# 2012 AMTA CONFERENCE PRELIMINARY PROGRAM ADDENDUM

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# **Continuing Music Therapy Education (CMTE) Information**

**Conference Attendance** – 5 CMTEs — Participants can earn 5 CMTE credits for attending this Conference with a maximum of 15 CMTE credits per five year cycle.

**CBMT Approved Workshops** — Thirty-two intensive workshops, four Pre-conference Institutes and four Pre-conference Trainings are being offered this year. Registrants will receive a certificate indicating completion of each learning experience.

**Umbrella Groupings** — Umbrella groupings are "a group of related workshops, courses, and programs, each fewer than five contact hours, which can be incorporated under a theme or unifying topic relating to the CBMT Scope of Practice and results in a total of at least five contact hours in duration" (CBMT Recertification Manual). Eligibility for this type of educational activity requires documentation.

**Short Event Activities** — Any session at this conference which is fewer than 5 contact hours of learning activity may qualify. In this category, up to 15 CMTE credits per 5-year recertification cycle will be allowed by CBMT. It is up to the individuals to monitor their limit. These are not pre-approved activities and AMTA is not responsible for participants' choice of short event activities.

Documentation for Umbrella Groupings and Short Event Activities:

- 1. Activity Title
- 2. Sponsor (AMTA in this instance)
- 3. Name of Instructor(s)

4. A written summary of the learning experience and its application to music therapy practice and the Examination Content Outline (approximately 250 words)

- 5. A copy of the conference brochure for the activity
- 6. Proof of attendance
- 7. Number of contact hours in each session.

8. Umbrella groupings must list the unifying topic, session titles, date(s) and instructor(s) for each session

If you have any questions regarding the AMTA continuing education activities at this conference, please contact the AMTA Continuing Education Committee Co-Chairs, Lisa Swanson or Vicki Vega. If you have questions regarding the recertification process or accumulation of CMTE credits, please contact the Certification Board for Music Therapists at 1-800-765-CBMT. CBMT is ultimately the authority on CMTE requirements for recertification. You are responsible for gathering documentation of your continuing education credits, so remember to pick up your CMTE certificate after each CMTE and your conference attendance certificate at the close of the conference.

Reference herein to any specific commercial firm, commercial product, process, or service by trade name, trademark, service mark, manufacturer, or otherwise does not constitute or imply endorsement, recommendation, or favoring by AMTA. Institutes and CMTE courses are approved by the Certification Board for Music Therapists for the specified number of Continuing Music Therapy Education (CMTE) credits. Credits awarded by CBMT are accepted by the National Board for Certified Counselors (NBCC). AMTA (#P-051) maintains

responsibility for program quality and adherence to CBMT policies and criteria. NICU Training is maintained by Florida State University (#P-068) and follows the same CBMT policies and criteria. Complete session information, learning objectives, pre-requisites, qualifications and credentials of instructors, cancellation and refund policies, may be found in the Official Addendum, online at www.musictherapy.org.

# AMTA 2012 Conference Refund Policy

Activities are planned in advance based on the number of registrants. Full refunds cannot be made. Refunds for cancellations of any conference activities (including Trainings, Institutes and CMTE courses) are available by written request only and must be mailed to the AMTA national office. 80% of fees will be refunded if the request is postmarked no later than 9/11/12, 50% if the request is postmarked 9/12/12-10/5/12. NO REFUNDS will be made after 10/5/12, so please plan ahead. Refunds are processed 45 days after the conclusion of the conference.

# HOW TO REGISTER FOR COURSES

AMTA again announces the on-line payment option for conference registration. Please go to <u>www.musictherapy.org</u> and click on the on-line registration and payment link in the "Latest News" box to ensure your placement in CMTEs, Institutes and Trainings. If you are not able to take advantage of our on-line payment option, please mail your registration form and payment to:

AMTA; 8455 Colesville Rd., Ste. 1000 Silver Spring, MD 20910

Full payment is required at the time of registration and must accompany your registration form. Credit card payments may be faxed to 301-589-5175 (security of this is at your discretion); all other forms of payment must be mailed. Please do not both fax and mail (or fax more than once) your registration as this will result in double charges to your credit card. All payments must be made in U.S. dollars, and checks must be drawn on a U.S. bank. For the convenience of our international guests, an on-line currency converter can be found at <u>www.xe.com</u>.

# PLEASE NOTE

You must be registered for the conference to take any of the 32 CMTE courses.

Conference registration and AMTA membership is required for the FREE Institute, Clive Robbins: His Legacy & Vital Impact on Music Therapy.

Conference registration and AMTA membership is not required for all other Institutes and Trainings.

# **CMTE Courses:**

# A. It's Not Just the Same Old Song

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): Caryl Beth Thomas, MA, ACMT, LMHC

# **Description:**

This workshop is intended to provide practical and hands-on ideas, tools and concepts in working improvisationally within pre-composed music in music therapy sessions, which has become a hallmark of my clinical work and the training of many music therapy students. In my almost thirty years of clinical work, popular music and preferred music of the patients have always been a mainstay. And I have spent years developing and teaching this "method", explaining to trainees as well as other professionals why and how these songs are more than just sing-a-longs, and that they also <u>must</u> be if the work is truly therapeutic in nature. We all know that one can never sing the same song exactly the same and that each time is unique, and this workshop is a deeper look at this common notion with a clinical perspective. This has been offered in 1 and 1.5 hour formats, and participants always ask for more, so I have proposed it as a 5 hour workshop, as it has seemed so useful and purposeful in the past. I have been told that there are never enough hands-on and music skill building workshops, so I would like to offer this as a CMTE. Several songs will be explored in terms of rhythmic, harmonic, melodic and lyrical expansion and development with specific clinical rationales to support these variations.

# Learner objectives:

1) participants will learn specific techniques to further develop pre-composed songs with more clinical intention and purpose

2) participants will learn ways to get more "mileage" out of a song in a clinical context

3) participants will leave this workshop with practical and realistic musical tools to take back to their clinical work and use immediately.

<u>All of these objectives address the following CBMT Scope of Practice items</u>: I.A.13: Identify how the client responds to different types of music experiences (e.g., improvising, recreating, composing, and listening) and their variations; I.C.10: Create music therapy experiences that address client goals and objectives. I.C.14: Structure and organize music therapy experiences within each session to create therapeutic contour (e.g., transitions, pacing, sequencing, energy level, intensity): II.A.5.g: use creativity and flexibility in meeting client's changing needs.

# **Bios of all presenters:**

Music therapist since 1983; full time music therapist at Lemuel Shattuck hospital in Jamaica Plain, MA; adjunct faculty - Lesley University; field training supervisor - Berklee College of Music.

# Format:

Engaging participants in a process to gain experience and mastery over the material covered (20% didactic, 80% experiential). This is a hands-on workshop and will be a combination of didactic methods with a lot of live workshopping of songs - specific case example will be used as well.

Prerequisites: None

# B. Comfortably Numb: Music Therapy Interventions for the Treatment of Co-Occurring Disorders (Mental Health /Substance Abuse)

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): Lisa Jackert, MA, MT-BC and Kathleen M. Murphy, PhD, LPC, LCAT, MT-BC

#### **Description:**

Individuals who struggle with mental illness and addiction have learned to "comfortably numb" their feelings by misusing drugs and/or alcohol. As they enter their recovery journey these feelings tend to surface and the potential for relapse is great if safe and healthy alternatives for expression and coping skills have not been adequately acquired. For those who have multiple relapses the intense feelings of guilt, shame, anger, and frustration grow even stronger and recovery can appear unattainable. Music has long served as a safe container for the expression of feelings. Music Therapy is a proven clinical treatment intervention that can effectively manage the symptoms of withdrawal and emergence of emotion. Through a combination of lecture, demonstration, and experiential learning participates will learn how common music therapy interventions such as song discussion, song-writing, movement to music, imagery and improvisation can be designed to be an integral part of addiction treatment. The presenters will discuss how the 12-step philosophy can be used to guide treatment and develop music therapy interventions that will address common recovery themes such as powerlessness, surrendering, support, self-care, and ownership of feelings. Additionally specific music therapy interventions will be demonstrated, discussed and experienced. Case material will be used to illustrate the integration of the 12-Step Philosophy into music therapy clinical practice. Participants will learn how to structure improvisation, song-writing, and listening experiences (including song discussion, movement to music and imagery) to engage clients at different stages of treatment (acute, chronic, detox, in-patient, outpatient). The use of ritual within music therapy will be examined and the presenters will share "music therapy rituals" that they have developed in their work with patients who have co-occurring disorders. Strategies for dealing with resistant clients and those who have had multiple relapses will be offered.

### Learner objectives:

At the end of this CMTE participants will be able to

- 1. Engage clients in music experiences to obtain assessment data (CBMT Scope of Practice I. A. 12)
- 2. Use the 12-step philosophy to make treatment decisions
- 3. Design and implement music experiences to address the clients'

(CBMT Scope of Practice II. A. 2)

- a. ability to use music independently for self-care (eg relaxation, anxiety management, redirection from addiction
- b. emotions
- c. participation/engagement
- d. self-esteem
- e. social interactions
- f. spirituality

### **Bio of Presenter(s):**

Lisa Jackert, MA, MT-BC: Lisa works on the acute adult and geriatric psychiatric unit at Community Hospital Long Beach, as has 23 years of experience with the adult and older adult mental health population.

Kathleen M. Murphy, PhD, LPC, LCAT, MT-BC earned her doctorate in Music Therapy from Temple University in 2008. She has been working in addictions since 2005. She is an Assistant Professor of Music Therapy at the University of Evansville.

### Format:

I.	Introduction and Overview of Presentation	Didactic	10 minutes
	This section will introduce the presenters and g	o over the topics to be covered and forma	t

- II. Overview of Co-Occurring Disorders Didactic 20 minutes This section will review diagnostic criteria and common symptoms of the most common combinations of mental illness and substance use disorder
- III. Overview of 12-Step PhilosophyDidactic & Case Material15 minutesThis section will review the 12-Step Philosophy and how it can be used to inform music therapy<br/>practice15 minutes
- IV. Music Therapy Interventions Didactic, Case Material 120 minutes Demonstration, & Experiential This section will cover the use of various music therapy interventions that the presenters have used in treating individuals with co-occurring disorders. The goals and objectives for each intervention will be shared as well as how they can be used in conjunction with 12-Step themes such as powerlessness, serenity, unmanageability, acceptance, support and ownership of feelings. Participants will have the opportunity to participate in and discuss the clinical applications of the interventions that are presented.

V.	The Importance of Ritual in MT Treatment	Didactic, Case Material	30 minutes
		Demonstration, & Experiential	
	This section will define ritual and the importance	e of including ritual in music therapy ses	sions.
	Participants will have the opportunity to participate in, and discuss the clinical applications of ritual		
	that are presented.		

VI. Strategies for Working with Resistant Clients Didactic, Case Material 20 minutes This section will provide participants with strategies for working with resistant clients

VII.	Post-test	15 minutes	

Participants will have this time to complete the post-test and CMTE evaluation

There will be two 10 minute breaks included. They will be scheduled based on the needs of the participants.

**Prerequisites:** None

# C. Swing Guitar

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

**Presenter(s):** Marcy Marxer, Grammy Award winner, Music Educator, Keynote & workshop leaders- National Association for the Education of Young Children, Author/Instructor – "Swingin' Rhythm Guitar" online and DVD series

### **Description:**

Swing Guitar is the backbone of the early Jazz and Big Band rhythm section. Swing inspires the joy of movement at any age, from toddler through older adult. This course is a step-by-step guide to using easily playable, movable chord positions up and down the guitar fingerboard for that classic Swing feel. We'll take a few familiar songs and turn them into dance tunes by adding 6, 6/9, Maj7, min7, Diminished and Augmented chords for plenty of jump and bounce.

### Learner objectives:

- Participants will learn basic swing chord progressions
- Participants will learn to play chord progressions in several keys
- · Participants will learn to accompany standard swing repertoire
- Participants will learn other tips and tricks of using swing guitar in music therapy applications
- Participants will play, jam, sing, and have fun WHILE learning!

### **Bios of all presenters:**

Marcy Marxer is one half of the GRAMMY winning powerhouse duo, Cathy Fink & Marcy Marxer. They are consummate entertainers, master musicians and trail blazers in multiple genres of folk, country, swing and family music. Marcy's new "Swingin' Rhythm Guitar" series at <u>www.truefire.com</u> has become a runaway hit.

A veteran instructor and performer, Marcy is also one of the most prolific and popular instructors with Homespun Tapes. She released "Swing Guitar," a book and 3 CD set and the DVD "Soloing 101" which have helped many guitar players jumpstart their swing guitar playing. www.cathymarcy.com

Format: Music Making & Learning

The format of the workshop will be experiential. Bring a guitar, or let AMTA know in advance that you will need to borrow one. Chord charts and simple written materials will be distributed. Participants are welcome to record the workshop.

**Prerequisites:** Intermediate and up. Must be able to change chords with ease, but no previous knowledge of swing chords required.

# D. The Healthy Voice: A Refresher Course for the Music Therapist

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): Nicki S. Cohen, PhD, MT-BC

### **Description:**

On an average workday, a music therapist is constantly speaking and singing. Although music therapy academic programs mandate vocal training for non-voice concentration students, it may not be enough to protect the professional music therapist's vocal health. Unless therapists continue to practice healthy vocal techniques, abnormal speaking or singing habits may develop. If left unattended, music therapists might inadvertently damage their voices. This course will present an overview of: a) vocal anatomy, b) healthy voice production, both in speaking and singing, c) maintaining the healthy voice, and d) causes and ramifications of vocal abuse. Included in the course will be exploratory portions focusing on voice-breath-body processes and a rehearsal portion with the demonstration and practice of vocal exercises. Materials will include recommended vocal exercises and a recording for each student. The instructor is a board certified music therapist who has also taught voice at the university level for over 30 years.

### **Learner Objectives:**

- 1. The student will demonstrate "functional skills with the voice" (CBMT *Scope of Practice,* II/A/5w) and 'vocal improvisation" (CBMT *Scope of Practice,* II/A/5h).
- 2. The student will identify major parts of the vocal anatomy.
- 3. The student will describe the characteristics of a healthy speaking and singing voice.
- 4. The student will identify means of maintaining a healthy voice.
- 5. The student will explain the causes and ramifications of vocal abuse.

### **Bios of Presenter(s)**:

Nicki Cohen is Vocal Coordinator and Professor of Music Therapy at Texas Woman's University. She has taught voice for 30 years and music therapy for 24 years at the university level.

### Format:

- I. Didactic-Vocal Anatomy (45 mins.)
- II. Didactic-Characteristics and Practices for Maintaining the Healthy Voice (45 mins.)

BREAK (15 mins.)

- III. Didactic-Vocal Abuse and Its Ramifications (45 mins.)
- IV. Experiential- Recommended Vocal Exercises and Vocal Coaching (One hour)

# BREAK (15 mins)

- V. Experiential- Body-Voice-Breath Improvisation Techniques (45 mins.)
- VI. Conclusion/Q&A/Evaluation (30 mins.)

Prerequisites: None

# E. Medical Music Therapy: Current Practices & Future Trends

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Heather Hodorowski, MS, MT-BC, NICU MT Regan Thompson, MM, MT-BC, NMT-F Erin Walsh, MM, MT-BC

### **Description:**

This session will give participants an in-depth look at Medical Music Therapy from the perspective of the Music Therapy Program at NorthShore University HealthSystem, a four-hospital integrated healthcare delivery system in the greater Chicagoland area. Participants will gain exposure to multiple aspects that make up Medical Music Therapy including clinical services, documentation, internship development/supervision, and program development. From the clinical perspective, the presenters will educate regarding the use of music therapy with the outpatient dialysis population, how to effectively integrate Neurologic Music Therapy (NMT) into a medical setting, and provide case examples of medical music therapy with multiple medical populations. Participants will be introduced to documentation tools in an Electronic Medical Record that have been found to be effective in the medical setting including assessment tools and pain/anxiety management tools. From the clinical training perspective, the presenters will share their insights and experiences in developing and managing a multi-site National Roster Internship and will focus on the importance of multiculturalism and diversity in the internship experience. From a more administrative and program development standpoint, the presenters will provide tips and pointers from their years of experience in the medical setting to encourage development of new medical music therapy programs. The presenters feel strongly that this presentation not be purely static and didactic in nature, and therefore plan to present material with a balance of learning techniques including lecture, clinical case examples, music making, and experiential components. The presenters further feel very strongly about fostering an environment of learning and collegiality and therefore will incorporate group discussion and ample time for questions throughout the presentation process.

