without us,” made popular in the U.K. by J. I. Charlton (2000) in his book on disability oppression and empowerment. The phrase stresses that social change is most effectively achieved when the experiences and opinions of the people it affects are centred. Although this was only explicitly discussed by one participant, the idea permeated all my interviews and provides an interesting way to connect them. The theme of allyship through music therapy, discussed by all participants, is bound to the concept of “nothing about us without us.” When music

therapy is witnessed, it offers an opportunity for clients to change perceptions of themselves. Our role as music therapists can be to use our privilege and power to facilitate this opportunity. This also relates to the theme of privilege and positionality. If people with lived experience of oppression are at the centre of social change, there are times as a music therapist when listening is more important than speaking out. It is vital to balance using our power to challenge the oppression that our clients face with using it to create space for clients to do this themselves and be heard. A key part of this is to put our power behind their ideas and the actions they may call for, to reduce the labour required of people with lived experience of oppression.

My research project showed that music therapists balance a variety of considerations when promoting social justice within institutions, and when learning from their institutions. There is not a simple separation between ways in which music therapists influence institutions and ways in which institutions influence music therapists. Interpersonal considerations including relationship-building and awareness of the dynamics engendered by privilege were factors determining participants' ability to work with their institutions towards social justice. Moreover, music therapists, institutional staff and clients are all part of the same complex social structures and hierarchies; each individual experiences oppression and privilege in different and unique combinations, which means we cannot assume the extent of any individual's capacity to work towards social justice. Most important is to continue reflecting on our own thinking and practice, striving for change and looking for opportunities to work with everyone around us to remove the barriers of systemic oppression that affect us all: "Without joining together, we will be unable to truly make movement in the dismantling of the oppressive systems" (Whitehead-Pleaux & Tan, 2016, p. 260).

Reflections

After completing my data analysis, after receiving feedback for my student research project, and again after receiving illuminating feedback from my reviewers before publication, I reflected on the limitations and omissions of my research.

My initial research questions posited a binary opposition between improving institutions and learning from institutions. With hindsight, it might have yielded more nuanced data to pose a single research question: "In what ways do music therapists feel able to work with and within their institutions to promote social justice?" Similarly, I think that my interview questions could have shown more awareness of the social system that we are all part of, understanding that staff at different levels of institutional hierarchies may have different experiences that impact their relationship to social justice work. I had started to realise this by the time I reached the conclusion of my write-up, but the more I reflect on this topic with hindsight, the more the discreet categorisation of client, staff, and therapist seems to collapse. All of us can bring our own unique perspectives to the fight for social justice. It is not enough to say that music therapists need to use our privilege to centre the marginalised voices of clients. That posits too much of a binary between the *helping* therapist in opposition to the *helped* client, which disregards the possibility for the therapist to have their own experiences of disability or other oppression, the potential for therapists to learn from and be changed by their clients, and the agency of clients to be active participants in creating social justice (as discussed, for example, in LaCom & Reed, 2014; Shaw et al., 2022). A more nuanced framework taking into account the spectrum of identity we all find ourselves on would benefit future research considering social justice work within institutions.

I found it interesting to note that participants did not discuss the ethnicity, gender, or sexuality of clients at any point within our broader conversations about social justice, and

only some referred to their own gender and ethnicity. Social justice is a broad topic, and I intentionally did not ask about specific areas as I wanted to be led by the experience of my participants. This has led to research that only highlights some aspects of social justice, and further research that more explicitly considers ethnicity, gender, and sexuality would offer a valuable contribution to the field. Similarly, I continue to reflect on whether I should have asked potential participants for Equality, Diversity and Inclusion (EDI) data. While I gathered from individual disclosures that I had some diversity in gender and ethnicity, actively learning from a diverse range of voices is impossible without gathering EDI data. As well as the practical limitations of this student project, there are ethical complexities to this, including the potential to be seen as ranking types of oppression, and the difficulty of ensuring anonymity. At the same time, interviewing a diverse range of participants would help to centre more marginalised identities within the music therapy profession, potentially highlighting lived experiences of oppression. This is especially important given that the music therapy profession in the U.K. is not representative of the diversity of the wider population. The British Association of Music Therapy (BAMT) Diversity Report (Langford et al., 2020) found that 80% of music therapists are female and 85% of music therapists are white, based on the 50% response rate across music therapists in the U.K. To avoid complicity in perpetuating societal oppression, I and any future researchers of this topic would need to consider the most ethical way to learn from diverse experiences of music therapists as well as their institutions and clients. I join many music therapists in calling for increased attention to the lived experiences of therapists with experience of marginalisation and oppression (see Swamy & Webb, 2022; see also Davies, 2022; Gipson et al., 2021; LaCom & Reed, 2014; Norris, 2020a, 2020b; Thomas, 2021).

