
POSITION PAPER | PEER REVIEWED

A Defining Moment: Context and Capacity to Shape Our Practice and Work

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Abstract

In this article, the author offers exploration and insight, building on Dr. Carolyn Kenny's metaphor of the great river of humanity that flows underneath all music therapy practice. Adapted from a recent music therapy regional conference keynote, the author draws on local contexts and themes of resource, relationship, and refusal, to frame insights for readers to apply to their reflexive thinking in music therapy. These ideas are grounded on examples from theory and practice representing scholarship in areas such as Indigenous ways of being, resource-oriented music therapy, anti-colonial framing, human flourishing, cultural humility, and Disability justice. From this foundation for reflexivity, the question is asked, "How would we define music therapy differently if we are reframing in these ways?" A definition for music therapy is offered from this context that is not meant to be the newest and best definition, but to give a grounded example of how our resource- and ecologically-oriented dispositions should shape our thinking. Instead of viewing ourselves in fixed roles and as centered with the most resources for change in therapeutic contexts, we are invited to a sustained reflexive process through a journey of capacity building that supports transformation.

Keywords: reflexivity; resource-oriented; noninterference; defining music therapy; anti-colonialism

With adaptations for readers, this paper includes the content of my keynote address from the Great Lakes Region American Music Therapy Association (GLR-AMTA) Conference in Milwaukee, Wisconsin on March 8, 2024. I subsequently use some of the region's local context for exploration and insight. The intention of the speech was to provide meaningful context and encourage continued capacity building for reflexive thinking in how we as music therapists define our work. There is a distinct thread of honoring humanity and

human rights throughout. As part of the speech, I also offer a definition of music therapy based on the content within the message.

Introduction

This article explores how reflexive aspects shape our definition of music therapy, incorporating how various contexts and moments influence our understanding and practice. By reflexive aspects, I mean elements that shape our awareness of meaningful influences (i.e., historical, sociocultural, relational, political) on our perspectives. As Bruscia (2015) stated, reflexivity is the foundation for integral thinking in music therapy.

The experience of “defining” will resonate with many of us, having been in situations where we’re asked to explain music therapy. When in those situations, I often define music therapy slightly differently depending on the context. Thinking of these experiences and the contexts that continually frame my thinking about my work in our profession have led to deeper insight that may resonate with music therapists more broadly.

This article explores this through stories, ideas, imagery, as well as includes recent GLR-AMTA region history. While readers have different contexts in the places they inhabit, this article is purposely framed using situated knowledge that can transfer beyond its local context. This extension of local knowledge rests on anti-colonial framing and the truth that colonization happened globally, so that we can learn everywhere from its presence anywhere. The ultimate intention for this article is to support a deepening of the ground that defines our work.

Land Acknowledgement

Related to the local context, it is important to acknowledge the land and its rightful stewards, as I did during the keynote address in Milwaukee. This land acknowledgment is also relevant to the broader understanding of this article and to the reflexivity it encourages for our music therapy work.

There have been many peoples in and around this land and I can’t highlight them all now—but I do want to highlight the connection of the Myaamia people. In their origin story, the first Myaamia people came out of the water and that place was called “the coming out place” (MyaamiaCenter, 2022). As they came out, they told each other, “grab hold of tree limbs.” They grabbed hold of those limbs and pulled themselves out of the water, and right there along the bank of a river, they built a town, and stayed there for some time.

Wisconsin is an English spelling of a French version of a *Myaamia* word (Reid, 2023). They called the local river Meskousing which means “this stream meanders through something red¹.” In contrast, in 1673 a European explorer traveled by canoe, and wrote about the river, “it is very wide; it has a sandy bottom, which forms various shoals that render its navigation difficult” (Wisconsin Historical Society, n.d.). Think about the difference between these two descriptions. The former is the language of relationship with the land, while the latter is one of domination. The settler colonial purpose for engaging the land and therefore view of the river was one of appropriation for private development and profit. Historically, Indigenous engagement with the land is one of relationship and stewardship. According to Métis-Cree writer Mike Gouldhawke (2020), speaking in a Canadian context but also applicable broadly:

¹ “Something red” here refers to reddish sandstone color of the cliffs and rocks along parts of the Wisconsin River.

