Building Relationships in a Youth Justice Residence in Aotearoa New Zealand: Experiences of a Music Therapy Student

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Masters in Music Therapy at Victoria University
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Abstract

Using Action Research, I explored my experience as a music therapy student in the process of developing relationships in a Youth Justice Residence in Aotearoa New Zealand. I reviewed a body of literature on therapeutic relationships within arts therapies and broader therapeutic traditions, music therapy with at-risk-youth, and social-justice perspectives in music therapy. Data was generated by means of journals and supervision notes and was analysed using thematic analysis through three cycles of action research. All names of the young people were changed to protect their anonymity. Findings showed that building relationships in this context involved having knowledge about the context and the population, self-knowledge and reflexivity, an ability to work across difference, and shared music-making.

While the research was primarily being undertaken to improve practice, student research can offer a valuable addition to the field of music therapy, which is a relatively new field that requires more research to fully understand its benefits and challenges in various contexts and with different populations. This study may support other practitioners in their own process of relationships building with youth-at-risk within the local context of Aotearoa New Zealand, and may illustrate strategies that support this within the context of youth justice residence, as well as barriers and challenges involved.

This research received ethical approval from Victoria University of Wellington,
made on behalf of students in the Master of Music Therapy Programme.

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Introduction

Background to the Study

My Interest in Building Relationships

I've been interested in relationships for as long as I can remember, perhaps because in some of my early relationships I was not met in the way I longed to be; because I saw adults around me floundering in their own relationships with little or no support; because I felt different, and therefore became interested in '*difference*' and how to build bridges to reach across the differences between people; and because my own '*difference*' made me acutely aware of how difference is seen in the world, which gradually politicised me and unveiled the power-dynamics involved with gender, class, race, wellbeing, ability, and sexuality.

In the context of my university placement, forming relationships interested me because of my previous experience working in Youth Justice Residences almost 20 years earlier, as part of a Kaupapa Māori¹ Theatre and Education group, Te Rākau Hua o te Wao Tapu (called Te Rākau herein). I loved this work, and found it inspiring and humbling to work with young people who were filled with passion and potential, but who'd often slipped through the gaps in the system and never had their potential nurtured. During my time with Te Rākau, I was privileged to be a part of a contemporary Māori approach to healing using traditional and contemporary performance, which focussed on building identity and cultural heritage within family and cultural networks (Durie, 1995; Durie, 2004; Pihama et al, 2002), and I became comfortable with activities that are normalised within Kaupapa Māori spaces from *pōwhiri* (welcome rituals) to *poroporoaki* (farewell rituals).

In the Youth Justice Residences, we built projects with the young people five days a week over approximately three months, and young people were withdrawn from other programmes offered in the residence for this period, allowing Te Rākau to work relatively independently within the residence grounds. Prior to the project, our team had lived and worked together

¹ Kaupapa Māori is a term that describes Māori world-views, experiences, philosophies, social practices, aspirations, research approaches, and engagement with the contemporary world, that emerged out of dissatisfaction among Māori with the failure of Western research paradigms and approaches to the problems facing Māori communities (See Bishop, 1994; Smith, L. 1999; Smith, G. 1992; Pihama, 2010; Ngata, 2014). Kaupapa Māori assumes being Māori is normal, and positions Māori ways of being as central and has found expression through the formation of Kaupapa Māori schools, Kaupapa Māori health centres, and Kaupapa Māori non-government organisations.

for many months and developed positive relationships. Almost 20 years later, I returned to one of the residences as a music therapy student on placement, where I was only onsite for 20 hours per week, had no prior relationships with staff, and was working within the context of other programmes offered in the residence. I was therefore interested in how I could build relationships with the young people in this new role, which differed considerably from the autonomous fulltime programme Te Rākau offered within a Kaupapa Māori framework.

While I imagined I would encounter some of the values I'd experienced within Kaupapa Māori space also within the residence (because there were strong Māori and Pacific cultural elements incorporated into the extra-curricular programmes, and a large proportion of staff working directly with the young people were of Māori or Pacific Island descent), I was also curious about what differences I might encounter because the residence was a government-run institution – not a Kaupapa Māori organisation.

I was unsure to what degree my effectiveness in building relationships in the past had been connected to the Kaupapa Māori context in which I was already de-centred as a Pākehā, in that I'd stepped into unfamiliar cultural territory, in which I'd become respected. In Te Rakau I was wholeheartedly supported by the group, but in this new role, I had no idea how much support I would gain from staff, and what impact this might have on building relationships with the young people. Although I sensed that much of the learning I gained from Kaupapa Māori would serve me well in this new context, because I had developed a high degree of comfort with being an 'outsider', I wondered if my 'outsider-ness' would be a bigger barrier in this new environment than it had been previously.

Being an 'Outsider'

My early experiences of feeling '*different*' while growing up laid a good foundation for moving into a completely new cultural framework. This came to the fore when I encountered Kaupapa Māori discourses. Most of my Pākehā friends were like me – 'outsiders' in their families, who didn't fit the dominant Pākehā system, or support it, but who were nevertheless privileged by it ethnically. Many were dealing with inter-cultural issues because they had Māori or Pacific partners or were co-parenting children with Māori ancestry, or because of inter-cultural experiences around sexuality and gender. As such, my 'outsider-ness' within my inherited cultural framework, and my engagement with feminist and sexuality politics and journey to

reclaim the spiritual and healing traditions of my grandmothers, created a natural openness in me and interest in Māori world views (which were also marginalised in the dominant Pākehā system).

When I encountered Kaupapa Māori discourses I found that some Māori norms seemed a much better fit for my personality than the norms I'd experienced in the middleclass Pākehā world I'd grown up in. I found my enthusiastic, intuitive, expressive nature being valued in Māori spaces. In contrast, I experienced being ostracised for these same traits in dominant Pākehā spaces. However, there were some Māori norms that took some getting used to. I'd grown up in an environment with strong middleclass values where I was used to people showing interest in *me* as an individual. The first question one tends to ask when meeting Pākehā people is "What do you do?" as a means to establish common ground in terms of shared interests and world-views. However, I discovered that the first question that tends to be asked in the Māori world is "Where do you come from?", because of the importance of *whakapapa* (genealogical connections with people and the environment) (Pere, 1991).

The other difficulty I encountered in my first experiences in Kaupapa Māori spaces was how to navigate my discomfort with *not knowing*, and I gradually began to distinguish between the different cultural protocols around accessing knowledge within Māori and Pākehā communities. Knowledge within the Pākehā world tends to be seen as an entitlement that ought to be available to all (Jones & Jenkins, 2008). This means that asking direct questions and expecting direct responses is often appropriate within Pākehā space. However, Māori pedagogy places a great deal of value on looking and listening before speaking or asking, and knowledge is not freely available to all (Smith, 1999). Rather, knowledge is given on the basis of a person embodying qualities such as right spirit and kinship (Jones & Jenkins 2008), and can involve seemingly unrelated activities, such as working in the kitchen, visiting people in their own homes, and working to irregular and unplanned timeframes (Ngata, 2014), and a commitment to long-term relationships and kaupapa-driven activities (Jones and Jenkins, 2008).

My early involvement with Kaupapa Māori spaces (and Pacifika spaces) left me feeling lost and confused about how I could connect with people, gain information, and contribute. Luckily, I enjoyed hard work, and I found that this was my 'way in'. I got on with the job, and gradually, I became part of the broader *whānau* through my engagement with the *kaupapa*

of shared music-making, drama, and performance. However, my belonging was tenuous, and within each new community in which Te Rākau worked I would be assessed from a distance for some weeks (or months) before Māori elders or young people were willing to connect with me. This required me to get comfortable with being isolated, and with being both visible (as the different white face) and invisible (because I had not yet earned the right to be fully included). However, I understood this process in the context of the colonial history binding Māori and Pākehā, which had left Māori distrustful of Pākehā intentions for partnership (Durie, 1998a). My intuitive understanding of these issues and the bigger socio-political picture (which I later explored through academic study), enabled me to surrender and trust the process. As a result, I learned lots of skills that became hugely valuable for working across ethnic difference. I learned how to be quiet and listen. I learned how to hear (by learning Te Reo and tikanga). I became comfortable with being uncomfortable, and I let go of my desire to ‘know’ everything. I learned to live with uncertainty and not-knowing, and became willing to learn *from* Māori rather than *with* Māori. Most importantly, I learned to accept ‘*difference*’ and gave up my fantasy of being ‘one people’ (see Bell, 2014; Huygens, 2011; Jones, 1999), and began to understand the limits of engagement so I could move between connectedness and separateness with Māori people (and other ethnic groups). At times I belonged, and at times I did not, and I understood my identity as flexible and relational. As Wevers (2005) writes, “Pākehā is not a fixed and given category of identity but rather one that exists in the negotiation of the history and geography of the Treaty and their social and economic consequences”.

My Starting Point for this Study

My prior engagement with Kaupapa Māori spaces, as a Pākehā, had a huge impact on my sense of identity and world view, and illuminated how large the gap is between dominant Pākehā norms and Māori norms, and how easy it is for Māori to be pathologized and marginalised through Pākehā systems in education, mental health, social welfare, and criminal justice, as well as the work-place. I began this study, therefore, with the assumption that the high proportion of young people in residence would be of Māori and Pacific Island descent who had been disadvantaged, pathologized, and marginalised in numerous ways.²

² Māori and Pacific wellbeing statistics show high levels of unemployment, high incidences of most diseases, mental disorders, poverty, domestic violence, child abuse, addictions, and suicide, educational crises, and high

My primary assumption was that there was nothing ‘wrong’ with these young people, but there *is* something ‘wrong’ with the society in which they/we live (Kelly, 2006; Robertson & Masters-Awatere, 2007).

