

Book of abstracts and one page summaries

PHD COURSE IN MUSIC THERAPY RESEARCH

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Doctoral Programme in Music Therapy

Department of Communication and Psychology

Aalborg University, Denmark

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Lectures and workshops at the course

Cathy McKinney: Guided Imagery and Music: Toward Mind/Body Wellness

In honor of Professor Cathy McKinney's appointment as Adjunct Professor at the Music Therapy Knowledge Group including the Doctoral Programme in Music Therapy at Department of Communication and Psychology, we are pleased to invite to the inaugural lecture: Guided Imagery and Music: Toward Mind/Body Wellness.

Guided Imagery and Music (GIM) is a music-centered, depth approach to self-exploration and therapy that uses selected sequences of classical music to support the generation of and movement through inner experiences. Using quantitative methodology, researchers are developing a substantial case for efficacy of GIM for altering both psychological and physiological outcomes. The results of these studies have begun to illuminate the potential of the synergistic combination of music, imagery, and consciousness to effect changes in physiology, as well as both physical and mental health.

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.

Carola Maack: Heuristic First Person Research

Heuristic First Person Research is a reflective form of research aimed at discovery. It uses self-inquiry and possibly dialogue with other to uncover tacit knowledge. In my presentation, I will give a brief overview of the research method, differentiate it from other first person research methods, and discuss areas of use as well as advantages of and difficulties with this method.

Carola Maack, PhD, music therapist, licensed psychotherapist and supervisor in private practice near Hamburg, Germany; primary trainer for GIM. My main interests are trauma therapy and the use of music and imagery in it. Currently, together with colleagues I work on developing a psychological theory of traumatization and a corresponding curative trauma therapy method. In this work as well as in my PhD-study at the University of Aalborg I used heuristic first person research.



Carolyn Demuth: Protoconversation and Protosong: implications for the developing self

The lecture addresses the interplay of culture and the developing self by looking at different forms of “protoconversation”. While rhythmicity is a central part in early mother-infant interaction and constitutes a fundamental tool for communication, there are striking cultural differences. In some African societies for instance, mother-infant interactions are often highly rhythmic and characterized by frequent vocal overlap or chorusing rather than dyadically following a turn-taking pattern. This pattern could be described as “protosong” rather than as “protoconversation”. I will discuss how these differences might have an impact on the developing self and how discourse analysis can be used as a methodological approach to study these phenomena.

Reference to literature to be read before the presentation

Demuth, C. (2013). Protoconversation and protosong as infant’s socialization environment. In: Therese M. S. Tchombe, A. Bame Nsamenang, Heidi Keller, & Márta Fülöp (Eds). *Cross-Cultural Psychology: An Afrocentric Perspective*. Pp. 232-256, Limbe, Cameroun: Design House

Gratier, M. & Trevarthen, C. (2008). Musical narratives and motives for culture in mother-infant vocal interaction. *Journal of Consciousness Studies*, 15(10-11), 46-79.

Carolyn Demuth is Assistant Professor at Aalborg University, Centre for Developmental & Applied Psychological Science CeDAPS. Her interests are in the dialogical interplay of self and culture with a specific focus on discursive practices in social interaction. She has done research on mother-child interactions in Cameroon and Germany, as well as on parental ethnotheories of Turkish migrant families and self narratives of young adults. She has also a strong interest in qualitative methods and epistemologies, particularly discursive psychology.

Christian Gold: Follow up on pragmatic versus explanatory studies in music therapy?

For those who participated in Christian Gold’s presentation last time, please bring the study you rated to in your group, your notes and the PRECIS wheel.

Christian Gold is Principal Researcher, Grieg Academy Music Therapy Research Centre (GAMUT), Uni Health, Uni Research, Bergen, Norway. Professor, Grieg Academy Department of Music, University of Bergen, Norway. Adjunct professor, methodological adviser, and member of the PhD board at the International Music Therapy Research School, Aalborg University, Denmark. Editor-in-Chief of the *Nordic Journal of Music Therapy*. Associate Editor for the Cochrane Developmental, Psychosocial and Learning Problems Group (CDPLPG). Private music therapy practice in Vienna, Austria. His main research interests include outcome research (clinical trials and meta-analyses), their methodology and application in music therapy in mental health. He is also interested in research connecting process and outcome.

