

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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PhD-defences

Evangelia Papanikolaou: Receptive music therapy in oncology: Guided Imagery and Music during the course of active treatment for breast and gynaecologic cancer. A two-part preliminary investigation

Evaluation Committee:

- . Associate Professor, PhD Charlotte Lindvang, Aalborg University
- . Associate Professor Eric Waldon, University of the Pacific
- . Professor Gro Trondalen, Norwegian Academy of Music

Supervisors

- . Associate Professor, PhD Niels Hannibal
- . Professor, PhD Cathy McKinney

Defence Moderator:

- . Niels Hannibal

This project is a very first attempt to explore and evaluate the potential of the receptive music therapy method Guided Imagery and Music (GIM) as a brief psychological intervention for women who are receiving chemotherapy or radiotherapy in an outpatient Greek Gynecologic Oncology hospital unit.

A GIM session involves an initial conversation followed by listening to a specifically designed sequence of music pieces in a relaxed state. The client describes to the therapist any images, emotions, sensations, or thoughts elicited and supported by the music, and afterwards, there is a verbal processing of the experience.

The overall preliminary investigation has two main aims: the first aim is to examine the feasibility of such a complementary intervention in a hospital setting that has no intervention other than standard medical care. Since there is no systematic evidence concerning applications of GIM during the course of active medical treatment for cancer, the second aim of this preliminary investigation is to pilot a randomized controlled research design inquiring into the role of GIM as a supportive therapy for women during the course of chemotherapy or radiotherapy and its potential effect on relevant psychological variables. Should findings indicate that GIM can be an effective treatment, this preliminary knowledge can inform clinical practice and give suggestions for a large-scale research protocol.

Therefore, this thesis consists of two investigations. The first investigation is a mixed-methods feasibility study including a qualitative and quantitative part, with a small purposive sample of four participants. Women received a series of six approximately weekly, individual, short GIM sessions, and they completed the FACT-G and HADS questionnaires at two time points (baseline/pre and post therapy) and 10-point Likert scales for fatigue and hope, before and after each single session. This was followed by a qualitative interview with focus on the perceived experience and participants' feedback on feasibility and delivery of the intervention (frequency, location, length, etc.). Results: Positive changes in mood, fatigue levels, and hope were reported by the participants while the changes in hope and fatigue were also supported by the results of the Likert scales, but, no significant changes to self-reported anxiety and



depression and QoL as measured by HADS and FACT-G were found. Consequently, the variables of fatigue, hope, and mood have formulated the research questions for the second part of the investigation.

The second investigation is an experimental, randomized controlled trial (RCT) pilot study, in which the questions, procedure, and design were adjusted and constructed according to the feasibility's outcomes and indicated direction. Participants (N = 20) with breast and gynecologic cancer were randomized into a Treatment group and a Control group. The Treatment group (n = 10) received six approximately weekly, individual, short GIM sessions in addition to standard care, and the Control group (n = 10) received standard medical care and two supportive verbal psychotherapy sessions, one at baseline and another after 6 weeks. Participants in both groups completed the same questionnaires on mood, fatigue, and hope. Profile of Mood States (Brief), Cancer Fatigue Scale (CFS) and Herth Hope Index (HHI) were used at baseline and post-treatment, and visual analogues scales (VAS) for Hope and Fatigue were used for 6 consecutive weeks. Results: VAS for Hope and Fatigue showed significant changes in increasing hope and decreasing fatigue in the Intervention group, but there were no significant pre-post within-group differences for the three standardized questionnaires HHI, CFS, and POMS; however, the Intervention group showed medium pre-post effect sizes on all three measures. GIM showed promise to be effective in decreasing fatigue, increasing hope, and mitigating distressed mood for women undergoing medical treatment for breast or gynecologic cancer.

The ultimate aim was not only to obtain preliminary documentation on the potential effect of the intervention but also to gain data on the practicality of GIM as a psychological therapy during the course of active treatment for breast or gynecologic cancer. Within this context, one other purpose of this investigation was to gather preliminary information as to whether a full trial could be feasible to conduct in the Greek hospital system. For this purpose, information was gathered about various components that are necessary for a trial such as recruitment, adherence, and variability outcomes, and explored whether they can work properly together. According to these, recruitment must be assisted by medical staff, and persistence by the researcher is needed to keep up with allocation and total completion time. Cultural and socioeconomic issues should be considered as they may play a major role in patients' compliance and engagement with therapy. Treatment fidelity issues need to be also taken into account; although GIM in shorter form and simplified music is feasible in such population, session format and therapeutic processes must be handled with flexibility to accommodate the needs of a clinical population with limited resources.