I also began this study with the knowledge that the loss of Māori language and culture has been severe, meaning my use of Te Reo and tikanga needed to be undertaken in a sensitive manner that positioned me as a learner (not an expert). Te Huia (2016) notes that Pākehā learning Te Reo may contribute to positive changes in bicultural relationships, because Pākehā heritage-language-learning appears to foster an awareness of racism and discrimination against Māori. However, Hotere-Barnes (2015) points out that “the use and understanding of reo and tikanga Māori by Pākehā is permeated with [both] ethical uncertainty *and* positive potential” (p.49). He suggests “Pākehā must be able to critically discern when, how, and to what purpose we [Pākehā] use Te Reo Māori” (p.49), and notes some Māori are concerned that Pākehā could use Māori language to naively appropriate Māori culture and consolidate power. While I saw the potential of my knowledge of Te Reo and tikanga might support building connections with Māori youth, I knew this was not guaranteed, because not all youth had had access to their own culture and language, and I could not be certain they would view my language ability in a positive light.

I also began my placement with some curiosity about what might have changed in a space that I had previously worked, and while I brought some knowledge from previous experience, I was also in a state of “not-knowing” in the new environment.

The Youth Justice Residence

The Youth Justice Residence (called the ‘residence’ herein) in which I worked was a secure facility in which young people were placed by the Courts. Young people residing there could not move freely around the institution without staff opening and closing doors for them (including the toilets and showers in most cases), and they had limited freedom over what they could wear, what possessions they could keep in their rooms, what activities they could engage in, and who they could be in contact with. However, the young people’s bedrooms

rates of imprisonment (Briars-Brown, 2015; Durie, 2004, 1998a, 1998b; Came, 2012; Barnes et al, 2012; Stats NZ; Wirihana & Smith, 2014; Webb, 2012; Tauri and Webb, 2011). Māori analyses draw attention to historical and structural factors addressing the history of colonisation, historical trauma, and ongoing subjugation of Māori through structural violence (Briars-Brown, 2015; Durie, 1998a, 1998b; McCreanor et al, 2014; Pihama et al, 2014; Robinson and Harris, 2007).

could not be locked (unless they were in danger of causing harm to themselves or others, in which case they were transferred to the secure unit, which had lockable bedroom doors). Youth could reside in the residence either on remand, for an overnight bed, or because they had been sentenced there (for a maximum of 6 months). The residence had an onsite school, which youth attended for five hours per day during the school week, and an extra-curricular programme provided opportunities to be involved sports, arts, and cultural activities. There was a strong philosophy and practice in the residence of advocating for the young person's choice, and providing positive role-modelling, and positive learning experiences. The residence was a government-run institution, however, it had a strong Māori and Pacific presence in terms of staffing and cultural programmes offered onsite. The average stay in residence was between three and six weeks; however, at times it was less than this, and at times significantly longer.

Literature Review

This section includes a review of the literature on the therapeutic relationship and music therapy with youth-at-risk. I also review literature on social justice approaches to music therapy, which emphasise the importance of understanding the context from which participants come, and the impact of power-relationships upon the therapeutic relationship.

The Therapeutic Relationship

The question regarding what makes therapy effective remains somewhat illusive and controversial (Rizvi, 2016). However, despite the existence of over 250 different approaches to psychotherapy, Rizvi (2016) argues that, “The therapeutic relationship is one aspect of therapy that transcends all different forms of therapy” (p.359). Similarly, Asbrand (2012) states that, “the therapeutic relationship stands out as one of the most powerful predictors of psychotherapy outcome” (p.2). Regardless of the techniques used across different therapeutic traditions, the therapeutic alliance is positioned as central within nursing, psychology, pharmacotherapy, and counselling, as well as psychotherapeutic approaches and the arts therapies (Asbrand, 2012; Mirhaghi et al, 2017; Norcross, 2010; Rolvsjord, 2010). Without it, recovery, healing, or improved wellbeing is unlikely to occur.

Bachelor and Horvath (2006) state there is general agreement that the therapeutic relationship is a “working alliance, emphasising the collaboration of the client and therapist in the work of therapy” (p.137). Several factors are cited as important within this alliance. Norcross and Wampold’s (2011) highlight the importance of congruence or genuineness (Kolden et al, 2011); empathy (Elliot et al, 2011); positive regard and affirmation (Farber et al, 2011); goal consensus and collaboration (Tryon et al, 2011); gaining feedback from client (Lambert et al, 2011); and adapting to the needs of the client, including reactance level, stages of change, personal preferences, culture, coping style, religion, and spirituality (Norcross & Wampold, 2011).

The therapeutic relationship is also seen to be transmitted through therapeutic technique (Tufekcioglu & Muran, 2015, p.470). In music therapy, change is facilitated through the relationships between the client/s, the therapist, *and the music*. The role of music, itself, within relationship-building is also discussed. Beer (2011) sees music therapy improvisation as inherently relational - “a spontaneous musical interaction between client and therapist

with specific therapeutic goals". Within psychodynamic music therapy literature, music is seen as a potent force to reach the unconscious, and a number of writers acknowledge the central role that music plays in building the therapeutic relationship (Hadley, 2003; Sutton and De Backer, 2014). Sutton and De Backer, (2014, p.12) talk about the capacity of music to enter directly into the essence of therapeutic experiences, providing a potent therapeutic force, which embodies an inherent quality of relationship. Hakvoorts (2014) writes, "Satisfying musical experiences, ranging from improvisations to singing songs, can establish an alliance between music therapist and client" (p.139). Other writers (Rolvjord, 2011; Mossler, 2011; Solli, 2008) emphasise the potential benefits of music therapy for those who do not benefit from verbal therapy, because of its, "unique motivating, relationship-building, and emotionally expressive qualities" (Mossler, 2011, p.6). Gilbertson and Aldridge (2008) also note that music of people with traumatic brain injury, however miniscule, can "form the basis of developing relationships in the context of shared musical activities" (p.12).

Thus, the clients' relationship with music, the therapist's relationship with music, the client-therapist relationship, and client-client relationships (in group work) are all factors which contribute to the largely non-verbal therapeutic discipline that is music therapy (Rickson, 2016). Further, Asbrand (2012) notes that, "extra-therapeutic client factors have increasingly demonstrated the active nature of the client role in the therapeutic process" (p. 14). The same has been observed in music therapy. Rolvsjord (2016), explores the role of the client's contributions to the success of music therapy, and illustrates the way in which clients are actively involved with moving the relationship toward reciprocity and equality through processes of reflexivity and radical reflexivity.

Differences in approaches to building therapeutic relationships are also likely to be influenced by different philosophical approaches. Bunt and Stige (2014) identify seven philosophical approaches to music therapy, including medical, behavioural, psychodynamic, humanistic, transpersonal, culture-centred, and music centred approaches. Each of these views personhood, motivation, and relationship slightly differently, and is likely to interpret client/participant actions in slightly different ways.

Music Therapy with Youth-at-risk

McFerran (2010, p.26) notes “it has become common in contemporary thinking to understand adolescents as facing unique challenges in relation to their physical or psychological conditions rather than to depict them as older children or younger adults”. As such, adolescence can be a time of significant and rapid change, both physiologically and socially, in which identity-development becomes a primary focus. While this can often be a tumultuous time for many young people, youth-at-risk are faced with more complicated challenges. The term youth-at-risk describes adolescents who engage with risk-taking behaviour during adolescence, such as drugs, crime, sexual promiscuity, and/or who suffer from mental health challenges, such as suicidal ideation, depression, or engage in self-harm, and have often experienced significant marginalisation (Austin, 2007; Camilleri, 2007; Clark et al, 2013; McFerran, 2010; Smith, 2012). This is particularly relevant for young people residing in youth justice residences, who as Daykin et al (2012) note, have complex health and social needs often due to “emotional trauma, violence and abuse, drug and alcohol misuse, peer pressure and gang-related activities, family rejection and lack of structured home environments” (p.198). High rates of learning disability, educational underachievement, and school truancy are also noted with this population (Daykin et al, 2012). Such challenges mean youth-at-risk frequently have difficulty developing and sustaining relationships. However, Urbanoski et al (2012) note that the therapeutic alliance can support a reduction in stress for youth coping with substance abuse. It's also important to note that developing a therapeutic relationship is an ongoing process, rather than just an early treatment task (Shirk & Karver, 2011).

The literature on music therapy with at-risk-youth suggests that music can be a powerful therapeutic tool, which contributes to building a therapeutic alliance whilst simultaneously meeting the needs of identity development that is characteristic of adolescence (Hadley & Yancy, 2012; McFerran, 2010). The bottom line, as McFerran (2010, p.74) writes is that, “Teenagers relate to music. Music plays an important role in society. Musical engagement can be health promoting. And most importantly, music can be fun”. According to Brown and Bobkowski (cited in McFerran, 2016, p.116) adolescents are most likely to use music frequently when they are distressed. However, McFerran (2016) points out that the relationships between music and wellbeing is complex and writes, “The same music can have

a different effect depending on the state of wellbeing of the individual” (McFerran, 2016, p.113). She stresses that processing intense emotions through music is complex and best done within the context of a supportive relationship.

McFerran (2010) identifies four key elements of adolescent wellbeing, which can serve as goals for music therapy – identity formation, resilience, competence, and connectedness. Many techniques are used for working with at-risk-youth, including song-writing, drumming, lyric-analysis, music-listening, music-improvisation, video production, and performance (Austin, 2007; Clark et al, 2013; Faulkner, 2011, 2012; Hadley & Yancy, 2012; McFerran, 2010; Snow, 2010). McFerran also describes different theoretical orientations therapists draw on, and suggests working with teens requires an eclectic approach depending on the needs of the young person. Similarly, Gold et al (2004), conclude an eclectic approach was most useful with children and adolescents with mental health issues. McFerran (2010) describes the role of the music therapist as different from that of a parent or teacher, and says working with teens requires a good sense of humour, an ability to not take oneself too seriously, and a genuine desire to be helpful (McFerran, 2010, p.52). Being able to work with uncertainty, complexity, and messiness is also emphasised by McFerran (2010) who notes, “it is rare to have a firm and confident sense of what is going on” (48). Grief and loss also tend to be part of music therapy with young people, along with the inevitability of returning to one’s own adolescence through supervision and peer debriefing (McFerran, 2010, p.218).