Reference to literature to be read before the presentation

Thorpe, K. E., Zwarenstein, M., Oxman, A. D., Treweek, S., Furberg, C. D., Altman, D. G., . . . Chalkidou, K. (2009). A pragmatic-explanatory continuum indicator summary (PRECIS): a tool to help trial designers. *Journal of Clinical Epidemiology*, 62, 464-475.
doi:10.1016/j.jclinepi.2008.12.011

Ilan Sanfi: The effect and meaning of receptive music therapy in reducing chemotherapy-related side effects in child oncology

After defending my PhD study at Aalborg University I initiated a multi-annual research project on receptive music therapy in child oncology at Aarhus University Hospital. What I would like to present to you is various aspects of this on going research project. The research project comprises two separate but related RCT mixed methods studies. The studies aim at evaluating whether *Specially designed music narratives* and *Guided Imagery and Music* can reduce side effects of chemotherapy in children (7-12 years) and teenagers, respectively, with cancer. Specifically, we evaluate whether if the above-mentioned music interventions can:

Reduce:

- Nausea
- Vomiting
- Fatigue
- Pain
- Amount of required nausea reducing medicine

Increase:

- Appetite
- Level of neutrophil granulocytes (white blood cells)
- Sence of coherence
- Weigth

In addition, via semi-structured interviews we secondarily evaluate the participants' experience of the two music interventions and which meaning the music therapy has in relation to their course of disease.

During my presentation I will address the background of the research project, the research questions, and the applied design and methods. A description of the music interventions will also be given. I will also give an outline of the applied treatment fidelity plan. After that, the results from a preparatory pilot study will be sum up shortly. Finally, the presentation concludes with a demonstration of one of the music narratives that we use in the study.

Ilan Sanfi, music therapist, PhD, Aarhus University Hospital (Denmark)

Jaan Valsiner: What can cultural psychology offer to music therapies?

Psychology has historically been built on examples of music (1890s discussions of Gestalt perspectives), but in later 20th century that focus has been lost. The new discipline of Cultural Psychology that emerged in the 1980s at the intersection of developmental and social



psychology and anthropology has finally (Klempe, H (Ed.), (in press. to appear in 2014) CULTURAL PSYCHOLOGY OF MUSIC) reached the analysis of musical experience. My presentation will build on the examples of cultural psychology of musical experiences that (I hope) will link with the interests of musical therapies.

Jaan Valsiner is a cultural psychologist with a consistently developmental axiomatic base that is brought to analyses of any psychological or social phenomena. He is the founding editor (1995) of the Sage journal, *Culture & Psychology*. He is currently Niels Bohr Professor of Cultural Psychology at Aalborg University, Denmark. He has published many books, the most pertinent of which are *The guided mind* (Cambridge, Ma.: Harvard University Press, 1998), *Culture in minds and societies* (New Delhi: Sage, 2007), and *Invitation to Cultural Psychology* (London: Sage, 2014). He has edited (with Kevin Connolly) the *Handbook of Developmental Psychology* (London: Sage, 2003) as well as the *Cambridge Handbook of Socio-Cultural Psychology* (2007, with Alberto Rosa) and *The Oxford Handbook of Culture and Psychology* (2012). He is the Editor-in-Chief of *Integrative Psychological and Behavioral Sciences* (Springer, from 2007). In 1995 he was awarded the Alexander von Humboldt Prize in Germany for his interdisciplinary work on human development, and Senior Fulbright Lecturing Award in Brazil 1995-1997. He has been a visiting professor in Brazil, Japan, Australia, Estonia, Germany, Italy, United Kingdom, and the Netherlands. E-mail: jvalsiner@gmail.com

Reference to literature to be read before the presentation

- Salvatore, S., & Valsiner, J. (2010). Between the general and the unique overcoming the nomothetic versus idiographic opposition. *Theory & Psychology, 20*(6), 817-833.
- Valsiner, J. (2005). Transformations and flexible forms: Where qualitative psychology begins. *Qualitative Research in Psychology, 4*(4), 39-57.
- Valsiner, J. (2014). Needed for cultural psychology: Methodology in a new key. *Culture & Psychology, 20*(1), 3-30.

Jean McNiff: The choices we make when doing action

Professor Jean McNiff is giving an open lecture at the 9th National Action Research Conference, taking place in Aalborg. McNiff is professor at Saint John University, York, YK.