Non-Native people, both those for and those against Indigenous resistance, often oversimplify our struggle as being just about who owns the land, whether it belongs to Canada or our Peoples. But just as importantly, it's about how the land is owned—how we relate to it, how we relate to each other through it, and who “we” are as Indigenous Peoples. In settler-colonial societies, land appears as an immense accumulation of property titles. To traditionalist Indigenous Peoples, in contrast, land is not a thing in itself but a social relationship between all living and non-living beings. Settler state policy is war by other means, working to replace our full sovereignty and jurisdiction over our lands and waters with mere municipal powers, delegated from the provincial and federal governments...and opening the way to further corporate development. (para. 12–13)

With this understanding in mind, we could view the word “meander” as evoking the idea of following and learning along the river’s path in the way it presents, perhaps even as it might zig and zag. The land and the stream are teaching me something as I follow and I am in relationship to them. Meander here is language that expresses being responsive to the land (Craft, 2016). Here, the river is a life-giving resource. On the other hand, the use of render could contextually be viewed as the language of power over something. “Render” means to make or to cause to be. In this case, the river is only a means to an end. The idea of a river doesn’t only help here as a land acknowledgement. It offers us a lesson as therapists through a connection to historical discourse of Dr. Carolyn Kenny in music therapy.

Dr. Carolyn Kenny and the Great River

Dr. Carolyn Kenny was an Indigenous music therapy clinician, writer, scholar, and mentor to many. As a writer, she offered impactful theory and frameworks rooted in Indigenous ways of being in the world. In exploring the idea of defining moments in music therapy, it’s powerful to consider how Indigenous knowledge can shift our frame of reference.

In “The Field of Play: An Ecology of Being in Music Therapy” (Kenny, 2014) she uses a metaphor of a great river... noting that healing spaces are spaces of loving and creating that join us to the river—and that the river is the artery that flows through all humanity and all living things. There’s also a connection between this great river, humanity, and music therapy.

Dr. Kenny says we all have our ethical imperatives. Examples include medical protocols for those working in hospitals; educational protocols for those in schools; or business owner or music therapy educator protocols, so on and so forth. But according to Kenny, underneath all music therapy imperatives is this great river. Relating to the story of the Myaamia people and Dr. Kenny’s framing of the great river, we can ask ourselves a couple of guiding questions. In music therapy:

- How do we foreground personhood as a guiding resource, rather than merely recognizing it as we navigate towards outcomes?
- How does the river of humanity (underneath our work) impact how we define our work, including how we foreground relationship and normalize noninterference?

As I explore these questions, I’ll do so using three themes:

- (1) Resource
- (2) Relationships
- (3) Refusal

Resource: The Spark

It's helpful to explore *resource*, by asking the reader “how did you enter the field of music therapy?” Do you remember? I'm sure you have a great story to tell and for some those moments felt intuitive. While you may have been formerly unaware of music therapy as a formalized field, I imagine you perhaps had an “Aha” moment that built on some existing spark.

We can be drawn to this profession for several reasons. We all have a spark within us, and that spark is situated within our unique sociocultural experiences. In my case, several resources already existed within my experience that made me feel alive and then aligned with what I would come to learn about music therapy. Some of those were musical resources, such as a love for songs and songwriting, the use of music as a means of reflection, the power of melody for collective memory, and rhythm as a sociocultural holding ground for collective belonging. For example, I grew up with a lot of famous Detroit Motown (USA) music in my home. Those songs were resources for families and generations, not just for individuals. They shaped my early musical foundations. Other resources were relational—for example, it has always meant more to me to be with people in music than to perform for people. This relational resource was a spark for music therapy as well. These resources of music and relationship tend to show up in meaningful experiences with friends and family, and in community.

As a professor who has interviewed countless prospective students, I've heard many examples of these sparks that drew them to music therapy. Experiences such as music as a means to overcome challenges with grief, as the connection with family and friends, and to support their own mental health journey. Students often desire in turn to use music to support others in similar ways.

For many of them, the spark was not merely within music in general, but in these contextual meanings situated in their familial, cultural, health, and relational experiences. As professors and supervisors, we get to witness and nurture these sparks, starting with empowering students' resources. As clinicians, we get to support and build on the existing resources of our clients. It can be a beautiful thing.

But there is always this underlying question of how resources are situated in these relationships—and I've found that this is a question we can't leave unexamined. Do we define our teaching and our practice primarily by the resource we provide, or is it meaningfully rooted in how people are already resourced? This question is one that is reflexive in nature and that I therefore have to answer continually. I hope you are thinking about how it might connect to you.

Reflecting on a significant moment from 2020, a student of mine shared an experience that impacted my understanding of resources. As a Black woman in a disproportionately white music therapy profession, she said that the songs she had learned, the experiences that made her fall in love with music, and things that made music a resource for her and her loved ones, were not part of the music therapy core curriculum. They were not foregrounded or given space for, leaving her either to doubt if they (or she) belonged, or to exert extra effort to prove she did. She noted having to learn the music of her white peers while they didn't have to learn about her context and the resources that it empowered. Thankfully, this was around the same time in our music therapy program that we initiated a major shift to be more holistic, culturally-rooted, and resource-oriented. And still, her experience is instructive to understanding how a resource-oriented approach relates to education and training.