According to McFerran (2010), it is difficult to assess change and development in music therapy with adolescents because young people rarely offer feedback or indicate whether therapy has been helpful, and few music therapists seek client feedback. However, there has been some research undertaken that suggests music can be a successful tool when working with at-risk young people. Data collected by over 2,500 facilitators of *Drumbeat* (a therapeutic music programme developed in Australia addressing peer pressure, feelings and emotions, bullying, and teamwork) shows that many participants experience an increase in belonging and community connection, increased emotional regulation, increased self-expression, focus and concentration, and team work and cooperation (Faulkner, 2011, 2012). Although this is not strictly music therapy, the research nevertheless supports the use of drumming as a therapeutic technique. Research into drumming programmes in Canada also suggests that

drumming can support motivation, assertiveness, participation in groups, release stress and anger, and help build self-esteem and confidence (Snow, 2010).

This literature suggests that therapeutic relationships with at-risk-youth requires understanding adolescence as a stage of development *and* the specific issues facing this population. This also requires a socio-political analysis, because as Asbrand (2012) notes, much of the research into the therapeutic relationship “still overlooks issues of diversity such as gender, race/ethnicity, and sexual orientation, and how they may impact therapist variables and client perceptions” (pp.18,19). Increasingly, music therapists have been calling for a social justice approach to music therapy that acknowledges the power relationships that impact upon the therapeutic relationship, and extend therapy outside of the therapy room into the social context.

Music Therapy and Social Justice

The need to deal with diversity and the broader social contexts in which music therapy takes place has become more common place in music therapy discussions (see Baines, 2013; Cobbett, 2016; Hadley, 2013a, 2013b; Mahoney, 2015; Vaillancourt, 2009). Cobbett (2016) advocates for systematic approach to music therapy, “that emphasises the relational contexts that people live in and sees difficulties as being generated in those contexts rather than residing inside people” (p.65). Hadley (2013a; 2013b) urges music therapists (many who are white women) to address their own identity within music therapy, drawing on critical, feminist, and critical whiteness theories. She writes:

We live in societies in which we are shaped by dominant/subjugating narratives including patriarchy, Eurocentrism, heterosexism, capitalism, psychiatry/psychology, and medical science... These narratives shape how creative arts therapists understand concepts such as therapy, health, and wellness, and issues of identity such as gender, race, ability, and sexuality. (Hadley, 2013a, p.373).

Hadley’s argument is underpinned by the view that it is impossible to split ourselves into personal and professional identities, meaning that we must explore our personhood to pursue a social justice approach within music therapy. She also points out that identity impacts upon the therapeutic relationship, which is particularly pertinent to this study:

It is imperative that creative arts therapists examine all aspects of identity in therapy, not only aspects of the client's identity, but also those of the therapist, and how these aspects of identity impact, structure and mediate the therapeutic relationship (p. 373).

Such discussions illustrate the importance of understanding the socio-political context in which I was undertaking my research and also the many 'hats' one can wear at different times. This is perhaps particularly relevant for music therapists, who often work in larger institutions as part of inter-disciplinary teams where 'other' frameworks and languages dominate (for example medical language in hospital settings). In the Youth Justice Residence, I had to position music therapy within a social work framework for the institution, and I did not emphasise the 'therapy' because of the resistance to verbal therapies that I was told many young people had.

My Assumptions

As a result of my previous experience working with youth in conjunction with the literature, I identified my assumptions about building relationships in this setting.

Assumptions about Building Therapeutic Relationships

- Relationships require mutual trust, respect, and commitment from both parties and an ability to work across difference.
- Group-work may support building therapeutic relationships for young people.
- Developing relationships with youth-at-risk requires patience and understanding of the issues facing this population that may make forming and maintaining trusting relationships complex.
- Building relationships in this context requires careful reflection on the impact of my own identity and cultural practices on the therapy process.
- Some of the ways of working in a Kaupapa Māori context are likely to be relevant in the residence.
- Music, itself, is likely to support building relationships with the young people.
- My perception of relationship is influenced by my previous relational experiences.

Therapeutic Approach

Theoretical Underpinnings

My overarching therapeutic goal was to support the young people to feel more connected to their potential, and more hopeful about their ability to achieve their goals. This goal reflects a strong humanistic approach, which views people as essentially 'ok', and emphasises the importance of having a positive regard for people and helping them reach their full potential (Bunt & Stige, 2014). However, I also drew upon an ecological approach, which views individuals as creative active participants in the context of wider social environments (Bunt & Stige, 2014). Hodgson (2014) notes a relationship between ecological perspective of music therapy and Kaupapa Māori models health and wellbeing. He also states that "music is particularly valuable for its capacity to engage and interact with spiritual or nonphysical phenomenon" (p.96). This idea is central to Kaupapa Māori, which locates the spiritual dimension at the core (Ngata, 2014), and also echoes transpersonal music therapy theories that view people as having a spiritual dimension (Bunt & Stige, 2014). Kahui (2008) also

emphasises the relational aspect of a cultural approach to music therapy, particularly in terms of the importance of the role of Māori elders in making decisions, as well as the use of Māori waiata and haka as important cultural tools within a Māori approach to music therapy. Aspects of behavioural approaches to music therapy were also integrated into my music therapy programme in terms of using music to help develop particular skills to support learning within the broader educational programme offered in the residence.

Therapeutic Practice

My therapeutic practice was based largely around skill-development as well as providing space for energy release and creative self-expression. This was partly because of the nature of the environment in which young people's freedoms were limited, so providing space for energy release was therapeutic in itself. It was also a response to the interests of the young people, who often became interested in the music programme because they wanted to learn the guitar or the keyboard. However, this skills-based approach supported other important therapeutic goals such as listening, communication, concentration, and sequencing, which were significant for some young people, particularly those with brain injuries, trauma, Alcohol Foetal syndrome, or ADHD.

I used a collection of instruments including drums (some large and some small), a range of smaller percussion instruments, a guitar, and a keyboard (which I found onsite). I also brought song sheets and over the year developed a collection of songs – some to challenge and extend their abilities – but mostly based on the preferences of the young people. I was surprised by some of these, which were far more pop-based than I expected. And for the first time ever, I found that Bob Marley had no influence, which was a great surprise!

Group sessions involved various percussive activities, such as call and response, creative add-on games, body percussion, and conducting. Singing pop songs and Māori songs was also a regular activity, as was improvising on percussion or drums, and guitar jams. Individual sessions involved teaching chords on the guitar or keyboard, choosing songs to learn, discussing lyrics, and song-writing. The black notes on keyboard became a most useful improvisation tool for some young people. I also used the guitar to provide beats for vocal and rap improvisation. At times I used structured song-writing (in both English and Māori), either picking a theme, or starting with the strongest feeling in the moment.

Research Question

Primary Question:

- How can I build therapeutic relationships with the young people in a youth justice residence in Aotearoa New Zealand as a music therapy student?

Subsidiary Questions:

- If mutual respect and trust is part of relationship-building, how can I develop this with young people?
 - What challenges or barriers am I encountering?
 - How might I deal with these challenges?
- What impact do other people in the environment have on my ability to build relationships with the young people?
 - What challenges or barriers am I encountering?
 - How might I deal with these challenges?
- How is the music part of relationship-building?
- How do my prior experiences impact upon relationship building?

Methodology and Methods

I chose to engage in *Action Research*, because my question was a process-based question, and action research is a methodology that seeks to improve practice. It also fits with my own position in relation to epistemology and ontology, in which I believe that there are many truths and ways of understanding the world. This approach allows me to investigate my own views and also be critical about them.

Action Research

While different sorts of action research exist (some which are undertaken by groups of people) this study will be a practical action research project, focussed on improving my own practice, in a similar way action research is used by teachers within classroom practice (McNiff and Whitehead, 2006). This was a pragmatic choice because the residence had a level of confidentiality that would have made doing research *with* the young people exceptionally difficult (if not impossible) as a Master's student researcher. However, even practical action research has an inherently emancipatory element, in that the intention is to reveal aspects of my practice that constrain or inhibit my development. As such, the research involves a rigorous investigation into my assumptions and beliefs and how they support or constrain my practice.

McNiff and Whitehead (2006) identify various ontological, epistemological, and methodological assumptions underpinning action research. Firstly, *action* is seen as value-laden, and researchers are transparent about the values they choose to adhere to and how they achieve this. Researchers also view themselves as relational beings within social and environmental contexts who are influenced by, and who influence others and the environment, and have a commitment to inclusiveness. These ontological assumptions counter positivist notions of objectivity, and assume that it is impossible to study social phenomena without influencing that phenomena and being influenced by it (McNiff and Whitehead, 2006).

At the level of epistemology, or how we can know things, action research resists positivist assumptions that knowledge is a static body that can be discovered through scientific methods. Instead, action research views knowledge as uncertain, ambiguous, and collaboratively created. The object of inquiry is not the 'other', but the researchers

themselves. Action researchers are not seeking ultimate knowledge. Rather, they are motivated by the desire to improve practice through collective improved learning. They are not impelled by the need to generalise or replicate research. Instead, they assess their research based on whether they are moving toward the emancipatory goals they have identified (McNiff and Whitehead, 2006).

At the level of methodology, action researchers assume agency is a central component within research. In other words, practitioners of research are seen to have the ability to influence and change the circumstances in which they find themselves. Additionally, the methodology is viewed as unfixed and developmental. Researchers aim to investigate their practice with the intention to improve it, and because of the collaborative view of knowledge, this means that methodology is also collaborative and in a state of constant development of action and reflection, action and reflection. In this way action research embodies an ideal of methodological metamorphous or transformation, rather than finality or closure.

The final assumption underpinning action research, according to McNiff and Whitehead (2006) is the requirement for action research to have a social purpose. This is built on an underlying ontological assumption about human nature – that people have an innate desire to care for and improve their world for themselves and others. In this sense, action research can be seen to be underpinned by an ethic of care.