#### Learner objectives:

1. Participants will demonstrate an understanding of specific characteristics of Medical Music Therapy, including the model of music therapy services available at NorthShore University HealthSystem – this includes an understanding of assessment tools, clinical services, and electronic medical record documentation in this model.

- *CBMT Scope of Practice I. A. Assessment (3. Within the following domains (e.g., perceptual, sensory, physical, affective, cognitive, communicative, social, and spiritual), identify the client's functioning level, strengths, areas of need).*
- *CBMT* Scope of Practice II. A. Implementation (3. Utilize the following music therapy treatment approaches and models to inform clinical practice: d. medical)

2. Participants will demonstrate an understanding of the use of music therapy with the outpatient dialysis population in a general medical setting.

• *CBMT* Scope of Practice I. C. Treatment Planning (3. Coordinate treatment with other professionals and/or family, caregivers, and personal network when appropriate. 4. Evaluate how music therapy fits within the overall therapeutic program.)

3. Participants will demonstrate an understanding on effective ways to integrate Neurologic Music Therapy (NMT) into a medical setting.

- *CBMT* Scope of Practice II. A. Implementation (2. Provide music therapy experiences to address client's: p.) language, speech, and communication skills r.) motor skills t.) neurological and cognitive functions)
- *CBMT* Scope of Practice II. A. Implementation (3. Utilize the following music therapy treatment approaches and models to inform clinical practice: f. neurological)

4. Participants will demonstrate an understanding of management of a multi-site internship program in a medical setting.

• CBMT Scope of Practice IV. B. Professional Responsibilities (8. Supervise staff, volunteers, practicum students, or interns).

### **Bios of all presenters:**

Heather Hodorowski is the Music Therapy Coordinator at NorthShore University HealthSystem, a four-hospital healthcare delivery system in Evanston, Illinois. In 2011, Heather received her Master of Science in Counseling.

Regan Thompson is a neurologic music therapy fellow who currently works part-time at NorthShore University HealthSystem Glenbrook Hospital. Regan also serves as an internship supervisor in NorthShore's Internship program.

Erin Walsh earned her MM in Music Therapy at Illinois State University. She works in medical and psychiatric MT, and has worked in disability advocacy, ASL interpreting and education.

### Format:

1. General Introductions and Introduction to the NorthShore University HealthSystem Music Therapy Program model (1 hour with appropriate allotted breaks)

• To include general introductions of presenters and general schedule for the day

- To include characteristics of the program such as staffing, organization, clinical units/services provided, electronic medical record documentation (e.g., assessment tools, pain/anxiety tools)
- Teaching methods = didactic, group questions/discuss
- 2. Music Therapy with Outpatient Dialysis Patients (1 hour with appropriate allotted breaks)
  - To include discussion of characteristics of dialysis patients, challenges specific to the population, appropriate collaboration with other disciplines, MT interventions used, continuity of care issues)
  - Teaching methods = didactic, experiential (hands-on), group discussion
- 3. Appropriate allotted meal break depending on time of day

4. Incorporating and integrating Neurologic Music Therapy (NMT) into the medical setting (1 hour with appropriate allotted breaks)

- To include integrating NMT into a certified stroke unit that is short-term stay by nature, integrating NMT into a Neurologic Institute, appropriate staff education for development, MT interventions used
- Teaching methods = didactic, experiential, case examples, group discussion

5. Developing and Managing a multi-site Medical Music Therapy internship (1 hour with appropriate allotted breaks)

- To include discussion about general process of appropriately managing multiple interns in multi-sites within the same system to ensure a variety of clinical experiences
- To also include integrating multiculturalism/diversity into the internship process (e.g., utilizing strengths, understanding cultural expectations)
- Teaching methods = didactic, group discussion

6. Challenges/"Pointers" for Program Development and Developing a new Medical Music Therapy Program (1 hour with appropriate allotted breaks)

- To include insights and "pointers" about program development (e.g., effective staffing, flexibility and creativity with resources, understanding your audience)
- Teaching methods = didactic, group discussion
- 7. Wrap-up of Program/Evaluation

Prerequisites: None

# F. The Power of Rhythm

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335 Presenter(s): Ronnie Gardiner, Musician, Professional Jazz Drummer, Creater of RGRM Method

#### **Description:**

This CMTE proposal is relevant to several learning objectives found in CBMT Scope of Practice Section II.A on Treatment Implementation.

The course teaches a method that can be thought of as a new therapeutic tool available to the music therapist to achieve defined therapeutic goals. Music therapists will learn about the building blocks of the method which can be used to provide experiences for clients who seek improvement in many of the enumerated conditions in section II.A.2, including but not limited to language, speech, communication and motor skills. The session will include an overview of the continuing interest of academics and scientists in the effectiveness of the method with stroke victims and individuals with Parkinson's disease. Participants will learn how the method applies the elements of music, employs active listening, incorporates multisensory cues, adjusts to client progress, incorporates standard movement into the learning process and gives the music therapist flexibility to improvise.

In development for over 30 years and put into practice for nearly 20 years, participants will come away from the CMTE session with a good understanding of how to incorporate the method into their practice. Participants will learn about the power of rhythm and music therapy and gain an understanding of the scope of its application. Participants will learn that practitioners of this method can use it to collaborate with therapists from other disciplines (i.e., physical therapists, occupational therapists and music therapists) to respond to client needs. There is a growing group of international practitioners of the method. Participants will become part of this growing professional network and gain access to the results of ongoing research into the effectiveness of the method, setting the stage for further professional growth and development opportunities.

### Learner objectives:

The goal sought in this forum is to introduce the method to the music therapy community in the United States and demonstrate the benefits of using the method to promote health and wellness generally, but especially for individuals suffering from neurological disorders arising from conditions such as stroke and Parkinson's disease. Specific learner objectives include (1) providing an introduction to the building blocks of the method to demonstrate how it is designed to achieve for target populations the aspirations noted in the Abstract section above; (2) informing the learner community about the acceptance of rhythm and music therapy as an complement to other neurological therapies; and (3) guiding the participants in the CMTE workshop through the process of how to implement the method with the client community (ref. para. II of the CBMT Scope of Practice).

#### **Bios of all presenters:**

Professional musician for over 50 years, with dozens of recordings playing professionally with innovative artists, such as Dizzy Gillespie, Clark Terry, Zoot Sims, Benny Carter, Gerry Mulligan and Dexter Gordon.

#### Format:

The Introductory course usually takes substantially longer than the allotted five hours to complete. Therefore, this session will condense key elements of the introductory course to give students an understanding of the key principles on which the course is based. It will consist of demonstrations, discussion and exercises in the following topical areas:

- 1. Rhythm: Demonstrations and exercises in communication
- 2. Stimulation of the senses: Exercises in relaxation and concentration
- 3. Music: Variations on timing, tempo, space and visualization
- 4. Body movements: Coordination and balance
- 5. Innovation: Seeing the possibilities

Approximately one hour will be spent on each topic.

Prerequisites: None

# **G.** Developing Literacy Through Music Based Instruction

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

**Presenter(s):** Kathy Schumacher, MT-BC, WMTR

### **Description:**

Children in our schools are struggling to be proficient readers. Students with autism have a visual strength with multiple needs that are often not met by our current educational system. Because many of our kids with autism are Visual Spatial Learners, they are often not in tune with auditory input. Many kids have frequent ear infections and are not hearing sounds and developing phonological awareness in the same way that typically developing children develop these skills. In addition, the debate between phonics and whole language instruction continues. It is the presenter's opinion that both approaches are valuable. Our children do not need one or the other. It is the presenter's experience that even children with autism who tend to be strong sight word readers benefit from intentional instruction in phonological awareness skills. Research also shows that targeted phonological awareness intervention improves speech production for children who are speech impaired. Thirteen specific phonological awareness skills will be explained and multiple music-based strategies to teach them will be demonstrated. Strategies for teaching sight-reading, letter-sound correspondence and fluency will also be shared. Participants will learn how to assess reading level, fluency and comprehension. Case studies of two children with autism and vignettes of typically developing children will be used to demonstrate concepts. In addition, participants will experience specific Brain Gym® movements useful for preparing the brain and body for learning, integrating the brain with the body, and improving academic success with a specific focus on handwriting. Multiple resources for music-based learning will be shared and participants will be provided with a detailed resource list for further exploration.

### **Learner Objectives:**

1. Learn the difference between phonics and phonological awareness. IV.A.2

2. Become familiar with the Phonological Awareness Developmental Continuum. IV.A.2

3. Learn how to teach thirteen phonological awareness skills through music-based interventions. I.C.10

4. Learn strategies for teaching sight words, letter sound correspondence, and blending. I.C.10

5. Become familiar with resources for teaching fluency and comprehension. I.C.10

6. Be introduced to several assessment tools for determining reading levels. I.A.3

### **Bios of all presenters:**

Kathy Schumacher graduated from UW-Eau Claire in 1996. She is author of Alphabet Stew and Chocolate Too: Songs for Developing Phonological Awareness, Literacy and Communication.

### Format:

50 min – Definitions and Research (didactic)

100 min – Phonological Awareness Continuum (hands-on & case examples including video)

50 min – Sight Words, Phonics, Fluency, Vocabulary & Comprehension (didactic & hands-on)

25 min – Assessment (didactic & case examples)

25 min – Handwriting & Brain Gym (hands-on & case examples)

Prerequisites: None

# H. Tones, Tunes and Timbre: Creating a Music-Rich Therapeutic Environment In Early Childhood Music Therapy

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): Elizabeth K. Schwartz, LCAT, MT-BC

# **Description:**

This course will provide an opportunity for music therapists to analyze, learn and create music for therapeutic interventions in early childhood music therapy. The focus will be on sharing practical, clinical ideas for early childhood practice that are based on best practices, research and extensive experience. The session will offer newly created and adapted songs; research based interventions; and strategies and resources for each developmental level in early childhood. Topics to be covered will include planning for and providing therapeutic music groups; working with children and families in music; individual music therapy; and therapeutic community based early childhood programs. In each of the topics, course members will have the chance to sing, play and move as they learn therapeutic music material that can be applied immediately to their own practice. Participants will also gain a thorough understanding of the role each musical element plays when designing developmentally appropriate treatment.

Song material will be organized in a manner that allows the therapist to appreciate the different ways in which young children experience music. These categories include songs for gathering; songs for bonding; transition songs; songs embedded into play; movement songs; and instrument songs. The music shared during the session will be specially composed or adapted to meet specific therapeutic or developmental needs.

Participants will examine instruments commonly used in early childhood with the purpose of understanding the key components of each instrument that match musical developmental levels of

early childhood.

Session members will also have the chance to share ideas and resources from their own practice. Learning outcomes will be measured by the CMTE Course Evaluation Form as well as participation in simulated developmentally appropriate music experiences for young children and a written post test as described in the learning objectives.

### **Learner Objectives:**

Partcipants will describe how to a create developmentally appropriate music space for early childhood music therapy.

I C 8. Create environment or space conducive to client engagement.

Participants will identify key features of developmentally appropriate early childhood music. IC 9. Consider client's age, culture, music background, and preferences when designing music therapy experiences.

Participants will learn and analyze music created specifically for therapeutic use in early childhood. IC 10. Create music therapy experiences that address client goals and objectives.

Participants will learn and describe key components of selecting developmentally appropriate instruments for therapeutic use in early childhood.

IC 11. Select and adapt musical instruments and equipment consistent with treatment needs.

### **Bios of all presenters:**

Elizabeth K. Schwartz practices in early childhood in New York and is adjunct instructor at Molloy College. She is the author of Music, Therapy, and Early Childhood: A Developmental Approach.

### Format:

Creating a developmentally appropriate therapeutic music environment (30 minutes- didactic/hands on)

Music development in early childhood (30 minutes - didactic) Barriers to typical development as it relates to music (30 minutes – didactic) Analyzing and creating early childhood music (45 minutes – didactic/hands on) Songs and music experiences in group settings (45 minutes – hands on) Songs and music experiences in family settings (45 minutes – hands on) Songs and music experiences in individual settings (45 minutes – hands on) Questions and Wrap-Up (10 minutes)

Prerequisites: None

# I. BrainTuning: Improve Your Mind With Music

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): James C. Gardiner, Ph.D. ABN, Joshua Schrader, MT-BC

### **Description:**

The purpose of this workshop is to provide a wellness experience that is innovative, informative, fun, inspiring, and life-changing. Participants will receive colorful descriptive handouts, songs about mental improvement, plus a list of scientific references and popular books on cognitive improvement.

We will introduce the importance of a well-rounded life in order to build cognitive strength. We will emphasize social, emotional, spiritual, community, and physical (including sleep, nutrition, and exercise) aspects as prerequisites for effective mental functioning.

There will be an introduction to Attention, the cornerstone of good cognitive performance. We will present the latest neuroscience theories of attention, then engage in cognitive musical exercises designed to improve attention skills.

Participants will be introduced to the latest theories of memory, learn how memory works in the brain, and know the ten principles of memory improvement (learned from a song). Then through musical cognitive exercises, we will work on memory improvement.

Executive Functioning will be the last subject, first examining the latest theories of executive control from neuroscience. Then cognitive musical exercises will be provided for improving goal setting, planning, execution, inhibition, and adjustment to obstacles in everyday life.

The participants will form a Brain Improvement Plan share their plan with other group members, and will receive musical support for executing their plan. Time will be saved for a brief review and evaluation of the workshop.

#### Learner objectives:

Participants in this workshop will:

a) Understand the basic principles of cognitive improvement, as applied to attention, memory, and executive function skills with healthy persons,

b) Appreciate how attention must be paid to the Complete Person (physical, mental, social, community, spiritual, and emotional) in order to improve cognitive functioning,

c) Learn how music can improve attention, memory, and executive function skills, and

d) Experience improvement in cognitive skills by participating in musical cognitive

improvement exercises and forming a Brain Improvement Plan.

e) Prepare to provide music therapy experiences to address client's: memory, neurological and cognitive function, and executive function (CBMT Scope of Practice II.A.2.h,q,&t.).

### **Bios of all presenters:**

James Gardiner is a neuropsychologist and musician with training in music therapy who combines music with cognitive principles to teach persons how to improve attention, memory, and problem solving skills.

Josh Schrader works in an education setting with incarcerated youth. He's developing a music therapy program built on strengthening the cognitive functions and emotional regulation needed to succeed in academics.

#### Format:

During the first hour we will get acquainted with the participants, present our goals, sing together about the "whole person" and the brain, and briefly present research findings on how exercise, nutrition, music, rest, and sleep affect the brain. Materials will be presented from a colorful booklet

that will be the guide for the entire presentation. It includes illustrations, songs, exercises, references, and recommended resources for additional work on brain improvement.

For the second hour we will present a brief description of attention and concentration; engage the participants in drumming exercises to improve focus, sustained attention, and alternating attention; and teach the importance of living in the "here-and-now" as a foundation for good mental functioning.

Hour three will focus on memory. We will administer a memory pre-test to the participants, then briefly present the various types of memory, the principles for improving memory, and several memory skill techniques. The participants will practice the memory skill techniques, then will take a memory post-test so that they can see how much better their memory works by using the techniques they learned.

During hour four we will work on ways to improve goal-setting, planning, executing plans, overcoming inertia, and adjustment to obstacles to our goals.