Overall, this PhD study contributes to clinical practice and research by providing new evidence on the role and significance of GIM in a new and under-researched clinical area, specifically, during a course of active cancer treatment. The promising quantitative results in combination with the qualitative findings, provide a multi-dimensional understanding of the effects of GIM for the study participants as well as of its role and feasibility in such a clinical setting. The importance of enhancing hope, and positively addressing fatigue and mood for women cancer patients becomes evident from these preliminary results. However, in this small-scale investigation with sample from only one hospital unit, the results cannot be generalized. Another limitation of this study is the inclusion of participants with first cancer diagnosis as well as advanced cancer patients, two categories that often have a different psychological profile due to stage of disease, suggesting the need for a more homogenous sample in the future. There are discrepancies in the findings between repeated measures VAS results showing statistical significance and the psychometric instruments HHI, CFS, and POMS

that did not show significance. The reason for this is unclear, and further research is needed to clarify this. Therefore, future research is recommended not only on qualitative, in-depth experiences of the patients, but also on measurable psychological outcomes in a larger-scale study.

It should be clarified that the term Gynecologic Oncology is used as an umbrella term for breast cancer (BC) as well as all types of gynecologic cancers (GC), since the hospital unit that hosted this study provides care for women with the aforementioned cancer types. However, little evidence in general has been found in the literature regarding patients with GC care and their psychological needs, and there is no evidence about any specific characteristics of patients with gynecologic cancers in Greece. Thus, the emphasis of the first part (feasibility study) was on patients with GC only, in order to identify any specific needs or characteristics that could have been pointed out by the participants of this Greek sample. However, since no particular trends were revealed or suggested by the participants, women with breast cancer also were included in the sample of the RCT pilot to enlarge sample size of the research investigation.

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Jens Anderson-Ingstrup: PhD-defence. 'A flexible fit. Developing a suitable manual frame for person attuned musical interaction'

Evaluation Committee:

- . Associate Professor Ulla Holck, Aalborg University (Chair)
- . Professor Helen Odell-Miller, Anglia Ruskin University
- . Professor Thomas Wosch, University of Applied Sciences Würzburg-Schweinfurt

Supervisors:

- . Professor Hanne Mette Ridder, Aalborg Universitet
- . Associate Professor Jacob Gorm Davidsen, Aalborg Universitet

Defence Moderator:

- . Associate Professor Stine Lindahl Jacobsen

In the thesis Jens Anderson-Ingstrup discusses the potential paradox of creating a manual that is meant to guide persons in conducting person attuned musical interactions. The paradox is that manuals can be considered as something fixed and inflexible, while successful person attuned musical interactions require a high degree of flexibility and adaptability.

Following a realist approach, Jens Anderson-Ingstrup investigates and discusses mechanisms that underlie manuals about complex interventions and explores the concept person attuned musical interaction. The methods include literature reviews (e.g., state-of-the-art and scoping reviews), video analysis, conversation analysis, analogue and software-supported methods (e.g., Melodyne and ELAN) of extracting information regarding musical parameters, and phenomenological approaches. The data includes video material and publications.

The thesis is compiled by three separate articles and this linking text.

Article 1 is a state-of-the-art literature review where I question the understanding of mirror neurons through a review of the evidence regarding their presence in the human brain



and possible connection to phenomena such as empathy and imitation. While one study has located neurons showing “mirroring properties” in the human brain, the evidence concerning their involvement in phenomena such as empathy and imitation is lacking or contradicting. Based on the findings of this review it is not recommended to apply the concept of mirror neurons as a fact-laden frame to explain these phenomena, which could be of relevance when describing person attuned musical interactions.

Article 2 is a scoping review where I explore the design of manuals about complex interventions in the field of dementia. Specifically, the analysis concerns the dissemination elements in the manuals, the level of flexibility of the manuals, and the possibility of tailoring the intervention disclosed by the manuals. The results show that the main dissemination elements include written text and a variety of different graphical organisers. None of the manuals contain audio/visual elements, animate or in-animate. All manuals allow tailoring of the intervention and the majority show a medium degree of flexibility. Based on the results it is recommended that developers of future manuals consider the inclusion of audio/visual material, allow tailoring of the intervention, and maintain a certain degree of flexibility in the manual.

Article 3 is an analysis of video material of a music therapy session with a music therapist and a person with dementia. Inspired by conversation analysis, I analyse and examine the use of music in the interaction between the participants and the development of the quality of their interaction. The method included a phenomenological transcription of the content of the video, extraction of data concerning musical parameters using analogue and software-based methods, and a detailed sequential analysis of the interaction between the participants. The results included an overview of how different musical parameters changed in accordance with the state of the interaction, specifically regarding different types of tempo variations. The results further indicated the presence of two sections in the interaction; a person attuned musical arousal regulation process and a person attuned musical interaction process, where the quality of the interaction shifted from being one-sided to being reciprocal with more equality regarding initiations in the interaction.

The linking text introduces the context for the thesis, presents expanded reflections regarding the methodology of the project, and provides answers for the research questions of the thesis. This includes presenting an ontology for the concept “a manual” and a discussion based on a realist perspective of relevant mechanisms that constitutes an applicable manual. Based on this discussion I propose a framework that can be used to guide the development of manuals. Finally, I provide suggestions regarding the application of the findings, as well as strategies to limit the limitations of the project. The thesis is part of the PAMI project located at Aalborg University and is funded by the Velux Foundation.