The Action Research Process

Stige (2005) describes the action research process as a series of collaborative action-reflection cycles. The process starts with establishing values, ideas, and visions that give direction to the work. However, the actual steps taken are a continual cycle of assessment, planning, action, evaluation, and reflection. These cycles can also modify the values and visions that the work was originally formed upon. McNiff and Whitehead (2006) go into some detail to describe the sorts of questions that action researchers need to ask in order to achieve each of the steps of the action research process:

- What am I concerned about?
- Why am I concerned?
- What experiences can I describe to show why I am concerned?
- What can I do about it?

- What will I do about it?
- What kind of data will I gather to show the situation as it unfolds?
- How will I explain my educational influences in learning?
- How will I ensure that any conclusions I come to are reasonably fair and accurate?
- How will I evaluate the validity of the evidence-based account of my learning?
- How will I modify my concerns, ideas and practice in the light of my evaluations?

Data Analysis and Writing

Data for the study was generated through journal notes and supervision notes, which I analysed through *Thematic Analysis* – a “method for identifying, analysing, and interpreting patterns of meaning (‘themes’) within qualitative data” (Clarke & Braun, 2017). This approach is often used with qualitative data and is focussed on producing rigorous and high-quality analysis. It involved investigating the data and identifying patterns pertaining to the question I was seeking to answer in each cycle. Important moments in the data were given a code to describe meaning. Each code was sorted and named, and then resorted and renamed to identify themes. Once the data had been coded and themes identified, I had the task of organising these themes and writing about them. This would naturally guide me to either reflect on the literature I had explored in the literature review, or direct me to new literature. In this way, the analysis process was very organic. Crowe et al (2016) also note that once themes have been identified and named, these need to be illustrated with reference to the raw data, and this involved selecting quotes from my journals that adequately represented each theme. Thus, the writing task involved weaving together my discussion of the themes with quotes from my journals and relating these back to the literature. Through the analysis and writing process, questions emerged organically out of my exploration of the themes, and these became the starting point for the next cycle of analysis.

Ethical Dimensions

At first glance, my study appeared to be low-risk because I was doing a self-study. It was not *participatory action research* that included the input of the young people I worked with. Rather, it was undertaken through my own reflexive practice. However, a large proportion of the staff and young people I worked with were of Māori and Pacific Island descent, and this raised some ethical questions for me around how to ensure that my research was ethically

safe, in terms of being a member of the dominant ethnic group myself, and my commitment to culturally respectful relationships and the two Codes of Ethics that provided ethical guidance for my research.³ For this reason, I believed it was important to include a section in the introduction outlining my prior learning in Kaupapa Māori spaces, which articulated my understandings about working across ethnic difference that might help me build therapeutic relationships with the young people (see Introduction).

The other issue I encountered was accessing Māori cultural expertise, which tends to be positioned as a key strategy to ensure cultural safety in research with or impacting upon Māori communities, and has also been acknowledged as being relevant to music therapy practice in Aotearoa (Kahui, 2008). However, it is not always easy to identify *who* holds cultural expertise in an institution until one has been there for some time, because cultural expertise can be held by other staff members, not just the official ‘cultural advisor’, and respectful relationships take time to develop. The cultural expertise I eventually accessed did not take place until many months into my placement, and was largely about ensuring that my written exegesis met cultural requirements of the institution. Again, this required me to sit with my discomfort.

Additionally, my written work was reviewed by key staff members, and all the names of the young people I worked with were changed to protect their anonymity, as required by the institution.

³ The Treaty of Waitangi is a central part of the Victoria University of Wellington Code of Ethics, and the Music Therapy New Zealand Code of Ethics.

Findings

My findings are presented through three cycles of Action Research, referring back to the literature and introducing new literature. I provide a summary at the end of each cycle highlighting the main points. The subsequent Concluding Discussion Section synthesises the findings from all cycles.

Preparing for Cycle One

The first stage of my research involved identifying an initial question for Cycle One that related to my overarching question – “how can I build therapeutic relationships in a Youth Justice Residence in Aotearoa?”. The question I eventually formulated was influenced by my first month on placement engaging with the induction process required by the residence, which provided me with the following new information about youth offending (since I had previously worked with youth):

- The prevalence of methamphetamine (P) and other drugs had significantly increased for young people (and sometimes their whānau).
- The influence of social media and technology devices had increased, including access to pornography, and other addictive and violent cultural media.
- New youth gangs had emerged, which lacked social and ethical boundaries of the older gangs. This created a competitive element to criminal activity with young people trying to engage in more and more risky and violent criminal activity, and sometimes seeking fame for one’s criminal behaviour.
- The social groups from which many of these young people come had become increasingly marginalised by increased financial instability in New Zealand, in which high living costs, low wages, and immense property prices, characterised the general economic climate.
- Some of the young people came from families who had long histories of poverty, marginalisation, and criminal activity, whose parents also grew up going in and out of prison.

This new information stimulated some anxiety in terms of whether these new trends might make forming relationships with the young people more complex than I’d expected. Additionally, I had to find space to work within the institution in terms of being their first ever

music therapy student, and develop a programme that could be accommodated by the onsite school (which young people were legally required to attend for five hours per day) and which would also meet the requirements for the staff/young person ratio. I also had to consider how to present the programme to the young people knowing that the term *therapy* itself may not be attractive to them. And I wondered whether my being Pākehā would create more of a barrier in terms of forming relationships than I had experienced in the past when I was part of a Kaupapa Māori group, in which I was well respected. This was mentioned by my induction trainers, who stated that although they believed it would be possible for each of us to find something in common with the young people, that this would be more difficult if we were female and/or white.

My first month on placement left me somewhat confused about where I might begin with the young people, and how I might stay open and trust the process, rather than become inhibited by the potential barriers to developing relationships. This led me to my first question for Cycle One – How do I cultivate *beginner's mind* in my practice?

What is Beginner's Mind?

I first encountered the term *beginner's mind* when I was learning karate in my teens, and practicing Zen meditation. It is a Zen Buddhist concept first translated from the Japanese word 'shoshin' by Suzuki (1970). Suzuki writes:

If your mind is empty, it is always ready for anything; it is open to everything. In the beginner's mind there are many possibilities; in the expert's mind there are few". (p.21).

In other words, *beginner's mind* is a way of approaching life as a beginner, regardless of how experienced one is (Demerson, 2013). It asks one to put aside one's beliefs and knowledge and to see things with openness and acceptance as if for the first time. Murphy-Shigematsu (2014) also links *beginner's mind* to vulnerability – "being comfortable with not-knowing, ambiguity, uncertainty, and complexity, and to cultivate awe, wonder, and humility, which deepen rather than diminish our knowledge" (p.399). Thus, *beginner's mind* incorporates the qualities of openness, acceptance and non-judgement, eagerness, being ok with not-knowing, being in the moment, and being process-oriented (rather than goal-oriented).

Why is Beginner's Mind Important?

The qualities of *beginner's mind* are perhaps most strongly present in music therapy through improvisation. However, they also reflect the qualities required to build therapeutic relationships. In my music therapy training, I was taught that music therapists need to be warm, accepting, understanding, empathetic, and trustworthy in their approach to building relationships with participants/clients, and foster openness, curiosity, humility, 'not-knowing', and non-judgement within their practice. I was taught to listen closely and sensitively, be present to participant's experiences, understand and work with their expectations and goals, disclose appropriate personal experience, use non-verbal techniques to affirm and acknowledge clients, and identify obstacles that might block change (Rickson, 2016). The therapeutic literature acknowledges such qualities in fostering therapeutic relationships, including empathy, respect, equality, and collaboration (Norcross, 2011). While these are not the qualities specifically identified as characteristic of *beginner's mind*, they nevertheless all require the qualities of *beginner's mind* to be achieved. For example, one cannot offer empathy and respect without holding a space of acceptance, non-judgement, openness, and being in the moment. *Beginner's mind* can therefore be seen to be a harmonious concept with relationship-building in a therapeutic context, and the use of improvisation in music therapy practice.

Cycle One: Fostering Beginners Mind

How do I cultivate *beginner's mind* in my practice?

Actions

- Introduce the idea of *beginner's mind* to my supervisor.
- Read about *beginner's mind*.
- Create session plans, but leave 'space' for change.
- Prepare the psychological space (through the use of rituals to foster openness).

Analysis

In analysing the first cycle of research, I created codes based on the qualities inherent to *beginner's mind* and the qualities that contradict *beginner's mind* (the *full mind*).

Codes:

Qualities of *beginner's mind*:

- Openness
- Acceptance/ Non-Judgement
- Being ok with not-knowing
- Being in the moment

Qualities of *full mind*:

- Non-acceptance/ Pre-judgement/ "Shoulds"
- Attachment to prior knowledge or experience
- 'Success' versus 'failure' dichotomy
- Goal-orientation

Once I'd identified these codes, I used a deductive approach to analyse the data. I identified five different sorts of journal notes: a) notes about planning for sessions; b) notes where I was recalling what happened in music therapy sessions; c) notes where I was critically reflecting on what happened; d) notes where I was justifying my assumptions about my interaction style in situations of conflict; and e) notes where I was questioning those assumptions. I looked at these to identify in which ways I was cultivating *beginner's mind*, and in which ways I was not.

Findings

My analysis suggested that the practice of *beginner's mind* was supported by:

- Planning for change – being ready to improvise
- Musical improvisation
- Critical reflection and feedback
- Exploring habit patterns

Planning for change – being ready to improvise

The first part of my practice in which I appeared to successfully cultivate *beginner's mind* was connected to planning for group sessions. One of my actions was to create a more 'open' session plan than usual that could allow me to improvise in the moment:

There was an aspect of intuition in planning the second session. I allowed myself to be open to ideas, and drifted into a dreamy space, and then the ideas emerged, and I ran with these, rather than critique them too much. Perhaps this was because I wanted to hold that sense of openness in the planning process too.

I went into these first sessions with a high degree of openness and I sustained this for much of the sessions, responding intuitively to what was happening in the moment. For example, although I had a number of activities in mind and a number of songs printed, I allowed for this to change in relation to what was being offered by the young people.

I adapted the plan to work with the talent and energy the young people offered. Instead of playing the guitar myself during song-writing, I sung over the top of one young man's guitar using the words that he had chosen to describe himself (from the virtues cards), which stimulated some laughter. Although the young people continued to challenge me, I felt like improvising with my voice earned a tiny bit of respect from them.