Whose Resources Make Music Therapy Work?

This way of thinking is also parallel to the way I encourage students to think about what exactly makes music therapy work. I want to share a story about a conversation with a student to highlight an example.

In October 2023, I had the opportunity to be hosted as a guest speaker with the undergraduate students of the music therapy program in the Southeastern US. Just the year prior, I had interacted with the professors and students from this program while attending an international music therapy conference. I perceived a strong sense of ownership and excitement from the students and a commitment to holistic growth and inclusion by the professors. I mention this intentional focus and energy of their program because I believe this shaped the generative nature of my conversation with one of the students during my visit.

During a lecture that included group music making and discussion, one student posed a scenario to me. She said:

Dr. Leonard, what do you do in a situation where you're in a conversation with a peer and when music therapy comes up, they answer in the following way?: "that's so cool, I bet that's so rewarding. I use music therapy for myself to help me with my mood."

She continued, saying:

How do I correct their misconception about music therapy? And let them know how it is evidence-based and is rooted in a therapeutic relationship with a board-certified therapist?

The situation itself is not necessarily one of insight since I'm sure many students and music therapists have had similar experiences. However, I believe insight lies in how this calls into question something about how other people experience music as a resource and how we might hold reflexivity around that in the way we think about and define music therapy.

I framed my answer to the student by saying, why do we feel the need to correct? If we define music therapy by first acknowledging how people already use music as a resource (i.e., for their emotions, thinking, motivation, relationships, mental and physical health, etc.), then we can start by affirming and building upon it. I offered for the student to consider an alternative response of connection instead of correction, suggesting communication with the person in the following way:

You've got the first part right about music therapy. You are naturally using music as a personal resource for your health and wellness. You recognize that power. But that's where the music therapist comes in to collaborate with you—we've gone to school, reflected on and related to how different people use music as a resource, had extensive hands-on training, and are familiar with research evidence about how to support their goals. So that's why music therapy requires that trained music therapist.

The insight here is multifaceted. We start by affirming that music therapy works firstly because musical and relational resources are situated in people, rather than the idea that resources primarily come from the therapist or the research. In doing so, we are simultaneously increasing our capacity for cultural humility and anti-oppressive work. Just by the way we position music experience prepares us to be culturally responsive instead of centering ourselves. Additionally, we are intuitively shifting into a resource-oriented understanding of music therapy. This taps into the same spirit that's evoked by Dr. Randi Rolvsjord (2015) when she writes that we need to understand what clients do to make music therapy work.

Table 1 below is adapted from my resource-oriented music therapy colleague Dr. Kate Myers-Coffman. Their clear ideas of resource-oriented principles and examples are

especially helpful for students and newer professionals while also being a nice refresher for other music therapists. As alluded to in the stories above, the table reinforces the idea that a resource-oriented approach supports the way people already use music as a personal resource; this aligns with starting with strength-based ideas of approaching practice rather than a focus on deficits; these dynamics influence the therapeutic relationship to be initiated as one of collaboration rather than intervention; and to enable these resources and relational dynamics, music therapists must build capacities for situating themselves in ways that witness and are culturally responsive to the lived experience and lived contexts of the music therapy participant.

Table 1. Integrating Resource-Oriented Music Therapy in Practice*

MT Approach	Principle**	Example
A Resource Oriented Approach	...views music as a health resource	Utilizing someone’s musicality, musical skill, and knowledge of songs as a central driving force and health resource
	... focuses on nurturing inner strengths, resources, and potentials rather than focusing on pathology and deficit	Engaging someone’s self-identified internal and community resources as supports in the therapeutic journey; identifying desires and aspirations as factors to guide therapeutic collaborations; growing self- and community-resources
	... frames music therapy as a collaboration between therapist and individual(s) rather than a therapist intervening; as such, there is a focus on empowerment and self-determination through the collaboration	Engaging those we work with in major decision-making areas of their therapy, from setting goals to directing music therapy experiences (e.g., instead of you coming in with a prescribed set of experiences, they direct the experiences and you facilitate and support them)
	... is a context-specific practice that assumes the individual cannot be removed from the contexts that surround them (e.g., social, physical, political, cultural)	Understanding and purposefully integrating elements of someone’s sociocultural identities because this provides the context for their life experiences and how they navigate the world

*Adapted from Dr. Kate Myers-Coffman²

**Resource-oriented principles from Rolvsjord (2006, 2010)

Relationships: When Their World is Bigger

It’s important to be reflexive about the nature of relationships in music therapy. Pause for a moment and create space for the question, “how have I prioritized the resources of others

² Adapted with permission from unpublished slides by Dr. Kate Myers-Coffman.