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Pre-PhD-defence

Julie K. Krøier: Exploring Person Attuned Musical interactions in Dementia Care. Presentation of three sub-studies and their integration in the thesis

Discussant: Stine Lindahl Jacobsen

Supervisors: Hanne Mette Ridder, Aalborg University, Denmark & Brynjulf Stige, University of Bergen, Norway.

Titel of the study: Exploring Person Attuned Musical interactions in Dementia Care

Research questions:

1. How can attunement between carers and persons with dementia be understood according to evidence-based research (paper 1, Published)?
2. How do music therapists talk about non-verbal interaction in their practice with persons with dementia (paper 2, unpublished manuscript)?
3. How do professional caregivers use and understand musical interactions in Dementia Care? (Unpublished manuscript)
4. How can PAMI can be disseminated to carers through a manual (together with the PAMI group, Unpublished manual in Danish)?

Research design: A multi-source strategy was applied incorporating different kinds of data (Literature reviews, musical improvisations, transcripts from workshops with music therapists and carers) to integrate theory and clinical practice. The PhD contains three interrelated parts that each explores attunement and non-verbal musical interactions from different perspectives (See research questions).

Method: The PhD is a qualitative research study and interpretivist methods were applied in order to answer the research questions.

Current state of the study: A meta-ethnographic synthesis of attunement in Dementia Care has been conducted and published. A phenomenological study of how music therapists talk about non-verbal communication with persons with advanced dementia was performed incorporating art-based methods. The study has been written into an article, ready for submission.

The PAMI-group has been working on a manual that supports music therapists in teaching carers in how to apply musical interactions in dementia care. The manual was tried out in a Danish Care-home in January-march 2020 and I am currently writing up an article concerning how the carers use and understand Musical interactions in their practice.

Krøier, J. K., Ridder, H. M., & McDermott, O. (2020). Conceptualizing attunement in dementia care. A Meta ethnographic review. *Arts & Health, 00(00)*, 1–17.
<https://doi.org/10.1080/17533015.2020.1827276>



One page summaries

Angel Leung: Asian music therapy educators' experiences of teaching music therapy in Asia after receiving formal training outside of their home country

According to the World Federation of Music Therapy (2017), various levels of music therapy practice is taking place in eight major regions of the world. In 2015, it is reported that 37 countries around the world, besides the United States, offer a total of 100 music therapy entry-level curriculums, with at least a quarter of those curriculums located in Asia (Kavaliova-Moussi, 2015). With the increased interests in music therapy, it is believed that the number of countries offering music therapy training will likely continue to increase.

In spite of the expansion of the profession worldwide, there are still countries where music therapists are struggling to achieve basic recognition and respect for their services as compared with other more established allied healthcare professionals (Brotons et al., 1997; Heiderscheit, Leung & Lotter, 2017). In addition, as mentioned by Kavaliova-Moussi (2015), some of the music therapy curriculums offered around the world are only entry-level, which may not be recognized by professional organizations as properly constituted training experiences (Erdonmez, 1994; Kavaliova-Moussi, 2015). Even if the curriculums are above entry-level and recognized in the country, they are generally fairly young (within 10 years of establishment) (Kavaliova-Moussi, 2015). When people in these countries seek to become professional music therapists, they often will travel to other parts of the world for more formal and established training curriculums.

With the expanding interests in music therapy around the world in the past decades (WFMT, 2017), and the reported numbers of music therapy curriculums worldwide (Kavaliova-Moussi, 2015; Schmid, 2014; Ridder & Tsiris, 2015; Saji et al., 2010), it is believed that many of those younger curriculums are developed and taught by professional music therapists who sojourned back home after receiving training from a more formal and established music therapy curriculum outside of their own country. This growing trend indicates a need for more attention to how these international professional music therapists take their education from their origin of studies and apply it in their home countries. Since many of the more formal and established music therapy curriculums are located in the Western part of the world, and more of the younger curriculums are situated in Asia, with culture being such a big difference between the East and the West, it would be interesting to explore the lived and teaching experience of native Asian music therapy educators who completed their formal music therapy education outside of their home country and then return home – in terms of how they experienced their Western music therapy education and how they adapted what they had learnt when teaching music therapy back in their own country.

Being one of the native Asian music therapy educators who completed their formal music therapy education outside of their home country and then return home to teach, I am interested in exploring this topic as an extension of my master thesis research. Hopefully those sojourning back home clinicians and visiting educators from the West could benefit from the findings of this study. To explore Asian music therapy educators' experiences of teaching music therapy at home after receiving formal training outside of their home country, I am hoping to adopt a phenomenological design for data collection and analysis for this study. With the nature of this qualitative study being constructivism, it will require an inductive reasoning process and therefore no hypotheses will be formed.

Dana Yakobson: Music Therapy for preterm infants and their parents: A cluster-randomised controlled trial; Starting the data analysis.