My final reflection (for now) is about the medium of this research and writing, which does not fully embody the message of social justice it seeks to convey. Even my use of the word “client” throughout this text could be seen as inscribing unequal power relations where the therapist has all the agency, rather than reinforcing the mutuality of therapeutic relationship advocated by many approaches that seek to work in socially just ways (see for example Hadjineophytou, 2022; Leonard, 2020). While my interview participants and I all talk about the importance of attending to the voices of clients, I did not make space for this within my research. The limited scope of this research as a student project did not allow for including client voice at the time, but perhaps even this limitation is a reflection on the oppressive practices that can be embedded at all stages of music therapy training, practice, and research. There are many examples of music therapy writing that is more co-produced. Music therapists may include the words of their clients within their writing (Bakan, 2014; Hadjineophytou, 2022); some go further than this to participatory action research, including clients more actively in the process of research and disrupting traditional approaches to knowledge and expertise (Rickson, 2014; Roman, 2022; Scrine, 2019). To comprehensively explore the social justice potential of music therapy within institutions in a socially just way, further research would need to take a collaborative approach that valued the perspectives of anyone involved in a given institution. Even then, there are many ways that research can be exclusionary or harmful: every step of the process is a political choice (see Honig & Hadley, 2024), and I will consider that much more intentionally with my future work.

Moving Forward

As identified in my literature review, there has been a gap in the field regarding how music therapists interact with institutions to promote social justice, which this project has begun to consider. I hope this research will prove interesting and relevant to all music therapists. While I am aware that not all approaches are as based on co-creation or empowerment as

the Nordoff-Robbins approach can be, I believe that there are still learning points for music therapists from any approach wishing to work more actively towards social justice. Further qualitative and participatory action research gathering experience and ideas from music therapists using a wide range of approaches, institutional staff, and music therapy clients would contribute to bridging this gap, especially looking at the experience of individuals of marginalised identities. As the music therapy profession takes an increasingly active approach to anti-oppression, researching these interactions will improve our capacity to work together with our institutions to promote social change that benefits everyone.

About the Author

Kate Apley trained as a music therapist with Nordoff and Robbins, completing their Master of Music Therapy course in July 2022. Since then, she has worked for Nordoff and Robbins Music Therapy across North London and Central England across schools, care homes and hospitals. Kate is interested in the social justice power of music therapy and the potential for music therapists to challenge oppression through and around their work.

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Appendix

Semi-Structured Interview Schedule

1. Could you tell me some of the different Partner Organisations you've worked in as a music therapist? [*Partner Organisations is a phrase used by Nordoff and Robbins: these are institutions that the charity collaborates with by providing music therapists to work there.*]

Depending on the answer, we will decide together which 1 or 2 institutions will be the most appropriate to discuss for the rest of the interview—for example, institutions where the therapist has worked for a substantial amount of time.

2. To what extent have you felt part of a team, or well-integrated in the institution?
3. To what extent have you felt that the Nordoff-Robbins approach, and your own approach to music therapy, have fit in with the values of the institution, or been welcomed by the institution?
4. Can you think of a time you felt you had some impact on the way an institution perceived or worked with a client? Tell me about that.
5. After that happened, did you see any ripple effects or wider changes in the values or daily working of the institution?
6. What about the other way round, can you think of a time your institution had an impact on the way you worked with a client?
7. In what ways did that experience bring about self-reflection, or impact your work or values as a music therapist more widely?
8. Have you ever had explicit conversations with your institution about social justice, or about each of your socio-political values?
9. In what ways do you think that your own broader social context has impacted your interactions with people working in your institution?