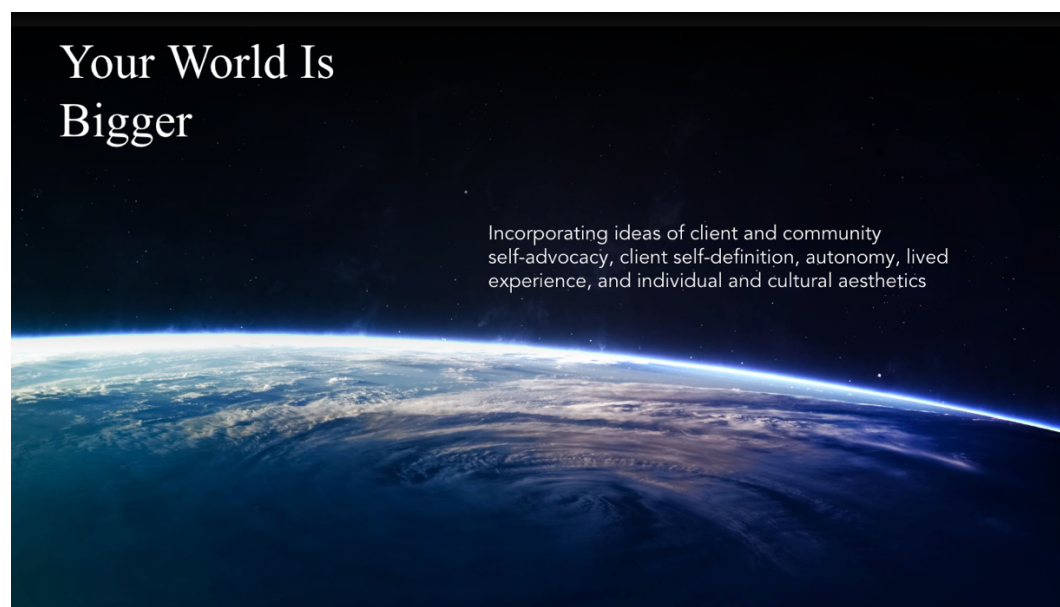
as central to my work?” In answering the question, consider how the following statement impacts your thinking: “Goals are derived from your world, your world is not derived from goals.”³

Goals represent a type of actualization, and therefore the act of establishing them requires a consideration of our assumptions and beliefs. “One’s view of actualization shifts deeply depending on when people are considered whole” (Leonard & dos Santos, p. 24). When we as music therapists value a resource-oriented approach, there is a better framing of whose resources are most influencing therapeutic growth and how “external resources support [clients’] already-in-process resources and capacity” (p. 26).

Evidence-based practice in music therapy has been framed as resting on three pillars (or we could also say, three areas of resource). Wheeler (2015) stated those three areas as research and systematic reviews, clinician best practices, and client preferences and values. When thinking about them as areas of resource, it can often seem as if the first two are whole worlds, but client preference is only in orbit around those worlds. But music therapists have to be able to hold a space that says to clients that “Your World is Bigger” (Figure 1). In doing so, it is imperative that music therapists do not merely uphold the role of expert, promoting resources in the areas of research and as a clinician. As a prerequisite for a relationship rooted in clients’ resources, as CharCarol Fisher wrote, music therapists must embody roles other than expert, such as advocate and partner (Fisher & Leonard, 2022).

To advocate for and partner with a client is to recognize that they are not a subject to be treated, but rather a collaborator with a lifeworld to be explored together. Rather than simply incorporating preferences to supplement clinical instincts, the therapist honors a world already in a process of becoming. Here, goals are not imposed, but derived. They grow from a collaboration where research and clinical skill serve as tools to support the client’s internal and community resources, rather than merely defining the destination.

Figure 1. Your World is Bigger.



While Wheeler (2015) identifies client preferences and values as a pillar of practice, an expanded view recognizes the client’s world as a vast ecology of resources. This world is

³ This was the title of a presentation from the 2021 Music for Kiddos annual symposium by myself and Kerry Devlin.

shaped by ideas of client and community self-advocacy, client self-definition, autonomy, lived experience, and individual and cultural aesthetics (see Figure 1).