Supervisors: Dr. Bolette Daniels-Beck, Dr. Christian Gold; (And special consultants Prof. Shmuel Arnon & Dr. Cochavit Elefant)

Title of the study: The effects of family-centred Music Therapy (MT) during Skin-to-Skin Care (SSC) on preterm infants and their parents in the Neonatal Intensive Care Unit (NICU). A cluster-randomised controlled trial

Research questions:

The aim of the current study was to evaluate whether combined MT and SSC, as compared to SSC alone will lead to:

- Primary outcome: Clinical improvement in preterm infants' Autonomic Nervous System (ANS) stability as measured by parameters of the autonomic system including high frequency (HF) power and low frequency (LF) power of the heart rate variability (HRV).
- Secondary outcomes:
 - Clinical improvement in preterm infants' physiological markers and behavioral states
 - Reduction of parental anxiety levels
 - Improvement in attachment level between preterm infants and their parents

Research design: A single-center, time-cluster-randomized controlled trial with two parallel arms.

Method: Ten time-clusters of two months each, with a total of 68 preterm infants and their parents (mother, father, or both), were randomized to either control or experimental condition. In each cluster, all parent-infant dyads received the same allocation (MT+SSC or SSC alone) and participated in 2 sessions in the NICU and a 3-months' follow-up session at home. Infants' and parents' measurements were taken before, during and after each session. The MT intervention applied the principles of the RBL model for neonatal MT (Lowey et al., 2013).

Current state of the study: Beginning the data analysis phase. First statistical analysis results were processed. Starting to write the results and its interpretation to form the results paper.

Topic for the presentation: Presentation of the available results and direction to draw initial conclusions and/or discussion.

Helene Waage: Tone and attunement: Co-singing in families living with dementia

Supervisors: Tormod Wallem Anundsen and Tony Valberg

Title of the study: Tone and attunement: Co-singing in families living with dementia, explored in the light of autonomic nervous system regulation and the polyvagal theory

Research questions:

- 1: How do persons with dementia and their relatives experience singing as a part of daily life activities, and how can co-singing be adapted and supported to fit their experiences and meet their needs?
- 2: How can autonomic nervous system regulation and the polyvagal theory shed light on the mechanisms in play during co-singing in families living with dementia?
- 3: How can the polyvagal perspective contribute to supporting the condition for singing as part of communication and cooperation for persons with dementia and their relatives?

The aim is to shed light on how and why singing can enhance communication and cooperation for persons living with dementia and their relatives, especially in the light of autonomic nervous system regulation.

Research design: Karen Barad's agential realism and especially the concepts of intra-action and diffraction has inspired my approach. I combine agential realism with an abductive research strategy and move "reflection" towards "diffraction". I will triangulate between different theories and empirical material (case studies). These may be read diffractively through each other, but I will also include qualitative research strategies and methods in parts of the study.

Methods: In the theory study, the crossroad of the phenomena *singing, dementia, relatives, and autonomic nervous system regulation* is explored through a narrative literature review, and assessed following relevant theories, especially the polyvagal theory and communicative musicality.

In 3-4 case studies, I cooperate with dyads of persons with dementia and their relatives on low-threshold, process-oriented daily life singing activities based on their experiences and wishes. The case studies are influenced by participatory action research and ethnography. Semi-structured interviews with the dyads are carried out at different stages of the process and analysed with thematic analysis.

Current state of the project: So far, much focus has been on philosophy of science, methodology, ethics, and the polyvagal theory. A pilot case study is in process.

Topic for the presentation: I will present my research issue and the study design and discuss challenges.



Julie Ørnholt Bøtker: How to unfluff the fluffy? A research project about the concept of authenticity within music therapy, music teaching and music performance

Supervisor: Stine Lindahl Jacobsen.

Title of the study: The concept of authenticity and its meaning and applicability within music therapy, music teaching, and music performance within a family-oriented context. The research project serves as follow-up research within the MuFaSa-research project (Musik-Familier-Samspil // Music-Families-Interaction) lead by Stine Lindahl Jacobsen in cooperation with Ulla Holck and Gustavo Gattino.

Research questions:

- How can the concept of authenticity be defined and understood within the three different professions of music therapists, music teachers and music performers in a family-oriented context? Including; What could the benefits and challenges be for the professionals working with families in relation to the concept of authenticity?
- How is an experience of being authentically present as a music therapist, music teacher or music performer connected to the experience of the interaction with the participating families and vice versa?
- How can the experiences and reflections from professionals within the three musical professions broaden and inform disciplines, on a practical and theoretical level, based on the concept of authenticity?

Research design: The PhD study will be conducted within the qualitative research paradigm, applying interpretivist methods in the research design. The goal of the research methods is to discover and unfold meaning in the music professionals' subjective experiences of authenticity/inauthenticity. Furthermore, if possible, I also wish to search for patterns and similarities within and across the three different disciplines, relating my findings to existing literature. I therefore wish to apply phenomenological and hermeneutical research approaches in the overall design.

