

# Identity: The Importance of Knowing and Listening to the Self

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## Introduction

### **Beginning Thoughts on Self Awareness and Listening:**

*Clients' histories, identities and music are analyzed at an in depth level...They are described according to the music they create...*

*How do music therapists define themselves through music?*

*Clinical music is based on equality...equal sharing of ideas through musical dialogue.*

*Each person in the relationship must be identified through the music they create.*

Without a self-reflective process the music therapist is not aware of the qualities he/she contributes to the musical dialogue. Therefore, he/she is not fully aware of how clinical techniques are influencing the client's music and guiding the clinical process.

**The Result:** An imbalance in the music therapy relationship.

### **Questions to Consider:**

- How can music therapists explore musical identity?
- How can music therapists be defined through music?
- How can personal musical history shape clinical work and enhance clinical improvisation?
- How can music therapists listen and analyze clinical music based on knowledge of musical identity?
- How can a "combined identity in music therapy" be achieved?

### **Why should these Questions be Considered?**

- To identify the musical self: *finding musical identity*.
- To understand the music therapist's presence in the music therapy relationship.
- To balance the therapeutic relationship by defining clients and music therapists through music.
- To explore and understand the intricacies of musical dialogue in music therapy.

**The Result:** Balance in the therapeutic relationship and musical equilibrium.

The information in this paper is taken from the author's graduate research entitled *Finding Balance in the Music Therapy Relationship: Exploring the Therapist's Musical Identity* (Quinn, 2003). The purpose of the qualitative study was to find balance in the music therapy relationship by acknowledging the influence of the music therapist's identity on clinical improvisation. Part One of the research study (*Identifying the Musical Self*) explored the varying levels of identities which comprise the overall "make up" of a music therapist. This consisted of an extensive self-analysis, literature research, and interviews with family members. Part Two, *Musical Analysis*, analyzed six clinical improvisations with the assistance of three independent listeners.

## **Part One: Identifying the Musical Self**

Being a music therapist is comprised of not only current identity, but identity from birth. Childhood, family history, and musical experiences shape who we are as people and music therapists. Not any two of us are alike or practice music therapy in the exact same manner. Unique qualities enhance each therapeutic relationship we encounter. In order to have balance and equality in the therapeutic relationship, we must acknowledge our identity as persons, musicians, and music therapists. If we expect this process from our clients, then we should expect it of ourselves. This is where your journey begins in self awareness and identity exploration!

### ***Levels of Identity***

Identity: *Sense of Self*

Musical Identity: *Musical Self/Musical Representation of Self*

Professional Identity: *Clinician, Consultant, Teacher, Supervisor*

Identity as Researcher

*Note:* The reader should explore each of these levels as it pertains to his/her particular life experience.

### **Identity: “A Sense of Self”**

Identity is simply who we are as unique people and how we define ourselves according to our own ‘being’ and society.

Perhaps the most influential psychologist and writer on this topic is Erik Erikson. He describes identity as:

...a sense of being at one with oneself as one grows and develops; and it means, at the same time, a sense of affinity with a community’s sense of being at one with its future as well as its history (1974, p. 27).

According to Erikson’s studies, we can understand our own identity by reflecting on our individual past and present, growth and development. We can also identify ourselves according to our community and society, past and present. Part of understanding our identity is understanding the ‘self’, which seem to be interrelated. The self is the person, their individuality...who they are. The sense of self shapes the identity of a person.

Establishing a sense of self and identity is a valuable aspect to self-reflection and awareness as a music therapist. “A capacity for self-awareness is necessary for full personhood” ( Kihlstrom, Beer, & Klein, 2003, p. 68). At this stage in our lives we define ourselves according to our profession, which means understanding how our profession is molded by personal and social traits.