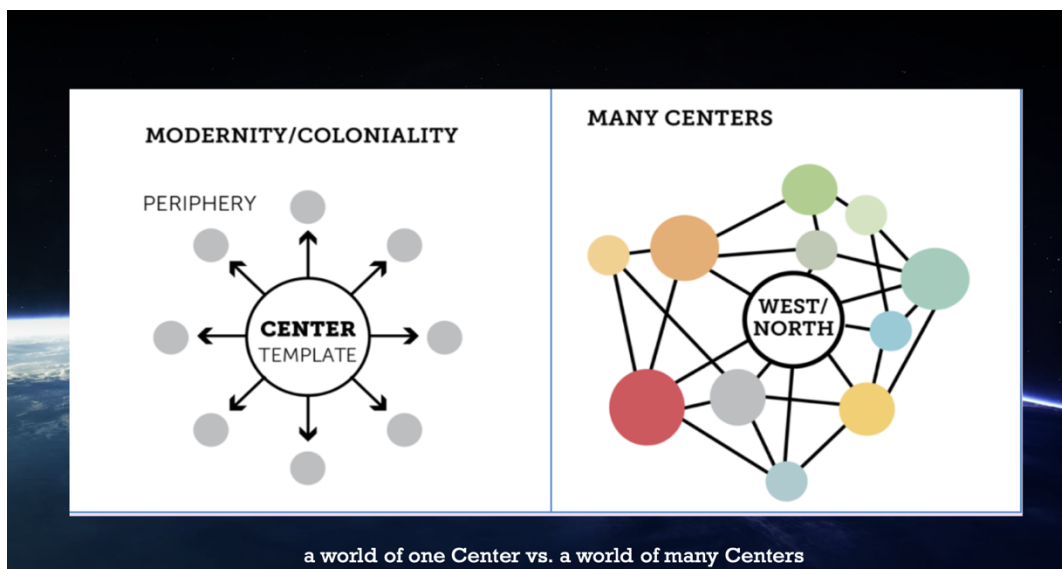
Once we have a disposition to learn how big clients' worlds are, it is then that we can better understand how resources within those worlds should shape music therapy practice. For a growing contingent, the work of being a music therapist, just as much as (if not more than) gaining clinician skills and research knowledge, includes the shifting of one's gaze, positionality, disposition, and/or role to support an expansion of clients' worlds within the therapeutic relationship and process. My previous scholarship and collaborations (Banzon & Leonard, 2023; Fisher & Leonard, 2022; Leonard, 2020; Leonard & dos Santos, 2025) have explicitly engaged with these themes, and highlighted the resonant work of other scholars, such as Hadley and Norris (2016), Devlin (2018), Viega (2018), and Scrine (2021). Even with a resource-oriented approach, it's important for music therapists to build capacities for these perspectives that are responsive to power dynamics. Because, as stated in Banzon and Leonard (2023):

Though resource-oriented literature is rooted in empowerment perspectives which have often been named, it is important for music therapists to explicitly connect cultural frames to their empowerment practice. Intentional language reduces the likelihood of universalizing ideas of inner resource in ways that fail to center the cultural assets of communities of color and others that have been marginalized... This represents a decentering of dominant normative views of therapy. (pp. 193–194)

Decentering Our World

Often, because of the way we define music therapy—centered in our world, our research, our experience, and our expertise—our clients' humanity and resources are positioned at the periphery. What happens when the resources of clients and communities shape our definitions? Would it be the same definition we have now? What do relationships rooted in empowerment, humility, collaboration, and consent mean for how we define our work? This is not at all to disregard that clients have needs, but to situate them within wholeness. Something different happens when their world is defined around resources and desires.

Figure 2. *A World of One Center vs. A World of Many Centers.*



Note. Adapted⁴ with CC 4.0 License from Leitão, 2020

⁴ The original graphic has been superimposed onto an image of the earth from outer space and is licensed under a Creative Commons [Attribution – NonCommercial – ShareAlike 4.0 International](https://creativecommons.org/licenses/by-nc-sa/4.0/)

Figure 2 shows images from an article by Dr. Renata Marques Leitão (2020, p. 3) about designing a world for human flourishing. The image on the left side of the figure is of a large circle where the word “Center” can be read in the middle. From that middle point moving outward, arrows are pointing to other, smaller circles, orbiting all around it in a space called the periphery (or the margins). This image represents a world where there is a centralized reference point that shapes what is meaningful and what is considered progress. From this worldview and way of relating, the entire world is set up so a person must be validated by the center to be successful. The words “Modernity/Coloniality” are at the top of the image to convey that this is a type of systemic structural order (of power-shaping relationships); in our context, this is reinforced by the way clients’ behaviors are framed as deficits, or how their resources depend on their relationship to the center. The picture on the right has one circle that says “West/North” that is connected in a web-type structure with other circles of many different colors. This represents that the circle that has traditionally been the “Center,” indicative of the Western worldview (of therapeutic or other relationships) or the Global North, is now just one of many centers, indicative of new ways of relating to each other. Within a global context, this image implies that so-called “developing” countries that have also been known as the Global South, are no longer dependent on a particular center, but that they come into a more collaborative, interdependent relationship.