Method: Epoché-writing. Repertory grid interview on basis of the epoché. Preliminary semi-structured interviews. Reviewing existing literature. Semi-structured interviews with the music professionals participating in the MuFaSa-project; Focus group interviews and solo interviews, and hopefully using video excerpts from the MuFaSa-project as part of the interview process. Thematic coding analysis of the transcripts of the interviews. Triangulation of the findings with existing literature and with my own epoché.

Current state of the study: Writing of epoché. Doing repertory grid interview. Conducting preliminary semi-structured interviews. Transcription. Initial analysis. Participation in different PhD-courses e.g. "Danish Code of Conduct for Research Integrity" (AAU) and "Using Semi-structured Interviews in International and Cross-Cultural Contexts" (CBS). Participation in MuFaSa-related activities. Teaching voicework at AAU.

Topics for the presentation: In my presentation I would like to give an overview of the study and its present status. I hope to be able to present some of the only just recently emerging initial findings from the preliminary interviews and wish to reflect upon the further process from here-on.



Kerry Devlin: Case Formulation in Music Therapy Clinical Practice: Proposed Project Overview

Title of the study: Case Formulation in Music Therapy Clinical Practice with Neurodivergent Children

Research questions:

1. How do music therapists formulate cases in their clinical work with neurodivergent children?
2. How do these processes subsequently impact the way(s) these music therapists practice clinically with neurodivergent children?
3. Are there commonalities to the processes through which these music therapists formulate cases with neurodivergent children?
4. What implications, if any, does this have for the education and training of music therapy students?

Research design: A maximum of 12 expert-level music therapists will be recruited through theory-based purposive sampling. At each US-based clinical site, the researcher will: (1) Observe at least two music therapy sessions given by the music therapist. (2) Interview the music therapist about these sessions, using open-ended questions that illuminate the way(s) they formulate their clinical work with these clients, including the therapist's theoretical perspective, assessment process, types of data they deem important, formulation of clinical goals, approach to treatment planning, client-therapist relationship and the role of music. (3) Analyze one case vignette created by the researcher and ask these music therapists to articulate their understanding of the client, formulate goals, and describe how they would begin therapeutic work with the client.

Method: Procedures related to data analysis will be consistent with grounded theory in order to construct a theory of case formulation practices that incorporate a range of theoretical perspectives (i.e. behavioral, developmental, music-centered, disability affirmative) in music therapy clinical practice with neurodivergent children. Data collection will be undertaken at two levels: (1) narrative information generated from session observations and interview responses, and (2) narrative responses to the case vignette each participant will be prompted to formulate. The goal of data analysis for data type (1) will be to identify and define the essential elements of case formulation undertaken by each of the music therapists. The goal of data analysis for data type (2) will be to identify similarities and differences in case formulation processes across theoretical perspectives, with an emphasis on the way(s) each participant understands the client, their needs, focus of therapy, and underlying approach to treatment.

Current state of the study: The initial proposal has been accepted by the program at AU, but preliminary research will not begin until enrollment is complete.

Topic for the presentation: Researcher introduction and project background/overview.

Lars Rye Bertelsen: "Seek and thou shall find" – a look into the recent research literature

Supervisors:

Stine Lindahl Jacobsen, Christian Gold.

Title of the study:

"Receptive music intervention for the abatement of anxiety for in-patients diagnosed with unipolar depression who receive standard ECT treatment".

Research questions:

1. Can listening to playlists before and during ECT treatment reduce the patient's anxiety level, and is there a difference in the three research arms from listening to music for 4 or 8, and listening to nature sounds during ECT treatments 1 through 9?
2. How can the patient's overall experience of listening to playlists with either nature-sounds or music during ECT treatment be described?

Research design:

RCT Design, mixed-method, with self-reported questionnaires in REDCap, MusicStar logfiles and follow-up interviews with a few participants from each of the three research arms.

Method:

Prior to-, and during-, and after their standard ECT treatment, patients are offered to listen to one of two playlists specially curated to support the trajectory of the treatment.

The patients are randomized to TAU + listening to playlists with music or TAU + listening to playlists with nature sounds. Data is collected at baseline, before the second, the fifth and the ninth ECT treatment. A few participants in each research arm will have a semi-structured follow-up interview.

The current state of the study:

Approval from the Science Ethics Committee, the project with randomisation and questionnaires is prepared in REDCap and being tested, several cooperations- and legal agreements in place, Almost ready for data collection, planned to last for two years – starting this fall/winter.

The topic of the presentation:

Being a part-time student poses certain challenges. Furthermore, this project was originally initiated as a quality assurance project. The initial literature search in 2014 returned no research articles on music listening and ECT treatment. Since, I have found new related articles from time to time, but haven't conducted a systematic search recently. What is the better strategy to do so: a narrow systematic search on "music listening + ECT treatment", or a broader search on e.g. "music listening and pre-operative anxiety"?



Marie Falk: Outlines of an Investigation into the Use of Timing and Entrainment in Music and how it can influence the Human Nervous System and help relieve Total Pain Symptoms.