The final hour will see the participants forming a Brain Improvement Plan; utilizing music to express their goals; and receiving support from the other group members for reaching their goals. Finally, the participants will take the posttest and evaluate the workshop.

Prerequisites: None

# J. The Alzheimer's Epidemic: What Every Music Therapist Should Know

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): Melanie Chavin, MS

# **Description:**

Alzheimer's disease is a growing public health issue. There are currently over 5.4 million Americans living with Alzheimer's, and this number is expected to grow exponentially over the next 40 years. Despite popular opinion, Alzheimer's affects not only older adults; over 500,000 Americans are living with younger onset Alzheimer's disease.

This session will introduce participants to facts and figures about Alzheimer's and other dementias, and will provide participants with a solid working knowledge of the symptoms and stages of the disease, the impact of the disease on the family and society, and current treatment strategies. Particular attention will be paid to how early diagnosis has changed clinical practice in recent years. Alzheimer's research, both biomedical and psychosocial, will be discussed, as will the latest research into the use of music therapy and creative arts with individuals with dementia.

The Alzheimer's Association's nationwide strategic plan has a major emphasis on providing support to

individuals in the early stages of dementia. Ideas will be shared as to how music therapists may engage with their local Alzheimer's Association Chapters. Participants will also learn tips and techniques for approaching nonprofits like the Alzheimer's Association to form partnerships and collaborations.

# Learner objectives:

1. Discuss facts and figures related to Alzheimer's disease, including incidence, societal costs and public policy issues

2. Identify key challenges faced by diagnosed individuals throughout the course of the disease

3. Describe the diagnostic process and current medical and psychosocial treatment strategies

4. List three strategies to consider when approaching nonprofit organizations regarding the establishment of music therapy initiatives

# **Bios of all presenters:**

Melanie Chavin is the Vice President of Program Services for the Alzheimer's Association - Greater Illinois Chapter. Melanie's professional experience includes working as a music therapist, and later as a gerontologist and consultant in a variety of residential and community-based settings. Her experience includes providing direct care, education, training and consulting services to organizations and programs serving older adults, and particularly individuals with Alzheimer's disease and related dementias. Melanie earned a Bachelor's degree in music therapy from De Paul University and a Master's degree in Human Services/Gerontology from National-Louis University. She is a graduate of the Diakonia program, a two-year program of theological instruction for Lutheran laity, and is currently working towards her Master's in Nonprofit Administration at North Park University. Melanie has written articles and book chapters on music therapy, dementia, spirituality and aging, has written a number of dementia-related training curricula, and has authored a book on music therapy and dementia.

Format: The workshop will involve lecture/discussion, small group work, and experiential activities.

Prerequisites: None

# K. CMTE cancelled

# L. Ethical Thinking in Music Therapy

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): Michael L. Zanders, Ph.D, LPC, MT-BC

**Description:** 

Two important influences lead to the development of this CMTE. The first influence was a survey I completed on ethics in music therapy. The purpose of the survey was to examine the ethical dilemmas and problems that music therapists encountered in practice. At the time the survey was implemented (April 2000), there hadn't been any research on the amount and types of ethical dilemmas/problems encountered by music therapists. Analysis of the survey found that music therapists, not surprisingly, encounter ethical dilemmas frequently. There were two noteworthy results from the survey; 1) approximately half of the respondents did not have a class or formal training in ethics and, 2) the large amount and types of ethically dilemmas encountered by music therapists.

The second major influence occurred while I had an assistantship within the music therapy program at Temple University. I assisted with research for Dr. Cheryl Dileo on Ethics and her book *Ethical Thinking in Music Therapy*. During this research I was able to gain in-depth background information on ethics and ethical thinking.

This CMTE consists of five parts based on the above two influences. Interspersed within the five parts of the CMTE is foundational information on ethics and ethical thinking including ethics history, philosophy, theory, and models, as well as practical information on code of ethics and the highly problematic areas of clinical practice in which ethical dilemmas most often occur for music therapists.

The CMTE includes lecture, case studies, and experiential learning components.

### Learner objectives:

1. Participants will be able to interpret and apply ethical standards of the music therapy profession (AMTA Professional Competencies 21.2).

2. Participants will understand foundational ethical concepts including ethical thinking.

3. Participants will demonstrate adherence to professional Standards of Clinical Practice (AMTA Professional Competencies 21.3).

4. Participants will assess areas for professional growth and set goals (CBMT scope of practice IV -A)

### **Bios of all presenters:**

The presenter has practiced music therapy for over 14 years. Within practice, he has extensive experience in educating both music therapists and non-music therapists on ethics and ethical thinking.

#### Format:

The schedule includes 3 hour morning session with 15 minute break, lunch break, and 2 hour afternoon session with 15 minute break. The structure and outline are developed within 5 parts. The presentation will include lecture within a Socratic method, with discussion, as well as small group case studies.

### Prerequisites: None

# M. Children's Right to Music

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335 Presenter(s): Marcia Humpal, M.Ed., MT-BC, Amber Weldon-Stephens, EdS, MT-BC

### **Description:**

Music therapy in early childhood and school age settings has received significant attention over the past two decades. However, economic, philosophical, and current trends may affect not only how music therapy service is delivered, but also how it is perceived and thus funded. This CMTE will address these issues, and will add another parameter to the discussion: that music is one of a child's basic human rights.

Through lecture, video examples, demonstrations, and hands-on experiences, the presenters will share information about how to ensure that music becomes available to **all** children. Through descriptions of successful partnerships with school districts, community agencies, administrators, parents, and other stakeholders, participants will learn how to justify music therapy service deliver within these settings, meeting the needs of children who may be excluded from music experiences due to their disabilities or interfering behavior.

Evidence-based practice and resources (including online examples) will be described and implications for the music therapy profession will be discussed. Hands-on experiences will involve the audience in ways to meet a variety of goals that can be supported through music therapy.

### Learner objectives:

Attendees will learn:

- How to make children's right to music become a reality within the community and educational settings (*IV.B. 17. Serve as a representative, spokesperson, ambassador, or advocate for the profession of music therapy*).
- Background information and evidence-based practice research supporting the benefits of including music therapy in children's educational programming (*I.C. 2. Consult the following in the treatment planning process: a) clinical and research literature and other resources).*
- Specific practical music therapy applications and techniques for use in educational and community settings (*II. Treatment Implementation*).
- Resources to share with administrators, support staff, and parents (*I.C. 3. Coordinate treatment with other professionals and/or family, caregivers, and personal network when appropriate. 4. Evaluate how music therapy fits within the overall therapeutic program).*

### **Bios of all presenters:**

Marcia Humpal is semi-retired following a long career with the Cuyahoga County Bd. of Developmental Disabilities in Cleveland, OH. She maintains a small private practice specializing in early intervention and inclusion programming.

Amber Weldon-Stephens is a music therapist in the Fulton County Schools, outside Atlanta, GA. Under her guidance, her district now employs one of the highest numbers of school music therapists in the country.

# Format:

- I. Introduction (didactic) 10 minutes
- II. Children's Right to Music A Human Rights Based Approach (didactic) 20 minutes
- III. Ensuring Children's Rights Through Music Therapy

- A. Early Childhood (50% didactic, 30% video/picture/case examples, 20% hands-on) 60 minutes
- B. School Age (50% didactic, 30% video/picture/case examples, 20% hands-on) 60 minutes

BREAK - 30 minutes

- IV. Establishing (or Maintaining!) Music Therapy in the Community and in the Schools (didactic and case examples) 45 minutes
  - A. Meaningful Music and Musical Messages Making it Happen (hands-on)– 45 minutes
  - B. Resources and References (didactic, handouts) 15 minutes
- V. Summary/Questions/Comments (audience participation) 15 minutes

Prerequisites: None

# N. Creating Change: Competencies for LGBTQ Best Practices

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

#### **Presenter(s):**

Natasha Zebrowski Anderson, MA, MT-BC, LMHC Amy Donnenwerth, MA, MT-BC Michele Forinash, DA, MT-BC, LMHC Spencer Hardy, MT-BC Maureen Hearns, MA, MT-BC Leah Oswanski, MA, LAC, MT-BC Beth Robinson, MT-BC Annette Whitehead-Pleaux, MA, MT-BC Elizabeth York, Ph.D., MT-BC

#### **Description:**

Historically, Lesbian Gay Bisexual Transgender and Questioning (LGBTQ) people have been marginalized and underserved by the mainstream culture. Although music therapists often receive training in cultural diversity, many report that they have never received training specifically on LGBTQ issues. Some music therapists may believe that they don't work with LGBTQ community members or that their clients do not identify as LGBTQ. This is complicated by the fact that many people do not feel safe disclosing LGBTQ information in a therapeutic setting. Because LGBTQ people are of all ages, cultures, populations, and geographical areas, it is highly likely that music therapists do work with LGBTQ clients, co-workers, and students, whether they realize it or not. After

observing a wide discrepancy in the quality and availability for training, treatment, supervision, and understanding of LGBTQ clients, co-workers, and students, a team of music therapists who work in a variety of settings across the United States created a best practices document.

By implementing standards and recommendations, the LGBTQ Best Practices is designed to be a starting point for music therapists to gain a broader perspective and understanding of LGBTQ issues. These guiding principles are essential to better prepare music therapists for supporting and affirming LGBTQ clients, co-workers and students.

This presentation will continue the dialogue started last year. The presentation will be broken down into three major areas: Clinical Practice, Work Environment, and Education and Clinical Training. Through an exploration of these best practices both through didactic and experiential learning, the participants will develop and hone skills needed to serve this population. In addition, the presentation will focus on increasing the participants' self-awareness and insight to further develop the skills needed to work with LGBTQ clients, coworkers, and students. Participants will learn to advocate for clients, coworkers, and students.

### Learner Objectives:

1. Enhance awareness of working with LGBTQ clients, co-workers and students (CBMT Scope of Practice I.A.4.c, I.A.4.d, & I.A.4.i.

2. Develop skills for working with LGBTQ clients, co-workers, and students (CBMT Scope of Practice i.c.9, II.A.1.f-g, II.B,2 IV.B.8, & IV.B.13)

3. Improve understanding about the Music Therapy LGBTQ Best Practices (CBMT Scope of Practice IV.A.1-2)

4. Provide opportunities to discuss LGBTQ best practices (CBMT Scope of Practice IV.A.3-5)

5. Learn ways to advocate for members of LGBTQ community

6. Increase the participants' self-awareness and decrease therapist bias. (CBMT Scope of Practice I.B.4 & III.B, 3).

### **Bios of all presenters:**

Natasha Zebrowski Anderson, MA, MT-BC, LMHC attended Lesley University's graduate program, and currently works as an outpatient therapist at Child Guidance Clinic with Behavioral Health Network in Springfield, MA.

Amy Donnenwerth, MA, MT-BC has been a music therapist for 15 years and her passion is working with at-risk youth. She is an advocate for the LGBTQ community.

Michele Forinash, DA, MT-BC, LMHC is Professor & Director of the PhD program in the Division of Expressive Therapies at Lesley University and has been involved in music therapy since 1981.

Spencer Hardy, MT-BC attended Berklee College of Music and currently has a private practice based in Palo Alto, CA.

Maureen Hearns, MA, MT-BC, Associate Professor; Director of Music Therapy at Utah State University; member of *"Daughters of Harriet;"* serves in various elected and appointed positions throughout the profession.

Leah Oswanski, MA, LAC, MT-BC is the coordinator of music therapy at the Carol Simon Cancer Center in Morristown, NJ, and is a strong advocate for LGBTQ issues.

Beth Robinson, MT-BC started her music therapy career in 1996. She and has a private practice in Los Altos, California. She has performed, presented and volunteered for the LGBT community.

Annette Whitehead-Pleaux, MA, MT-BC works with pediatric burn survivors at Shriners Hospitals for Children-Boston. She has been an advocate for LGBTQ civil rights and volunteered with queer youth.

Elizabeth York, Ph.D., MT-BC, is Chair of Music Education and Music Therapy at Converse College. Previously director of Music Therapy at Utah State University, she co-founded the campus Ally Program, a training program on LGBTQ issues.

#### Format:

2 hours Didactic, 2 hours Experiential, 1 hour roundtable discussion

Prerequisites: None

# O. Supervising the Music Therapy Intern

Thursday, October 11, 2012 7:30 AM – 12:30 PM 5 CMTE Credits Cost - FREE \*Free to current AMTA members who are registered for the conference.

#### **Presenter(s):**

Mary Jane Landaker, MT-BC, AIAC Chair; Eve Montague, MT-BC, NE Representative; Teri McManus, MT-BC, MAR Representative; Lauren DiMaio, MT-BC, SER Representative; Gina Hacker, MT-BC, MWR Representative; Kay Luedtke-Smith, MT-BC, GLR Representative; Amy Smith, SWR Representative; Andrea Scheve, MT-BC, WR Representative

### **Description:**

This course is offered annually by the AMTA *Association Internship Approval Committee*. The format is periodically changed to provide internship personnel with upated information on techniques and topics related to supervising music therapy interns. This supervision CMTE has been designed to prepare prospective internship directors/supervisors for their role in the training and supervision of

music therapy interns as well as provide "refresher" supervisor training to music therapists who currently supervise music therapy interns. The course provides the supervision training requirement for potential national roster internship directors according to the standards stated in the AMTA National Roster Internship Guidelines. All relevant internship training documents will be reviewed as they pertain to the supervision process. These documents include: the AMTA Standards for Education and Clinical Training; National Roster Internship Guidelines; and the AMTA Professional *Competencies*, which provide the foundation for intern training, supervision, and evaluation. Stages of internship will be thoroughly reviewed with attention focused on the role of the supervisor during each stage. A comprehensive overview of various supervisory topics will be presented, including supervision models, using music as a supervision tool, motivational techniques, problem solving, conflict resolution, multicultural considerations in supervision, performance management, intern evaluation, and administrative tasks. Internship agreements, including establishing partnership with academic faculty for training students, will be discussed with emphasis on early collaboration. The session will also include time for attendees to discuss specific challenges encountered in supervising interns in order to promote group discussion on effective supervision approaches. Handouts and resources will be provided to all participants. Participants will be encouraged to develop and discuss specific internship situations in large group and small group discussions.

### Learner objectives:

Learner will identify challenges of training interns by identifying 2 stages of internship and listing a training consideration for each stage (CBMT Scope of Practice IV.B.8)

Learner will write specific, measurable goals for intern training (CBMT Scope of Practice I.C.6 – where the client is the intern)

Learner will demonstrate awareness of ways music can be used in the supervision process through explaining personal purpose/reason for using music (CBMT Scope of Practice IV.A.5; IV.A.6; IV.B.11)

Learner will indicate two supervision models for use with interns by stating reasons why models could be applied to the supervision of music therapy interns (CBMT Scope of Practice IV.B.8)

#### **Bios of all presenters:**

Mary Jane Landaker is the chair of the Association Internship Approval Committee (AIAC). Eve Montague is the New England Representative to the AIAC. Teri McManus is the Mid-Atlantic Representative to the AIAC. Lauren DiMaio is the Southeastern Representative to the AIAC. Gina Hacker is the Midwestern Representative to the AIAC. Kay Luedtke-Smith is the Great Lakes Representative to the AIAC. Amy Smith is the Southwestern Representative to the AIAC. Andrea Scheve is the Western Representative to the AIAC.

#### Format:

0:00 - 1:30 – Introduction of AIAC members; What is Supervision? Ethical Considerations in Supervision; Experiential situations offered by audience members

1:30-1:40 - Break

1:40-3:00 – Establishing and maintaining the supervision dialogue; racial and cultural identity development; Five practices of exemplary leadership; Creating TEAM; Experiential situations offered by audience members

3:00-3:10 – Break

3:10-4:30 – Stages of internship; Administrative and managerial tasks of supervision; Internship Agreements; Competency-Based training; Music in supervision; Experiential situations offered by audience members

### **Prerequisites:**

Yes – attendees MUST preregister. No onsite registrations as materials have to be compiled and shipped prior to conference start. Attendees must be professional members of AMTA or graduate students with MT-BC to take course.