This illustrates the way that *beginner's mind* was supported by being ready to improvise in the moment, adapting and changing activities in terms of instruments, songs, order and my engagement, and also using *musical improvisation* during activities.

Musical Improvisation

Although I had a number of possible activities in the back of mind in the early sessions (including drums, percussion, and body percussion), I also allowed these activities to incorporate an improvisation element. For example, in one session I started with a call and response on the drums, but as the young people gained confidence this gradually morphed into a free-flow improvisation.

I started with a call and response drum activity (with me leading), and quite quickly the energy and volume increased in the group, and then quite spontaneously the group began to introduce new musical beats and the whole process turned into an improvisation with different members leading calls and responses, and other people doing their own thing.

In this way, I responded to the musical offerings of the young people and allowed what had been a 'led' activity transform into an improvised one with our musical conversations laying the foundations for a therapeutic relationship to develop. Improvisation is a key music therapy strategy in numerous music therapy approaches, but particularly within the psychodynamic approach it is viewed as central to being able to develop a relationship and also access and process trauma.

I also adapted my song-choice based on the contributions of the young people, and rather than sing one of the songs I had brought, I let them sing me a song that many of them knew and liked, which I later learned for future sessions. Improvising musically, and improvising in a broader sense, was an important part of sustaining a beginners mind, and also seemed to contribute to building a therapeutic relationship with the young people.

Critical Reflexive Inquiry

Aspects of both *beginner's mind* and *full mind* were present in some of my critical reflections of group music sessions, my planning sessions, and my reflexive process around my assumptions. This was because I was seeking to improve my practice, which is goal-oriented by nature and underpinned at times by a desire for 'success' or a fear of 'failure':

One of the main things I need to work on in terms of trying to foster a democratic therapeutic space is inviting response from the young people. I know this will take time because this is a part of building trust, and they are so enculturated by a system that expects them to go along with what is asked of them (rather than negotiate the boundaries) and that it is right out of their comfort zone to be fully engaged in a co-creational sort of way. However, I think I might be avoiding inviting their input, perhaps because of my fear of chaos, and heeding the advice of staff that I need to be in charge... Staff had directed me to set really clear boundaries and use the standard behavioural tools [to provide consistency of practice] and to let the young people know they can't 'walk all over me', and put a stop to challenging behaviour really quickly because in their experience things can spiral out of control quickly [when young people don't what is expected of them] which then becomes a safety issue for everyone. And I not only need to develop relationships with the young people but also the staff, so I think I've been unconsciously wanting to demonstrate my capacity to be in charge to the staff, in order to gain their trust and support as well.⁴

⁴ The square brackets indicate where my clinical liaison extended my understanding about the guidance offered by staff.

In the above excerpt, I had a secondary goal to build trust with staff, and I reflect on how this impacted on my facilitation of the group session. However, I still investigated my practice in a way that embodied qualities of *beginner's mind*, including openness and being in the moment in the reflective process.

Exploring Habit Patterns

The strongest aspect of my practice that did not reflect *beginner's mind* was connected to unconscious philosophical assumptions that underpinned my confrontational conflict style with young people during challenging moments. I hadn't identified these in my action plan, and these assumptions remained unconscious during my practice and were only revealed through a process of critical inquiry. Initially, I justified my communication:

My assumption is that confrontation is the dominant conflict style of these young people, and they will connect with me more quickly if I'm able to communicate with them in that style at least some of the time, and they want to see my capacity for this because this is how they determine what boundaries they are operating within and how safe they are. My assumption is once they see my ability and willingness to speak that language and I'm not scared of speaking that language, then they will be able to relax and open up to another possibility for communication. My intention is to speak that language as little as possible. However, I believe that I should be ready to speak that language when I sense it is needed.

I later critique this assumption:

It's become really clear how attached I am to my habit patterns and how I can easily justify them as valid within this context of a youth justice facility. However, it's also clear that there is another way, and this process has helped open me up to that possibility. I don't need to abandon my default strategy – it will always be there. However, if I'm to develop as a person and practitioner, I need to be open to something else.

What's important here is my reflexive inquiry was stimulated by my discomfort in response to discussions with supervisors and colleagues. This would suggest that critical feedback from others, combined with critical self-inquiry (particularly of discomfort), are helpful in fostering *beginner's mind*. Without an ongoing rigorous exploration of my habit patterns, it would be difficult to be open to something new emerging in my practice. In other words, letting go of my beliefs, theories, and assumptions requires me to know what these are in the first place, and this requires a personal inquiry.

I later wondered if there was a cultural element involved with my habit. Although my personality traits are not a particularly good fit within dominant Pākehā norms (particularly as a woman) I wondered if my assumption that the young people had confrontational conflict styles was a reflection of racial stereotyping. Only a few young people were confrontational with me, and there appeared to be a diverse range of conflict styles among other young people. I also wondered if I was overlooking the impact of the residence, which often stimulated stress and anxiety for the young people (e.g. waiting for court dates, being separated from family, coping with past trauma). I also questioned if I was intuitively responding to my previous experience of group work with Māori and Pacific communities, and the expectations around leadership. Diaz (2003) discusses her social work training in group-work as being dissonant with her values and beliefs as an Asian-Pacific woman. She ascertains that Asian-Pacific peoples expected group leaders to be directive and in control, whilst also being warm and non-confronting. She argues that exploring feelings, addressing conflict, and being expected to spontaneously offer ideas can make Asian-Pacific group members extremely uncomfortable (Diaz, 2003, p.46). I wonder if my *taking charge* was me trying to meet this expectation for firm leadership.

Summary

My analysis of Cycle One data suggested that the practice of *beginner's mind* was supported by planning for change, using musical improvisation, and engaging in reflexive practice, which supports the literature on building therapeutic relationships. Cycle One also illustrated the impact of my perception of staff expectations on my approach to the young people, as well as the powerful influence of my prior experiences and habits. My tendency to privilege 'hardness' over 'softness' during conflict was particularly interesting, because for some years I've been studying a system of self-development, called the Enneagram, that aptly describes this aspect of my habitual reactions.

The Enneagram has been developed from a combination of ancient knowledge and modern psychology illuminated through a geometric figure that shows nine fundamental personality types and their complex interrelationships (Riso & Hudson, 1999). The system identifies strengths and weaknesses of the personality types and offers a path for personal development by identifying specific habits that each personality type is prone to, and the actions that will allow them to develop and flourish.

In the Enneagram system, I identify with the archetype commonly described as the Challenger or Warrior. People who resonate with the Challenger archetype tend to approach the world as if it were a challenge or battle-ground. They possess courage, assertiveness, and decisiveness, and they lack gentleness, patience, and tact. They find it difficult to be vulnerable, and their approach to life's challenges is to 'toughen up'. They seek intensity and are known as rugged individualists (Riso & Hudson, 1999). I also identify with the Peace-Keeper or Healer archetype (to a slightly lesser degree). This sub-archetype is prone to experiencing heightened sensitivity to other people's needs and psychic energies, and can withdraw into creative, fantasy worlds. The combination of these archetypal characters results in a personality that swings between keeping the peace by meeting other people's expectations of them, or overtly challenging the status quo in support of social justice. This has always been difficult for me to navigate, because I can feel internally torn. However, when under pressure, I tend to default to the Challenger archetype, particularly in situations of conflict.

After a classroom discussion, I became aware that my Challenger default pattern was determining some of my interactions with young people, and I began to wonder how I might interrupt this habit. Recently I've become interested in Taiji, which is a defence system that uses softness to overcome hardness, so I knew there was another option that contrasted my default 'hard' approach. I wondered if I could risk trying this in my music therapy practice even in challenging moments (in which I usually default to 'hardness'). For example, where I might habitually become louder to gain attention, perhaps I could explore using silence, stillness, and quietness instead. This led me to my question for cycle two.

Cycle Two: Exploring Softness in Challenging Situations

How can I explore *softness* as a new option in response to conflict or challenging situations?

Actions

- Explore literature on habits.
- During challenging clinical moments, try the following actions:
 - Hold the intent to explore softness.
 - Sit with my own feelings before responding.

- Ask a question about the young person's needs.
- Invite group involvement in finding solutions.
- Continue to engage in reflexive inquiry:
 - Identify the beliefs and assumptions that are part of my habit pattern.
 - Pay attention to my feelings and needs (particularly fear and vulnerability) in my journal.

Analysis

I used an inductive approach to analyse the data from Cycle Two. Firstly, I investigated the data by asking further questions about it, and from this I identified three significant themes:

- Changing habits is sometimes uncomfortable.
- My habitual responses are deeply embedded with unconscious beliefs and assumptions.
- Changing habits requires ongoing practice.

These themes indicated five potential strategies for developing softness in my approach to challenging situations:

- Understanding the nature of habits
- Paying attention to discomfort
- Engaging in reflexive inquiry
- Identifying unconscious beliefs and assumptions
- Preparing for the ongoing work of interrupting habits

Findings

Understanding the Nature of Habits

The literature on habits emphasises how illusive habits are and how difficult it is to identify them and change them. Vago (2013) explores the connection between Buddhist approaches and modern psychological approaches to habits of mind (or biases), which are viewed as the source of suffering in the Buddhist tradition that reinforce a distorted perspective of reality – past, present, and future. Vago (2013) argues that developmental psychiatry views habits in a similar way - as “enduring cognitive structures and schemas of the Self and world-view”, and “persistent negative feedback loops of negatively-biased constructions of experience” (p.

29-30). These feedback loops lead to errors in interpretation, such as overgeneralisation, selective abstraction, and personalisation, and the reduced possibility for positive interpretation of experience (Vago, 2013; Aich, 2013).

In an academic analysis of habits and addiction, Fraser et al (2014) conclude that habit is more than something humans do as they go about life, but that it “constitutes the nature of reality” and is what makes humans human (p.235). They write,

Realities “must be repeated if they are to hold stable, to become and stay real. We must do them over and over – we must addict ourselves to them if they are to appear to make a stable world filled with stable objects. This stable world and its stable objects are reciprocally dependent on us to enact them through repetition. We could conclude, then, that all reality is addiction. But we would prefer to say all reality is habit” (Fraser et al, 2014, p.235, 236).