Titel of the study: The Influence of Musical Timing in Receptive Music Therapy on Arousal and Wellbeing in Patients in Palliative Care

Research questions:

- How does palliative music therapists use conscious musical timing during live receptive music therapy in order to help lower arousal and enhance wellbeing?
- How does changes in tempo in music affect the human nervous system and how might that be used as an aid in lowering arousal and enhance wellbeing?
- How does the conscious use of musical timing in live receptive music therapy affect the state of arousal and wellbeing in patients in palliative care?
- How can possible findings be transferred to and applied in the creation of recorded music for music medicine for patients in palliative care?

Research design:

- In this study both quantitative and qualitative methods are applied in order to answer the research questions. It may fall into four parts, one for each research question.

Method:

Part 1: the first research question is answered through short phenomenologic interviews with a small number of music therapists in palliative care.

Part 2: A number of voluntary individuals receive live receptive music therapy containing incidents of conscious timing. The possible reactions in their nervous systems is measured by heart rate, respiratory rate, finger temperature, blood pressure and/or EEG-measurements.

Part 3: Patients in palliative care with high arousal and total pain symptoms are randomized into an experimental group and a control group both receiving relaxing live receptive music therapy. In the music therapy for the experimental group conscious timing is applied.

Quantitative data are collected through observations of respiratory rate and visible signs of arousal and muscle tension and through self-reported levels of anxiety, stress, relaxation, pain and wellbeing as measured on a VAS-scale. Qualitative data are collected through analysis of short phenomenological interviews with the patients on their experiences with the applied treatment.

Part 4: On the basis of possible findings from part three a small number of music recordings are created and used as music medicine with patients in palliative care. The patients' benefit from the music is measured using a questionnaire on self-reported changes in physical, psychological and existential wellbeing.

Current state of the study: the study is at the first stages of presentation, delineation, discussion, justification and acceptance.

Topic for the presentation: to present the area of investigation and the initial ideas for researching the area. To discuss and receive feedback on the presented ideas to improve the research focus, the research design and the coming proposal for the PhD.



Snow (Tingting) Ren: The Historic Role of Culture in Case Studies

Title of the study: A qualitative systematic review on the components of clients' culture in music therapy case studies.

Research questions: How do the components of a client's culture influence the outcomes in music therapy? How has the reporting of a client's culture changed over time?

Research design: This qualitative systematic review will explore components of clients' culture in music therapy. It will research the role of culture in each case study, the influence on the therapeutic relationship, and the impact on the outcome of each case study in music therapy.

Method: This research will follow the guidelines of the PRISMA checklist when designing the study.

In addition to designing the study, the researcher will create a team of experts to assist in the process of reviewing the data and ensuring integrity of the project.

The researcher will:

1. Create inclusion criteria and exclusion criteria
2. Develop criteria for team members
3. Create a screening process
4. Create method of extracting data from the case studies
5. Search databases using the pre-established criteria and screening process
6. List and define all variables for which data is sought
7. Assess risk of bias
8. State summary findings
9. Create methods of handling data and combining results of studies, including measures of consistency
10. Specify assessment of risk of bias that may affect the cumulative evidence
11. Report results

Current state of the study: title established. Currently exploring literature on systematic reviews.

Topic for the presentation: research idea.

Tim Honig: Random[ly] [Un]Controlled Trial: A Pilot RCT in Time of Covid-19.

Supervisors: Dr. Niels Hannibal, Dr. Cathy McKinney

Title of the study: Treatment Effects of the Bonny Method of Guided Imagery (GIM) in the Treatment of Depression

Research questions:

Primary research question: Is a series of Bonny Method of GIM an effective treatment for persons with depression?

Phase I: Development of Quality Assessment process. Aim: Develop a quality assessment process including a form to monitor treatment fidelity for research purposes.

Phase II: Pilot RCT. In individuals with depression, does a series of GIM sessions a) reduce severity of depression, b) reduce severity of anxiety, or c) improve mental wellbeing in comparison to a control group?

Phase III: Full-Scale RCT Design. Based on the findings of the Pilot RCT, develop a design for a full-scale RCT investigating treatment effects of a series of GIM sessions for persons with major depression.

Research design: Mixed design with waitlist control group

Method: Randomized controlled trial with a wait-list control group

Current state of the study: The Treatment Fidelity pilot stage ($n = 25$ sessions) has been completed, manuscript under review. As of March, 2020, all recruitment and research procedures involving in-person contact were suspended due to COVID-19 and as required by the ethics review board. In August, 2020, sessions were resumed online, but recruitment was closed permanently ($N = 14$). Participants have either completed data collection ($n = 5$) or are in the final stages of intervention delivery and data collection ($n = 6$; attrition of $n = 3$). All data collection is to be completed in late January, 2020.

Topic for the presentation: In the latter stages of carrying out a pilot randomized controlled trial (RCT) investigating the effectiveness of a series of GIM sessions in treating persons with major depression, the onslaught of the global pandemic introduced a new set of challenges. Yet, the research continues. This presentation will outline the adjustments made in light of the pandemic and will highlight preliminary findings of the pilot RCT. A central question for this presentation is *How can we produce meaningful knowledge from a controlled trial in a time that defies control?* I will also present findings from the completed pilot stage of a quality assessment process to monitor treatment fidelity in GIM.