# P. Ethics Board Presents: Music Therapy Ethics – Raising Consciousness

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Debbie Bates, MMT, MT-BC, LCAT: Cleveland Clinic Betsey King, PhD, MT-BC: Nazareth College Gretchen Patti, MT-BC: Bethany Children's Home Jan Schreibman, MM, MT-BC: Riley Hospital for Children, Certified Child Life Specialist Carol Shultis, MEd, MT-BC, LPC: Seton Hill University, Fellow, Association of Music and Imagery Elizabeth York, PhD, MT-BC: Converse College

### **Description:**

Music therapists routinely address problems related to confidentiality and managing the therapeutic relationship, but ethics in music therapy covers so much more. Music therapy ethics impact every aspect of our profession from a music therapy educator's interactions with a student to how a music therapist in private practice announces services. How does a music therapist navigate the boundaries that are often blurred when working in a small town? Is bartering for services ever acceptable? Can a dual relationship be beneficial to a client? As the practice of music therapy evolves and grows, questions about ethical music therapy practice in multicultural settings emerge. Ethics education opportunities are limited and few in our profession have the chance to continue to learn and explore ethical concerns once in the work world. How can we address this need?

Using didactic material, experience exercises, and group discussion, participants will continue learning about ethics in music therapy and have the chance to explore ethical concerns that arise from their own workplace situations. Current trends in music therapy ethics will be discussed. Topics may include multiculturalism, social networking, collegial relationships, and proactively addressing ethical dilemmas that may arise. Participants are invited to bring ethical dilemmas they have encountered to consult with their professional colleagues.

### Learner objectives:

1. Define the origins of ethical codes in professional practice and the importance of these codes in service professions (CBMT Scope of Practice: V.A.2)

2. Apply Dileo's 12-step problem solving approach to ethical dilemmas (CBMT Scope of Practice: V.B.5)

3. Consult with colleagues to provide possible solutions to ethical concerns (CBMT Scope of Practice: V.A.4)

# **Bios of all presenters:**

Debbie Bates, MMT, MT-BC, LCAT, is a music therapist for the Cleveland Clinic where she has clinical, supervisory, and research responsibilities. She is also a PhD student at Temple University. She has been on the Ethics Board since 2002 and co-chair since 2007.

Betsey King, PhD, MT-BC is Assistant Professor and Undergraduate Music Therapy Program Coordinator at Nazareth College in Rochester, NY. She is currently conducting clinical research in the effects of music therapy interventions on adult-onset speech and language deficits.

Gretchen Patti, MS, MT-BC, LCAT - Director of Therapeutic Services at Bethany Children's Home, Womelsdorf, PA; served the MAR/AMTA as President, Government Relations Chair, Assembly Delegate and member of the Ethics Committee.

Jan Schreibman, MM, MT-BC, Certified Child Life Specialist, is a music therapist at the Riley Hospital for Children and an adjunct faculty member at Indiana University – Purdue University/Indiana.

Carol Shultis, MEd, LPC, MT-BC: After 24 years of clinical work and supervising interns, Carol now teaches part-time at Seton Hill University while working on her PhD in music therapy at Temple University.

Elizabeth York, Ph.D., MT-BC, is Chair of Music Education and Music Therapy at Converse College, Spartanburg, SC. Her clinical and research.

# Format:

Part 1 - 90 minutes – introductory information – where are we now? (Polling of participants and discussion; presentation of information, values clarification exercise and related discussion.) Part II – 90 minutes – Didactic presentation of information regarding Codes of Ethics, core ethical principles, characteristics of the virtuous music therapist and the 12 step ethical decision making process.

Part III - 90 minutes – Small group work to practice utilizing the 12 step ethical decision making process to address sample dilemma (and/or situations presented by the group) This section will also include time to address specific concerns raised by participants and a question/answer time. This CMTE could be condensed to three 60 minute sections to offer as a 3 credit CMTE if desired.

# Prerequisites: None

# Q. Managing Anxiety with Music Therapy

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): Barbara Dunn, PhD, LICSW, MT-BC

### **Description:**

This workshop presents a comprehensive approach to understanding and addressing anxiety. It melds cognitive approaches and mindfulness-based practices with music therapy; focus ranges from severe Anxiety Disorders to anxiety experienced in daily living.

Anxiety can be crippling and prevent living a fulfilled life. It can also exacerbate another condition and make things worse than is necessary. For example, anxiety over an illness can complicate and interfere with medical treatment. Anxiety can interfere with getting a good night's sleep as well as making concentration on various tasks difficult. It can immobilize and create a "gripped" experience that prevents one from moving forward with efforts to address challenges in his or her life.

We will cover various anxiety-related diagnoses under the DSM IV, including Panic Attacks and phobias. We will also address anxiety that can be co-occurring with clients struggling with other conditions, such as an eating disorder or cancer. We will address current pharmacological and nonpharmacological ways that anxiety is commonly addressed via the mental health profession. Additionally we will looks at stress and anxiety in our own lives and how we cope with it.

The primary focus of the workshop will be on how music therapy can respond and assist in dealing with these anxiety-related situations and conditions. Various music therapy techniques will be utilized, including listening to music, improvisation, singing, and instrument playing. Format for the workshop will include didactic and experiential learning with opportunities for small and large group discussions.

### Learner objectives:

- Participants will learn about anxiety-related DSM IV diagnoses identified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR)
- Participants will learn about music therapy techniques that can be used to address anxiety.
- Participant will explore ways that music can be used to decrease stress and anxiety in their own lives.

### **Bios of all presenters:**

Barbara Dunn, PhD, LICSW, MT-BC has a private psychotherapy and music therapy practice in Seattle, WA. She also directs the music therapy program at Whidbey General Hospital.

### Format:

# OUTLINE

Introductions

What is stress?

# What is anxiety?

### DSM-IV-TR

- Panic Disorder
- Agoraphobia
- Social Phobia
- Specific Phobia

- Generalized Anxiety Disorder
- Obsessive-Compulsive Disorder
- Post-Traumatic Stress Disorder
- Agoraphobia without History of Panic Disorder
- Anxiety Disorder Due to a General Medical Condition
- Substance-Induced Anxiety Disorder

**Causes of anxiety** 

Medications and supplements to treat anxiety

Behaviors that maintain anxiety and stress

### **Comprehensive Treatment for Anxiety**

- Physical
- Emotional
- Behavioral
- Mental
- Interpersonal
- Self-Esteem
- Existential

Self-Care

**Discussion/Closing** 

TEACHING METHODS: workshop, didactic, case examples

Prerequisites: None

# **R.** Towards a Trauma – Informed Music Therapist

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

**Presenter(s):** Gene Ann Behrens, PhD, MT-BC Professor of Music Director, Music Therapy Program Elizabethtown College

Matthew Phillips, LSW, MT-BC Director of Music Therapy Bethany Children's Home

Vivian Nix-Early, PhD, MT-BC Co-Founder & Chief Operations Officer BuildaBridge International

Flossie Ierardi, MM, MT-BC, LPC Director of Field Education Department of Creative Arts Therapies Drexel University

### **Description:**

The pervasive influence of trauma due to crises, disasters, life events, or experiences of clients with various diagnoses is receiving increasing importance within health care professionals. The relatively new research in the area of neurobiology is shifting the focus of treatment (van der Kolk, 1996, 2006; Perry, 2001). Due to the unique benefits of music, music therapy can be a key component of the treatment process. However, limited research or treatment discussions on trauma exist in the music therapy literature.

This 5-hour CMTE workshop will present an intensive overview of trauma, trauma research, and trauma treatment. Attendees will receive some of the latest information in the area of trauma and participate in break out discussions and music experiences while developing materials for supporting the trauma needs of their own clients.

Eight main topics related to the area of trauma will be presented during the workshop. Initial discussions of the history, various classifications, and cycle of trauma will provide a background to the topic area. A discussion of the current research on the neurobiology of trauma, the developmental influence of trauma on children, and treatment protocols will form the core of the workshop. Music therapy methods and techniques will be applied to the suggested treatment protocol evolving from relatively new research; three of the presenters will discuss specific applications of music therapy related to their work. Short tasks linked to scenarios will be presented for attendees to discuss and complete within several topic areas; the discussions will lead to the development of trauma informed music therapy experiences relevant to each attendee's client/s. Several short music experiences also will occur throughout the presentation to provide treatment examples. The workshop will conclude with two other discussions, the ethics involved in working with clients in various stages of trauma and caring for the caregiver.

#### Learner objectives:

1. Attendees will be able to identify when current trauma research evolved.

2. Attendees will be able to discuss the key components involved in describing trauma and trauma symptoms, including symptoms of secondary (vicarious) trauma or "compassion fatigue." (I.A. 4. Identify client's: a) active symptoms. b) behaviors. d) issues related to family dynamics and interpersonal relationships. e) learning styles. f) manifestations of affective state. g) music background, skills. i) stressors related to present status.)

3. Attendees will be able to discuss theories about what occurs in the brain of individuals dealing with trauma stress. (*IV.A.2. 2. Review current research and literature in music therapy and related disciplines.*)

4. Attendees will be able to discuss theories about how the neurobiological changes resulting from complex trauma impact the development of children. (*IV.A.2. 2. Review current research and literature in music therapy and related disciplines.*)

5. Attendees will be able to discuss how music therapy experiences can potentially support the therapeutic needs of individuals dealing with trauma stress. (*I. C. 2. Consult the following in the treatment planning process: a) clinical and research literature and other resources. and c) other professionals, when appropriate.*)

6. Attendees will be able to discuss ethical considerations when working with individuals dealing with trauma. (*IV.B.9. Adhere to the CBMT Code of Professional Practice; II.B. Safety.*)

7. Attendees will be able to discuss the importance of trauma treatment for caregivers and identify strategies for self-care. (*IV. Professional Development and Responsibilities: A. Professional Development.3. Participate in continuing education.5. Seek out and utilize supervision and/or consultation.*)

# **Bios of all presenters:**

Gene Ann Behrens, PhD, MT-BC, a Professor and Director of Music Therapy at Elizabethtown College, is interested in research methodology and research pertaining to emotional meaning in music and trauma.

Matthew Phillips, LSW, MT-BC, Director of Music Therapy and Internship Director at Bethany Children's Home, is interested in trauma-informed care and clinical applications of technology.

Vivian Nix-Early, PhD, MT-BC, Co-Founder & Chief Operations Officer of BuildaBridge International, provides community training for artists/health workers in developing countries to use arts-based intervention with children and women experiencing trauma.

Flossie Ierardi, MM, MT-BC, LPC, Director of Field Education for the Department of Creative Arts Therapies at Drexel University, has worked with various populations—homebound lower income older adults and youth in detention.

### Format:

(10m) I. Introduction – (didactic and music experience)A. Drumming experience with attendees – example music experience I

- B. Introduction of presenters
- C. Overview of workshop
- D. Overview of procedures (three 10-min. breaks)

-

(10m) II. History of trauma

- A. History of trauma from the 1860s to present day (didactic and audience participation)
- B. Incidence of various areas of trauma (didactic and group discussion)

(20m) III. What is trauma – the symptoms

- A. DSM- IV (didactic)
- B. Complex trauma (didactic)
- C. Other classifications (didactic)

(10min) D. Present scenarios to attendees – (group discussion of case examples)

(20m) IV. Cycle of trauma in disasters and crises

- A. The process (didactic)
- B. Phases of response (didactic)
- C. Existing MT response teams (didactic)
- D. Apply to attendees scenarios (group discussion of case examples)

(20m) V. Neurobiological influence of trauma (didactic)

(15m) VI. Influence of trauma on neural development (didactic)

(10m). VII. Review in relation to research –
A. Summary of resulting symptoms (didactic)
(10 m) B. Music experience II – (group participation)

(45m) VIII. Proposed treatment models

- A. Key components of treatment based on research trauma informed care (didactic)
- B. Other models on which we can build (didactic)
  - 1. Sanctuary Model (Bloom)

2. Attachment, Self-Regulation and Competency Model - ARC

- (Kinniburgh, Blaustein, Spinazzola, van der Kolk, 2005)
- 3. National Child Traumatic Stress Network & National Institute for Trauma and Loss in Children
- 4. Bath Model
- 5. Other models (cognitive-behavioral, EDMR)
- C. Music therapy key components (didactic)
- (10m) D. Discuss applications for scenarios (group discussion)

(25m) IX. Applications – working with populations involving trauma stress

- A. Presenter one's international and local work (didactic)
- B. Presenter two's work with Sanctuary Model (didactic)
- C. Presenter three's work in Bethlehem, OPT (didactic)
- (20m) D. Music experiences with group (group participation)

(20m) X. Ethical considerations (didactic)

- (15m) XI. Caring for the caretaker (didactic)
- (5-10 m) XII. Concluding remarks (didactic)

Prerequisites: None

# S. Music & Wellness – An Integrative Evidence-Based Model for Mind, Body, Spirit, Heart and Soul

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Christine Stevens, MT-BC, MSW, MA

### **Description:**

This workshop features scientifically based practices for accessing and attuning to music for spirituality, health, wellness, and personal growth. It is designed for music therapists interested in extending self-care and to extend Scientific evidence now shows that music used for stress reduction, even with non-musician subjects, actually reversed the genes activated by stress, and de-activated the brain areas related to self-monitoring, and over-thinking. This and other studies begin to build a case for a model of music for wellness Evidence shows that its not so much what music does for us; but more what music *un-does* that creates a scientific model for music and wellness.

This workshop begins with an opening experiential process involving all four elements of music; rhythm ,melody, harmony, and silence, to center and focus the group and to give each participant their own connection to each element of music. An original song is used to give a mneumonic connection to the model;

May your heart sing a melody of love.

May your body dance to the rhythm of life.

May your soul harmonize with all your relations

May your mind rest in the silence of peace.

Next, the model of music and wellness is presented in a didactic format; that emphasizes both music listening and music making as tools for programs that emphasize wellness, stress-reduction, personal growth, spirituality and health.

Each element is explored in experiences in receiving (listening) and expressing (making) music. For this portion of the workshop, participants will have a hand out that identifies key activities useful for achieving the wellness benefits of music for mind, body, spirit, heart and soul. Following this component, participants are given time to consider their own creative activities to achieve similar goals, and spend time in dyads sharing the clinical applications as well.

The workshop moves into a didactic presentation that presents the research and evidence-base of key principles in this integrative model of music and wellness. This includes the work of neurologist CJ Limb, using fMRI studies with jazz improvisers and the work of Dr. Barry Bittman, neurologist studying genomic levels of stress reduction through music. A hand out supports this information.

# Learner objectives:

1. Participants will demonstrate ability to create music making and listening experiences for the goals of wellness and stress-reduction.

2. Participants will identify key research studies and outcomes that support the use of music for stress-reduction and wellness.

3. Participants will identify key correlations of each element of music; rhythm ,melody, harmony, and silence and their application for body, heart, soul, mind, and spirit.

4. Participants will demonstrate knowledge of how music can be used to reduce stress, strengthen immune system functioning, and lead to greater health and well-being.

### **Bios of all presenters:**

Christine Stevens, MSW, MT-BC, is the author of *Music Medicine, The Healing Drum Kit and The Art and Heart of Drum Circles*. She is the founder of UpBeat Drum Circles.

### Format:

1. Opening Welcome Experience

2. Demonstration of each music element and its correlation to mind, body, spirit, heart and soul – experiential

- 3. Hand out on model of Music for Wellness didactic
- 4. Experience in melody for heart
- 5. Experience in rhythm for body
- 6. Experience in harmony for soul
- 7. Experience in silence for mind

(each experience is introduced by one key scientific study and quotes from spiritual teachers)

8. Closing – how to apply this in music therapy work - didactic

### Prerequisites: None

# T. Songwriting Boot Camp

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### Presenter(s): Cathy Fink

Grammy Award winner, Music Educators, Songwriting Instructor @ The Writers' Center, Songwriting Contest Winner (John Lennon Contest, International Songwriting Competition)

### **Description:**

What are the elements of a great song? We will study these elements for several genres and work on songwriting warmups, techniques, skills and practices. This course will satisfy both music therapists who want to start writing songs, and those who want to improve their songwriting either for their music therapy practice or for their own fun and enjoyment (and other musical careers). The theme will be art at the intersection of purpose and play.