Anne Marya Greve & Maria Abildgaard Haladyn: From Submission to E-publishing

A common procedure has been established for submitting, filing, printing and publishing PhD theses at AAU. The procedure supports the various interested parties involved at the faculties in the best possible way. The new common procedure results in a flexible submission and publication process, as well as it ensures high quality research exposure through accessibility of the theses in the established PhD Series from Aalborg University.

PhD defences

Xi Jing Chen: Music therapy for improving mental health problems of offenders in correctional settings

Presentation of doctoral research followed by a public viva with the examining committee; Cathy Mckinney, Helen Odell-Miller and Jaakko Erkkilä. The doctoral thesis and a summary is available at: <http://www.mt-phd.aau.dk/eventlist/event/phd-defence-by-xi-jing-chen--music-therapy-for-improving-mental....cid140635>

Katarina Mårtenson Blom: Experiences of Transcendence and the Process of Surrender in Guided Imagery and Music (GIM) - Development of New Understanding through Theories of Intersubjectivity and Change in Psychotherapy.

Presentation of doctoral research followed by a public viva with the examining committee; Inge Nygaard Pedersen, Denise Grocke and Antoon Geels. The doctoral thesis and a summary is available at: <http://www.mt-phd.aau.dk/eventlist/event/phd-defence-by-katarina-m-rtenson-blom.cid141916>



One page summaries



Anna Helle-Valle: How do we understand children's restlessness?

Supervisor: Brynjulf Stige, University in Bergen

This presentation will focus on to questions related to my Ph.D. project about children, restlessness and music therapy in kindergarten:

1. How do parents and professionals understand children's restless behavior?
2. How can community music therapy contribute to adults' understanding concerning children's restlessness?

ADHD is the most frequently used children's mental health diagnosis in Norway today (Ullebø, 2010) and is in this sense both a part of the Norwegian normality, but also a way to define children as outside the norm. A definition of normality includes both descriptive and normative aspects (Lie, 2010; Rolvsjord, 2010). There is no objective test for ADHD, and the foundation for diagnosing as having ADHD consists of subjective assessments made by parents, teachers, doctors and psychologists. Within this context, I have chosen to investigate how these adults describe, understand and judge children's restless behavior. Community music therapy (Stige & Aarø, 2012) will in this presentation be used as a context that affords a supplementary or contrasting understanding of children's restlessness.

The qualitative data presented were collected as audio recordings from group discussions held by a cooperative inquiry group. The group was part of a bigger action research project about children, restlessness and community music therapy in a kindergarten in Bergen. The cooperative inquiry group was recruited from the kindergarten's local community, and consisted of three parents, a clinical social worker from the children and youth's mental health outpatient clinic, a psychologist from the pedagogical-psychological services, two music therapists from the pedagogical competence center, a case worker from the children's welfare services, a general practitioner, two pedagogical leaders and the director of the kindergarten where we had carried out the community music project. Together with one of the music therapists, I facilitated the group discussions.

After having transcribed the recordings, read through, reread and coded them, I chose to place the different understandings presented by the group in relation to Bronfenbrenner's ecological model (Bronfenbrenner & Morris, 2007). The ecological perspective can be related to a biopsychosocial model of health (Engel, 1977), which again can be said to facilitate the extensive use of the ADHD diagnose (Helle-Valle, 2014).

I will present the results under the following headings: An individual-oriented understanding, a family- or group-oriented understanding, a community-oriented understanding and a meta-reflexive understanding. The main findings have so far been that the participants in the cooperative inquiry group presented and discussed restlessness on many levels, and connected children's restlessness with several other problems than ADHD as it is presented in the diagnostic manual. Concurrent with an ADHD understanding, restlessness was often talked about as a problem relating to the behavior of the child, but several other understandings were also offered. This could for instance be restlessness as communication, resource, relating to the conditions that children live under, modern Norwegian child rearing culture, parents' insecurities and problems, family violence, kindergarten architecture or adults' individual window of tolerance.

At the Ph.D. course I will present the results in more detail and hope to initiate a shared reflection related to the two questions posed at the beginning of this summary.



