

AMERICAN MUSIC THERAPY ASSOCIATION  
EDUCATION AND TRAINING ADVISORY BOARD

**ADVISORY ON  
LEVELS OF PRACTICE IN MUSIC THERAPY**

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## **History and Rationale for Delineating Levels of Practice in Music Therapy**

When the Commission on Education and Clinical Training made its recommendations to the Association, some of the recommendations in its 2000 report to the Assembly of Delegates were not adopted in the *Standards for Education and Clinical Training* and were appended to that document as “Issues for Future Consideration.” The Commission also recommended changes in the organizational structure, to include committees on Program Approval and Internship Roster, as well as an Overview Committee. The Overview Committee was to be charged with internal and external monitoring of standards, considering competency requirements, examining trends and needs, giving advice concerning the Association’s role and responsiveness in the areas of education and training, and acting as liaison to the Certification Board for Music Therapists (CBMT) and other outside agencies. The 2001 report of the Implementation Task Force supported the changes in the organizational structure recommended by the Commission.

In 2001 the Assembly of Delegates charged a Task Force on Organizational Restructuring to develop this new structure. In 2002, the Assembly adopted the proposed new organizational structure, which included an Education and Training Advisory Board. This board was created to serve as a visionary body to advise, inform, and make recommendations to the American Music Therapy Association (AMTA) on issues related to music therapy education and training. It was charged to analyze policy issues that focus on standards and professional competencies for advanced levels of education and training; and more specifically, the relationship of these standards and competencies to advanced degrees, education and training requirements, levels of practice, professional titles and designations, and various state licensures.

In carrying out these charges, the Education and Training Advisory Board was to address the “Issues for Future Consideration.” Prior to its first meeting in November 2003, the Advisory Board reviewed a comprehensive packet of published literature, AMTA documents, and AMTA internal reports related to music therapy education and training from 1960 to the present. At the meeting, the Advisory Board discussed the literature and then focused on the prioritization of tasks. The Advisory Board determined that it was necessary to delineate levels of practice in music therapy in order to provide the foundation for the development of advanced competencies. From its inception, the Advisory Board worked according to one fundamental principle: that no recommendation would be forwarded to the Association unless it was unanimous.

After much discussion, the Advisory Board agreed that defining levels of practice in music therapy was a top priority for the profession as well as a foundation for other high priority tasks. Each Advisory Board member then researched and wrote a paper from her/his respective area of expertise related to this topic.

Differential levels of music therapy clinical practice have been described for decades in the music therapy literature (Bruscia, 1989, 1998; Gfeller & Thaut, 1999; Maranto, 1993; Scartelli, 1989; Standley, 1989; Wheeler, 1983). Suggested levels have been based on types of goals, depth and extent of services, and/or independence of the music therapist. Gfeller and Thaut, Scartelli, and Standley related levels of practice to educational preparation. The Commission on Education and Clinical Training (AMTA, 1999) similarly suggested that while the Bachelor’s degree is designed to impart Professional Competencies for music therapy practice, the Master’s degree could prepare the music therapist to work at a more advanced level, “depending on the clinical components of the degree program” while the doctoral degree would not only provide competence in research, teaching, and supervision, but also advanced competency in a “specialization area in music therapy.”

The clinical music therapy literature describes several music therapy models that require substantial training and expertise beyond the AMTA Professional Competencies. These models include Analytical Music Therapy (AMT; Priestly, 1994), the Bonny Method of Guided Imagery and Music (BMGIM; Grocke & Bruscia, 2002), and Nordoff-Robbins Music Therapy (NRMT; Nordoff & Robbins, 1977). Several authors have described other treatment approaches that represent advanced or highly specialized clinical practice (e.g., Austin, 2001; Gfeller, 2001) or advanced areas of practice such as supervision (e.g., Forinash, 2001) and education and training (e.g., Wheeler, 2003; Wigram, Pedersen, & Bonde, 2002). Still others have modeled a level of practice beyond the Professional Competencies by developing methods of assessment (e.g., Coleman & Brunk, 1999; Wigram, 2000) or by proposing theories of music therapy (e.g., Kenny, 1989; Thaut, 2000).

The urgency of the need for AMTA to define levels of music therapy practice has increased with recent legislative and regulatory actions in several states that have specified how and under what circumstances music therapists may practice. By defining levels of music therapy practice, AMTA will be prepared proactively to partner with state legislatures and regulatory bodies in the development of occupational regulations that affect music therapy services.