The difficulty with habits, however, is the process of doing them over and over means we engage with them unconsciously and automatically. If indeed habit constitutes reality, as Fraser et al (2014) claim, and if some habits cause suffering (as is the case with addiction), how can we change such habit patterns when they are, by nature, so difficult to see?

I encountered this illusive quality inherent to habits during Cycle Two. For example, the data showed that I was still using language that reflected my habit pattern despite my intention to try something different:

I didn’t call Te Ata over [who was sitting away from the group], because I didn’t want to start the group with a confrontation. I could sense him almost calling me into confrontation but I chose to not engage with it as I’d done the week before.

Nelly paced the room and tried to take control of the space using a loud voice, sitting on my resource table, coming and going from the group. I did not want to step into a confrontational space with her quickly. When she sat on the table behind me, I felt anger rise up in me. I wanted to ‘bite’, or ‘take the bait’.

In both situations, I was unconsciously viewing actions through the lens of power and control, and interpreting the young person’s behaviour as being a personal challenge toward me. In truth, their behaviour may have been stimulated by all sorts of events (a bad sleep, receiving bad news, wanting to impress peers, anxiety about a future event etc). It also may have been an attempt on Nelly’s part to de-centre me as a Pākehā person and re-centre Māori youth culture. She was a fluent Māori speaker, and on another occasion, she’d spoken in Te Reo

about me (whilst I was in the room) to the Māori teacher, as if to determine how much language ability I had, and simultaneously let me know that I was *not* included. Had I been connected to any of these other possibilities, I might have responded differently to Nelly. However, my interpretation she was doing something to intentionally annoy *me* by disrupting the group, naturally stimulated anger in me. Had I interpreted her behaviour as being motivated by a need for help or support or a desire for action, or an attempt to de-centre me as the 'Pākehā authority', it is likely that another emotion might have been stimulated in me, such as compassion or curiosity. However, I interpreted the situation through a personal lens and when anger was present in me, I was unable to stay connected to the *soft* approach that I had hoped to stay open to.

I sat with my frustration for a moment until it subsided a little, and then asked her to get off the table... However, I was unable to resist a confrontational approach [or the potential for confrontation]... The feelings were too strong, and I was too caught up in my own interpretation of her behaviour, and I didn't have the ability to figure that out in the moment.

I also failed to see challenging moments as an opportunity for the whole group, despite my intention to engage the group in my action-plan. This illustrates the strength of habits, and the way in which the beliefs that underpin them are activated unconsciously:

The funny thing about this is I've had numerous experiences that contradict these false beliefs and show that gentleness works in many situations. However, I still default to this overly assertive pattern, particularly when under pressure. That's how strong habits are, especially when they're deep within the personality structure. I mean I think these thoughts have been present since I was a small child.

In understanding the complexities involved with habits, noticing discomfort revealed itself as an important strategy for interrupting habits.

Paying Attention to Discomfort

Discomfort appeared to be inherent to the experience of trying to change my habit pattern, and instead of experiencing a sense of achievement and relief in response to the actions I'd decided to take, I mostly experienced disappointment and dissatisfaction:

It felt uncomfortable to deal with the scattered energy in the room. I found it difficult to hold the space, and stay connected to everyone when they were sitting far apart

from one another and some walking around. I wanted to support the group to 'come together', to be synchronised. I didn't like the disconnectedness.

In lots of ways these groups were less satisfying for me personally because of the scattered energy in them. Although I gave myself more space to feel my own feelings before responding in a couple of situations, I was left wondering what had happened in the sessions. I allowed the sessions to be more scattered and less contained than all the previous sessions. And at one level this felt good [because it was one of my goals]. But it was also scary. I felt afraid that the staff would criticise me for not containing the groups better.

Discomfort was the topic of my previous Master of Arts thesis, in which I concluded that being unsettled and uncomfortable is a crucial aspect of critical transformative education (Williams, 2007). The findings of Cycle Two support this idea, and discomfort can be seen to be a valuable catalyst in changing habits. Paying attention to my discomfort effectively resulted in me engaging in further reflexive inquiry.

Engaging in Reflexive Inquiry

Looking back at my journal and thinking more about my awareness allowed me to gain clarity about my habit pattern. In other words, *reflecting on my reflections* helped reveal the beliefs and assumptions underpinning my actions. Without such an analysis, it would be difficult to identify clear future actions to establish a new habit. This is what Rennie (2007) calls *radical reflexivity*, which he defines as “awareness of self-awareness” (p.53), and which he argues is what allows one to make decisions about the next step in a process of self-inquiry. For example, in noticing my discomfort, I began to ask questions about it:

What I can see is my underlying sensitivity, or over-sensitivity, and a need to protect myself from being overwhelmed. I can also see my lack of clear boundaries between myself and others, and a lack of trust in others. My tendency to set hard boundaries is a self-protective mechanism.

I have a judgement about indirect expressions of power, and feel more comfortable around direct expressions of power or direct negotiations about power. At the core of this lies fear of my own powerlessness and vulnerability, and fear of betrayal and persecution. When people express power indirectly, I immediately interpret this as a betrayal of some sort. I think, they are no longer 'with me' so they must be 'against me'. I fail to see that they might just be really scared of being direct. I think they are consciously undermining me out of a place of disrespect. I associate directness with respect, and indirectness with disrespect. This sets me up to see the other person as not meeting my need for respect when this may not be the case at all. Rather, they

may be indirectly seeking my support to get connected to their own needs, or they may fear that they will not get what they need if they are direct.

Thus, through a combination of observing my discomfort and engaging in reflexive inquiry I identified aspects of my habit pattern in more detail and explored the false beliefs underpinning my habit pattern of *hardness* in challenging situations.

Identifying Unconscious Beliefs and Assumptions

My reflexive inquiry (largely stimulated by discomfort) allowed me to identify a number of beliefs embedded within my habit pattern:

- “I’m unsupported and I have to do it myself”
- “Something bad will happen if I show my vulnerability”
- “Feeling powerlessness and helplessness doesn’t get anywhere”
- “I have to ‘toughen up’ to get through life”
- “There are winners and losers”
- “Directness is better than indirectness”
- “Confrontation is better than passive-aggression”
- “Things are good when they’re intense”

These beliefs culminated in two key tendencies in my work:

- The tendency to view challenging situations through the lens of power and control (rather than needs).
- The tendency seek intensity and use this as a measure of success.

Viewing Challenges Through the Lens of Power and Control

As afore mentioned, the language I used to describe challenging situations reflected my attachment to interpreting situations through the lens of power and control. I become quickly irritated with people’s expressions of emotional desperation or powerlessness, which reflected my discomfort about my own feelings of powerlessness. According to Riso & Hudson (1999), the Eight personality struggles to be vulnerable, and they describe Eights using terms such as powerful, domineering, self-confident, decisive, wilful, and confrontational. They argue that Eights have an underlying fear of being controlled, and write, “Eights get the idea that it is not safe to be gentle or giving. These attitudes feel ‘soft’ and ‘weak’ and in their minds only invite rejection, betrayal, and pain” (Riso & Hudson, 1999, p.291). Eights try and

protect themselves from such experiences by ‘toughening up’, and they become overly assertive and potentially aggressive:

I was afraid that the young people would see me as weak, and I wondered if they felt let down in some way, because I was less driving and motivating than in previous sessions.

I was also triggered by situations in which an individual asserted themselves in an indirect or passive-aggressive manner, for example, when someone ignored a request I’d made or acted in a way that contradicted an agreement without negotiating this directly with me. This also appears to be a characteristic of the Eight personality type, and Riso & Hudson (1999) note that Eights find it very difficult to deal with indirectness, and “have difficulty understanding why others are not as forthright as they are” (p.303). When the young people tried to get their needs met indirectly, I interpreted this as a ‘power play’ – that they must be “against me” if they were no longer “with me”, and Riso & Hudson (1999) note that Eights tend to interpret other people’s actions as betrayals. As such, my interrogation of the data revealed an unconscious belief that the young people were ‘undermining’ me out of a place of disrespect, indicating a belief that correlated directness with respect, and indirectness with disrespect. This prevented me from accessing a different view of the situation – which was that the individual may have been trying to meet their needs and that they may have not known any other way to do this other than indirectly (Rosenberg, 2003). This may have a negative consequence in terms of working across difference because I could view young people’s attempts to express their individuality and cultural traditions as personal challenges.

This tendency also illustrated how my awareness of boundaries became blurred. In both situations, I interpreted certain behaviour as directly connected to me, when this was only one of many options that may have been motivating the young person. This is important in the context of building therapeutic relationships, which requires an awareness of therapeutic boundaries and counter-transference experiences. In these challenging situations, I placed myself at the centre of the other person’s experience, which was quite possibly an experience of countertransference of the adolescent experience so often characterised by a heightened awareness of self. Hayes et al (2011) state that managing countertransference promotes successful therapy, and they encourage therapists to address their counter transference in their own therapy or clinical supervision.

Seeking Intensity

The other characteristic of my habit pattern revealed through reflexive inquiry, was that of seeking intensity. When I sat with my feelings instead of engaging with the conflict, the group became disconnected, chaotic, and unintegrated, and this was uncomfortable. When I explored my discomfort, I realised I'd interpreted the lack of cohesion and togetherness in the group as a '*failure*'. This further revealed an unconscious assumption about what '*success*' ought to look and feel like.

I did not feel enlivened in myself, and I guess I interpreted this at some level as a failure. Now that's interesting to look at because I must unconsciously interpret success as being connected to feeling good (or feeling strong positive emotions). But of course, that's not always true. Sometimes I've been successful in something and it's just been jolly hard work. Perhaps what I'm seeking is the experience of 'flow' - those peak moments where everything seems connected and in harmony.

