

Book of abstracts and one page summaries

PHD COURSE IN MUSIC THERAPY RESEARCH

November 3-8, 2013

Doctoral Programme in Music Therapy

Institute for Communication and Psychology

Aalborg University, Denmark



Contents

Lectures and workshops at the course.....	3
Cathy McKinney: Presenting quantitative results – Telling the Story with Numbers.....	3
Cathy McKinney & Lars Ole Bonde: Workshop: Text analysis	3
Niels Hannibal: How, what and why the pilot study?.....	4
Hanne Mette Ridder: The magic circle: putting it all together. The final monograph or the article based thesis	4
Vibeke Skov: Pre-viva and committee workshop.....	5
Sanne Storm: Pre-viva and committee workshop.....	5
Anke Coomans: “Towards a synthesis: about naming, checking, validating, connecting, strengthening and... writing”!	7
Helen Leith: A mixed methods exploration of music therapy and the resettlement of women prisoners with non-psychotic mental health problems.....	8
Juanita Eslava-Mejía: Moving on after the literature review: A big challenge	9
Julian O’Kelly: The development of evidence based Music Therapy for Disorders of Consciousness	10
Katarina Mårtenson Blom: Presentation and discussion of Results - focus on connection between transcript analysis and music analysis	11
Margareta Wärja: Surprises and Discoveries in Designing a Mixed Methods Study “The Story of a Control Group Becoming an Intervention Group”	12
Monika Geretsegger: Tying it all together – finalisation of treatment guide and where to put what in the thesis.....	13
Ruth Hertrampf:	14
Tali Gottfried: Discovering the treasure - Data Collection phase.....	15
Unni Tanum Johns: A presentation of the research background for a study of «the music in the therapeutic interplay» in child psychotherapy	16
Xi Jing Chen: Final stage of the article-based thesis: mix all the ingredients	17



Lectures and workshops at the course

Cathy McKinney: Presenting quantitative results – Telling the Story with Numbers

You have succeeded in implementing your study and collecting your data. You have carefully entered them and begun your analysis. There seem to be mountains of numbers! How to organize them and present them in such a way as to reveal your findings and communicate your results to others? This presentation will offer considerations for presenting the statistical elements of your study.

Biography

Cathy McKinney, Ph.D., LCAT, MT-BC, is Professor and Director of Music Therapy at Appalachian State University in Boone, North Carolina, USA.. Professor McKinney's research has focused on effects of various music and music therapy interventions on psychological and physiological measures. Her primary direct research has investigated effects of the Bonny Method of Guided Imagery and Music (GIM) and associated interventions on mood, neuroendocrine levels, and immune markers in healthy adults and in women with breast cancer. Currently Editor-in-Chief of the *Journal of the Association for Music and Imagery* and a member of the editorial review board for the *Journal of Music Therapy*, Professor McKinney has served on the editorial review boards of seven professional journals.

Cathy McKinney & Lars Ole Bonde: Workshop: Text analysis

Music therapy researchers often are called to work with textual data, whether from interviews, session transcripts, or oral/transcribed/written narratives provided by research participants. This workshop will provide an overview of qualitative content analysis and will give students the opportunity to work in small groups with a set of transcripts to begin an analysis relevant to the research questions. The transcript is from a series of individual GIM sessions (file: 8235 Series). Students will work in small groups, and in each group there will be a GIM-informed researcher who can explain details about the music and other specific GIM issues.

Before the workshop, students are asked to:

1. Read the complete session transcript to gain a sense of the case as a whole.
2. Note impressions and thoughts from this first reading.
3. Note important images/imagery and maybe codes or themes emerging from the reading.

Come prepared to share and discuss the emerging analysis with others in your group. Questions for the discussion will be presented at the workshop.



In Mahara, you will find the file with the transcript – plus three articles on methods of text analysis: Hsieh & Shannon Qual Content Analysis/ Textual analysis / Interpretive phenomenology.

It would be nice, if you could find time to read these texts before the workshop.