### Learner objectives:

- Participants will learn basic songwriting formats
- · Participants will learn writers' warm ups
- Participants will learn tools for wordsmithing
- Participants will learn other tips and tricks of songwriting
- Participants will do writing exercises in class, independently and in collaboration with other participants

### **Bios of all presenters:**

Cathy Fink is one half of the GRAMMY winning powerhouse duo, Cathy Fink & Marcy Marxer.

They are consummate entertainers, master musicians and trail blazers in multiple genres of folk, country, swing and family music. Cathy is a songwriting instructor at The Writers' Center in Bethesda, MD and has taught at numerous summer music workshops. She has taken first place in the John Lennon Songwriting Contest, International Songwriting Competition and Mid-Atlantic Songwriting Contest.

A veteran instructor and performer, Cathy's song for the Aids Quilt, "NAMES", was recorded by over 30 artists and choral groups internationally. She is also a mighty fine banjo player, ukulele player and yodeler.

### www.cathymarcy.com

#### **Format:** Music Making & Learning

The format of the workshop will be experiential. Bring a guitar, ukulele or other instrument if you have one, or let AMTA know in advance that you will need to borrow one. Written materials will be provided

Prerequisites: None - an interest in songwriting!

# U. Every Day I Get the Blues: Blues Guitar in Music Therapy

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Peter Meyer, MA, MT-BC; Paul Nolan, MCAT, MT-BC, LPC; Robert Groene, PhD, MT-BC

### **Description:**

The session will begin with a history of the blues, from its origins in Africa to its prevalence in the United States. The harmony of the 12-bar, 2 8-bar progressions and "ice cream" changes will be discussed. Participants will then learn the blues and pentatonic scales. A discussion of how blues can be incorporated into music therapy applications will follow. A breakout session will be offered so that participants will learn several blues shuffles, 9<sup>th</sup> chords, Delta and Piedmont techniques on guitar. The session will conclude with a demonstration of using blues in music therapy applications including the use of blues to facilitate creativity and the benefits to mental health as well as using blues style guitar for ensemble approaches using music therapy instruments.

### Learner objectives:

Participants will learn the names of important blues guitar players (CBMT SOP: II, A, 1 a & b, 2, b, t, ab, ag & ah, 5, m, y & z). Participants will learn how to create authentic accompaniment in order to play blues pieces or just add interest to their repertoire (CBMT SOP: II, A, 5, a, b, c, w-3, y & z, IV, A, 6). Participants will learn electric guitar basics and how to create a stylistically correct/good tone (CBMT: IV, A, 7).

### **Bios of all presenters:**

Peter Meyer, MA, MT-BC works as a MT at GSS-USC, and is an adjunct professor at Augsburg and St. Mary-of-the-Woods colleges. He recently authored *Guitar Skills for Music Therapists and Music Educators*.

Paul Nolan is Director of Music Therapy Program, Department of Creative Art Therapies, Drexel University. He co-chaired a Blues Institute at the AMTA 2004 conference.

Dr. Robert Groene, Director of Music Therapy at UMKC, has played and taught guitar and related frets since 1961. His research involves the quality of musicianship on the efficacy of client response.

### Format:

Experiential with case and video examples

Prerequisites: None

# V. An Experiential Exploration of the TaKeTiNa Rhythm Process for Embodying Rhythm

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

**Presenter**(*s*): Michael Kenny, MMT, MT-BC

### **Description:**

TaKeTiNa is a group process that allows anyone to access his or her body's innate rhythmic knowledge. Instead of being taught random rhythm patterns, participants are guided into the experience of rhythm archetypes—the underlying structure of all forms of music conveyed in a natural, organic manner.

The TaKeTiNa process was developed in 1970 by Austrian musician and composer Reinhard Flatischler. It is now used worldwide in universities and clinics, in therapeutic practices and in drama schools, in pain therapy and in management.

The TaKeTiNa process is not simply a method of learning music or rhythm; it always involves learning more about yourself and others. Everything that hinders our life shows up in this process as a rhythmic problem that, however, can be transformed by the learning process that unfolds in TaKeTiNa. This is why TaKeTiNa is also used in different forms of therapy.

Through TaKeTiNa, the student gains direct access to the rhythmic worlds of Africa, Asia, and Latin America which, in turn, leads to increased competence and creativity in the related rhythms of classical music, jazz, and hip hop.
Experience has shown that profound rhythmic orientation can be achieved more easily by using the body itself as the main instrument. In this way, TaKeTiNa participants can encounter rhythm directly and intensely. Through vocalization, clapping, and stepping, they are guided into three separate rhythmic layers.

Attendees will have the opportunity to participate in the experience of a TaKeTiNa circle through stepping, clapping and singing, and engage in a discussion of the theoretical underpinnings and elements of TaKeTiNa. Participants will also learn how to draw a polyrhythm mandala to illustrate the relationships in the TaKeTiNa journey.

# Learner objectives:

- Employ active listening
- Provide visual, auditory, or tactile cues
- Use creativity and flexibility in meeting client's changing needs
- Improvise instrumentally and vocally
- Integrate movement with music
- Provide verbal and nonverbal guidance
- Utilize imagery
- Employ music relaxation and/or stress reduction techniques
- Share musical experience and expression with clients
- Empathize with client's music experience
- Participate in continuing education. Expand music skills

### **Bios of all presenters:**

Michael obtained BMT at Marywood College, and MMT from SMU. He provides music therapy for Dallas, Garland, and Cedar Hill schools, taught world rhythms at Richland College, works with many populations. He teaches, leads drum circles, president of Drums Not Guns.

## Format:

Introduction to the origins and practice of TaKeTiNa – 30 mins Construction of a concentric mandala illustrating polyrhythmic relationships – 30 mins Experiential TaKeTiNa Rhythm Journey – 1.5 hours Group processing and discussion of experience – 30 mins Experiential TaKeTiNa Rhythm Journey – 1.5 hours Group processing and discussion of experience, Q&A – 30 mins

Prerequisites: None

# W. An Exploration of Resource-Oriented Music Therapy & Related Practices

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

# **Presenter(s):**

Heather J. Wagner, MMT, MT-BC

# **Description:**

This CMTE is designed to encourage participants to become more aware of the value in building their clients' resources and strengths. Recent research in positive psychology supports the idea that building one's strengths and resources may have the effect of reducing symptomology (Seligman, Rashid & Parks, 2006). Other clinicians cite the need to build and connect clients to their inner strengths in order to engage in issue-oriented work (Summer, 2011). Yet American psychology and related practices continue to approach client care from a medical- or illness- model that focuses on expert intervention, prescribed interventions, and amelioration of symptoms. Music therapy by its very nature offers many opportunities to support clients in finding the good within themselves and building those strengths in order to move toward a greater state of health and wellness. It is likely that many music therapists already practice a resource-oriented approach or something similar without fully understanding the impact and importance of this approach, and potentially lack the vocabulary to articulate this phenomenon in relevant clinical situations. This CMTE will thus educate participants about the resource-oriented approach as discussed in Rolsvjord (2010), it's foundational theories, and it's relationship to similar music therapy practices while fostering their own development as therapists practicing from this orientation. Information will be presented didactically, and experiential music making and sharing will occur throughout the presentation.

# Learner objectives:

Participants will:

- 1. Be able to identify and contrast illness ideology and wellness ideology, with relevant applications to clinical music therapy practice.
- 2. Develop an understanding of resource-oriented music therapy approaches and relevant foundational theories.

Apply and implement the tenets of the resource-oriented approach to music therapy in recreative, receptive and improvisational experiences.

## **Bios of all presenters:**

Heather Wagner, MMT, MT-BC has experience in a variety of mental health populations. She is an AMI Fellow and is pursuing her PhD at Temple University. She currently serves as president-elect of NER.

# Format:

30 minutes	Lecture: Background of resource-oriented music therapy
15 minutes	Lecture: Resource-oriented music therapy specifics
45 minutes	Experiential #1: song sharing, group sharing
10 minutes	Break
15 minutes	Lecture: Supportive music and imagery introduction
15 minutes	Lecture: SMI Connections to R-OMT
60 minutes	Experiential #2: SMI, dyad processing, group discussion
10 minutes	Break

45 minutes Lecture: How to work in the resource-oriented approach 45 minutes Experiential #3: group improvisation, group sharing

15 minutes Wrap-up & post-test

Prerequisites: None

# X. Neurologic Music Therapy Interventions for People with Parkinson's Disease

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

**Presenter(s):** Sandra Holten, MT-BC, NMT Fellow

## **Description:**

Parkinson's disease (PD) affects each person uniquely. Although awareness of PD symptoms has increased in recent years, there is a need for continued education regarding the implications of how PD can affect individuals' functioning and disrupt their daily life. Neurologic Music Therapy (NMT) can be an integral part of treatment, addressing symptoms of Parkinson's and treating the "whole person". The presenter's goal for this presentation is for participants to increase their understanding of PD and how NMT techniques improve the quality of life of people with Parkinson's. The presenter will provide examples of how interventions can address changes in posture, voice, mobility, ability to move, mood and feelings about self. Ways to collaborate with other professionals in the health care will be discussed. The format for this presentation is primarily lecture; however attendees will view video clips of clients experiencing interventions and will be encouraged to experience some of the interventions within the presentation. Attendees will be encouraged to ask questions and draw from presenter as well as fellow attendees ideas for specific symptoms or cases they have found challenging within this population. The presenter will be sharing based on her 16 years of experience in working with people diagnosed with Parkinson's and related movement disorders.

### Learner objectives:

- **1.** Participants will be able to identify the four primary symptoms of Parkinson's Disease.(CBMT Scope of Practice I.A.4.a)
- **2.** Participants will be able to identify how Parkinson's disease impairs communication and identify two NMT interventions to address these concerns.( CBMT Scope of Practice I.C.6)
- **3.** Participants will be able to identify three NMT techniques to address sensorimotor concerns and how they can be used to treat physical symptoms of Parkinson's disease.(CBMT Scope of Practice-I.C.6)

### **Bios of all presenters:**

Sandra Holten, MT-BC, Struthers Parkinson's Center, served on faculty for NPF's Allied Team Training for Parkinson's and has presented on state, regional, and national level. She contributed "Music Therapy for People With Parkinson's" to a medical textbook, "Parkinson's Disease."

### Format:

1 hour	Parkinson's Overview Didactic with video examples		
.5 hour	NMT Overview Didactic		
1.25 hours	5 NMT to address sensorimotor concerns in Parkinson's disease		
	Didactic, Case Examples, Video and live demonstration		
.75 hour	NMT to address Speech Concerns in Parkinson's disease		
	Didactic, video examples		
.75 hour	Addressing psychosocial concerns		
	Didactic, case examples		
.5 hour	NMT to address Attention Issues in Parkinson's disease		
	Didactic, experiential		
.25 hour	Complete Evaluation		

Prerequisites: None. NMT training would be helpful, but not required.

# Y. Music Therapy & the Brain

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Dale B. Taylor, PhD, MT-BC; Diane Knight, M.S., MT-BC; Anita Louise Steele, M.M.Ed., MT-BC; Robert C. McAllister, M.M.; Janice Harris, MA, MT-BC; Carolyn Dobson, MT-BC; Brenna Beecroft, MT-BC, WMTR; Ruby Chen, BFA; Connie Tomaino, DA, MT-BC; Annie Bosler, DMA

#### **Description:**

The first speaker will present information about the latest research findings showing how music influences brain functions in music therapy interventions. This review will describe three components for each separate area of brain functioning: a) Specific parts of the brain and their functions; b) Research data showing changes in brain functioning resulting from musical influences; c) Application of those influences to specific music therapy interventions. Music therapy goal areas to be addressed include emotional, motor, cognitive, neurological, immunological, self expression, self image, sensory, head trauma, social, language, and some musical behaviors.

Two practicing music therapists, an advanced student and an educator will each give brief prepared anecdotal descriptions to help attendees see that real people understand and utilize music-brain information daily in music therapy practice. They will demonstrate how they use music-brain information in explaining their services, preparing treatment plans and IEPs, progress reporting, and in describing treatment outcomes for actual cases. Examples of the use of this data in actual documents, website pages, college course materials, treatment team meetings, and grand rounds presentations as well as the advantages gained through such usage will be explained. The student presenter will demonstrate how this approach has positively impacted her understanding of music therapy. Music therapy practitioners will describe how their understanding of music-brain relationships has guided their work with actual cases. An educator will describe how her educational materials and objectives changed once she understood the central role of brain functioning in music therapy practice. She also

will describe changes in student comprehension and acceptance of music as therapy once she began using music-brain influences as a basis for teaching therapeutic techniques.

Throughout the course, participants will be engaged in discussion of their own music therapy understandings and experiences and the application of course data to cases with whom they work.

# Learner objectives:

- 1. Demonstrate knowledge of specific brain structures and their responses to musical intervention. [CBMT Scope of Practice II.A.2.t.]
- 2. Describe and exemplify ways to use musical experience to change brain functions. [I.C.6.]
- 3. Describe the basis for determining musical material for a head injured or cognitively impaired client when basing the selection on brain functioning. [II.E.4.a.]
- 4. Describe techniques for the use of music to enhance cognitive behavior in disabled clients. [II.A.4.b.]
- 5. Provide a biological explanation for the positive effects of specific musical applications in raising pain thresholds, treating brain trauma, and enhancing immune functions. [III.A.3.d.]
- 6. Demonstrate knowledge of the use of music to improve functioning in specialized language centers of the human brain. [II.A.2.p.]
- 7. Demonstrate knowledge of the concept of "functional plasticity" in the human brain and musical procedures for use of this concept in helping brain injured clients regain motor and other skills. [II.A.2.b.]

8. Describe music therapy goals and objectives with inclusion of information regarding musical influences on brain functioning. [I.C.10.]

# **Bios of all presenters:**

- Dale B. Taylor, Ph.D., MT-BC is a professor, published researcher, book author with numerous publications in the *Journal of Music Therapy, Music Therapy Perspectives*, and *International Journal of Arts Medicine*.
- Diane Knight, MS, MT-BC is an Associate Professor and Director of the Music Therapy program at Alverno College.
- Anita Louise Steele, M.M.Ed., MT-BC is retired Ohio University Music Therapy Director, a published researcher, directed The Cleveland Music School Settlement, served on the *Journal of Music Therapy* Editorial Committee.
- Robert C. McAllister, M.M. Dean of the Colburn School of Performing Arts in Los Angeles, formerly was clarinet instructor at Case Western Reserve University and the Cleveland Music School Settlement.
- Janice Harris, MA, MT-BC, is Immediate Past President of the Southwest Region of AMTA, host of online radio's *The Music Therapy Show* and Music Therapy Supervisor at Southern Methodist University.
- Carolyn Dobson, MT-BC, is owner of Neurologic Music Therapy Services in Carpinteria, California and provides services for the local Parkinson's Association and Alzheimer's Association.
- Brenna Beecroft, MT-BC, WMTR is a practicing music therapist in Wisconsin and Public Relations Chair for the Wisconsin Chapter for Music Therapy.
- Ruby Chen, BFA is a graduate student at Ohio University, an instructor at the Athens Community Music School, and a member of the African Ensemble and Dance Company of Athens.

- Concetta Tomaino, D.A., MT-BC, Executive Director and co-founder of the Institute for Music and Neurologic Function and Senior Vice President for Music Therapy at Beth Abraham Family of Health Services.
- Annie Bosler, DMA, is a member of the Los Angeles Horn Quartet, horn instructor at UC Irvine, The Colburn School of the Performing Arts, and El Camino College.