This helped me realise I correlate success with cohesiveness, connection, intensity, and flow, and I associate disconnectedness and disintegration as failure. However, while cohesion is identified in the literature as an important factor in determining therapeutic outcome, which group leaders ought to foster, Burlingame et al (2011) point out that cohesion is strongest when the group lasts for 12 or more sessions. This locates cohesion within a process that develops over time. However, my *attachment* to cohesion neglected to see it as a developing factor in group dynamics. In other words, I attributed the lack of cohesion as a failure on my part, rather than a valuable part of group process.

In reflecting on this, I saw other experiences in my practice where *intensity* was motivating my action. On one occasion, I encountered a time-table clash and had to problem-solve in a short space of time to find a way to attend an individual session. As I did this, I noticed myself striding across the courtyard with great purpose, and observed a sense of thrill in my body. I felt alive and energised, like I was 'meeting life on life's terms'. This reminded me of past work environments that were extremely intense physically, emotionally, and mentally, in which I'd work for many months for up to 20 hours a day, with no breaks. I have the capacity to push my body and mind extremely hard, and again these traits are classic to the Eight personality. As Riso & Hudson write, "Eights are extraordinarily tough and can absorb a great deal of physical punishment without complaint" (p.290) ... "Eights have enormous willpower and

vitality and feel most alive when they are exercising these capacities in the world. They use their abundant energy to effect changes in their environment” (p.289).

While these traits clearly have a positive expression, my privileging of the qualities of cohesiveness, connection, and intensity, over disconnectedness and disintegration may also have a negative consequence on my practice and my ability to establish positive relationships, particularly in a group setting. All these qualities are natural cycles within group process that are neither symbolic of success or failure, but are stages within group process. Malekoff (2014, p.62) summarises stages of development groups go through, including establishing trust, creating structure, establishing power relationships, testing the limits of the group, bonding more closely, working together as a whole, resolving conflicts, making group decisions, and then going through separation issues in preparation for the group ending.

Preparing for the Ongoing Work of Disrupting Habits

In seeking to lay the foundations for a new habit pattern, I began to ask questions that would prepare me for the ongoing practice of interrupting my habits:

How do I foster or cultivate acceptance of my own sense of powerlessness or vulnerability in a real way? How do I feel this in myself safely, and bring this into the therapy space? How can I be with other people’s emotional expressions of powerlessness and vulnerability with more comfort and acceptance? How can I disentangle myself from their experience so that I don’t place myself inside their experience? And how can I interpret other people’s expressions of indirect power differently?

While I was pleased with some of the changes I’d made, I was also aware that more work would be required:

I felt like I held my own energy in those situations better than I’d done in previous sessions - like I was able to contain my own space better and not get so carried away into the intensity of the young people’s energy. But also feel like it will take a lot of work to achieve this consistently... This feels like a good thing to work on in myself – how to stay centred in amongst disconnectedness and scattered energy.

Here, I identified a future goal – *to stay centred in amongst disconnected and scattered energy*, but I imply this will require ongoing work. This idea that changing habits requires ongoing practice is supported by the literature. Aich (2013) and Vego (2014) argue that Buddhism and modern psychology share approaches to dealing with the problem of negative

habits, which are the primary focus of meditative practices and mindfulness techniques in both traditions. Mindfulness practices involve cultivating a conscious habit of paying attention to the present moment with acceptance. This act of presence allows one to see one's unconscious habits that create suffering more clearly (attachment, craving, hatred, denial; and engagement with wrong thought, speech, or action) (Vago, 2014). Similarly, Riso & Hudson (1999) acknowledge the process of interrupting negative habit patterns as a lifelong process of self-development.

Summary

Cycle Two illustrates the way in which my habits provide the lens through which I see the therapeutic process, particularly in a group setting. It illustrates the challenges involved with disrupting habits because of their illusive nature, and illuminates the value of exploring discomfort and engaging in reflexive inquiry to reveal the beliefs and assumptions embedded within habitual reactions. Practices that incorporate mindfulness, radically reflexivity, and feedback are likely to support me to investigate my biases and habits in an ongoing way, which is a life-long journey that requires dedication and commitment. This supports the literature on habits, and confirms the idea inherent within social justice approaches to music therapy (Hadley, 2003a, 2003b) that I cannot separate my personal and professional worlds and that what I bring to the table in terms of my personal and cultural habits has a direct impact on my relationships in this setting. This links to one of my subsidiary research questions about how my prior experiences impact upon relationship-building. My habitual attachment to intensity was particularly interesting, because it prevented me from staying connected to the developmental stages of the group process. This led me to my question for Cycle Three, and I became curious how I might create more space for quality of non-intensity in my work.

Cycle Three: Creating Space for Non-intensity

How can I create more space within my music therapy practice for the qualities of non-intensity, such as patience and spaciousness?

Actions

- Identify patterns of intensity and non-intensity in my music therapy practice.
- Reflect on these patterns, paying attention to underlying motivation.

Analysis

I used an inductive approach to analyse Cycle Three data, identifying codes reflecting the patterns of intensity and patterns of patience/spaciousness, and noting my motivation underpinning my actions.

Patterns of Intensity

Intensity manifested both during and outside of music therapy sessions.

- Being assertive and directive when I sensed the energy was stuck, conflicted, or chaotic
- Raising my voice or using dynamic physical action
- Ignoring or avoiding time-frameworks
- Moving intensely and quickly around the institution
- Avoiding taking breaks
- Avoiding preparation and planning

Sometimes my intense actions were underpinned by positive motivations, such as a desire to encourage participation and guide the process:

The main ways I noticed my assertive energy in the individual sessions was that I made clear suggestions for what we do at various times, mostly when I sensed the participant was uncertain about what they wanted to do. So, I would offer an activity with quite a bit of [decisive] energy in my body and voice.

I was also motivated by the need to ensure safety in terms of institutional requirements:

I stood up and raised my voice saying "taihoa" [wait] and established an agreement that people didn't come and take an instrument, but that I'd put them in the middle of the circle, and then they could take one. This is a safety measure to reduce the potential

risk of things getting out of control or being moved without my knowledge [which affects the resource count at the end of the session].

At other times, my use of intensity was motivated by my desire to support the cohesiveness of the group, but this meant I didn't allow enough time at the end of the session for completion, which resulted in things becoming intense and rushed:

I didn't track the time very well, because I didn't want to interrupt the group when they were experiencing some flow, but this meant that I lost time at the end of the group to bring it back together.

On another occasion, my use of intensity was the result of becoming overwhelmed and losing perspective of my role as the 'therapist', and struggling to stay centred and grounded in relation to chaotic, conflicted, or stuck energy:

During the song, things became particularly chaotic, and I raised my voice – and thus contributed to the chaos.... I became immersed in the chaos myself, and there were lots of different things going on in the room, and lots of information coming in that I was receiving, and it was difficult to process all of that, yet at the same time I wanted to keep the group focussed on the activity. So, in a way I was resisting the chaos or trying to contain it, but also becoming a part of it at the same time, and was unable to surrender to either approach.

The last motivating factor in relation to intensity within music sessions was my concern about other people's expectations. In some group sessions, I found myself wondering if the teacher (who was present as a support person) was feeling annoyed with the degree of chaos in the room and expecting me to be more assertive and proactive:

In group sessions, I feel this expectation (whether real or not) to get things moving and 'give' people an experience. However, this sounds like teaching, not music therapy facilitation. I think I underestimated how much I was affected by my perception of unspoken expectations of other staff and the teacher. I was aware at times that one staff member seemed uncomfortable with the chaos, and I suspected this might be because they expected me to be more 'in charge' because this is perhaps a more common teacher approach in the classroom.

While I can't be sure if this was an accurate experience of the teacher because I didn't check this out, it illustrates my use of an intense strategy as a reaction to my interpretation of their expectation.

I also identified three intensity codes that took place outside of music sessions. The first was the tendency to move intensely and quickly around the institution.

I tend to stride in a purposeful way. When I encounter certain people who I sense want to ignore me, I say 'hello' or 'kia ora' quite loudly. At other times, I put my head down and just focus on what I'm doing. So, I move between two interactive styles – either an animated, slightly cheeky, and challenging, or insular and withdrawn. It seems hard for me to find a middle ground where my energy is both contained and connected with others. I swing between being over-responsive and under-responsive. And interestingly, both these positions seem to have a certain intensity to them.

This tendency to move quickly and intensely was accentuated by my use of coffee:

Coffee also has a big impact on this. When I'm tired, I use coffee to energise me, but its false energy. My body gets hyped and slightly speedy and jittery. I have an ambiguous response to this experience. One part of me likes the intensity of the body-buzz. And the other part of me doesn't enjoy it because I feel ungrounded and uncentred.

My use of intensity also manifested through a tendency to avoid taking breaks, which was partly influenced by logistical factors:

I have to set up the space before sessions, which takes time, and I have limited times in which I'm able to do sessions. This reduces the time I get for morning tea breaks and lunch breaks by half.

However, my tendency to avoid taking breaks was also underpinned by my natural learning-style and work-style preferences:

I don't take breaks because I'm working on something and I don't want to stop because I'm enjoying the process and I want to finish it. I like the feeling of working continuously and prefer to stop when my energy comes to its own natural ebb. My natural energy seems to enjoy long periods of sustained work, followed by long pauses for integration and reflection (rather than short bursts of work and short breaks). In this way, I'm a natural immersion learner. However, this style of learning and working does not necessarily fit well in an institutional environment, and it can mean that I burn out because I don't end up getting enough opportunities to break in order to reflect and integrate.

My avoidance of taking breaks was also underpinned by discomfort with vulnerability and intimacy:

One thing that comes into play is my social phobias or difficulties being able to relax with other people. My primary experience of relaxation is when I'm alone, so I'm not drawn to want to take breaks when I'm around people because I don't achieve the purpose of the break. So, I tend to avoid having breaks when other staff members are taking breaks for this reason (except just to eat and go straight back to work).

The last factor that contributed to manifesting intensity outside the music space, was the tendency to avoid preparation and session-planning processes.