Biography

Cathy McKinney, see above.

Lars Ole Bonde is professor in music therapy, Aalborg University. Professor II at Center for Music and Health, The Norwegian Academy of Music, Oslo. MA in musicology and literature, Aarhus University, PhD in music therapy, Aalborg University. Associate editor of Nordic Journal of Music Therapy and co-editor of the e-journal Musikterapi psykiatrien/Music Therapy in Psychiatry. Numerous articles and books on music therapy, music psychology, music education and music theatre.

Reference to literature to be read before the presentation

(see Mahara)

Hsieh, H. F., & Shannon, S. E. (2005). Three approaches to qualitative content analysis. *Qualitative health research, 15*(9), 1277-1288.

Benner, P. (2008). Interpretive phenomenology. In L. Given (Ed.), *The SAGE encyclopedia of qualitative research methods*. (pp. 462-465). Thousand Oaks, CA: SAGE Publications, Inc. doi: <http://dx.doi.org/10.4135/9781412963909.n234>.

Lapadat, J.C. (2010). Thematic analysis. In Mills, A.J. & Durepos, G. & Wiebe, E. (Ed.), *Encyclopedia of Case Study Research*. DOI: <http://dx.doi.org/10.4135/9781412957397>.

Niels Hannibal: How, what and why the pilot study?

Biography

Niels Hannibal. Associate professor, PhD, Clinical music therapist at Aalborg Psychiatric Hospital. Co-editor of MIPO. Research areas: Psychiatry, Personality Disorder, Mentalization.

Hanne Mette Ridder: The magic circle: putting it all together. The final monograph or the article based thesis

Finalising your thesis is not a thing to be done in the last months before submission, but is a process that starts from the very beginning of your enrolment. According to Trafford and Leshem, research can be viewed as a holistic process of many interrelated components which is not necessarily linear (2008, p. 156). Even for those who just started, it can be helpful at an early state to consider the rules and guidelines for the final product which will be outlined and discussed, especially with focus on the guidelines for the monograph vs. the article based thesis.

Biography

Hanne Mette Ridder is Professor and Head of the Doctoral Programme in Music Therapy at Aalborg University, and president of the European Music Therapy Confederation (EMTC). Her research focuses on music therapy in gerontology and dementia care, as well as the integration of qualitative and quantitative research in mixed methods research designs. She is a certified clinical music therapy supervisor.

Vibeke Skov: Pre-viva and committee workshop

Supervisors: Inge Nygaard Pedersen & Michele Forinash

Title of study: Art therapy. A prevention for development of depression? A mixed methods investigation of biopsychological and spiritual changes during participation in group art therapy for people who are vulnerable to depression.

Download thesis and abstract:

<http://www.mt-phd.aau.dk/music+therapy+events/Events//phd-defence-by-vibeke-skov.cid96403>

Sanne Storm: Pre-viva and committee workshop

Supervisor: Lars Ole Bonde

Title of study: Research into the Development of Voice Assessment in Music Therapy

Download thesis and abstract:

<http://www.mt-phd.aau.dk/music+therapy+events/Events//phd-defence-by-sanne-storm.cid96404>



One page summaries

Anke Coomans: “Towards a synthesis: about naming, checking, validating, connecting, strengthening and... writing”!

Supervisors: Jos de Backer & Hanne Mette Ridder

Title of study

Music Therapy and Dementia; the value of musical improvisation for the development of a therapeutic relationship in music therapy with people suffering from dementia

Research Question and Context

Main Research Question: *What is the value of musical improvisation for the development of a therapeutic relationship in music therapy with people suffering from dementia?*

The study has been set up following a phenomenological, qualitative multiple case study design within the natural setting. Main data are video-recordings of the individual music therapy sessions with people in a moderate/severe state of dementia, and the clinical notes of the music therapist who is also the researcher. Data analysis happens by means of a research intervision group (two external music therapists, psychotherapist, researcher herself) which will observe the video-recordings. These findings will be categorized and linked to the clinical notes and musical analyses of the improvisations.