As music therapists, our perception of others and how we work together must now take much greater account of their desires, aspirations, and how they define themselves. Their definition and what constitutes their resources no longer depend on us as the reference point. In this way, we begin the therapeutic relationship in the role of witnesses. Think of this process as learning to relate to people as human beings instead of through filters of power, privilege, and expertise. Dr. Andeline dos Santos (2022) frames this type of witnessing using the liberation psychology concept of “psychosocial accompaniment,” stating that:

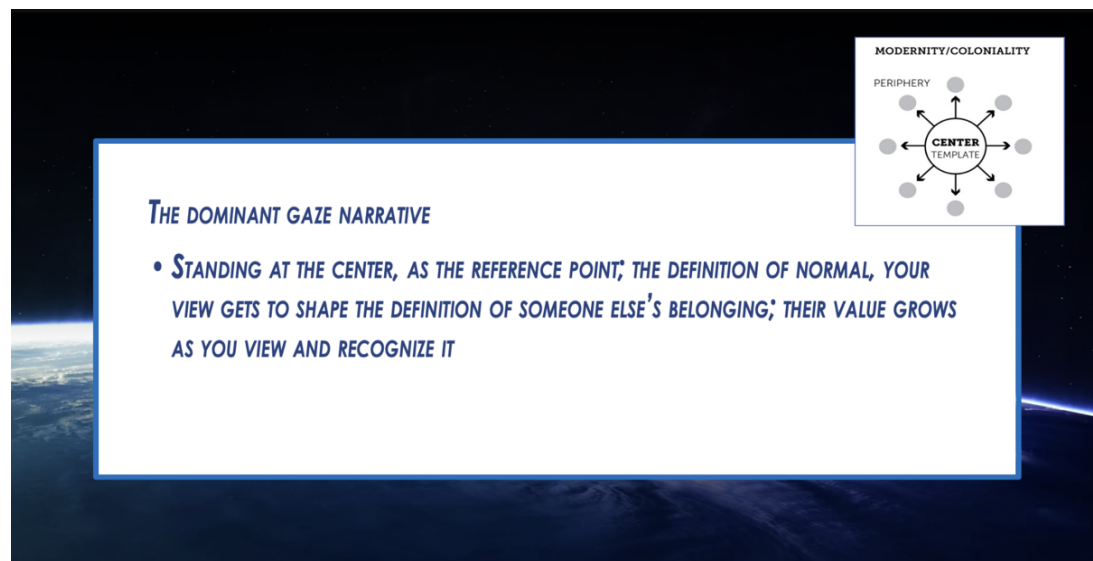
Psychosocial accompaniment involves a particular type of presence. Rather than attempting to “fix” or “intervene,” re-inscribing colonial hierarchies of values and power, accompaniment involves listening, witnessing, advocacy, and critical inquiry. We need to refrain from suggesting solutions to their problems on their behalf; instead, we intently listen to their own strategies.

Just as a musical accompanist listens acutely to the unfolding song, for example, the psychosocial accompanier takes a supportive role rather than occupying the limelight. (pp. 178–79)

Our ways of being, knowing, and relating must disrupt the dominant gaze in music therapy. Relating to people from the “Center” means that we are relating through a dominant gaze. One that is shaped by both our socialization in Western cultural hierarchies of personhood and that emphasizes our expertise and research above the resources of others. When we are in relationship with others through the dominant gaze, we often embody this narrative written in Figure 3:

- Standing at the center, as the reference point, the definition of normal, your view gets to shape the definition of someone else’s belonging; their value grows as you view and recognize it.

The dominant gaze cannot sustain empathy without itself as the reference point.

Figure 3. The Dominant Gaze Narrative⁵

Note. Figure includes superimposed image of a “world of one center” from Leitão, 2020

Sustained Capacity Building

In order to employ greater awareness and value in recognizing someone else’s world, we have to build capacity for that. Capacity building is important at all levels, including individual, relational, collective, and institutional. When I did the GLR-AMTA speech, I referenced the keynotes from the previous two years as an important example of institutional capacity building. For the reader who didn’t attend this region’s conferences, I realize the local context is not as personally relevant. However, two important points shape my decision to still retain a reference to them in this article. The content of these keynotes remains relevant to this manuscript, and their inclusion provides the important aforementioned capacity building example for deepening engagement around justice.