Lectures and workshops at the course

Bolette Daniels Beck: Carrying out a randomized clinical trial - music therapy versus active control in a clinic for traumatized refugees – lessons learned!

Background: After a successful pilot, a randomized study was carried out in a psychiatric clinic, with four music therapists and four psychologists.

Objective: We aimed to investigate whether the music therapy method trauma-focused Music and Imagery (tr-MI), would be as effective than the standard psychological treatment on decreasing trauma symptoms.

Methods: A pragmatic, non-inferiority, parallel, randomized controlled trial with six months follow-up was carried out in three refugee clinics. Seventy-four adults with posttraumatic stress disorder (PTSD) were allocated to either music therapy sessions (tr-MI, N=39) or psychological treatment as usual (TAU, N=35). Western classical music, new age, and music from the participants' own cultures were used to generate inner imagery in a phased treatment protocol. Homework entailed music listening. The primary outcome was trauma symptoms measured by the Harvard Trauma Questionnaire, section IV (HTQ-IV); secondary measures were somatoform and psycho-form dissociation, attachment, and well-being. Treatment differences in change of primary and secondary measures were estimated using linear mixed models.

Results: (under publication – will be presented).

Reflections: Carrying out a multisite RCT is a challenge – various problems and shortcomings will be discussed with the focus of sharing the learning experience from the researcher's point of view.

Bolette Daniels Beck, PhD, associate professor of music therapy, Department of Communication and Psychology, AAU.

Reading material for the class: Beck et al. (2018)

Christian Jantzen: Walking-along to capture user experiences

Experiences are seminal for human well-being. But experiencing is a complex phenomenon challenging standard methods of data collection. Firstly, experiencing is an inner process, which cannot be observed neither precisely nor in its totality from an external position. Observation studies therefore do not sufficiently account for this inner process. Secondly, experiences are dual: on the one hand, experiencing is bound to a stream of moments of sensing and perceptions, on the other hand experience is a recollection of such experiencing. Memory is a retrospective, but fallible representation of these moments. Interviews draw on and activate memory, but they fail to grasp the actual moments of experiencing. This presentation proposes the walk-along method as a way to deal with the complexity of experiencing. This method combines aspects of participatory observation and of interviewing as the researcher moves through space with the informants while they are moved by their surroundings.

Reading material for the class: Skov, Lykke & Jantzen (2018).

Christian Jantzen is professor and head of the Doctoral Programme at the Department of Communication & Psychology, Aalborg University (Denmark). His fields of research are media studies, consumer culture and experience design. He has contributed to developing the



concept of 'experience' and to viewing experience design as an esthetic practice. He holds a MA degree from the University of Utrecht (the Netherlands) and a PhD degree in Cultural Analysis from Aalborg University.

Gustavo Gattino: Interpreting research data in music therapy research

Interpretation of research data is a topic explored in music therapy, especially in the qualitative research paradigm. However, this is not exclusive of the qualitative paradigm, because all the different kinds of music therapy designs which deal with data (qualitative, quantitative and mixed methods) involve interpretive procedures. This presentation aims to discuss how music therapy researches might understand their interpretative practices to deal with different kinds of data when conducting a study in music therapy.

Gustavo Gattino, PhD, assistant professor of music therapy, Department of Communication and Psychology, AAU.

Hanne Mette Ridder: Phenomenology and hermeneutics. Similarities and differences in methodology and analysis

There are differences between reflexive interpretations that are either phenomenological in-depth inquiries where insight is gained at a profound and subjective level, or the hermeneutic understanding of connections between parts that form a meaningful whole. However, there are also similarities between these two ways of reflexive interpretations and how they add to the construction of knowledge. In this presentation, I will start with the ontology of understanding and interpreting and then go through the epistemologies of hermeneutics and phenomenology. This will lead us to a discussion of the similarities and differences in philosophies and methodologies.

Reading material for the class: Laverty (2003) and Starks & Trinidad (2007).

Hanne Mette Ridder, PhD, Music therapist (DMTF), Professor of Music Therapy and coordinator of the Doctoral Programme in Music Therapy at the Department of Communication and Psychology, Aalborg University, Denmark. She is an approved clinical supervisor, finalizing her level III GIM training, and past president of the European Music Therapy Confederation (2010-2016). Her research and publications are mainly focused on music therapy in a psychosocial understanding of dementia care.

Inge Nygaard Pedersen: Applying a rigorous research design with a vulnerable client population in mental health care. Categories of possible/not possible challenges and reflections of coping strategies

In this presentation, I will share research experiences from being the principal investigator the last four years for the study Music Therapy as Treatment of negative Symptoms for Adult Patients diagnosed with Schizophrenia. The study design was created in close cooperation with psychiatrists and aimed at being as close to a biomedicine design as possible to be accepted as an RCT blinded study with sufficient rigor and weight in the world of medicine. We all knew it would cause challenges but I couldn't imagine how serious and many-faceted challenges we met. I have categorized these challenges and I want to present the four main



categories; (1) Instability in the steering group; (2) Collaboration agreements and contracts; (3) Recruitment – how to get in direct contact with potential participations; (4) Societal barriers. Further, I will reflect on what we did to cope with the challenges, what we could not change and what to be aware of in future studies with this population.