Anke Coomans: Musical improvisation and severe dementia. Final presentation: Common knowledge versus personal pre-understandings

Supervisors: Prof. Dr. Hanne Mette Ridder and Prof. Dr. Jos de Backer

Title of study: Musical improvisation and the occurrence of essential moments of meeting in music therapy with people in a severe stage of dementia

Research Question and Context: Main Research Question: *How does musical improvisation contribute to the occurrence of essential moments of meeting in music therapy with people in a severe stage of dementia?*

Methodology: The study has been set up following a multiple case study design according to the principles of interpretive phenomenology. Main data are video-recordings of the individual music therapy sessions with 4 subjects in a moderate/severe state of dementia, and the clinical notes of the music therapist who is also the researcher. These clinical notes comprise the therapist's impressions and phenomenological descriptions of the sessions. The analysis of the data happened by means of a clinical research intervention group (CRIG: clinical supervisor, external music therapist, psychotherapist and researcher). They made a selection of the most important video-fragments by watching all recordings of the sessions. Then, a musical analysis of these selected fragments was made. In the final stage, all findings from the musical analysis, the CRIG and the clinical notes were combined by means of categories in order to formulate answers on the research question.

Current state of the study

Part-time Study: July 2009-June 2015. Data-analysis is finished, writing process is ongoing.

The final: "Common knowledge versus personal pre-understandings"

In this presentation I want to explore the 'grey zone' between my idea about common knowledge and my personal pre-understandings. According to the stage of my Phd-process, I ask myself the question: "To what extent do I have to describe my specific conceptual framework in order to permit the reader to understand my thesis. Which theoretical concepts do I need to explain in order to understand the outcome of my study?". Writing about my outcome, confronted me with the idea about the risk there is in describing the core phenomena of my study (the outcome) by means of other phenomena and concepts that are not part of common knowledge. I got aware of the fact that certain terms that I use in my descriptions (for example: musical reverie, resonance, transmodality), are part of a specific jargon which is characteristic for psychodynamic oriented music therapy in Belgium (Leuvense school), and for that reason, need more explanations for people from abroad or from different frames of thoughts frameworks. In my final presentation I want to explore this by means of a peer group reflection. In a first part, I will present the group an overview of chapter 2 of my thesis which comprises the theoretical and conceptual framework of my study. In a second part I will show the findings that I got from one of the four case studies, in the way they are described in the thesis. Main question for the group will be here: "Are the findings clear and understandable for everyone, no matter which background or clinical orientation one has?". And, are possible misunderstandings a result from the way the outcome is presented?

Esperanza Torres Serna: Results : toward the end of the research: Usefulness of group Music and Imagery (Grp MI) with Fibromyalgia patients

Supervisors: Inge Nygaard Pedersen & José Ignacio Pérez Fernández

Title of study

“Usefulness of group Music and Imagery (Grp MI) with Fibromyalgia patients”

Research questions

1) To analyse the effects of group treatment combining relaxation, image visualization and music (GrMI) on the perception of psychological welfare, pain perception, self-perception of energy potential and functional capacity of FM patients, as well as on other variables related to psychological malaise, such as feelings, anger expression, anxiety and depression.

2) To determine if the effects of this kind of treatment last over time.

Method

This study uses an experimental design of repeated measures pre-test, post-test, and follow-up after three months with a control group.

A quantitative methodology is used.

Current state of the study

The research project started on 1st, August, 2010.

The results have been worked out and I am starting to write up the discussion chapter.

Abstract of Presentation

This presentation will focus on the results chapter. I would like to use the opportunity to present some of the dates of the analysis carried, such as: 1) comparison of the results between both groups (inter-group analysis) in the different measures (pretest, posttest, and follow-up) and 2) intra-group results in the different variables studied. I would like to have your feed back on my way of approaching how to link the findings and the literature.



Gabriella Rudstam: In the very beginning of my journey: “Group GIM and expressive arts in trauma treatment

Supervisors: Lars Ole Bonde

Title: Group GIM and expressive arts in trauma treatment.

Research questions

1. Can group GIM and expressive arts:
 - a) Be helpful in reducing the symptoms of CPTSD?
 - b) Enhance quality of life?
 - c) Increase capacity for regulating the ANS in clients with CPTSD?
2. Can group GIM and expressive arts be helpful for processing and integrating traumatic experiences of a population with CPTSD? If so, in which way?
3. What characteristic features and development processes (in individuals with CPTSD) are observed in images evoked by music listening?
4. Which features and development processes are characteristically described in external images made after the music listening phase?