The keynote by Jasmine Edwards⁶ at the 2022 Fall Symposium was about cultural humility. It’s important that we recognize cultural humility for what it truly is—as a developmental, intercultural, and systems framework that our music therapy programs, our clinical practices, our relationships, and our lives should be grounded in. It also employs a critical lens to address power imbalances and inequalities. It helps us not only to reflect on our cultural self-awareness and intercultural relations, but actively to look at the conditions that shape them. When deciding to be resource- and ecologically-oriented, music therapists commit to understanding not only how to support relationship dynamics, but also the conditions that shape equitable relationships. Relationships that honor ecologically oriented value systems allow for resources in relationships to be informed not only by the individual dynamic, but also by contextual and community self-advocacy lenses. For example, Devlin (2018) only knew how to work with her client, Graham, after understanding his self-definition and resource potentials as informed by an autistic self-advocacy lens. Scrine (2021) showed how a violence-informed lens totally shifted the relationships and therapeutic trajectories of participants who had experienced trauma.

⁵ I defined *The Dominant Gaze Narrative* initially for my social justice-themed music therapy course and introduced it in the Milwaukee keynote address.

⁶ From the keynote speech titled “*Cultural humility: Implications for music therapy training and practice*” from Fall Symposium, Great Lakes Region of the American Music Therapy Association on October 13, 2022.

This also relates to the Great Lakes region's 2023 keynote by Amy Sekhar⁷ entitled "Empowering the Therapeutic Relationship through the Lens of Disability Justice." She spoke about the Affirmation model of disability, where disability is viewed as a type of human diversity, to be celebrated and regarded as enriching to life. This is not to say that people don't need or desire support, but it's imperative to have a non-tragic view of disability and impairment. There are many resources that come from Disability culture and our view can begin through centering the resources that come with the lived experience and relational solidarity within it.

Relationships in music therapy must be shaped by an ecologically oriented lens as music therapists become more integral in their thinking (AMTAmusictherapy, 2023). This type of thinking and action helps to sustain capacity for a transformative culture of music therapy.

Refusal

Lastly, let's briefly explore the theme of refusal. Refusal comes from Indigenous ways of knowing and has recently been explored in music therapy literature (Leonard & dos Santos, 2025). Refusal is a turn away from damage-centered views of people and considers a world built upon resources and desire (Tuck, 2009). There is a belief that people have a creative impulse to flourish. Refusal doesn't simply mean to stop or merely to say no. "No" by itself can mean the unwillingness to do something, but the deeper desire of refusal is to act in accordance with one's own motivation without starting with someone else's context as the reference point (Garland, 2013). As if to say, "I will no longer be in a relationship with you this way. I will not be understood in this way. I am incomprehensible to you unless my culture and I are their own reference point."

In music therapy theory, it also relates to Dr. Carolyn Kenny's practice approach of noninterference. Noninterference refuses damage by "just letting people be" and providing them with the "conditions and resources" to thrive and "believing by doing this, they will have a good life" (Kenny & Hadley, 2013, p. 220). Or said another way, they will reach their goals. A number of music therapists in recent years have emphasized the importance of noninterference and refusing damage as foundational to music therapy practice, teaching, and research (Crooke & Hadley, 2022; Fisher & Leonard, 2022; Gillman, 2022; Leonard & dos Santos, 2025). Music therapy also has concepts, such as communicative musicality (Malloch & Trevarthen, 2009, as described by Trondalen, 2016), that give credence to inborn capacities for growth, such as how individuals as infants (and then through the lifespan) have "a predisposition for human contact where interactive exchanges [are] marked by [impulses and inclinations for] vitality affects, synchronization, rhythm, timbre, and pitch" (Leonard & dos Santos, 2025, p. 25).

Refusing damage can fundamentally change who music therapists perceive as having the resources that shape therapeutic change and redefine what the goal of change would be. For example, through moving from a deficit/damage-centered lens in real time, Devlin (2018) not only shifted the therapeutic relationship, but crystalized self-regulation (in the way the client was already resourced to perceive it) as a foundational aim within therapeutic sessions. In her scholarship (dos Santos, 2019; dos Santos, 2022; Leonard & dos Santos, 2025) detailing clinical work in South Africa, Dr. Andeline dos Santos provides a great example of how refusing a damage-centered framing of clients shifts the possibilities for change. She shows how working in this way starts before arriving to the session by "knowing that my view of [clients] will inform the process, and that rigorously

⁷ From the keynote speech of the 70th Annual Conference, Great Lakes Region of the American Music Therapy Association on March 17, 2023.

critiquing my preconceived ideas of who they are is the only viable starting point” (Leonard & dos Santos, 2025, p. 19). For her, this disposition also involved intervention that starts, not toward the clients, but first and foremost toward our own music therapy systems and processes such as referral and assessment. She refused to allow reasons for referral that “include(d) words such as *violent*, *rude*, *unmanageable*, and *failing*” (p. 19) to construct her view of clients and what their behaviors meant. Ultimately, refusing damage in these and other ways allowed her to understand the relationship between aggression and clients’ life-affirming needs and desires for empathy, respect and fairness (dos Santos, 2019). As they progressed from there, goals took on different meanings through collaborative processes of meaning-making. Referencing the words and experiences of her clients, dos Santos (2019) concluded: “Experiences of aggression, empathy, and the relationship between them occur in the context of experiences of exploring what moving forward in life may and may not entail” (p. 21).