Current state of the study

Part-time Study: July 2009-June 2015

Data-analysis is ongoing, writing process is initialized.

Presentation

Doing a study following a qualitative flexible design strategy, implies that the detailed framework of the design emerges during the study (Robson, 2002). However at a certain moment in time the researcher comes to the point where he has to start writing the methodology down with the final written thesis as a goal in mind. This means: kill some darlings and face some demons!

In this presentation some of the difficulties that I experience in the (final) transcription of the methodology chapter will be brought up.

After a presentation of the overall structure of the methodology chapter I'd like to discuss some issues on different levels: form, style and content. On the one hand these issues will relate to phases of the study that are already finished (for example: data collection), on the other hand, it concerns decisions that have to be made anticipating the final phase of the study (for example: concerning validation).

Themes that will be brought up:

-identity of the study (Is it what I think it is?)

-data saturation (when is it enough?)

-implementation of RepGrid in the final stage of a study (why, why not?)

-‘multiple case’ study (or ‘a set of individual case studies’?)

-negative case analysis (do I need one?)

-other...

NAMING

CHECKING

VALIDATING

CONNECTING

STRENGTHENING

writing

Helen Leith: A mixed methods exploration of music therapy and the resettlement of women prisoners with non-psychotic mental health problems

Supervisors: Helen Odell-Miller & Niels Hannibal

Research questions:

1. Is there a process of change in the self-perception of women prisoners with non-psychotic mental health problems attending music therapy?
2. What is the nature of the experience of women prisoners with non-psychotic mental health problems attending music therapy, with particular reference to self-perception?
3. If there is a process of change in the self-perception of this population, how does this affect a prisoner's ability to engage in resettlement pathways interventions?
4. What is the effect of different treatment lengths on a prisoner's ability to engage in resettlement pathways interventions?

Methodology: Mixed methods embedded QUAL/quan (Creswell, Plano & Clark 2007)

Current status: Begin of data analysis April 2013

Juanita Eslava-Mejía: Moving on after the literature review: A big challenge

Supervisors: Cheryl Dileo & Ulla Holck

Title of study: Development and pilot study of a music therapy assessment of the neuropsychological development in children

The main aim of this study is to design a music therapy based assessment tool that measures children's musical neuropsychological development and that will provide new information about the child, from a music therapy perspective. A second aim is to pilot the assessment and compare it with a traditional neuropsychological assessment, in order to establish inter-rater reliability; construct/convergent, content and criterion/concurrent validity; and correlations between the two assessments.

Current research questions:

Main question: Can a music therapy assessment designed to measure the music neuropsychological development of a child do so in a valid and reliable manner?

Sub-question 1. Will there be correlations between results from a standardized neuropsychological battery and the proposed music therapy assessment?

Sub-question 2. If so, can these correlations be used to support construct/convergent, content, and criterion/concurrent validity of the music therapy assessment?

Phases of the study: Phase 1: literature review, survey of neuropsychological assessment practices in Latinamerica, Music Therapy assessment design with a focus group to establish content validity. Phase 2: small pilot of the assessment (5 subjects) and inter-rater reliability procedure to make adjustments to the tool. Phase 3: Pilot study involving several Latinamerican countries and 60-80 subjects. Phase 4: Statistical analysis to establish reliability, construct/convergent, content and criterion/concurrent validity of the MT assessment and co-relations with the NP assessment. Phase 5: Writing Final report. Currently researcher is on Phase 1. In April Phase 2 will begin.