Questions to ask yourself:

*Where was I born?*

*What is my heritage and ethnic background?*

*What experiences did I have in childhood and growing up?*

*What characteristics are unique to me?*

*What are my beliefs and values?*

## Musical Identity: “Self in Sound”

Each person has his/her own “sound”, or “voice”. Similar to Nordoff-Robbins’ theory of the “music child” (Bruscia, 1987), I believe each person possesses a unique sound which portrays personality, emotions and “inner voice”. This internal voice represents a person’s soul, emotions and stories that are untold. It is the voice that sounds through music. In the book *The Sonic Self: Musical Subjectivity and Signification* (2000), Cumming presents theories on music philosophy and aesthetics, and raises questions on how we interpret music and how sound is formed. She poses the question, “does the self form the sound or the sound the self (p. 7)?” Do our identity and personality traits shape the sounds we create, or does our inner voice shape our identity? This is a question that cannot be answered, or generalized, and should be left to the individual person who seeks to understand his/her musical identity. I believe that both are true and that *our “inner sounds” work in balance with our inner self to shape the person’s identity.*

The purpose here is to:

- 1) Outline the process of identifying ourselves by the music we create.
- 2) Describe the music that is individually unique.
- 3) Create the awareness of individual musical identities.

Not only do we have an identity as a person and human being, we have an identity based on the music we experience and the music we create. However, identifying ourselves through music may not be ‘defined’ with words, but through music itself.

### Diagram I: Exploring Musical Identity

Stage 1: Musical Autobiography/Self Reflection

Stage 2: Chronological Outline of Significant Musical Events

Stage 3: Interviews with Family Members or Close Friends to Support Personal Reflections

Stage 4: Literature Research into Personal Culture, Traditions, Traditional Music, and Psychological Theories on Identity and Musical Identity

### *The Process*

*Stages 1 and 2:* A “musical biography” begins the process of identifying significant musical memories and influences. This includes a “chronological outline” of music lessons, significant events, employment, and university training. A list of significant songs, pieces and instruments should be noted.

Topics to consider while Exploring Musical Identity:

- Events
- Places
- People
- Musical Styles
- Instruments
- Songs/Pieces

Questions to Consider:

- *What styles of music do I enjoy playing?*
- *What styles of music do I enjoy listening to?*
- *Which people influenced/influence the musical aspects of my life?*
- *Which songs/pieces were/are influential? Why?*

- *Which songs/pieces were/are considered a family tradition?*
- *What are the musical characteristics of these songs/pieces?*
- *Do these characteristics show through the music I create today?*
- *How do these characteristics influence the music I create?*

*Stage 3:* To support the musical biography, a series of interviews can be held with family members and/or close friends. A set of general questions should be given to the interviewees so as to allow for open discussion and reminiscing. The questions are as follows:

1. *Can you describe significant songs?*
2. *What songs/music do you remember from my growing up?*
3. *Can you describe significant musical events?*
4. *What are your memories of my musical history?*
5. *Are there any songs/pieces that you consider a family tradition (passed on from generations)?*
6. *What people do you think were influential in my musical up-bringing (classical and non-classical; family and non-family, including yourselves)?*

Compare themes from the interviews with memories from the musical biography. Significant pieces of information that are consistent among family members, as well as significant to the therapist, can be placed into related categories. Musical scores should be gathered to provide an understanding of the musical styles and elements pertaining to the themes. If a score is not retrievable, notate melodies according to interview discussions and memory.

*Stage 4:* Related literature assists in defining terminology according to leaders in the psychological, social, music, and music therapy theoretical fields as well as to demonstrate topics that are similar to each music therapist's exploration process. Interview information should be compared alongside each of these discussions to portray the process of learning about one's own self and identity.

*Note:*

A) It is important that during this process analyses, definitions and literature research of influential styles of music and songs/pieces are completed. These will provide key information into the musical elements that influence your musical style as a therapist. For example, if you are influenced by folk music, what type of folk music does your musical interests fall under? What are the common musical characteristics of folk music? What are the harmonic analyses, forms, modes, rhythms and melodic contours of your favorite folk songs? Complete this process for each style of music present in your life.

