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## A Kiwi Odyssey

### Music Therapy University Training in New Zealand Takes Flight

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This article looks at the new postgraduate music therapy programme at Massey University in New Zealand, and at how it has developed as this country's first full-time tertiary course in music therapy. Music therapy in New Zealand has a history going back almost 30 years, and the new programme builds on the fine traditions established over that time. The emphasis and challenge have been to craft a programme that weaves the many skills required to become a competent music therapist with the unique flavour of what music therapy is and can become in the ethnically diverse and rich cultures of Aotearoa - New Zealand. Particular attention and discussion are given regarding the issue of supervised clinical training.

#### History

From modest but fertile roots in the mid-1970's, music therapy in New Zealand has continued to grow, develop, evolve, and blossom. As a newcomer to Aotearoa - New Zealand, I have been consistently impressed and stimulated by the on-going high quality of music therapy clinical work and scholarship carried out over this extended time by a relatively small group of dedicated professionals. Not only have these music therapists been fairly few in number, they have also continued their clinical activities dispersed across the length and breadth of the two islands that comprise this beautiful country. In addition, they have unceasingly "spread the word" about music therapy throughout the years via professional and community workshops and presentations, articles and features in the media, and the activities of the national and regional music therapy societies. It is in part this pioneering spirit of the Kiwi music therapy community that has attracted me to the challenge of helping to develop and launch an inaugural university music therapy programme.

While the New Zealand Society for Music Therapy (NZSMT) was formed in 1975, it is only now that a full-time dedicated New Zealand university music therapy programme is in place. This is not to imply that there have not been on-going activities geared to establishing a tertiary programme in music therapy. In fact, over 18 years of concerted efforts by a number of clinicians, educators, researchers, and supporters preceded the final approval of the Master of Music Therapy Programme here at Massey University in 2002 (Croxon, 2002, 1997, 1993). During this time, some New Zealanders have travelled abroad to train in a number of countries and then return to work as music therapists. These destinations have included Australia, Canada, England, and the United States. Others have taken part in individualized courses of study facilitated and approved by the NZSMT. The NZSMT has a history of bringing international music therapy clinicians, researchers, and educators to the country for trainings, conference presentations, workshops, and professional development courses. These presenters have been of the highest calibre, and have included leaders such as Dianne Allison, Michael Atherton, Carol Bitcon, Ruth Bright, Leslie Bunt, George Duerkson, Jane Edwards, Denise Grocke, Robin Howat, Donald Michel, Ole Tiechman Mackenroth, Susan Munro, Paul Nordoff, Claire O'Callaghan, Margaret Pickett, Marie Reynolds, Clive and Carol Robbins, Auriel Warwick, and others.

Over this time a domestic accreditation process was also developed. In addition, a music therapy training and endorsement were offered as part of a Diploma in Teaching at the Palmerston North College of Education under the coordination of Morva Croxson (Croxson, 1997). Croxson is one of several therapists trained at the Guildhall School of Music & Drama in London. An independent Registration Board for music therapists was approved by the NZSMT in 1999 and formed in 2000. The Registration Board grants the credential RMTh to qualified applicants, as well as a Practising Certificate, which is renewable in three-year periods with evidence of continuing education, supervision, and other on-going professional activities.

### **The Present Programme**

As previously mentioned, the long-term intention and wish of the NZSMT was to support the development of a full-time dedicated university programme. An extensive proposal was developed with support from the NZSMT that outlined the justification and need for a music therapy programme. Massey University proved to be receptive, and the present programme began to take shape. Massey proved to be a good fit for music therapy with its well-established Conservatorium of Music, headquartered at its Wellington campus. The Conservatorium offers bachelors and graduate degrees in various areas of music, including jazz studies. As the nation's capital, Wellington also offered opportunities to educate and lobby policy shapers, allied health professionals, key politicians, and others along the way.

As part of this proposal and development process, invaluable support and guidance was provided from both within and outside of New Zealand. Along with the NZSMT and supporters from allied health fields, Dr. Denise Grocke of the University of Melbourne was a key advisor and consultant in shaping an overall curriculum template that was acceptable to Massey. It was decided that a postgraduate model would allow for focus on the music therapy areas of each student's skill development. A bachelor's degree in music or a relevant bachelor's with solid and comprehensive music skills, and previous psychology coursework would be required for entry into the programme. Additional entry requirements and processes were outlined as well. Papers (courses) in the degree would include music therapy principles, music therapy methods, selected music of indigenous cultures, special topics in music therapy, practicum, and case work and research. A two-year curriculum was finally approved in 2002 for the new Master of Music Therapy (MMusTher) degree, and a Music Therapy Programme Leader appointed.