Research design

A convergent parallel mixed method study. There will be a quantitative part with a randomized trial with a waiting list control group and qualitative part with analysis of the music, the internal and external imagery, journaling and a semi structured interviews.

Current state of the study

I'm in the very beginning and have started up the first pilot group consisting of five women with CPTSD. Together with my co-therapist Ingrid Hogan I start to build a manual for the group sessions. We are planning for a second pilot group starting in January 2015.

Content of presentation

To present the project and discuss reflections from the reviewer.
Is the study to big?

**Lena Ugglå: In the middle of a two armed controlled randomized efficacy trial:
"Can music therapy improve quality of life and support the somatic recovery
after hematopoietic stem cell transplantation in children and adolescents?".
Discussion of interesting but also conflicting results**

Supervisors:

Britt Gustafsson, main supervisor, MD, PhD, professor in pediatric hematology

Björn Wrangsjö, co-supervisor, MD PhD, associate professor, child psychiatrist, GIM-therapist

Britt-Marie Svahn, co-supervisor, PhD, registered nurse.

Title of the study Can music therapy improve quality of life and support the somatic recovery after hematopoietic stem cell transplantation in children and adolescents?

Research questions

- Can music therapy support the psychological recovery after:
Autologous stem cell transplantation in children and adolescents?
Allogeneic stem cell transplantation in children and adolescents?
- Can music therapy affect the physical recovery after completion of HSCT in children?
- Can music therapy affect the staffs' awareness of the child's needs in the hospital ward?
- In what respects it is possible to describe the interaction between patient and music therapist?
- We have, now identified results from 20 patients, including physiological figures and results from the quality of life questionnaires. We have so far, noticed an interesting difference in some physiological parameters, but the questionnaires are hard to interpret, due to different ages. How can we interpret these results in a very scientific medical setting? (Our aim is to publish and discuss the results in a pediatric journal "Acta Paediatrica").

Research design

Study 1: A two-arm randomized controlled study

Study 2: A two-arm randomized controlled study,

Study 3: A qualitative study research as a collaborative research interview with children, parents and therapist from both study 1 and 2.

Study 4: Focus Group discussions with the staff from the two present departments of the hospital; Centre for Allogeneic Stem Cell Transplantation (CAST) and B 78 at Astrid Lindgren Children Hospital, both departments at Karolinska University Hospital-Huddinge.

Currents state of the study: Data collection phase, study 1 started in Feb. 2013, study 2 started in Sept 2014 and planning for the start of study 3 in Feb 2015.

Presentation: I will begin with a presentation of the two ongoing studies and discuss some interesting but also conflicting results.

Financial support: the Swedish Childhood Cancer Society, The Ekhsaga Foundation.

Margareta Wärja: Pulling together a huge data set in a Mixed Methods Study. “The process of finding the most relevant topics for an article based PhD”

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

Title of study: 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 implemented. 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 theories and methodology of 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. The wait-list/control group within the RCT format will also generate a large amount of data. The control has within the course of this project become a valid intervention in its own right. The collected data from the wait-list will be investigated after the defense of this article based PhD.

Content of presentation

1. Briefly describe the current state of the project
2. Present an overview of the article and the book chapter that have been accepted for publication (to be included in the dissertation)
3. Discuss challenges of appropriate screening illustrated by comments from participants
4. Reflect upon how to use the rich collected material from the three comprehensive questionnaires (pre-post-follow-up) and the forms filled out by the individual therapists
5. Involve two therapist for comments on the process of filling out forms
6. More specifically: reflect upon how to find the appropriate focus/topics for two/three more articles within this large data set

Maya Story: Re-designing the Blueprint: Updates to Methodology and Design

Supervisors: Lars Ole Bonde, Bolette Daniels Beck, Lisa Summer

Title of Study: Guided Imagery and Music as a Treatment Modality for Female Veterans with Military Sexual Trauma and Post Traumatic Stress Disorder

Study Aims/ Research Questions

Aim 1: Determine the feasibility of Guided Imagery and Music (GIM) as a treatment modality for female veterans with Military Sexual Trauma related Post Traumatic Stress Disorder

- Do female veterans find GIM beneficial?
- What themes do female veterans explore through the GIM process?
- What is the feasibility (viability of GIM sessions in terms of recruitment and attrition) of GIM sessions?

Aim 2: Discover how female veterans are experiencing GIM.