Conclusion: A Reflexive Definition

The ideas that have been shared above about resources, relationships, and refusal have been offered as considerations to shape our reflexive thoughts regarding the nature of music therapy practice. This exploration of resources, re-situated relationships, and refusing damage as a starting point harkens back to the framing of the great river of humanity that flows underneath all music therapy practice. Upon reflecting deeply on these elements, one question that might arise is, “how would we define music therapy differently if we are reframing in these ways?” In this conclusion, I offer such a definition.

However, there is a caveat for my offering: the subsequent definition is not offered as the one, only, or essential best answer. There are many definitions of music therapy, and there would be much hubris to say this is the new and best one. This is merely a definition that resonates with the context and is based on the capacities I’ve outlined in this writing. It is also not a one size fits all: as Carolyn Kenny wrote (2014), we all have our different ethical imperatives and protocols based on where we practice. Maybe in some places we need to emphasize different interventions, for example. But it still remains important to distinguish between our applied description of music therapy in particular settings and our default definition or what we believe at the core. A belief that, in my opinion, must center resources and relationships before we ever talk about interventions.

Now to the definition. This definition was crafted by me and my dear friend and colleague Dr. Kerry Devlin (originally published in Leonard & dos Santos, 2025). It starts by stating:

- Music therapy is a relational experience...

This recognizes that there is a relationship that is based on mutuality and collaboration that is core to anything we do. This relationship supports existing resources, is contextual to the environment, and is dynamic in process to enable emergent growth. This leads us to the next part of the definition.

- Music therapy is a relational experience that holds space for participants’ (situated) personhood and music...

What does music as a relational experience hold? I believe that before it holds commitments to research and clinician expertise, it must hold space for how someone’s personhood and music show up, and how the resources that come from personhood, research, and clinician best practice are interactive with each other. The word “situated” is placed in parentheses because, while the definition can be expressed without this word (for purposes of flow), it is implied when discussing someone’s personhood and music, we

are supporting a context-oriented perspective and one that is rooted in their sociocultural lived experience and requires us to reflect on ours. Like the earlier story shared about my former student, music was a resource to her in ways that connected to her cultural context. This is the same for our clients and understanding that allows us to support their existing resources.

- Music therapy is a relational experience that holds space for participants' (situated) personhood and music *to support their resources and goals*.

“Goals are derived from your world, your world is not derived from goals.” This idea was shared earlier to highlight how people already have existing resources (including how they use music) before they enter into the music therapy space. We can't understand their goals without acknowledging their resources. The focus on personhood and resources in this definition accent the great river of humanity that undergirds our clinical practice. Here is the entire definition (excluding the word “situated” here):

- Music therapy is a relational experience that holds space for participants' personhood and music to support their resources and goals.

In reflecting on what we've explored, let's use the following questions:

- How do you foreground humanity in the way you define and practice music therapy?
- What is one area, after reading this, that you want to grow in your clinical reflexivity?
- Why are you motivated for this—what personal or clinical experience serves as a spark?
- Who are the clients that are inspiring you to be more resource- and ecologically-oriented? Who are the scholars you are reading to grow your knowledge base? Who are the clinicians you are receiving supervision from to expand your capacity to shift your roles to better support clients' resources?

To conclude, I want to connect back to the theme of the great river of humanity. Briefly recall the earlier distinction between how the Myaamia people viewed the river versus the way the European settler viewed it. For the Myaamia people, they saw their journey as being in relationship with the river. For the settler, he saw the river as a means to an end. Throughout this article, narratives have been shared of students or clients who could not fully be related to without meaningfully holding space for their personhood. In reflection of those themes and this article, I offer the following Toni Morrison quote about the Mississippi River. I invite you to think about how it speaks to how our music therapy practice should be a journey with personhood instead of a rendering of goals that relegates humanity to an uncritical background:

They straightened out the Mississippi River in places, to make room for houses and livable acreage. Occasionally the river floods these places. ‘Floods’ is the word they use, but in fact it is not flooding; it is remembering. Remembering where it used to be. All water has a perfect memory and it is forever trying to get back to where it was.

—Toni Morrison (2018, p. 109)⁸

⁸ The Site of Memory essay that includes this quote was originally published in 1990

About the Author

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⁹ Link currently broken with message stating 'We're in the process of updating our website' when visiting www.wisconsinhistory.org