# Format:

Panel/Symposium: a) First half of the course to be used teaching basic brain structures, functions, responses to music, and targeted interventions to improve brain functions; b) Second section to be used by music therapy practitioners describing and displaying applications of music-brain relationships in actual case examples; c) Third section will be educators describing their inclusion of music-brain data in classroom materials and learning objectives; d) A current graduate student will describe the personal impact of learning about music-brain influences as part of her professional preparation. PowerPoint visuals, videos and other examples will be used throughout the symposium. Attendees will be encouraged to ask questions and discuss their own experiences in relation to the information being shared.

Prerequisites: None

# Z. Autism & Music Therapy: Connecting with Toddlers, Teens & Adults on the Spectrum

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

Presenter(s): Cathy Knoll, MA, MT-BC

# **Description:**

Autism impacts five general areas of the daily lives of individuals to varying degrees - social interaction, communication, sensory sensitivity, functional life skills, and perseverative and obsessive interest in routines and objects. Based on dozens of years of music therapy experience with toddlers, children, teens, and adults diagnosed on the spectrum of autism, the presenters share a wealth of specific strategies, interventions, and music experiences proven helpful in addressing challenging issues, maximizing the potential of the individual with autism, and enhancing the quality of life of all involved.

For more information about this CMTE, visit one of the links below:

Dropbox link: https://www.dropbox.com/sh/aug76dsg5rhdxzt/GRjRRer7jR

YouTube link: http://youtu.be/roR\_lrYfmDE

# AA. Integrated Marketing: Keys to Success in Building your Music Therapy Practice

Thursday, October 11, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Meredith R. Pizzi, MT-BC

## **Description:**

At a time of increasing growth in our field and job uncertainty in many fields and professions, music therapy is flourishing in private practices, for-profit and non-profit music therapy business models. At the 2011 AMTA Conference, the Music Therapy Business Owners Network was introduced and without a lot of promotion, the meeting attracted dozens of professionals across the country who saw themselves as business owners and wanted to connect with other like-minded music therapists. I was overwhelmed by the response. Since December, over 75 Music Therapy Business Owners have connected on our Facebook group, creating a forum for support and information to move our practices to the next level. Judging by the response to the conference gathering and the continued online discussion, many music therapists have adopted this entrepreneurial energy and are looking for direction and guidance to the questions that are much larger than starting a private practice. Music therapists want to know how to structure their businesses and how to plan ahead for growth.

This CMTE will give music therapists permission to dream big about their practices. It will also provide a structured way to create the vision for their companies. The course will begin with participants defining their personal purpose and vision for their practice through hands on experiences and small group sharing. Through lecture and large group discussion, the facilitator will provide the participants with tools, skills and resources necessary for business planning, going through the following key topics: building you team, strategic objectives, organizing your company, keeping the finances straight, and marketing your services. In small group format, participants will work to craft their 2-minute pitches, learning key elements to include and effective delivery. All participants will practice their pitch in front of the group and get feedback to help them sharpen their message.

### Learner objectives:

Participants will identify their personal purpose and vision for their music therapy business.

Participants will identify at least 25 key team members and resources inside and outside of the music therapy profession who can support them in building their businesses. (IV. B. 13. Engage in business management tasks (e.g., marketing, payroll, contracts, taxes, insurance).)

Participants will learn how to leverage their positions as business owners in a for profit model to advance our profession through networking, community partnerships, and value driven business models that are both profitable and sustainable. (IV. B. 17. Serve as a representative, spokesperson, ambassador, or advocate for the profession of music therapy.)

Participants will develop and practice their 2 minute pitch to tell others about their business and the

services they offer. (IV. B. 17. Serve as a representative, spokesperson, ambassador, or advocate for the profession of music therapy.)

### **Bios of all presenters:**

Meredith Roman Pizzi, MT-BC is the Founder and Executive Director of Roman Music Therapy Services. She has been featured as a resource for music therapy business practices regionally and nationally.

### Format:

Defining your purpose and vision for your practice - 30 minutes - hands on, experiential, and small group sharing

Business Planning - 3 hours Combination of didactic, experiential, small group and larger group sharing

Including: Building Your Team - 30 minutes Strategic Objectives - 30 minutes Organizing your Company - 45 minutes Keeping the Finances Straight - 45 minutes Marketing - Defining and Connecting with your Target Market - 30 minutes

Crafting your Two Minute Pitch - 60 minutes Hands on, experiential and group discussion

With 2 - 15 minute breaks, one during and one after the Business Planning segments.

### **Prerequisites:**

Attending music therapists should already be in private practice and looking to grow personally and professionally to the next level.

# BB. Self-Supervision for Music Therapy Internship Supervisors

Sunday, October 14, 2012 9:15 AM – 3:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Laurel Young, PhD, MTA Fellow, Association for Music & Imagery

### **Description:**

Although all music therapy interns must participate in clinical supervision, music therapy internship supervisors are not often formally required to evaluate their own supervisory practices. Ultimately, it is each supervisor's responsibility to ensure that his/her interns are receiving the supervision that they need in order to become competent music therapy professionals. This workshop will provide music therapy internship supervisors with information on what constitutes competent and effective

supervision. Time will be set aside for open discussion on barriers that may interfere with one's ability to provide effective internship supervision, and the impact that this may have on supervisors. Reflective and experiential exercises will be utilized to provide participants with information and techniques that they can use to purposefully guide and monitor their own growth and development as music therapy internship supervisors. Experiential exercises will include improvisation, songwriting, music & imagery (the facilitator is a certified Bonny practitioner), and use of mandalas. Persons who have previously supervised music therapy interns will likely benefit most from this workshop although new supervisors are also welcome to register.

### Learner objectives:

1. To explore what constitutes competent & effective internship supervision.

2. To explore and discuss barriers that may interfere with one's ability to provide effective internship supervision and the impact that this may have on supervisors

3. To provide techniques for purposefully guiding and monitoring one's own growth & development as a music therapy supervisor.

### **Bios of all presenters:**

Laurel Young is an Assistant Professor of Music Therapy in the Creative Arts Therapies Program at Concordia University. She has 18+ years of clinical experience and currently serves as Vice President of CAMT.

### Format:

# Agenda Ground rules (15 mins) Introductions & "Check-In" Improvisation(s) (experiential - 60 mins) Lecture (intro. & overview on topic) Songwriting (didactic, experiential, discussion, case examples - 90 mins) Competency-Based Approach to Self-Supervision (didactic, discussion, participant presentations - 60 mins) Reflective & Experiential Self-Inquiry (experiential, discussion - 60)

#### **Prerequisites:**

Yes. Participants should have supervised <u>at least</u> one music therapy intern prior to attending this workshop as supervisors will be called upon to reflect upon their own experiences as music therapy supervisors.

# CC. Learning Leadership: A CMTE Course for Music Therapists

Sunday, October 14, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Ronna Kaplan, MA, MT-BC Mary Adamek, PhD, MT-BC Deborah Benkovitz, LSW, MSW, MT-BC Annette Whitehead-Pleaux, MA, MT-BC Lauren Bevilacqua, MT-BC

## **Description:**

Leadership development is crucial to AMTA's future! This session will provide some basic underpinnings of leadership and allow participants to explore their own leadership skills and styles. The presenters, a panel of AMTA leaders serving in many different capacities and varying in age and years of experience, will provide an introduction to various leadership models, approaches, or theories. These include but may not be limited to the trait approach, style approach, situational approach, leader-member exchange theory, feminist leadership, nursing leadership, and primal leadership or resonant leadership.

The group will also explore a few interpretations of leadership phases or stages. For example, Adamek (2007) mentioned four phases of leadership growth, while Bennis (2004) discusses the seven "ages" of leadership.

In addition, six commonly described leadership styles, visionary, coaching, affiliative, democratic, pacesetting, commanding, will be delved into.

The use of one's emotional intelligence in leadership situations will be highlighted. Emotional intelligence domains, as outlined by Goleman (2004) and Goleman, Boyatzis, and McKee (2002) include self-awareness, self-regulation, motivation, empathy, and social skill. Each has associated competencies within it, which may be learned abilities that will enhance an individual's leadership capacity.

The panel of presenters will share their own leadership experiences in terms of the various frameworks and skills discussed. Participants will be invited to dialogue about their leadership experiences in this manner as well.

Attendees will have the opportunity to self-assess some of their own leadership skills, strengths and gaps through simple inventories, as well as identify their own core values, "ideal" and "real" selves. Finally, they may begin to consider and/or formulate goals for themselves to assist in their movement along a leadership development path.

## Learner objectives:

Participants will be able to:

- 1. Become aware that a number of leadership models/approaches/theories and leadership phases/stages exist.
- 2. Identify the Emotional Intelligence domains and their associated competencies.
- 3. List and briefly describe six leadership styles.
- 4. Begin to self-assess their leadership traits/skills, strengths and gaps and formulate personal goals for leadership development.

Objectives are related to the following items from CBMT Scope of Practice: Professional Development and Responsibilities:

A. Professional Development, 1. Assess areas for professional growth and set goals.

A. Professional Development, 4. Engage in collaborative work with colleagues.

B. Professional Responsibilities, 17. Serve as a representative, spokesperson, ambassador, or advocate for the profession of music therapy.

# **Bios of all presenters:**

Ronna S. Kaplan, MA, MT-BC, is currently AMTA President and Director of Music Therapy at The Music Settlement in Cleveland, OH. She has a BA in music therapy and music education, an MA in special education, and certificates in nonprofit management, Orff Level I, Neurologic Music Therapy, and DIR<sup>R</sup>/Floortime<sup>TM</sup>.

Mary Adamek, PhD, MT-BC, is a music therapy professor at The University of Iowa, and is a coauthor of <u>Music in Special Education</u>. She is an AMTA past president, a frequent conference presenter, and recipient of the 2012 Award of Merit from AMTA.

Deborah Benkovitz, LSW, MSW, MT-BC, holds certification as a NICU Music Therapist. She is a Music Therapist and Coordinator of Music Therapy Internships at Children's Hospital of University of Pittsburgh Medical Center (UPMC) and Adjunct Professor of Music Therapy, Duquesne University. She is Past-President of AMTA's Mid- Atlantic Region.

Annette Whitehead-Pleaux, MA, MT-BC, works in pediatric burns. Serving AMTA since 1997, she is currently the Assistant Speaker of the Assembly, the Standards of Clinical Practice Committee (chair) and a member of the MTP editorial board.

Lauren Bevilacqua, MT-BC, owns LFB Music Therapy Services, LLC, a private practice serving the southern San Francisco Bay Area. She currently serves on the WRAMTA Executive Board as the Continuing Education Committee Representative.

# Format (Tentative):

- 1. Musical opening (experiential) and Overview of learner objectives (lecture) 20 minutes
- 2. Style questionnaires (individual hands-on) 45 minutes
- 3. Examples of leadership models, approaches or theories (lecture/discussion) 75 minutes
- 4. Emotional intelligence domains and associated competencies (lecture/discussion) 60 minutes
- 5. Leadership styles (lecture/discussion) 45 minutes
- 6. Four elements of leadership (lecture/discussion) 25 minutes
- 7. Seven "ages" of leadership (lecture/discussion) 25 minutes
- 8. Sharing leadership experiences (presenters and participants-discussion) 45 minutes
- 9. Self-assessments (individual hands-on) 30 minutes
- 10. Personal goal-setting (music experience and then individual hands-on) 30 minutes
- 11. Reflection and sharing(group activity/discussion) 20 minutes
- 12. Questions 10 minutes
- 13. Post-test 20 minutes

## Prerequisites: None

# DD. The Interface of Technology, Ethics and Music Therapy Practice

Sunday, October 14, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Debbie Bates, MMT, MT-BC; Gretchen Patti, MS, MT-BC, LCAT, Fellow in the Association for Music and Imagery; Matthew Phillips, LSW, MT-BC

### **Description:**

Online social networking and digital media provide many benefits for clinical music therapy practice. We can network with colleagues around the globe using Blogs, Facebook and Twitter. We can have instant access to virtually any client-preferred music on YouTube. We can use our smart phones as metronomes, tuners, and digital audio recorders. However, these benefits also come with risks that must be carefully considered. As cultural norms shift and what was once private is now public, the nuanced implications for the client therapist relationship can be profound. What happens when a client requests to be your friend on Facebook? How do you respond when a client's family members posts a video of your session on YouTube? What happens when you are viewing an online music video in a session, and an advertisement pops up? What if you have stringent privacy settings on your Facebook account so that clients cannot access your information, but your spouse's personal blog is not secure? Do you "Google" your clients, and what do your clients find when they "Google" you? What does the music therapist need to consider when engaging in telepractice or "e-therapy"? In an attempt to move toward standardized answers to these challenging questions, this course will promote critical thinking by using the AMTA Code of Ethics as a jumping off point for music therapists to develop their own ethical responses to these important issues.

While the current AMTA Code of Ethics does not specifically address social networking, the AMTA Ethics Board has issued a statement of caution reminding members of the importance of confidentiality and boundaries in this venue. Because online practices vary widely among the general population, and presumably among music therapists as well, personal morals and values are not sufficient standards for music therapists to use in determining how their personal information is shared online. Because this topic has received limited attention within the field of music therapy, we must look to other medical and human services fields for guidance. A sample non-profit agency social networking policy, similar to what may already be in place at agencies that employ music therapists, will also be reviewed as a means of maintaining awareness of the employing agency's best interests as well.

Throughout the session, participants will be presented with ample opportunity to ask questions and participate in small group discussions. Opportunities will be presented to develop and exercise clinical and professional judgment as informed by the AMTA Code of Ethics and sample agency policy. The intention of the course is not to provide easy answers, but rather to engage participants in critical thinking and to establish an informed knowledge base from which clinicians may draw when they consider the implications of technology on clinical practice.

# Learner objectives:

To internalize and apply an ethical decision making model

To increase self-awareness in regards to personal and professional presence online

To learn about the ethical implications of using digital online media in clinical practice

To increase understanding of the role of technology in the therapeutic space

## **Bios of all presenters:**

Matthew Phillips, LSW, MT-BC, is the director of music therapy at Bethany Children's Home. Matthew's professional interests include supervision, the role of technology in clinical practice, and trauma-informed intervention.

Gretchen Patti, MS, MT-BC, Fellow in the Association for Music and Imagery; Director of Therapeutic Services at Bethany Children's Home, Womelsdorf, PA; Served the MAR/AMTA as President, Government Relations Chair, Assembly Delegate and Ethics Committee Member.

Debbie Bates, MMT-MT-BC, works at the Cleveland Clinic where she has clinical, supervisory and research responsibilities. She has been on the Ethics Board since 2002 and has been a co-chair since 2007.

