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A Life of Music Therapy: Working Together and in Isolation

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I have a postcard that I collected years ago when I was an exchange student in Germany in 1990. It super-imposes much of Europe onto Australia in order to capture the geographical vastness of the Australian continent. When I view my music therapy 'life' from that perspective, it seems as though I did my undergraduate training in Austria (Canberra), completed my music therapy training in Scandinavia (Brisbane) and now live and work in France/UK (Perth). This makes me feel quite well travelled to say the least, but it also helps to explain why it is easy to feel isolated when working in many parts of Australia.

From Canberra to Brisbane

My interest in music therapy began in high school when our European trained teacher led us to run a group in community pre-school for students with autism. As a part of this we had to plan weekly "lessons" based on Kodaly/Orff principles. I will not forget the day mid-way through term when one of the four young boys in the group spontaneously began to sing with us. This was a child who had not uttered a single sound since birth, his teachers were so excited they called the mother straight away. Somehow the music had encouraged this boy to make contact with his environment. The profound effect of such a simple music activity on one of these students led to my further investigation of the use of music with children with special needs. I learned of music therapy courses during under-graduate music studies in Australia's small capital city of Canberra. I then attended workshops by senior Australian music therapists including Ruth Bright and Denise Grocke, which culminated in my application to study music therapy. But where would I go?

Where else to go from the cold, alpine climate of Canberra than to the warm, sub-tropical atmosphere of Brisbane in Australia's north-east? What luck that there was a post-graduate music therapy program there! I believe I was in the third year of intake for the post-graduate course there, and under the guidance of Dr. Jane Edwards was immersed in a world that I have grown to love with a passion. Brisbane was many things to me – the music department itself was a friendly place, particularly the post-grad fraternity with its' regular wine, cheese and concerto evenings. I truly soaked up the culture of the University of Queensland – bookstores, coffee clubs and regattas on the river – as well as the physical environment. I learnt that when the sky starts to get a pale shade of green on a summer day it was wise to get your car under-cover because a hail storm was approaching. I learnt that during the five minute walk from my student accommodation to the main campus I could get wet in the summer rain but still be dry by the time I got to my lecture. And I learnt that music therapy was going to challenge me as a person as well as a musician.

The move to Brisbane was my first significant separation from family and perhaps my first significant experience of isolation as I knew no-one. However, the motivation to study music therapy was strong and staying in on-campus accommodation provided the substitute family/social network I needed. My first placement was in a special education school [as they

were called then] and with other placements in paediatric burns/oncology and in aged care, I was challenged to think about how my own rather sheltered upbringing might be affecting the way I approached each of these situations. I realised music therapy was about more than finding the right music to match the situation but also about being authentic in the client-therapist relationship. I achieved that balance as best I could as a student but it certainly set the stage for me to begin to examine my family of origin and how it was influencing the decisions I made in therapy sessions – that exploration is still ongoing.

From Brisbane to Perth

Truth be told, my mind was elsewhere even before the end of my training. Although I could quite happily have stayed in Queensland, I had met a geologist during my undergraduate days (whom I've since married and had two kids with). The writing was on the wall that I would end up on the other side of our continent and so I began another journey into music therapy. I established links to Perth during my final University placement by having brief conversations with the two music therapists already in Western Australia. I experienced more than a little trepidation as I decided to take a chance and accept a contract for 8 hours a week at a nursing home in Perth. With the confidence of a new graduate, I began mass mailing all the other aged care facilities in the metropolitan area but quickly learned that face-to-face meetings, and personal, facility specific presentations were the way to get work. In my first year of living here I was lucky enough to be accepted into a small business grant program that provided the financial support I needed to bide me some time to make those contacts. Within two years, I had enough contract and private clients to be considered full-time – not bad!

Working in Professional Isolation

What defines isolation? Isolation is in many ways for me an attitude or state of mind. Sure, in a place like Western Australia there are geographical challenges, but I know that colleagues in other parts of Australia have felt equally isolated at times despite music therapy colleagues being mere minutes away. In many ways the geographical isolation encourages you to think more “outside the box” and to find allies within other like-minded professions. It challenges you to be creative about maintaining links within our own profession. I was one of what is still a small band of music therapists on this side of the country, and together we were forging out not only enough work to survive on a personal level, but also pioneering the use of music therapy in most of the facilities in which we worked.