Current State of the study: In the course of the first year of the study, a broader literature review was elaborated including new sections such as: Methods of validation of Music Therapy assessments, Neuropsychological factors and blocks, and Validity and reliability issues. Other sections were further elaborated such as Music Therapy assessment and Neuropsychological assessment of children development. A more in depth analysis of the available music therapy assessments as well as an analysis of tools for measuring neuropsychological development available in Spanish and validated for Latinamerican countries were part of the additions. Finding literature of Neuropsychological assessments has been difficult as well as making translations. In the methodology area, the research questions, the design and the data analysis were modified to better serve the objective of the study. Currently, the researcher is collecting surveys of NP assessments used, and beginning the assessment design. It has been difficult to get responses for surveys on a timely manner. PhD plan was submitted and approved on December 1st and approved on January 4th 2013. Elaborated proposal was submitted on March 1st 2013 and approved on May 19th.

Presentation: During the past year, the related literature and the methodology of the study were reviewed. Presentation will focus on adjustments in methodology, issues of assessment validity and reliability, and the issue of beginning the assessment design.

I would like to discuss with the group a couple of broad issues related with my current challenge: How to make the transition between the literature review and the design of the assessment? How to design the assessment in a systematic way?

Julian O'Kelly: The development of evidence based Music Therapy for Disorders of Consciousness

Supervisors: Wendy Magee & Hanne Mette Ridder

By improving arousal and awareness for those with disorders of consciousness (DOC), music therapy may contribute to the assessment of whether individuals are in vegetative states (VS) where there are no indications of consciousness despite wakefulness, or minimally conscious states (MCS), where consciousness is present, but inconsistent. However, supporting evidence is lacking, and distinguishing between VS and MCS is a challenging process. The purpose of this presentation is to illustrate how this PhD study addresses a primary research question: can music therapy affect neurophysiological and behavioural changes suggesting arousal and awareness to contribute to the assessment of patients with DOC?

The study comprises a PhD thesis by publication with three peer reviewed papers: (i) an exploration of music therapy and relevant neuroscience literature which establishes the rationale for the thesis (O'Kelly & Magee 2013a), (ii) an audit of concurrent music therapy and global behavioural assessment records (O'Kelly & Magee 2013b) and (iii) a behavioural and neurophysiological study exploring the responses of healthy volunteers and those with DOC to a range of music therapy and other auditory stimuli (O'Kelly et al. in press).

The presentation will illustrate how the study has developed our understanding of the role of music therapy with DOC. Neurophysiological and behavioural findings from the thesis indicate that music therapy improves arousal and awareness, providing empirical support for its role in optimising the conditions needed for assessment and rehabilitation. The combination of music therapy and neurophysiological methods may also offer a novel means of contributing to diagnostic and prognostic assessments. Further research is indicated exploring how these effects may be harnessed to improve clinical outcomes for DOC patients. This presentation will provide a condensed 'rehearsal' version of the Defence for this study, for which feedback and questions are welcomed.

References

- O'Kelly, J. & Magee, W.L. (2013a). Music therapy with disorders of consciousness and neuroscience: the need for dialogue. *Nordic Journal of Music Therapy*. 22(2), 93-106.
- O'Kelly, J. and Magee, W.L. (2013b). The complementary role of music therapy in the detection of awareness in disorders of consciousness: an audit of concurrent SMART and MATADOC assessments. *Neuropsych Rehab* 23(2), 287-298.
- O'Kelly, J, Magee, W., James, L, Palaniappan, R., Taborin, J. , Fachner, J. Neurophysiological and behavioural responses to music therapy in vegetative and minimally conscious states. *Frontiers in Human Neuroscience*. In press.

Katarina Mårtenson Blom: Presentation and discussion of Results - focus on connection between transcript analysis and music analysis

Supervisor: Lars Ole Bonde

Titel of the project

Transpersonal and spiritual BMGIM experiences and the Process of Surrender

Research questions

1. *Can the categories of analysis identified in a pilot study (Mårtenson Blom, 2010) be useful in developing a new understanding of transpersonal and spiritual GIM experiences and their transforming power? If yes, in what ways?*
2. *How are the relational modes that constitute shared lived experience/ intersubjectivity expressed and described in the transcripts of GIM sessions?*

Abstract – one page summary

An overview of results/findings will be presented, focusing on the connection between transcript analysis and music analysis.