B) Highlight and list the categories of music that are most influential. Compare these to the analysis of clinical improvisations to be discussed in Part Two.

### **Professional Identity: "Clinician, Consultant, Teacher, Supervisor"**

As music therapists, we have varying identities that mold and shape our overall entity. We have a personal identity, a musical identity, a professional identity, and an identity as researcher. All of these work in balance with each other to comprise our unique identity as music therapists. Each specific part of the self informs our knowledge and understanding of ourselves, which enhance our understanding of our clients.

Magee (2000), described music therapists in the UK as being defined by the music they create or use during clinical sessions (p. 95). Not only are we defined by our approach and music as music therapists, we are also defined by the music that influences and shapes our unique human entity. We tend only to look at musical techniques and clinical approaches to define who we are as music therapists. In fact, there is more to our musical "definition".

One of the main pieces of music therapy literature which discusses musical identity is the book *Music Therapy: Improvisation, Communication, and Culture* by Even Ruud (1998). In the chapter "Music and Identity" Ruud describes how music can be connected to the way we present our identities. What we listen to, perform and how we talk about music are not necessarily a reflection of our identity, but the way in which we present our identities. By being aware of our musical identity and how music helps to construct an individual's self concept can help us to choose the right music for our clients that are representative of their life and culture (p. 47).

The most important aspects of a person's professional identity is his/her ability to self-reflect, knowledge and practice of ethical behaviour, professionalism in conducting clinical work, and past, current and future ambitions for continuing education.

To enhance personal and professional growth, music therapists must:

- 1) Maintain a good working relationship with colleagues, staff, clients and their families.
- 2) Become involved with continuing education, workshops, and certifications.
- 3) Keep an open mind with regard to new approaches and techniques.
- 4) Understand their own involvement in the therapeutic relationship through self-reflection, peer supervision, journaling.
- 5) Provide quality musical experiences to clients by "listening" and "analyzing" the music of clinical improvisations.

*Key Words:*

*Listening:*

As music therapists we use many facets of listening. Not only do we listen as therapists, we listen as musicians. It is important to know the intricacies of hearing *and* listening so we can effectively communicate with our clients and develop a meaningful relationship. We need to be aware of our own values, beliefs and personal intricacies, and then listen to others without bias or judgment so as to not compare them to ourselves. Ansdell (1995) describes this technique in music therapy as: A music therapist is trained to give this quality of listening both to the precise details of the music and to the person playing...not to each in isolation but to both together...to the person-in-the-music (p. 157).

*Clinical Improvisation:*

Bruscia (1987) describes Creative Music Therapy as music *as* therapy, rather than music *in* therapy. "Music is the primary means of motivating and effecting the client's therapeutic growth". The main feature of this approach is the use of improvisation, which is used creatively to make contact with the client. The creative experience is a progressive process, thereby enhancing the client's creative development (p. 24). Clinical improvisation is a true form of musical expression for both the client's and therapist's identities.

*Analysis:*

Analyzing music from music therapy sessions is an essential component to providing quality documentation and enhanced musical support to a client's process in creative music making. Analysis can provide information about the client's music, as well as our own, that would aid in appropriate preparation for following sessions.

The main form of analysis used in this study was *Indexing*. Indexing is a process by which the music therapist listens intently to the musical excerpt and writes down significant observations according to various categories. These categories include descriptions of: the client's music, the therapist's music, clinical observations, and general observations. Each of these descriptions is recorded according to the time element of the musical example (i.e. minutes and seconds). This is an adapted format originally developed by Nordoff-Robbins. In both the Nordoff-Robbins "Creative Music Therapy" approach (Bruscia, 1987) and the analysis process used by Lee (2000),

the importance of choosing a musical example that is significant to the therapeutic process is emphasised.

Listening and analysis informs clinical work through highlighting musical and clinical elements. This process enhances a therapist's understanding of the music being created and why, or how, certain elements are used.

*Note:* Choose examples that demonstrate significant musical styles that are representative of your personal identity.