Defining levels of practice in music therapy serves as the foundation toward achieving the following objectives for the Association:

1. Identify advanced competencies, both global and in areas of specialization, along with analysis of existing professional competencies
2. Develop education and clinical standards for graduate degree programs
3. Support the Academic Program Approval Committee in reviewing AMTA approved academic programs that are reapplying for AMTA program approval, as well as new programs applying for initial approval
4. Provide information for government relations work dealing with state licensures and employment practices (e.g., job descriptions, salaries, populations, scope of practice).
5. Support efforts in seeking reimbursement and financing of MT services
6. Support public relations efforts in professional recognition and perception of music therapy by other professions and the public
7. Support efforts in continuing education by providing a framework for defining what constitutes specialized trainings, advanced trainings, and other types of continuing education opportunities
8. Provide a basis for developing advanced professional designations and/or credentials
9. Support research efforts in music therapy
10. Stimulate continued growth of music therapists and the profession

In November 2004 the Advisory Board began its deliberations on defining levels of practice, which continued through a mid-year retreat in July 2005. Following the retreat, the Advisory Board issued the following Advisory on Levels of Practice for consideration by the AMTA Board of Directors, Assembly of Delegates, Regions, and membership.

## **Preamble**

This Advisory distinguishes two Levels of Practice within the music therapy profession. In presenting a framework for these Levels of Practice, the Advisory Board has described characteristics, preparation, and skills within four domains for each of two levels of practice. For the advanced level, types of experiences that may lead to an advanced level of practice also are offered.

In making a distinction between professional practice and advanced professional practice, the Advisory Board recognizes that music therapy practice exists on a developmental continuum. This continuum represents both breadth and depth in levels of practice and may be viewed from the perspective of a “gestalt,” where the whole is greater than the sum of its parts. Considering this developmental continuum, the Advisory Board felt that Abraham Maslow’s (1971) principles of human development closely matched our perception of the field and its members; that is, professional music therapists are always in a process of “becoming.” Moreover, the Advisory Board acknowledges that a music therapist may practice at an advanced level in a specific role or with a specific population; however, the level of practice may shift when the therapist takes on a distinctly different role or serves a different population, e.g., from clinician to supervisor or from developmental disabilities to mental health.

In deliberating about levels of practice, the Advisory Board debated what to label the level of practice needed to enter the profession as a practitioner. At the present time, AMTA has a document entitled “Professional Competencies” and CBMT grants a “professional” credential. For now, the Advisory Board has chosen to use the term “professional” to remain consistent with current terminology; however, the terminology may be subject to change in response to internal and external influences.

## **Professional Level of Practice**

A music therapist at the Professional Level of Practice has a Bachelor's degree or its equivalent in music therapy and a current professional designation or credential in music therapy (i.e., ACMT, CMT, MT-BC, or RMT). At this level, the therapist has the ability to assume a supportive role in treating clients, collaborating within an interdisciplinary team to contribute to the client's overall treatment plan.

Central to the Professional Level of Practice are the characteristics of the music therapist practicing at this level. This section presents characteristics of the professional music therapist and how these contribute to professional practice.

### *Professional Growth*

Professional growth includes the development of knowledge, skills, and abilities through education, supervision, and other professional experiences. At this level, the music therapist pursues continuing education, receives supervision, participates in a supervisory relationship, demonstrates understanding of his/her role within the organizational structure of the treatment setting, and actively seeks continued development within that structure. The therapist practices within the scope of professional preparation.

### *Musical Development*

Musical development is the acquisition of music knowledge, aesthetic sensitivity, and skills relevant to music therapy, and the application of those skills to clinical practice. At this level, the music therapist uses music and music experiences to elicit musical and extramusical responses from clients and to support progress toward treatment goals.

### *Personal Development of the Therapist*

Personal development involves becoming self-aware and actively seeking to further develop the self. At this level, the music therapist observes and is aware of her/his own feelings, behaviors, and limitations in order to respond therapeutically to client behaviors. S/he may actively seek personally challenging and enriching experiences in order to facilitate personal growth.

### *Clinical Experience*

Clinical experience involves provision of music therapy services within the context of a treatment team. At this level, the music therapist utilizes music therapy techniques to meet clients musically and clinically. The music therapist demonstrates basic knowledge of assessment, treatment, documentation, and evaluation; communicates empathy and establishes therapeutic relationships; and demonstrates understanding of ethical principles and current standards of practice.

## Advanced Level of Practice

A music therapist at an Advanced Level of Practice has a Bachelor's degree or its equivalent in music therapy, a current professional designation or credential in music therapy (i.e., ACMT, CMT, MT-BC, or RMT), professional experience, and further education and/or training (e.g., continuing education, a master's degree, a doctoral degree, or in-depth training in areas of specialization such as AMT, BMGIM, or NRMT). It is anticipated that in the future music therapists at the Advanced Level of Practice will hold at least a Master's degree in music therapy that includes advanced clinical education. The advanced music therapist demonstrates comprehensive understanding of foundations and principles of music, music therapy, treatment, and management in clinical, educational, research, and/or administrative settings.

Central to the Advanced Level of Practice are the characteristics of the music therapist practicing at this level. This section presents characteristics of the advanced music therapist and how these contribute to advanced practice.