Inge Nygaard Pedersen, PhD, associate professor of music therapy, Department of Communication and Psychology, AAU.

Reading material for the class: Pedersen et al., 2019

Niels Hannibal: Searching the literature: process, findings and considerations

As part of an ongoing research project examining the effect of music therapy on negative symptoms in patients with schizophrenia, we are in the process of analysing and writing up the results, and therefore need to update the literature review from the protocol article. Using this research project as a case example, I will share the literature search process, findings and considerations/ discussion points.

Niels Hannibal, PhD, associate professor of music therapy, Department of Communication and Psychology, AAU.

Reading material for the class: Jia et al., 2020; Pedersen et al., 2019

Sanne Storm: Research into the psychometrics of VOIAS (Voice Assessment profile) and it's feasibility in clinical practice focusing on the perinatal population

Introduction: The objectives of the study is to strengthen the psychometrics of VOIAS and increase it's clinical applicability within the perinatal population. The possibility of distinguishing between "healthy" persons and those at risk of suffering from depression or anxiety within the perinatal population will be studied. Furthermore a postnatal pilot study will explore the capacity of VOIAS to measure change in group music therapy based on Psychodynamic Voice Therapy.

Focusing on the protocol for carrying out a vocal assessment the objective is to examine how the people being vocally assessed are experiencing the developed protocol of the Voice Assessment (VOIAS).

Methods: VOIAS has been carried out in following settings: 1) vocally untrained non-clinical women, who are not suffering from depression or anxiety, and are not pregnant or have not given birth within the last 12 months. 2) pregnant women who voluntarily have carried out a voice assessment in connection with a screening with Edinburgh Postnatal Depression Scale (EPDS). 3) pre and post assessment in a pilot study following 8 sessions of group music therapy for 6 women suffering from postnatal depression and anxiety. In order to evaluate the VOIAS protocol quantitative data is collected from all participants who have been vocally tested.

Results: Results from the questionnaire - quantitative data - will be presented. Both from non-clinical and the perinatal population.

Discussion: It will be discussed and reflected upon what is "best practice" for pregnant women when carrying out a VOIAS.



Sanne Stom, PhD, Music therapist and researcher at Psychiatric Center, The National Hospital, Faroe Islands, and external lector and guest researcher at Aalborg University, Denmark. Developer of The Voice Assessment Profile (VOIAS). Clinical work and research is focused on early intervention towards perinatal anxiety and depression, voice assessment and studies of vocal interventions in music therapy.

Reading material for the class: Storm, S. (2018)

Reading list

- Anderson-Ingstrup, J. (2020). 'A flexible fit. Developing a suitable manual frame for person attuned musical interaction'. (Abstract PhD thesis)
- Beck, B. D., Lund, S. T., Sjøgaard, U., Simonsen, E., Tellier, T., Cordtz, T. Laier, G., Moe, T. (2018). Music therapy versus treatment as usual: Protocol of a randomized non-inferiority study with traumatized refugees diagnosed with posttraumatic stress disorder (PTSD). *Trials*, 19:301. <https://doi.org/10.1186/s13063-018-2662-z>
- Jia, R., Liang, D., Yu, J., Lu, G., Wang, Z., Wu, Z., ... & Chen, C. (2020). The effectiveness of adjunct music therapy for patients with schizophrenia: A meta-analysis. *Psychiatry Research*, 113464.
- Laverty, S. M. (2003). Hermeneutic phenomenology and phenomenology: A comparison of historical and methodological considerations. *International journal of qualitative methods*, 2(3), 21-35.
- Papanikolaou, E. (2020). Receptive music therapy in oncology: Guided Imagery and Music during the course of active treatment for breast and gynaecologic cancer. A two-part preliminary investigation. (Abstract PhD thesis)
- Pedersen, I.N., Bonde, L.O., Hannibal, N.J., Nielsen, J., Aagaard, J., Bertelsen, L.R., Jensen, S.B. & Nielsen, R.E. (2019). Music Therapy as treatment of negative Symptoms for Adult Patients Diagnosed with Schizophrenia – Study Protocol for a Randomized, Controlled and Blinded Study. *Medicines* 2019, 6(2), 46; <https://doi.org/10.3390/medicines6020046>
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- Starks, H., & Brown Trinidad, S. (2007). Choose your method: A comparison of phenomenology, discourse analysis, and grounded theory. *Qualitative health research*, 17(10), 1372-1380.
- Storm, S. (2018). The Voice Assessment Profile (Chapter 16). In S. L. Jacobsen, E. G. Waldon & G. Gattino (Eds). *Music Therapy Assessment: Theory, Research, and Application*. Jessica Kingsley Publishers.