To inform further writings of the Discussion part of the Thesis, I'd like to discuss findings from the interaction between transcript analysis and music analysis.

As a basis for the discussion, I will present

- Findings from focus group interviews
- Findings from analysis of 38 transcripts
- Findings from music analysis and transcript analysis

Topics to discuss

Your thoughts about the relationship between Phenomenological 'data' - fex music classification categories – and 'data' based on theory on developmental psychology – f ex categories of analysed experience?

Does this triangulation of data make sense/ generates meaningful knowledge?

If there is time, and it seems relevant, I will say some things about

- Findings from case studies
- Clinical applications of findings

Margareta Wärja: Surprises and Discoveries in Designing a Mixed Methods Study “The Story of a Control Group Becoming an Intervention Group”

Supervisors: Lars Ole Bonde, Aalborg University and Karin Bergmark, Karolinska Institute

Working Title of project

Receptive Music Therapy for Women Treated for with Gynecological Cancer

Design

Randomized controlled study (n=60) embedded in a mixed method design aiming to collect quantitative and qualitative data.

The aim is to study an individual short-term receptive music therapy intervention in the rehabilitation phase for women treated for gynecological cancer. The project is a collaborative effort between four parts: Karolinska University Hospital, The Doctoral School of Humanities at Aalborg University, Karolinska Institute, and Expressive Arts Stockholm. Participants are recruited from the Oncology Clinic at Karolinska University Hospital. An intervention called KMR-Brief Music Journeys (KMR) is used. This is an adaptation of the Bonny Method of Guided Imagery and Music (GIM) (Bonny, 2002) which is well documented in the research literature (Burns, 1999 & 2001; McKinney, 2003; Bonde, 2005). KMR has been developed as a short-term therapy to address existential crises, traumatic experiences and other psychological problems. The theoretical frame is embedded in expressive arts therapy, existential psychotherapy and GIM. In this study KMR is applied in an individual format based on a protocol specific to the diagnostic group. The goal is to measure effects and describe experiences of twelve individual KMR sessions on fear of recurrence, distorted body-image, dysfunctional sexuality, and existential questions. In the phase of implementing the RCT the format of the wait-list/control group has changed. This process will be discussed in the seminar (see below).

Content of presentation

1. Describe the development of the wait-list/control group into a valid group therapy intervention
2. Introduce the protocol for the group therapy intervention
3. Introduce the study-specific questionnaire developed for the group therapists
4. Present clinical vignettes
5. Discuss implications for change in design
6. Discuss what can be learned and harvested from the wait-list/control group
7. How to use the data collected for the group-intervention...



Monika Geretsegger: Tying it all together – finalisation of treatment guide and where to put what in the thesis

Supervisors: Christian Gold & Ulla Holck

Working title of the study: Effects of Improvisational Music Therapy on Social Communication Skills in Pre-school Children with Autism – a Randomised Controlled Trial

Revised title: Promoting social communication through music therapy in children with autism spectrum disorder

My PhD thesis will be an article-based one, containing the following papers:

- RCT study protocol (Geretsegger, Holck, & Gold, 2012)
- Update of Cochrane Review on music therapy for ASD (Geretsegger, Elefant, Mössler, & Gold, submitted)
- an article preliminarily entitled “Defining improvisational music therapy: Development of a treatment guide for improving social interaction skills in children with autism spectrum disorders” (Geretsegger, Carpena, Holck, Elefant, Kim & Gold, in preparation)
- Results from the “pilot part” of the TIME-A study (= the first 15 participants recruited in Vienna, see below).

Through a collaboration between the University of Vienna and GAMUT/Uni Helse, Bergen, this PhD study is also part of the international multicentre trial TIME-A (PI Christian Gold, see helse.uni.no/timea) with an overall aimed-at sample size of n=300 to be recruited in 9 countries.

Research questions:

Primary outcome: Is music therapy superior to standard care in improving social communicative skills in children with ASD as assessed by independent clinicians at the end of the treatment period?