# Format:

I. Introduction of the Course and Presenters (15 minutes)

II. Context for the Discussion (15 minutes) – how the areas of clinical practice, technology, ethics all relate to one another

III. Defining Use of Technology in Music Therapy Practice (30 minutes)

- A. Within Session
  - 1. Similarity between technology proficiency and music skills proficiency
  - 2. Unique attributes of various technologies: iPod, iPad, Music Sequencing Software, Smart Phones
- B. Outside of Session
  - 1. Professional Uses: Supervision via Skype, e-therapy, professional website (private practice, agency, etc.), digital documentation and record keeping
  - 2. Personal online presence: Facebook, Twitter, YouTube, Dating Websites, Google and other search engines
- X. Paradigm Shift
  - 1. What once was private is now public
  - 2. Traditional ethic standards are not nuanced enough to address the needs of music therapists negotiating these rapidly evolving landscapes
- IV. Role of Technology in the Client Therapist Relationship
  - A. Disclosure and Transparency (30 minutes)
    - 1. Types of Self-Disclosure Deliberate, Unavoidable, Accidental
    - 2. Propriety of Self-Disclosure Appropriate, Benign, Inappropriate
    - 3. Transparencies Initiated by Clients clients who obtain information about therapists through social networking sites and other online sources

(10 minute Break)

- B. Therapeutic Space (20 minutes)
  - 1. Traditional Perspective the therapy space is a physical room
  - 2. Currently evolving perspective technology transcends the need for client and therapist to be in the same physical space
  - 3. Complex ethical implications
- C. Confidentiality and Privacy (30 minutes)
  - 1. Loss of control over the flow of information
  - 2. Therapist Perspective
  - 3. Client Perspective
- V. An Ethical Decision-Making Model (40 minutes)
  - A. Identify the problem, issues and practices involved
  - B. Assess the obligations owed and to whom
  - C. Assess your personal/emotional responses
  - D. Consult core ethical principles, ethical standards and codes, relevant laws and institutional policies
  - E. Consider the context and setting
  - F. Identify your own beliefs and values and their role in this situation, as well as those of the client
  - G. Consult with colleagues, supervisors and all possible resources
  - H. Consider how the ideal, virtuous music therapist might respond
  - I. Generate possible solutions, utilizing the input of the client when feasible
  - J. Evaluate each proposed solution in terms of possible consequences and make a decision
  - K. Implement the decision
  - L. Evaluate the decision

(10 minute Break)

VI. Application of the Ethical Decision-Making Model to Clinical Vignettes (60 minutes) – work through scenarios in small group and share findings with larger group

VII. Question and Answer (15 minutes)

VIII. Post Test (15 minutes)

Prerequisites: None

# EE. Music, Art, Dance, Drama, Play! Grow Your Practice with Collaborative Pediatric Programming

Sunday, October 14, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

### **Presenter(s):**

Carolyn D. Dachinger, MM, MT-BC; Jillian Mehler, MT-BC, NMT

### **Description:**

Music therapists in both private- and community-based practice are constantly looking for ways to promote their services by offering innovative programming which meets the needs of their clients and clients' families. By expanding services to include collaborative work with other traditional and arts-based therapies, unique opportunities arise for improved therapeutic outcomes. When practitioners offer services which move beyond traditional individual and group session formats, children are afforded even greater opportunities to explore their abilities and interests while achieving functional outcomes that generalize outside of the therapy session.

In this session, participants will learn about the inception, development, implementation, and outcomes of a number of collaborative services offered at a successful creative arts therapy private practice, including Move & Groove social pragmatics group, Creative Arts Saturday Camp, a Sibling Relationship Development course, My Grown-Up & Me caregiver and child group, and Come On & Sing With Me language stimulation group. Through lecture, video presentation, live demonstration, assessment of practice needs, and group discussion and music-making, participants will generate ideas for expanding their own practices to include non-traditional creative arts programming.

The success of creative arts programming relies heavily on excellent marketing, an established network for referrals, business savvy, and trial and error. The presenters will discuss all aspects of establishing successful business practices for collaborative programs, such as fee schedules, marketing, cross-disciplinary referrals, staffing, and documentation, to ensure programs make a lasting impact while still being profitable.

Time will be allotted throughout the presentation for participants to consult with the presenters and each other regarding questions and comments specific to their own potential private- or community-based creative arts programming ideas.

### Learner objectives:

From the CBMT Scope of Practice:

I.C.3 Coordinate treatment with other professionals and/or family, caregivers, and personal network when appropriate.

I.C.10 Create music therapy experiences that address client goals and objectives.

IV.A.4 Engage in collaborative work with colleagues.

### **Bios of all presenters:**

Jillian Mehler, MT-BC, NMT owns Whole Steps Creative Arts Center, a pediatric therapy center in Miami. Jillian has extensive experience serving individuals diagnosed with Autism Spectrum Disorders and varying exceptionalities.

Carolyn Dachinger, MM, MT-BC has extensive experience providing music therapy services to individuals of all ages in a variety of medical, psychiatric, educational, and community settings throughout Florida.

#### Format:

Proposed Format: 15 - 20 Minutes – Presenter and Participant Introductions (group music making, group discussion) 15 Minutes – Description and Background of the Presenters' Creative Arts Therapy Practice (didactic) 30 minutes -- Assessing Your Practice and The Community's Needs, client criteria for group inclusion (didactic, time for individual self-assessment, group discussion)

25 minutes x 5 = 125 minutes – Description of the following collaborative creative arts programs (to include video examples, live demonstrations, group discussion and active-music making in addition to didactic presentation):

- 1. Move & Groove Social Pragmatics Group developing social skills in a group therapy format facilitated by music therapist with a Speech-Language Pathologist
- 2. Creative Arts Saturday Camp a Saturday morning "drop off" camp that targets collaborative work between Music and Dance/Movement Therapists, with art, drama and play components.
- 3. Sibling Relationship Development Course targeting relationship between typicallydeveloping siblings and their sibling with special needs to increase awareness, social skills, and language/communication.
- 4. My Grown-Up & Me designed around emotional attunement and communication between caregiver and child, facilitated collaboratively between music therapist and dance/movement therapist
- 5. Come On & Sing With Me a language stimulation group designed to target various levels of communication needs facilitated by music therapist with a Speech-Language Pathologist

45 Minutes Business Practices for Thriving Collaborative Services – referral networks, documentation, fee schedule, staffing, budgets, and other business logistics (didactic)

30 minutes - Participant assessment/brainstorming, questions, consultations with peers and presenters

Prerequisites: None

# FF. Non-violent Crisis Intervention Techniques & Strategies

Sunday, October 14, 2012 1:30 PM – 6:30 PM 5 CMTE Credits Cost - AMTA members, \$100; Non-members, \$335

## **Presenter**(s):

Bruce Hunter, MM, MS

# **Description:**

This presentation will focus on using verbal and nonverbal techniques to de-escalate persons who are acting out verbally with staff members. Participants will be involved in activities designed to increase their awareness regarding safety issues which arise when staff members stand too close to clients who are becoming volatile. Participants will work with partners during a series of conversations in which their partners will present them with challenging verbal behaviors ranging from questioning to yelling and screaming along with verbal threats. Following these conversations a debriefing session will be held in which strategies will be presented regarding how to intervene with these challenging behaviors. Additional scenarios will be presented in which participants will be required to problem-solve using knowledge gained from the presentation. Through the activities, participants will gain a deeper understanding as to how their actions can either de-escalate or escalate challenging individuals.

# Learner objectives:

1. Participants will learn how to assess what is actually taking place during a crisis in order to implement a plan which promotes safety for everyone involved in the crisis.

2. Participants will learn strategies to help keep their own emotions under control during volatile situations.

3. Participants will learn how to stay out of power struggles with challenging individuals

# **Bios of all presenters:**

Bruce Hunter retired from the Parkway School District (St. Louis, MO) in 2011 after serving for thirty-one years as a strings teacher, assistant principal, principal, and certified district Nonviolent Crisis Intervention Instructor.

# Format:

This will be a highly interactive session in which participants will be involved in activities designed to promote confidence in working with clients who question staff members, refuse to cooperate, yell and scream, or threaten staff members. The format of the presentation will include lecture, case examples, activities, and discussion.

Prerequisites: None

# **Pre-conference Trainings**

# International Training Institute for Neurologic Music Therapy (NMT)

October 8 – October 11, 2012 8:00 am – 11:30 am Session Type: Special Training 36 CMTE Credits Cost - AMTA members, \$575; Non-members, \$810

# TRAINING NOW CLOSED; FULL

# **Bonny Method of Guided Imagery & Music Level I**

October 8 – October 11, 2012 8:30 am – 4:00 pm Session Type: Special Training 36 CMTE Credits Cost - AMTA members, \$600; Non-members, \$835

**Presenter(s):** Frances Smith Goldberg, Louise Dimiceli-Mitran

# **Description:**

This intensive 4-day seminar introduces theory and clinical applications of the Bonny Method of Guided Imagery and Music (GIM) and other music and imagery techniques. Participants gain intensive personal experience with GIM, along with hands-on experiential exercises, demonstrations, and clinical examples. In addition, simple music imagery techniques are introduced.

Course includes a brief history of GIM, definitions of GIM in contrast to Music Imagery (MI), Bonny's theory including the Cut Log Diagram, transpersonal therapy, Wheeler's levels of music psychotherapy, elements of the GIM session and clinical applications. Altered states of consciousness, types of imagery, guiding, the role of music in GIM/MI and music programs in GIM will be discussed. Music analysis, levels of therapy in music and music imagery approaches, indications, contraindications, standards of practice and ethics, credentialing and GIM training will be included. Students will learn simple guiding techniques, practice in closely supervised dyads throughout the training, receive feedback & evaluation from trainers and observe processing techniques which include mandala drawings.

### **LEARNING OBJECTIVES**

### **CBMT SCOPE OF PRACTICE**

Learn basic theory & clinical applications of The Bonny Method of GIM.	I. C.,4, 8, 9, 10. II. A. 3. 5. a), o), p), z) II. B. l, 2, 3, 5.
Learn the basic elements of the Bonny Method through experience, demonstrations and clinical examples.	II. 1. a), b), c), d), e).
Learn simple music imagery techniques that are immediately useable.	I. C. 1., 4, 8, 9, 10, 13,14,15. II. A. 3., 4. d), e), f).

# **Bios of Presenters:**

**Louise Dimiceli-Mitran,** MA, MT-BC, LCPC, GIM Fellow, is an Assistant Trainer with the Therapeutic Arts Institute, owns a private GIM practice in Chicago, IL and is an Oncology Music Therapist at Advocate Lutheran General Hospital.

### Format:

Monday October 8: Training 8:30am – 12:30pm, lunch 12:30 to 3:00, Training 3 to 7pm. Tues. & Wed. October 9 & 10: Same as above. Thursday, October 11: Training 8:30am – 12:30pm, lunch, 12:30-2, Training 2-4pm. 4pm dismissal

**Prerequisites: TBD** 

# **Music Therapy Drumming: Level One Training**

October 9 – October 10, 2012 8:00 am – 5:00 pm Session Type: Special Training 18 CMTE Credits Cost - AMTA members, \$300; Non-members, \$535

### **Presenter(s):**

Bill Matney, M.A., MT-BC Kalani, MT-BC Carolyn Koebel, M.M., MT-BC

### **Description:**

During *Music Therapy Drumming: Level One Training*, participants will engage music-centered tools to enhance three areas: percussion techniques, rhythmic acuity and clinical skills. World percussion techniques will be integrated with indigenous traditions, covering the basics and introducing intermediate skill sets. Rhythmic acuity will be applied through the Rhythmic Acuity Measurement Scale. Clinical leadership skills will focus on a review of current research and establishment of rhythmic grounds under various conditions, including using percussion as an accompaniment to singing. Materials will be offered with foundational therapeutic considerations.

# **Learning Objectives:**

Identify a variety of percussion instruments [II.A.5.w.4]; Demonstrate techniques on percussion instruments [II.A.5.w.4]; Demonstrate a basic rhythmic vocabulary on percussion instruments (II.A.5.a); Demonstrate improvement in rhythmic acuity (I.B.5,6. V.A.6.); Demonstrate knowledge of cultural perspectives as related to traditional percussion play (III.A.3.v., IV.B.2.); Demonstrate musical leadership skills to conduct group drumming processes music therapy (III.A.3.u); Demonstrate improvisation techniques that facilitate therapeutic processes (II.A.3.c.); Identify one theme based in the research of percussion in music therapy (I.IV.A.2.).

# **Bios of Presenters:**

**Bill Matney,** M.A., MT-BC works full time with a school district, and teaches two percussion methods courses at Texas Woman's University. He authored the book *Tataku, The Use of Percussion in Music Therapy,* currently being used at universities nationwide.

Kalani, MT-BC is a keynote presenter, speaker, clinician, acclaimed performer, prolific author, and music educator. Kalani's most recent publication is *All About Hand Percussion*.

**Carolyn Koebel, M.M., MT-BC** works in hospice and private practice, tours/performs as a percussionist in many idioms and contexts, and serves as adjunct faculty at Western Michigan University and as director of International Percussion at Kalamazoo College.

Format: Music making, experiential, lecture

Prerequisites: None

# NICU Music Therapy Training

October 10, 2012 9:00 am – 6:00 pm Session Type: Special Training 8 CMTE Credits Cost - AMTA members, \$175; Non-members, \$410

# **Description:**

Specialized training for providing music therapy clinical services in Level III Neonatal Intensive Care Units (NICU). Persons completing the requirements to receive a certificate and to use the initials NICU MT as a designation of specialized training. This institute comprises one of the 3 requirements for this specialized training and will consist of 8 CMTE hours of intensive classroom training. This institute is available to MT interns and Board Certified Music Therapists. The complete specialized training course may not be completed until Board Certification is documented. Registration fee includes text.

# **Qualifications:**

This institute is available to MT interns and Board Certified Music Therapists. The complete specialized training course may not be completed until Board Certification is documented.

# **Institute Objectives:**

- 1) To understand neurological development in the 3rd trimester including gender differences (V. A. 2.)
- 2) To understand current knowledge about the development of hearing in the premature infant and implications for presentation of auditory stimuli (II.A.3)
- 3) To understand the developmental timetable by gestational age and the assessment of same (II.A.3)
- 4) To understand the differentiation of medical vs. developmental treatment and compliance with NICU phases of developmental intervention (II.A.3).
- 5) To identify and understand the clinical application of research-based music therapy interventions with developmental benefit (III.A. 2).
- 6) To understand the long-term consequences of premature birth and the clinical application of music therapy developmental activities for the first year of life. (III.A.1.f.2)
- 7) To be proficient in the provision of evidence-based NICU MT services. (II. A.B.C.D.E, III. A. B., IV. A.B.)
- 8) To be proficient in the provision of evidence-based MT services to premature infants readmitted to the hospital as pediatric patients. (III.A.s).

## **Presenters:**

Jayne Standley, Ph.D., MT-BC, NICU Music Therapy Andrea Cevasco, Ph.D., MT-BC, NICU Music Therapy Judy Nguyen Engel, MM, MT-BC, NICU Music Therapy Lori Gooding, Ph.D., MT-BC, NICU Music Therapy Miriam Hillmer, MMEd., MT-BC, NICU Music Therapy Jennifer Jarred Peyton, MM, MT-BC, NICU Music Therapy Olivia Swedberg Yinger, M.M., MT-BC, NICU Music Therapy Darcy Walworth, Ph.D., MT-BC, NICU Music Therapy Natalie Wlodarczyk, Ph.D., MT-BC, NICU Music Therapy

## **Biographical Sketches:**

**Jayne M. Standley, PhD, MT-BC,** is a Robert O. Lawton Distinguished Professor and the Ella Scoble Opperman Professor of Music at The Florida State University. She is the Director of the National Institute for Infant and Child Medical Music Therapy and is a researcher in NICU-Music Therapy.

Andrea Cevasco, PhD, MT-BC, is an Associate Professor at The University of Alabama and is an Institute Fellow. She is Director of the University of Alabama Affiliated Institute and conducts NICU clinical services and research in Tuscaloosa, AL.

**Judy Nguyen Engel, MM, MT-BC,** is a former Coordinator of the Medical MT, Arts in Medicine partnership between FSU and Tallahassee Memorial HealthCare. She is an Institute Fellow who conducts clinical MT and research at Yale New Haven Children's Hospital.

**Lori Gooding, PhD, MT-BC,** is Director of Music Therapy at the University of Kentucky and is an Institute Fellow. Lori's specialty is medical counseling. She is Dir. of the U. of Kentucky Affiliated Institute and is conducting research at the U. of Kentucky Medical Center.

Miriam Hillmer, MMEd, MT-BC, is Coordinator of the Medical MT/Arts in Medicine

partnership between FSU and Tallahassee Memorial HealthCare. She is an Institute Fellow.

**Jennifer Jarred Peyton, MM, MT-BC,** worked in the MT program at TMH and developed the hospital/NICU program at Longwood Hospital in Ft. Pierce, FL. She is an Institute Fellow is currently a doctoral student at The Florida State University.

**Olivia Swedberg Yinger, PhD, MT-BC, NICU-MT** is a former Coordinator of the Medical MT/Arts in Medicine partnership between FSU and Tallahassee Memorial HealthCare. She is currently an Assistant Professor at the University of Kentucky and conducts research in Lexington, KY.