### **Identity as Researcher:**

The identity as a researcher enhances professional identity because the music therapist, then, is dedicated to expanding the music therapy profession, enhancing the standard of practice, and willing to increase awareness of global music therapy practice. The following quote by Aigen (Langenberg, Aigen & Frommer, 1996) reflects the reasons for the research study.

My Jewish identity is connected to music; music comes from the land; the land holds history; music tells the story of a land and its people; to be in a land is to feel its story through music. I sense that there is something for me to learn in this about myself and my relationship to music that will help me to be more authentic as a researcher (pp. 173-174).

### **Part Two: Analysing the Music**

This section describes how the reader can gain further insight into the meaning of clinical music through the analysis of clinical improvisations. It is expected that once the analyses are complete, that these are compared with significant themes found through the exploration of musical identity. The purpose is to find the relation between influential musical characteristics in the music therapist's identity and the music he/she creates in a music therapy session.

*Note:*

- 1) Consent forms are required on the part of the clients (if used for study) and independent listeners.
- 2) This process is based on a research model. The assistance of independent listeners may not be possible in all cases. The music therapist who is completing this process on more of a personal level, to enhance his/her current work, is encouraged to complete steps one, two, five and six using listening guidelines and indexing.

### **Process:**

1. Choose a cross-section of clinical examples (at least six) from two or more client programs.
2. Consider different musical qualities: choice of supporting instruments, musical style, structure and form.
3. To limit bias, request the participation of *independent listeners* (can be professional musicians of varying specialties) to assist in the musical analysis. At least three analysts are recommended.
4. Instruct the listeners to describe the music, style and interaction they hear in the examples. Provide specific guidelines for listening, description, analysis and notation of musical examples. An example of listening guidelines used for the research study can be found in the Appendix. Lee's (2000) nine-stage listening method in *A Method of Analyzing Improvisation in Music Therapy* and Arnason's (2002) series of six reflections in *An Eclectic Approach to the Analysis of Improvisations in Music Therapy Sessions* are also helpful examples of listening guidelines.

5. It is recommended that the music therapist follow the listening guidelines as well, while using an Indexing format for a deeper therapeutic understanding.
6. Compare the information from all independent listeners with the Indexing, placing consistent information and themes into categories relevant to themes found in Part One: Identifying the Musical Self.
7. Schedule follow-up interviews with the independent listeners to discuss the analysis. Consider their potential cultural influences.

### **Acknowledgement of Clinical Identities**

#### ***A Combined Identity in Music Therapy: Listening to the Self, Listening to the Client, Listening to the Music***

An “identity in music therapy” cannot be formed unless “identity” characteristics are explored for both client and therapist. It is just as important to research our own identity in order to establish our place in the musical dialogue, and understand how the music we create influences the client’s music, and vice versa. The identity of the music therapist informs clinical music, which evolves from the continuous musical dialogue in the therapeutic relationship. The improvisation that is created between therapist and client is the result, with an eventual meeting in the music after the relationship is established.

#### **The five stage model: *combined identity in music therapy* (Diagram II).**

Throughout each stage, a musical dialogue occurs as the therapeutic relationship develops. Once both therapist and client have explored the other’s respective identities, clinical music is recognised and whole identities meet to establish an “identity in music therapy” through clinical improvisation.

This diagram shows the importance of identity in the therapeutic relationship, and the balance of music and individual identities. It also outlines the main points of study mentioned in the Introduction:

- 1) To identify the musical self: finding our musical identity through identity research and self-reflection.
- 2) Understanding our presence in the music therapy relationship through exploring our own identity and analysing our music, and exploring how it influences the client’s music.
- 3) Balancing the therapeutic relationship by defining our clients and ourselves through music.
- 4) Exploring and understanding the intricacies of musical dialogue in music therapy through musical analysis and self-reflection.