### *Professional Growth*

Professional growth includes the development of music therapy-related knowledge, skills, and abilities through education, supervision, and other professional experiences. Education includes formal coursework, graduate degree programs, and continuing education directly related to and integrated into music therapy practice. Supervision includes observation and feedback, case consultation, and/or mentorship of music therapy practice provided by a clinical supervisor, an advanced colleague, or a graduate educator. The advanced music therapist understands major theories of clinical supervision, provides supervision, and serves as a clinical model for the supervisee. Other professional growth experiences include informal, professionally related activities, such as teaching at conferences and institutes. The advanced music therapist understands issues involved in standards, policies and procedures for clinical practice, clinical supervision, clinical administration, college/university teaching, and research. Listed below are possible ways to enhance professional growth.

Educational options include but are not limited to

- Completion of graduate degree program
- Completion of institute-based advanced training (AMT, BMGIM, NRMT)
- Graduate level courses
- Completion of continuing education credits through conferences, workshops/institutes
- Remaining current with the music therapy literature and integrating it into teaching, supervision, research and clinical practice

Supervision options include but are not limited to

- Consultation
- On-the job clinical supervision
- Contracting for private clinical supervision
- Peer supervision
- Clinically oriented in-services
- Supervised clinical experiences as part of a graduate degree program

Other professional growth options include but are not limited to

- Participation in professional committees and task forces
- Government and public relations activities on behalf of music therapy

- Publishing scholarly articles, books, monographs, etc.
- Teaching music therapy
- Professional presentations about music therapy
- Supervision of music therapy interns
- Volunteering with an unfamiliar population

### *Musical Development*

Musical development is the broadening and deepening of both the music therapist's relationship to music and her/his musicianship relevant to music therapy, and the integration of both into clinical practice. The advanced music therapist designs and conducts music experiences that are primarily process-oriented. S/he applies complex and spontaneous manipulation of multiple musical elements to facilitate and work with client responses.

Ways in which music therapists may develop musically include but are not limited to

- Actively working to broaden repertoire in response to clinical need
- Taking lessons to broaden and deepen musical skills and musicality
- Active involvement in music outside of the clinical setting (e.g., composing; attending concerts; listening to music; moving to music; or making music in bands, orchestras, choirs, houses of worship, community theaters)
- Reflecting on the way music affects people and communities emotionally, cognitively, interpersonally, spiritually, and physically
- Familiarizing oneself with various genre of music and their cultural contexts (e.g., multicultural, multi-denominational, hip-hop/rap, country/western) while recognizing one's own cultural limitations
- Expanding skill using various forms, structures and techniques (e.g., improvisation, jazz, drumming, music technology, movement, additional styles)

### *Personal Growth and Development*

Personal growth is the deepening awareness and actualization of the self. The advanced music therapist is aware of the role of the self and its effect on both the client and the therapeutic process. The advanced music therapist is aware of the role of self in relation to one's own personal issues, which may affect the client and therapeutic process. The advanced music therapist integrates knowledge with empathy and is aware of resources and limitations, both personal and situational.

Ways in which music therapists may grow personally include but are not limited to

- Personal music therapy (e.g., AMT, BMGIM)
- Personal therapy (e.g., counseling, other arts therapies, psychotherapy)
- Involving oneself in new personal challenges and self-growth experiences (e.g., travel to or study of different cultures, dance classes, retreats)
- Personal growth groups (e.g., dream work, support groups, 12-step groups)
- Engagement in challenging life experiences that enhance understanding of the human condition
- Living a lifestyle that includes expression, reflection, and self-awareness (e.g., journaling, arts, meditation, other spiritual pursuits)



*Integrative Clinical Experience*

Integrative clinical experience is professional practice in music therapy of sufficient duration and depth to gain a comprehensive understanding of the clinical process of the client and the therapist's impact on that process. Through such experiences the music therapist moves beyond didactic knowledge to integrate rationale, theories, treatment methods, and use of self to enhance client growth and development. Based on a comprehensive understanding and integration of theories and practices in assessment, treatment, evaluation, and termination, the advanced music therapist takes a central and independent role in client treatment plans.

Given a growth motivation and a conducive work environment, clinical experiences that lead to this integration include professional activities such as

- Treatment and analysis of client progress over time
- Providing music therapy interventions within a clinically based research protocol
- Interaction with treatment team members and milieu
- Sufficient experience with many clients to recognize patterns
- Reflecting on and interpreting the clinically relevant actions of both client and self
- Partnering with the client in therapeutic process
- Collaboration and sharing with colleagues and mentors
- Assimilating relevant literature into clinical practice
- Research activities that further enhance the treatment process

## Summary

This document represents an initial framework of Levels of Practice in Music Therapy. The Advisory Board envisions that Advanced Competencies will emerge from the Advanced Level of Practice and recommends that a Task Force now be appointed to develop those Competencies. The Advisory Board recognizes that the Advanced Level of Practice actually encompasses more than one level. In the future, the multiple layers within the advanced level will need to be clarified further as they emerge. The Advisory Board urges the Association to be proactive in delineating and disseminating Levels of Practice to external regulatory bodies before they define them for us.

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