Secondary outcomes: (a) Is music therapy superior to standard care in improving social responsiveness in children with ASD as assessed by parents/guardians at the end of the treatment period? (b) Does the response to music therapy vary with variation of treatment intensity? (c) Are any differences in social communicative skills between the music therapy and standard care groups retained at follow-up twelve months after randomisation?

Research design: three arm single (rater) blind randomised controlled trial of intervention

Interventions:

- Individual improvisational music therapy over a period of five months: one session (low-intensity) or three sessions (high-intensity) per week
- Standard care in all treatment arms: parent counselling sessions at 0, 2, and 5 months

Between Nov. 2011 and Sep. 2013, **15 participants** with a diagnosis of ASD, aged between 4;2 and 5;11 years at baseline, were recruited in Vienna/Austria from several institutions.

Primary outcome measure: Autism Diagnostic Observation Schedule (ADOS) “Social Affect” score at 5 months

Secondary outcome measures: ADOS “Social Affect” score at 2 and 12 months; ADOS subscales (Language and Communication, Reciprocal Social Interaction, Play, Stereotyped Behaviors and Restricted Interests), at 2, 5, and 12 months; *Social Responsiveness Scale* (SRS) as rated by parents at 2, 5, and 12 months; SRS subscales (Social Awareness, Social Cognition, Social Communication, Social Motivation, Autistic Mannerisms); quality of life in participants and their families

Presentation & discussion:

(1) Update on data collection schedule within and beyond the PhD project; (2) latest progress in developing the treatment guide, including the integration of international experts’ feedback; (3) where and how can the “making-of” of articles be integrated into the thesis?



Ruth Hertrampf:

Supervisors: Lars Ole Bonde & Cathy McKinney

Title of study: Guided Imagery and Music (GIM) in Curative and Non-curative Treatment for Patients with Breast Cancer and Gynecological Cancer

Research Questions of the Study

1. What is the influence of Group Music and Imagery (GrpMI) on
 - a) anxiety and mood,
 - b) well-being, and
 - c) quality of lifefor patients with breast cancer or gynecological cancer diagnoses?
2. What are the differences in the influence of GrpMI on these three variables as related to the treatment status (curative vs. non-curative treatment)?
3. What differences can be identified in the imagery occurring related to the treatment status (curative vs. non-curative treatment)?
4. What differences can be identified in the imagery occurring related to the diagnosis (breast cancer vs. gynecological cancer)?
5. What differences can be identified in regard to the chosen pieces of music?

Design

For this study, a mixed methods design is applied. The randomized clinical outcome study is comparing GrpMI and PMR.

Tali Gottfried: Discovering the treasure - Data Collection phase

Supervisors: Christian Gold & Cochavit Elefant

Title of study

Parent Counseling in Music Therapy (PCiMT) for parents of children with Autism. A Randomized Controlled Trial

This research is a part of an international study called TIME-A, investigating the effectiveness of MT on interaction and communication skills of young children with Autism. This current study focuses on parents' sense of competency, aiming to investigate the effectiveness of Parent Counseling on reducing level of parental stress and developing the use of music in everyday life by the parents with their children with Autism.

Up till now, 12 families have enrolled the study, allocated randomly to one of four groups: 1. Parents attend low intensity PC process (3 sessions), and their children receive MT treatment; 2. Parent attend low intensity PC process and their children don't receive MT; 3. Parents attend high intensity PC process (10 sessions) and their children receive MT, and 4. Parents attend high intensity PC process and their children don't receive MT. 4 families have concluded the five months intervention period, and 8 families are still on the go. A second recruitment is taking place in the last few weeks, hoping to enroll 6-8 more families.

Main Research Questions

1. What is the influence of Parent Counseling in Music Therapy (PCiMT) on level of stress and quality of life of parents of children with ASD?
2. What is the influence of PCiMT on the use of music in everyday life by the participants with their children?