## Diagram II:

**5 Stage Model: Combined Identity in Music Therapy (when whole identities meet)****Therapist's Identity**

personality  
 religion  
 exposure  
 beliefs  
 values  
 culture

M  
 U  
 S  
 I  
 C  
 A  
 L

**Client's Identity**

personality  
 religion  
 exposure  
 beliefs  
 values  
 culture

**Therapist's Musical Identity**

religious music,  
 exposure to events and  
 musical styles,  
 traditional music,  
 beliefs and values in  
 musical choices,  
 musical training

D  
 I  
 A  
 L  
 O  
 G  
 U  
 E

**Client's Musical Identity**

religious music,  
 exposure to events and  
 musical styles,  
 traditional music,  
 beliefs and values in  
 musical choices,  
 musical training

**Identity as Music Therapist**

combination of identity and  
 musical identity with clinical  
 approach, techniques, and  
 responses

**Identity as Client**

combination of identity  
 and musical identity,  
 needs, challenges,  
 responses (musical and non)

**Therapist's Clinical Music****Client's Clinical Music****Identity in Music Therapy**

when whole identities meet in clinical improvisation;  
 relationship is established

### **Concluding Thoughts on Listening to Our Identity**

Augsberger (1982) states that as a listener we must "...come to understand another as different from the self...to respect that uniqueness without attempting to gloss it over...(p.17)". Through self-awareness the therapist can explore personal values, beliefs, strengths, challenges and personal intricacies. This process will allow us to listen to others without bias or judgment so as to not compare them to ourselves.

We enhance our clients' experiences by identifying our personal and musical selves. A balance in the therapeutic relationship will occur because the therapist will be able to hear the person and hear the music simultaneously. Therefore musical dialogue and personal understanding created during clinical improvisation will be equal. By ignoring the "music" of our heritage and life, we are unable to fully understand the musical needs of our clients, therefore not choosing appropriate music for them. Although therapists often explore their responses and involvement within the therapeutic relationship, this paper implicates that without the "musical self-awareness", music therapists cannot truly understand the nature of the relationship and its process.

Each individual has a unique "inner sound" which is expressed through musical identity. The music therapist and client can be defined through music by exploring the unique characteristics of their "musical identities" and the intricacies of musical dialogue. This process enhances understanding and awareness of each individual's presence in the relationship. "Music can be used...as a means by which we formulate and express our individual identities (Hargreaves, Miell & Macdonald, 2002, p. 1)". Clients and music therapists are defined by the music they create. These identities inform the clinical music and relationship, achieving a combined identity in music therapy.

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## Appendix

### Example of Listening Guidelines

#### I: First Listening Stage

Describe your *overall observations*. These can include adjectives to describe the excerpt, thoughts, interpretations of the *music as a whole* (i.e. musical dialogue between client and therapist), and any other *general descriptions*.

##### (A) First Listening

- listen to the excerpt without making notes until the end of the example
- describe the example, making general comments about the music as a whole

##### (B) Second Listening

- make notes as you listen, pausing the CD when needed; record track numbers, minutes and seconds when necessary
- again, these are general descriptions of the excerpt

#### II: Second Listening Stage

Describe any musical characteristics and styles heard in the therapist's music. Supporting instruments may include: piano, voice, flute, or guitar. This will be indicated on the CD for each example.

##### (A) Repeated Listening

- musical characteristics may include (*These are only suggestions for guidance purposes*):
  - musical form, shape, structure
  - rhythmic patterns
  - modes
  - repetition
  - syncopation
  - styles (i.e. idioms, oriental, classical motifs, jazz, pop, folk, country etc...)
- make notes as you listen, pausing the CD when needed; record track numbers, minutes and seconds when necessary
  - if needed, you may notate any significant musical elements
  - be as creative with description and interpretation as you feel necessary

#### III: Third Listening Stage

This is the final listening, once you have finished your interpretation and analysis.

- listen to the excerpt as a whole, without writing
- write a final summary or concluding thoughts based on anything that you heard in the excerpt, including musical dialogue, client/therapist interaction, etc...