**Darcy Walworth, PhD, MT-BC,** is a former Coordinator of the Medical MT/Arts in Medicine partnership between FSU and Tallahassee Memorial HealthCare and is currently Dir. of Music Therapy at The University of Louisville. She is an Institute Fellow and Dir. of the University of Louisville Affiliated Institute. She is currently conducting research in Louisville, KY medical centers.

**Natalie Wlodarczyk, PhD, MT-BC, NICU-MT** is an Assistant Professor at Drury University. She is an Institute Fellow with a specialty in hospice NICU-MT.

Format: Lecture and Experiential

# **Institute Schedule:**

9:00-9:50 Fetal Development in the Third Trimester

10:00-10:50 Medical and Developmental Problems of Prematurity

11:00-11:50 Assessment/Interdisciplinary Treatment, Referrals, Reimbursement

12:00-1:00 Lunch

1:00-1:50 Research in Music and Prematurity

- 2:00-2:50 MT Methods in the NICU I: Music Listening and Multimodal Stimulation
- 3:00-3:50 MT Methods in the NICU II: Use of Music Reinforcement for Developmental Milestones and for Stress Reduction
- 4:00-4:50 MT and Parent Interactions
- 5:00-5:30 MT After Discharge for the Premature Infant
- 5:30-5:50 Questions and Final Evaluation of Course

# **Pre-conference Institutes**

# **FREE Institute:**

# **Clive Robbins: His Legacy & Vital Impact on Music Therapy**

October 10, 2012 9:00 AM – 12:00 PM Session Type: Institute 3 CMTE Credits Cost: FREE

Institute Co-Chairs:

Michele Forinash, DA, MT-BC, Licensed Mental Health Counselor Suzanne Sorel, DA, MT-BC, LCAT, Nordoff-Robbins Music Therapist Alan Turry, DA, MT-BC, LCAT, Nordoff-Robbins Music Therapist

## **Description:**

Dr. Clive Robbins was a co-originator of Creative Music Therapy who worked with children with developmental and multiple disabilities for over fifty years. Throughout his years of teamwork with Dr. Paul Nordoff beginning in 1959, Clive Robbins was continuously active in the practice, documentation, study, research, and demonstration of creative music therapy with children and adolescents presenting a wide range of disabling conditions. Clive led with his heart so clearly and passionately that people sometimes overlook his immense intellectual contribution to the field. Through lecture, discussion, video examples, audio examples and live music making, we will illuminate Clive's legacy and the various facets of his work: teamwork, writing, teaching and his philosophy. (Free to current AMTA members registered for the conference)

## **Learner Objectives:**

Principles and practices of the Nordoff-Robbins Model of Music Therapy (II.A.3.c, II.A.4.c-f.); improvisation as an investigative tool in assessment (I.A.1, 11-15; I.B.2-3); improvisation as the primary mode of treatment (II.A.1. a-e, II.A.2.a-ak); incorporating clients' moment-to-moment responses—instrumental, vocal, physical, verbal and/or emotional—in goal-directed improvisation (II.A.2.p,r,s,u,ak, 3.c., 5. a-b, e, g, h, q, aa), and understanding clinical functions of various elements of music (II.A.5.a-i, q, r, t-aa).

# **Bios of Presenters:**

**Dr. Michele Forinash** is Director of the PhD Program in Expressive Therapies at Lesley University. She is a former director of research at the Nordoff-Robbins Center for Music Therapy at NYU.

**Dr. Suzanne Sorel,** NR Level III trainer/educator, directs the Graduate Music Therapy program at Molloy College, is Director of Education and Training at the Rebecca Center for Music Therapy and coordinates the recently approved Nordoff-Robbins Training Program at Molloy.

**Dr. Alan Turry** is Managing Director of the Nordoff-Robbins Center at New York University as well as researcher, senior clinician, level III trainer/educator and supervisor for advanced trainees and therapists.

### Format:

8:30-8:45	Introduction: Key concepts in NR, Outline Clive Robbins' Contributions-Dr. Alan
	Turry
8:45-9:30	Presenter Dr. Suzanne Sorel
9:30-10:15	Presenter Dr. Michele Forinash
10:15-10:30	Break
10:30-11:15	Presenter Dr. Alan Turry
11:15-11:30	Questions, comments, post-tests

Prerequisites: None

# **Institute: Hospice Music Therapy: Current Trends in Practice**

October 10, 2012 12:30 PM – 6:30 PM Session Type: Institute 6 CMTE Credits Cost - AMTA members, \$130; Non-members, \$365

> Institute Co-Chairs: Lauren DiMaio, MMT, MT-BC Russell Hilliard Ph.D., LCSW, LCAT, MT-BC, CHRC Natalie Wlodarczyk, Ph.D., MT-BC

> > *Presenters:* Joke Bradt, Ph.D., MT-BC Debra Burns, Ph.D., MT-BC Kirsten Nelson, MT-BC Anne Wilkerson, MT-BC

### **Description:**

For many years, music therapists have shown an interest in helping people who are dying. Today the profession of music therapy assists in solving the mystery of death with integrity, compassion and aesthetic understanding. This institute will address current trends in clinical practice as well as current trends in mixed method research. Participants will explore strategies of research and hospice, pediatric hospice with music therapy, the influence of countertransference in hospice music therapy, the role of grief rituals, the use of legacy programs and the role of music therapy in bereavement.

### Learner Objectives:

• Participants will be able to identify three mixed method designs appropriate for end-of-life music therapy research (CBMT *Scope of Practice* IV.A.2&8).

- Participants will be able to discuss three music therapy interventions appropriate for use within a hospice bereavement program (CBMT *Scope of Practice* I.C.4).
- Participants will identify aspects of their own feelings and behaviors that affect the therapeutic process with patients receiving end-of-life care (CBMT *Scope of Practice* II.A.f).
- Participants will identify countertransference dynamics that occur in end-of-life care (CBMT *Scope of Practice* II.A.g).
- Participants will understand Medicare conditions of participation for bereavement services within a hospice setting (CBMT *Scope of Practice* I.C.10).
- Participants will become familiar with the existing literature on grief rituals and legacy and will be able to identify when the inclusion of a grief ritual is indicated for music therapy clients (CBMT *Scope of Practice* II.A.2.k).
- Participants will become familiar with several creative ways to incorporate ritual and legacy into both individual and group music therapy sessions with grieving clients (CBMT *Scope of Practice* II.A.2.k).
- Participants will be able to identify members of the interdisciplinary pediatric palliative care team (CBMT *Scope of Practice* I.C.3).
- Participants will describe music therapy and legacy interventions implemented within pediatric palliative care sessions (CBMT *Scope of Practice* II.A.2c,k,x,aj & II.A.5).

# **Bios of Presenters:**

**Lauren DiMaio**, MMT, MT-BC received the BMT from Berklee College of Music and the MMT from Temple University, where she is currently pursuing her Ph.D. She is the Bereavement Manager and music therapy internship director at CarePartner's Hospice, Asheville, NC.

**Russell Hilliard**, Ph.D., MT-BC is the Vice President of Supportive Care, Research, and Ethics of Seasons Hospice & Palliative Care based out of Chicago, IL and the Founder of the Center for Music Therapy in End of Life Care.

**Natalie Wlodarczyk**, Ph.D., MT-BC is Assistant Professor of Music Therapy at Drury University. Her research interests include disenfranchised grief, music therapy for hospice staff, and the use of grief rituals in bereavement care.

**Joke Bradt**, Ph.D., MT-BC is Associate Professor in the PhD program in Creative Arts Therapies at Drexel University. Her expertise includes vocal music therapy for chronic pain management, efficacy studies, mixed methods research, and systematic reviews in medical music therapy.

**Debra Burns**, Ph.D., MT-BC is Associate Professor and Coordinator of Music Therapy Programs at IUPUI. She maintains an active research program exploring the various benefits of music therapy for cancer patients across the disease trajectory.

**Kristen Nelson**, MT-BC serves the pediatric inpatient units at the University of Iowa Children's Hospital and is a member of the Pediatric Palliative Care Core team. Kirsten has experience providing community services to individuals with developmental disabilities and mental illness.

**Anne Wilkerson**, MT-BC, has ten years of clinical experience working in psychiatric, medical, and end-of-life settings. She currently works for CarePartners Hospice, providing music therapy in end-of-life care and supervising interns.

Format: Lecture with some experiential activities

Prerequisites: None

# **Institute: Leading the Way – Music Therapy Businesses of the Future**

October 10, 2012 12:30 PM – 6:30 PM Session Type: Institute 6 CMTE Credits Cost - AMTA members, \$130; Non-members, \$365

> *Institute Presenter:* Meredith R. Pizzi, MT-BC

### **Description:**

Music therapy is prospering in for-profit and non-profit music therapy business models. Music therapists who have already experienced the thrill of self-employment and know they could never go back to having a "day job" will gain the skills, tools and confidence needed to grow their businesses, enhance the profession and increase access to services.

# Institute: Multicultural Music Therapy Institute: The Intersections of

# Music, Health & the Individual

October 10, 2012 12:30 PM – 6:30 PM Session Type: Institute 6 CMTE Credits Cost - AMTA members, \$130; Non-members, \$365

> Institute Co-Chairs: Annette Whitehead-Pleaux, MA, MT-BC Xueli Tan, MM, MT-BC

*Presenters:* Paige Robbins Elwafi, MMT, MT-BC Karen Estrella, PhD, LMHC, ATR-BC, MT-BC Rebecca Froman, MA, MT-BC Nicole Hahna, PhD, MT-BC Spencer Hardy, MT-BC Feilin Hsiao, PhD, MT-BC Marcia Humpal, M.Ed., MT-BC Karen Reed, MA Therese West, PhD, MT-BC Elizabeth York, PhD, MT-BC

## **Description:**

This institute explores the relevance of music and the arts to health and the individual who identifies with race, ethnicity, religion, sexual orientation, gender identity, gender, and ability that differs from the majority culture. Participants will discover ways to design music therapy interventions that embrace the individual's culture, learn about the music of these cultures, and explore her/his own biases.

## **Learner Objectives:**

- 1) Assessment: Identify clients' cultural and spiritual background (CBMT *Scope of Practice* I.A.4c.)
- 2) Assessment: Identify clients' music background (CBMT Scope of Practice I.A.4g.)
- 3) Interpret assessment: evaluate reliability and presence of bias in information from available resources (CBMT *Scope of Practice* I.B.1.)
- 4) Interpret assessment: Acknowledge therapist's bias and limitations in interpreting assessment information (e.g. cultural differences, clinical orientation) (CBMT *Scope of Practice* I.B.4.)
- 5) Treatment planning: consider client's age, culture, music background, and preferences when designing music therapy experiences (CBMT *Scope of Practice* I.C.9.)
- 6) Evaluation: acknowledge therapist's bias and limitations in interpreting information (e.g. cultural difference, clinical orientation) (CBMT *Scope of Practice* III.B.5.)

### **Post-test Based on Learning Objectives:**

- 1. Please list five cultural groups.
- 2. Why is it important for music therapists to assess the client's culture(s)?
- 3. What are four ways for music therapists to incorporate a client's culture(s) into the music therapy intervention?
- 4. Why is it important for music therapists to engage in periodic cultural self-assessment?

5. How can a music therapist embody the role of an ally to a client from a culture other than her/his own?

- 6. What is white privilege?
- 7. Should the norms from a client's culture(s) be considered when assessing, developing a treatment plan, and evaluating progress?

8. What three things you can change in your assessment that will aid in the multicultural assessment of the client?

9. How can you find about multicultural resources in your community?

10. What are three potential solutions if a music therapist discovers her/his cultural bias is affecting the therapeutic process with a client from a specific culture?

## **Bios of Presenters:**

Having worked in music therapy for almost 20 years, **Annette Whitehead-Pleaux**, MA, MT-BC currently works with pediatric burn patients at Shriners Hospitals for Children-Boston, where she works with children and families from across the world. With Team Rainbow, she works toward LGBTQ best practices.

**Xueli Tan**, MM, MT-BC is a Presidential Doctoral Fellow at the University of Iowa. She had chaired panel sessions and roundtable discussions focused on cultural, language, training and supervision, and legal issues of international students at AMTA conferences since 2006.

**Paige Robbins Elwafi**, MMT, MT-BC offers ten years of clinical experience with a wide range of individuals and settings. Her passion for multicultural issues in music therapy has developed from experiences of culture in her personal and professional life. Paige specializes in Islamic culture and the crossroads with Western cultures and values.

**Dr. Karen Estrella** works at Lesley University's Expressive Therapies department. Her interests lie in psychodynamic approaches to psychotherapy and multicultural issues in music, art, and expressive therapies and counseling, and have led to a strong emphasis in social activism.

**Rebecca J. Froman**, MA, MT-BC, completed undergraduate studies at the University of Michigan, her graduate degree at the University of Iowa, and is a clinician in the Chicago area specializing in work with older adults and clients of Jewish background.

**Nicole Hahna**, Ph.D., MT-BC is an Instructor in the Music Therapy Program at Slippery Rock University. She has published and presented on the use of feminist music therapy with survivors of domestic violence as well as on the use of feminist pedagogy in music therapy education.

**Spencer Hardy**, MT-BC attended Berklee College of Music and currently has a private practice in Palo Alto, CA. He has been actively involved for the past 8 years in LGBTQ and transgender activism as well as LGBTQ youth support organizations.

**Feilin Hsiao**, PhD, MT-BC is the Program Director and Associate Professor of Music Therapy at the University of the Pacific. Dr. Hsiao had published and presented on issues pertaining to training and supervision of international music therapy students in past conferences.

**Marcia Humpal**, M.Ed., MT-BC maintains a private practice following retirement from the Cuyahoga County Board of Developmental Disabilities in Cleveland, OH. She is co-chair of AMTA's Strategic Priority on Autism Workgroup and is on the editorial board of imagine, AMTA's early childhood music therapy online magazine.

**Karen J. Reed**, MA, Program Director at Coalinga State Hospital, worked 22 years with Mentally Disordered Offenders and Sexually Violent Predator. She promoted the use of Gospel Music in Music Therapy treatment. Her book is titled Music is the Master Key.

**Therese West**, Ph. D., MT-BC, F.A.M.I. Past President Assoc. for Music & Imagery, former MTP Editorial Board member; member AMTA's Academic Program Approval Committee.

Multicultural/integrative theoretical perspectives & 28 years clinical experience inform her Bonny Method consultation, supervision, practice, and adaptations for persons facing health challenges.

**Dr. Elizabeth York** is Professor and Chair of Music Education and Music Therapy at Converse College, a single gender institution in her hometown of Spartanburg, SC. She Co-Chairs the AMTA Ethics Board and is President Elect of the Southeast Region of AMTA.

### Format:

12:30pm – 12:45pm: Introduction: – Annette & Xueli (15 mins)

12:45pm – 4:00pm: Ethnic and Religion:

12:45pm – 1:15pm	1) Asian – Xueli & Feilin (30 mins)
1:15pm – 1:45pm	2) African-American – Karen Reed (30 mins)
1:45pm – 2:15pm	3) Arabic – Paige (30 mins)
2:15pm – 2:45pm	4) Jewish (30 mins)
2:45pm – 3:00pm	BREAK (15 mins)
3:00pm – 3:30pm	5) Latino – Karen Estrella (30 mins)
3:30pm – 4:00pm	6) Native-American – Therese (30 mins)

- 4:00pm 4:30pm: Sexual orientation & identity Annette & Spencer (30 mins)
- 4:30pm 5:00pm: Disabilities Marcia Humpal (30 mins)

5:00pm – 5:30pm: Reflecting on Bias – Nicole, Annette, & Xueli (30 mins)

5:30pm – 6:00pm: Role of Allies – Elizabeth York (30 mins)

6:00pm – 6:30pm: Open Dialogue – audience with full panel (30 mins)

Prerequisites: None