- What do female veterans find meaningful in GIM?
- How do female veterans experience components of the GIM sessions (music, imagery, creative processing)?

Aim 3: Obtain effect sizes and preliminary data on the efficacy of GIM for female veterans with MST related PTSD as an alternative to evidence-based CPT.

Hypothesis 3.1: GIM participants will score no worse than Cognitive Processing Therapy (CPT) participants, on reduction of PTSD symptoms at end of group sessions and 8 weeks post end of group.

Hypothesis 3.2 GIM participants will score no worse than CPT participants on social measures at end of group sessions and 8 weeks post end of group.

Research Design: Sequential Mixed Methods qual:QUAN

Current State of the study:

PhD plan submitted and approved

Elaborate Proposal to be submitted November 2014

Presentation: After completing an extended literature review as part of the elaborate proposal process, questions emerged in regards to the group format for the intervention. Further examination led to a decision to switch from a Group Music and Imagery intervention to an individual GIM intervention. I will present brief findings from the literature review that led to the rationale for switching aspects of the methodology and design. Embedded in that discussion will be a description of the non-inferiority design, and the decision to use a continuum of GIM as the intervention.

Ruth Hertrampf: Seeing the light at the end of the tunnel – getting towards the end of a research journey

Supervisors: Lars Ole Bonde, Cathy McKinney

Title of the Study

Guided Imagery and Music (GIM) in curative and non-curative treatment for patients with breast cancer and gynecological cancer

Research questions

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?

Research design

The mixed methods study firstly consists of an RCT comparing „GrpMI + treatment as usual (TU)“ and „Progressive Muscle Relaxation + TU“ in six sessions, and secondly of a qualitative investigation focusing on the relationships between GrpMI and both diagnosis and treatment phase.

Current State of the study

Data collection is supposed to be finished in December 2014. Preliminary quantitative and qualitative data analyses are being conducted.

Topic for the presentation

As this is my last time presenting at the PhD Course, an overview of the whole research process will be given, including challenges met on the way. Recent quantitative and qualitative data analyses will be presented and illustrated with case studies. An important issue for discussion will be the triangulation of quantitative and qualitative data.

Tali Gottfried: Effect of intervention: Does Collaborative-Parent-counseling in Music Therapy (CPCiMT) help to reduce parental level of stress, increase their QoL perception and increase the use of music in everyday life? A spotlight to RCT analysis

Supervisors: Christian Gold & Cochavit Elefant

Title of study

Collaborative-Parent-Counseling in Music Therapy for parents of children with Autism Spectrum Disorder

Main Research Questions

1. What is the influence of Collaborative-Parent-Counseling in Music Therapy (CPCiMT) on Level of Stress and Quality of Life of parents of children with ASD?
2. What is the influence of CPCiMT on the use of Music in Everyday Life by the participants with their children?

Design: Randomized Controlled Study (final n=13; planned: n=40) embedded in a mixed methods design aiming to collect quantitative and qualitative data.

Aim of the study: this study aims to examine whether Collaborative-Parent-Counseling in Music therapy (CPCiMT) contributes to: a) reduce level of parental stress; b) increase parents' perception of Quality of Life; c) extending and developing the use of music by parents in everyday life.

Current state of the study: data collection of 14 families completed on April 25th; data analysis was done for the RCT; MEL questionnaire was validated; qualitative analysis has started; an independent rater watched videos of counseling sessions, and completed Fidelity Assessment of Counseling Guide.

Topic of the presentation: Participants of the current study (n=13) were randomly assigned to one of four groups:

	With MT	Without MT
Minimal CPC	OC-93	OC-96
	OC-84	OC-99
	OC-85	OC-161
Maximal CPC	OC-86	OC-94 OC-163
	OC-109	OC-88
	OC-83	OC-104

I will present data analysis of the change after intervention in each group. In summary, data analysis show: 1) no significant change in level of stress in any group; 2) a significant positive change in QoL of children who participated in MT sessions; 3) a significant positive change in QoL of parents who participated in maximal CPC sessions; 4) a good result for using music in routine activities by participants in the maximal CPC; 5) a significant correlation between 'using music in routine activities at home' and high QoL of the family; 6) an advantage to CPC in more 'singing together' and 'playing instruments' together; and 7) an advantage to MT in more 'listening to music together' and 'playing musical apps. together'.

A question I have at this point: What is the best way to present results of such a small n?