Along with the tremendous opportunities that accompany the implementation of this inaugural programme come numerous questions, possibilities, and challenges, such as:

- What models of and approaches to music therapy should be stressed?
- What is the best number of students to accept given the small number of current jobs available to clinicians?
- How can a programme help to bring together therapists working across large distances and two main islands?
- How can the unique cultural flavour and mix of New Zealand be retained throughout the programme?
- Within this mix, how can the programme embrace the traditions and needs of our Maori population, who are the tangatawhenua, or first people of Aotearoa (Croxson, 2002)?
- How does "New Zealand music therapy" fit within Australasia and the world music therapy "scene"?
- How can adequate clinical supervision of students be managed by a small and disperse number of qualified music therapists?

And so on.

### **The Challenge of Providing Supervised Clinical Practice**

While many of these bear careful consideration and could be discussed here, the last challenge of clinical skill development and supervised clinical practice are certainly at the core of a new university programme. It is internationally recognized that central to the development of entry-level music therapy skills is an extensive period of supervised clinical training (American Music Therapy Association, 2001; Forinash, 2001; Wheeler & Erdonmez Grocke, 2001; World Federation for Music Therapy, 1999). While requirements in terms of number of

hours vary by country, they are often considerable in number. As an example, the American Music Therapy Association specifies a total minimum of 1,200 supervised clinical hours (practicum and internship) within an approved academic programme. The challenge of providing such a level of supervised clinical placements within New Zealand is twofold. First, there are a limited number of qualified music therapists with supervisory experience in the country. Second, these therapists are spread across a distance of approximately 1,200 kilometres from Invercargill at the lower tip of the South Island to the Auckland area towards the upper end of the North Island.

To help meet this challenge, the curriculum and clinical placements have been arranged and designed to build across the two-year programme in a fairly unique way. The goal was to provide intensive instruction and preparation on-campus during the first semester, and then to allow students to spread out across the country during parts of subsequent semesters to work with music therapists in the field in the following framework. Semester One consists of two major papers (courses) - Music Therapy Principles and Music Therapy Methods. Each is worth 25 points, or half of a full-time student load. Together they total 16 hours per week in class and another 34 hours per week of independent learning. Observations of and clinical field visits with music therapists are included. The Methods paper culminates with a set of pre-practicum readiness clinical skill demonstrations. Practicum (400 clinical hours total) then begins in Semester Two for 25 points. Semester Two also includes an individualized Music Therapy Special Topic and a paper in Indigenous Music of Selected Cultures (focussing on music and culture of the Maori people). Supervised clinical work continues in Casework & Research through Semesters Three and Four (year two). Casework & Research is a 100-point paper which functions in two ways. For students needing the 1,200 supervised clinical hours, Casework & Research will include 800 hours of clinical placements. Students will work with supervising music therapists throughout the country based on client population (assuring a variety of experiences/populations for each student), where in New Zealand the students reside (for domestic students), and where in New Zealand students might like to live and work after completing the programme. For students entering the programme with their clinical training completed (i.e. as qualified/credentialed music therapists) and with existing postgraduate credits, will be credited for the first year of the programme and will enrol only for Casework & Research. The Casework & Research paper will then be a research-based thesis, following all university guidelines and requirements for postgraduate research projects and thesis preparation.

Supervision of students will take place at three levels - with site supervisors, tutors, and the music therapy programme leader. Site supervision will be provided by music therapists at the facilities at which they work (including contract and private practice work). Qualified music therapists may also provide supervision of students in additional facilities in their areas. These may include facilities where they are not themselves working, but which are desirable to place students due to population, other therapies offered (educational opportunities for students), potential job development, etc. Retired music therapists may also provide some supervision and mentorship. To help get site supervisors some initial training, an excellent two-day professional development course on various aspects of clinical supervision was sponsored by the NZSMT prior to the 2002 annual conference in Auckland. The course was taught by Denise Grocke. Music therapists serving as site supervisors will receive an honorarium via the university. Two tutors, experienced music therapists appointed by the University will also provide supervision. There will be one tutor for the North Island and one tutor for the South Island. The tutors will work closely with both the site supervisors and music therapy programme leader in coordinating placements. They will make site visits and observe students on a regular basis, and will co-teach clinical seminars with the programme leader. The clinical seminars will be taught in blocks at the beginning, mid-point, and final weeks of each semester at the Wellington Conservatorium of Music. The tutors will receive an hourly salary from the university. The music therapy programme leader will work with the tutors to coordinate and teach the clinical seminars, and will visit each site as needed. During the semesters, WebCT will be used as a vehicle for interaction and discussion between students, site supervisors, tutor, and the programme leader. A number of WebCT tools will be used, including calendar, chat rooms, discussion forums, e-mail (group and private), databases, and student homepages.

Again, there are many challenges in setting up this new programme and ensuring that students receive the finest preparation possible. As this article appears in *Voices*, the first group of students will be starting their music therapy journey here at Massey. I look forward to the challenges that their growth, and the continued development of our programme will bring. I am also excited that our programme is joining in the Australasian and international university music therapy community. Music therapy is truly a global field now in practice, training, and research.

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