At one level, it didn't seem like much at the time, it was just what we [music therapists] did. Responding to requests for short-term 'pilot' projects, filling sessions in schools and nursing homes whilst constantly promoting our work and hoping that those higher up the food chain would eventually see fit to increase those hours to something more substantial. Being geographically isolated was a factor, but the way I saw it was that more than thirty years ago in Melbourne our now prominent music therapists had to have that same sense of pioneering spirit and belief in what they had to offer and that it could be taken seriously by those around them. We have such a broad international base of evidence now that my ongoing journey in a sense is that much easier!

Looking back, I wouldn't change any of it. We were living in Scarborough at the time, only two blocks (or about 5mins walk) from the beach.... What better way to unwind after work than a walk along the sand as you watch the sunset?

The reality was confronting though, with no existing jobs to apply for. Before I had my first child, I worked half of my time in special education and the other half in aged care – a broad spectrum of contract positions that saw me travelling at least 300km a week around Perth. It was a real challenge working in so many different settings and driving all over Perth with a car boot load of instruments but it certainly helped build my confidence in talking to a wide range of people about music therapy.

It also taught me the importance of being creative about maintaining contact with music therapy colleagues. Ten years later, I'm still the sole music therapist in the facility in which I work and that is unlikely to change in the immediate future. But I know that I have access to a wealth of support and information through that invention no-one could do without – email!

Combining Work and Personal Worlds

In reflecting on geographical isolation, I am drawn to consider the other extreme of my life in music therapy – the capacity for 'closeness' that having a family brings. All life experiences influence this work, but in my opinion, having your own children has a profound effect on the

way you work with other people's children. I think the biggest thing that my children have taught me is that no textbook, or health professional, has all the answers. Before I had children, my knowledge came from books and from the weekly interactions I had with clients. My whole perspective on that work is changed now. I have more empathy towards parents and carers beyond what music therapy is providing for their child. I know what it feels like to be so sleep deprived that you can't see the child in front of you. I understand so much more what "average" and "below average" development means [and how daunting all those terms can potentially be for a new parent – the anxiety you feel for example when your child is the last one at mother's group to learn how to crawl, so insignificant 5yrs later!]. Most of all, I know what it feels like to be so connected to another human being, 24/7, without a break.

Now that I am working in paediatric oncology, I find myself constantly bringing to supervision the parallels I see between my own life and that of the families on our ward and I certainly thank God numerous times that I am not in their shoes. All the reading on child development and infant-parent interaction could never have seemed as real as it does now as I watch my own children grow. Psychological theories of attachment and circle-of-security are played out at home and give me a wealth of information on which to draw on in my work. In addition, parents on the ward interact with me in a different way to staff who don't have children. That's not about placing more value on one relationship over another, and it's nothing that's quantifiable, but there is an unspoken synchrony between mothers. There is a closeness that is tangible.

Dragging the Music Therapy Mountain to the West

Just last week I became the President of the Australian Music Therapy Association. Although this is rarely a contested election, it is still a significant moment in my music therapy life. I really don't see Perth as being so far away from the rest of Australia, but people from the east coast often seem to feel that the distance is great. In this way, it will be great to broaden members' thinking about where music therapy resides in Australia and to draw their attention beyond the long-standing developments on the east coast.

Maintaining connections with the national music therapy association has never been an issue because of technology. Although, it is true that I can remember starting out my career 10 years ago with just a landline phone and fax machine, and not even a mobile! Happily, that quickly changed! As far as challenges go in the future, the biggest one will be taking time differences into account when scheduling meetings. But this technical difficulty has already been anticipated because executive members were predominantly Victorian for so many years, and the slow spread to other states has already gradually brought about some change of thinking. Individual committees within the Australian Music Therapy Association, such as Continuing Professional Development and Ethics (on which I've served for a number of years), have adopted this approach for sometime as the Chairs of each committee have seen a need to represent the diversity within our country as much as possible. There are different lifestyles, different ethnic and indigenous groups as well as different climates in all the capital cities of Australia. During our national conference last week, listening to the diversity of papers presented by music therapists from all those cities, I found myself wondering how those things influence the work we do and the populations within which we work.

I'm excited to be taking on such a prominent role as President of our association and see it as a real opportunity to widen the girth even more. To have the chance to be more formally involved in even a small way in the varied clusters of music therapists across Australia is a privilege. I know that a president from Western Australia is going to stimulate and challenge many Australian music therapists to think "outside the box" about the direction of the association and hopefully it will encourage more people to see that it is not inconceivable for them to be involved, regardless of their geographic location.

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