Current status of the study

- PhD plan approved on March, 2012
- PhD elaborate proposal reviewed by Cathy Mckiney and Amilia Oldfield and approved on November 2012
- Data collection phase

Presentation

The presentation will give an overview on the data collection phase, discovering treasures of working with parents through MT point of view; through an example of one family, I ask to raise the wonderment of forming specific guidelines in one hand, and still keep the acquired flexibility for each and every family.

Unni Tanum Johns: A presentation of the research background for a study of «the music in the therapeutic interplay» in child psychotherapy

Supervisor: Lars Ole Bonde

Title of study

The “music” in the therapeutic interplay

A Qualitative Study of Forms of Vitality in Child Psychotherapy

Research Question and Context

The project focuses on forms of vitality in child psychotherapy, and will be studied in clinical sessions from my own clinical therapeutic practice as a clinical psychologist and music therapist with children that are referred with different mental health problems. The clinical research study will be carried out in collaboration with the institute of psychology at the University of Trondheim. The central research focus will be explored through several research questions:

1. How do forms of vitality emerge in the therapeutic relationship and how are these expressed (for example tone of voice, body movements, change of rhythms or intensity contours etc.)
2. How can features of forms of vitality be described and shed light on patterns in the therapeutic interplay?
3. Do forms of vitality contribute to therapeutic changes and developments in the session? If so – how?
4. Can a focus on vitality forms in the “here and now” contribute to an understanding of the significance of the child’s non-verbal communication? If so – how?

Current state of the study

At present there is final work on the child psychotherapy process study that I will be a part of. That implies writing a manual for the method “Developmentally directed psychotherapy with children” that will be used by the therapists taking part in the research project. This builds on the results of my previous research project and will also be published. In relation to my present research focus I am looking into several methods of analysis, which will enable me to capture the intersubjective microprocesses of the therapeutic interplay.

Presentation

At this PhD course I will present the background and focus for my study which builds upon the results of a previous research study into change processes in child psychotherapy. Some of the results were surprising to the researchers and gave inspiration to look further into the vitality forms of the therapeutic interplay.

Xi Jing Chen: Final stage of the article-based thesis: mix all the ingredients

Supervisors: Niels Hannibal & Christian Gold

Title of PhD research study

The effect of group music therapy on non-psychotic prisoners-A randomised controlled trial

Abstract of the study

Objective: To investigate the effects of group music therapy on improving anxiety, depression, and self-esteem in Chinese prisoners.

Method: Two hundred adult male prisoners were randomly assigned to music therapy (n = 100) or standard care (n = 100). The intervention group received twice weekly group music therapy for 20 sessions and the control group received standard care. Anxiety (STAI-State, STAI-Trait), depression (BDI) and self-esteem (RSI, TSBI) were measured at pre-test, mid-test, and post test. Data were analysed based on the intention to treat principle.

Results: Comparing to standard care, anxiety and depression in music therapy decreased significantly at mid-test (STAI-State: $p = .006$; STAI-Trait: $p = .001$; BDI: $p < .000$) and post-test (STAI-State: $p < .000$; STAI-Trait: $p < .000$; BDI: $p < .001$); Self-esteem improved significantly at mid-test (TSBI: $p = .011$) and at post-test (TSBI: $p = .001$; RSI: $p < .001$). Younger participants improved more ($P < .05$) in STAI-Trait at mid-test. Participants with lower education had greater improvement in STAI at post-test ($p < .001$).

Conclusion: Group music therapy seems to be effective for prisoners in improving anxiety, depression, and self-esteem. It can be highly beneficial for prisoners of young age or low education.

Presentation: The presentation will focus on the results of my PhD study and the current stage in my PhD thesis. From April to November 2013, the data collection and analyses process of my PhD study have been completed. Three articles which cover different aspects of this study have been finished, including a meta-analysis of music therapy studies in this area, a study protocol, and a study result report. So far, one article has been published, and two are still in review process. As regard to writing “Kappe”, one important work is to integrate three articles with a summary to make the PhD thesis a whole package. The structure and contents of the whole thesis will be discussed in the presentation.