There's definitely some sort of resistance in me to session-planning – perhaps partly because I've never been a particularly successful planner in that my plans don't usually seem to go to plan because life seems to be filled with unexpected interruptions, and partly because I don't want to set myself up to get attached to 'the plan', but want to be responding intuitively in the moment so that I can be present to what is happening now. And partly because I often come to planning at the last minute without a lot of energy, but this is a weakness so it takes me a lot of energy.

Patterns of Patience and Spaciousness

I identified four patience/spaciousness codes in Cycle Two data:

- Demonstrating a different energy when I want to change what was happening
- Pacing myself
- Being patient and spacious in response to stuck, conflicted, or chaotic energy
- Moving fluidly between assertive and receptive states to contain and support

Like patterns of intensity, patterns of patience and spaciousness occurred both during and outside of music sessions, and were motivated by both positive and negative factors.

Some of the patience/spaciousness patterns I identified illustrated the way in which Action Research continuously influences practice, because they arose in direct response to my reflexive inquiry into the patterns of intensity I'd begun to identify. One example of this was demonstrating a different energy when I wanted to change what was happening, instead of directing that change in a more assertive manner:

I felt positive about the way I dealt with facilitating moving from noise to silence. Instead of just raising my voice, I asked the group how we could get silence when it was too noisy. One person suggested yelling "shut up", and I said I didn't want to get a tired voice, and suggested a couple of alternative ideas and the group agreed that waving both hands in the air wiggling fingers would be the "quiet signal." ...I felt good

trying a more gentle way to facilitate silence, rather than a loud or physically dramatic one that added to the chaos and noise.

In the above example, self-care was a motivating factor (caring for my voice, and everyone's ears), as well as a desire to include the group in creating group boundaries.

The next patience/spaciousness pattern I identified was in response to stuck, conflicted, or chaotic energy. Again, this illustrates my practice developing in alongside my research:

Tania had not wanted to play any instruments other than the drums in previous sessions, but this time she asked to learn some chords on the guitar. She really struggled with this – much more than I had expected her too – perhaps because she is so assertive verbally and takes lots of risks with her voice, although I could see that she was probably avoiding doing something she felt less confident in, so it was quite a risk to try something completely new that she really struggled with. I also wondered about whether she might have some hand-eye coordination issues, and I had to be very slow and patient with her as she struggled placing her fingers on the fret-board. It was not at all comfortable. There were long silences and the absence of our usual assertive banter felt strange. However, my being with her patiently as she worked seemed to deepen our connection, and at the end of the session, I suggested “we” do an improvised song about her anger at her ex-boyfriend who she’d just broken up with, and she did this fearlessly, improvising lyrics for at least five minutes without stopping, which really surprised me, and I got the feel that my patience helped her feel that I was really with her and that helped her be more open vocally too.

Being patient was also a significant positive influence in a session with Jake.

In previous sessions with Jake, I would often become confused about how to deal with his broken focus and indecision (which is probably a reflection of my fear of indecisive stuck energy), and I think I would generally react with assertive energy too quickly for him. However, in this session I was more patient and accepting of Jake's indecision. I sat back, and in doing so created space for him to feel his own energy more. When I asked what he wanted to do, he said guitar and keyboard. I checked about the drums and he said “no”. However, a little later he requested we do some drums and he had a really good time doing this, and demonstrated some very good decision making while we were playing drums together, both taking the lead and creating drum and percussion patterns while I played the guitar. So, I feel like this was a significant positive step for me in sitting with the stuck indecisive energy with more acceptance and patience, and the positive things that came from that, in terms of what Jake offered in the session.... And I sensed that my relaxation and patience gave him much more permission to express himself both verbally and musically, and that he took some risks that he had not previously taken. Perhaps this was also about the relationship

developing... there are likely to be many contributing factors, but I sense the way I positioned myself in response helped in some way.

In this situation, I was connected to Jake's needs and my own simultaneously, and this seemed to allow me to be spacious and patient in response to his indecision. Another example of this happened in an individual session with Shane, who I'd experienced being very distracted in group sessions:

Working with Shane was interesting in terms of how different he was in a one-to-one situation compared with the group. In the group he was hyped-up and intense. However, in the individual session he was focussed and concentrated, and I was more able to get a glimpse into what might be motivating some of his behaviour. In the group, he would often change instrument quickly, and he seemed to find it difficult to sustain any activity for a period of time. In the individual session, I also saw the potential for this arise at times, and he would start to look as if he was going to quit and say, "this is too hard". However, he never let me know that it was too hard in the group sessions, and I realised that his chaotic energy might have been due to feeling despondent about being able to achieve what we were doing as a group, but being too ashamed to acknowledge this struggle. In the individual session, I was able to interrupt this pattern of giving up on himself very quickly when he found something difficult, and I gently supported him and encouraged him to keep going, reassured him he could take his time, reminded him that he was learning something new that took a lot of concentration, and then reflecting back to him afterwards that he had achieved what he set out to learn, and that perhaps he doesn't need to give up on himself so quickly. This created a much more relaxed connection between us. Shane seemed to soften and be more open to my input and encouragement, and smiled when I affirmed what he was doing.

While the above excerpts demonstrate patience/spaciousness as a response to my development as a practitioner in response to my research, in other situations it was my confusion, discomfort, and tiredness that motivated this approach. Effectively, I became patient/spacious because I was stuck and I didn't know what to do:

I stepped back and allowed the group to be in considerable chaos, and attempted to mirror and match the play of various individuals, and support their choice of activity. I think I did this because I was tired and struggling with a sinus infection that had not fully cleared up. I also hadn't made a very clear session plan (again because of tiredness). I also sensed chaos might be an important part of the group process, and that it was better for me to allow this to happen.... I chose gentle approaches because of my exhaustion, and because the hard approaches were not working, and because I

was confused about how to proceed because the young people's behaviour was so different from their individual sessions.

The final patience/spaciousness pattern I observed was moving fluidly between assertive and receptive states to contain and support. This was also motivated by a simultaneous connection with myself and the participants. In these moments, I used my assertive energy to initiate an action, and once the activity has started, I used my sensitive empathetic energy to support in a much gentler way, mirroring and matching their play. In this way, I blended the best of my strength with softness to contain and support the young person:

I suggested to Charlie that we do an improvisation on the black notes and it didn't take long before he became quite immersed in the music, which was quite important because he had an ADHD diagnosis and sustaining connection to activity was generally difficult for him. We played for about 15 minutes without talking, and much of this time was very flowing. I played a continuous series of two chords on Eb minor and Ab minor, and only made changes in volume and attack in response to his changes. At times, I wondered how he was going with the silence and continuous music-making, but I stayed grounded in the process, and supported and contained his experimentation on the high black notes. Occasionally, he let out small laughs and jiggled around a bit in a way that might have indicated that he was going to disconnect from the music-making. But with my continued play, and occasional affirmation through vocal improvisation he stayed in the music. During that improvisation, I felt like I combined the best of my soft and hard energy into a firm but gentle container that was strong because it was stable and consistent, but which was also soft because it created a foundation for him to express over the top of. It was not dominating, but gentle, firm, and containing all at the same time.

Findings

My analysis of Cycle Three data showed ways in which patience/spaciousness was already present in my practice, and the ways it was developing naturally alongside my research. It also showed ways in which intensity manifested in my work, and by investigating the motivation underpinning my use of intensity and patience/spaciousness, I identified the following potential strategies for developing patience and spaciousness in my work:

- Fostering comfort with stuck-ness, conflict, and chaos
- Fostering openness, not knowing, curiosity, and vulnerability
- Developing closure processes
- Developing sustainable self-care strategies

- Educating other professionals about music therapy

Fostering Comfort with Conflict, Chaos, and Stuck-ness

Some of the intensity in my work was motivated by my discomfort with chaos, which caused me to consider how to develop more comfort with the chaotic aspects of music therapy, particularly in group-work:

I think I could sit back more when the chaos happens and let it happen – so I can see it more clearly. But there’s something that seems very difficult about that for me – perhaps because I’m partly attracted to the creative aspect of the chaos and when I’m playing music I’m slipping into that space quite naturally myself, but then resisting that at the same time because I’m telling myself I have to keep facilitating the activity that we’re doing. But perhaps I could let go of that more, and let the group be part of how we find our way back to togetherness when it becomes chaotic.

Malekoff (2014) discusses the disorienting aspects of group work with adolescents, and recalls the reflections of one of his co-group workers, Camille, that very much reminded me of my experience. Camille states:

If I didn’t get caught up in the noise then maybe I could understand and make sense of the chaos and it would be less frightening and I would not feel so powerless” (Malekoff, 2014, p.26).

According to Malekoff (2014), Camille viewed this awareness as crucial to become a successful group worker, and Malekoff (2014) writes:

The more a group worker is prepared to handle novelty and uncertainty, the better his or her therapeutic impact is likely to be. To look with planned emptiness is to hold a position of uncertainty, to be willing to learn from the inside out, and to enable oneself to whether the sometimes-disorienting qualities of a group in motion (p.25).

Malekoff (2014) calls group work with teenagers “tricky business” (p.34), and McFerran (2010) calls it “messy business” (p.47). These descriptions from experienced group-workers implore me to develop a greater capacity to be with messiness – my own, other people’s, and the messiness that is a natural part of group process, particularly with adolescents. This is important because acceptance is such a key aspect of developing therapeutic relationships, which implies having acceptance for the chaotic, messy, complicated aspects that emerge in the therapeutic space. This links to the next strategy for increasing patience and spaciousness in my work – fostering openness, not-knowing, curiosity, and intimacy.

Fostering Openness, Not-knowing, Curiosity, and Intimacy

One of the recurring themes in this study has been about seeing my strengths and weaknesses with more clarity. My natural virtues of decisiveness, assertiveness, courage, and insight are hugely beneficial in some situations and wonderful motivating factors. However, I've also struggled to work with individuals who are particularly moderate, gentle, and accepting. During Cycle Three I was working with a young woman, Katarina, who was so accepting and gentle that she was unable to express her own preferences and opinions and seemed disconnected and bored for the first two sessions. My tendency in such situations is to use my assertive energy to energise the other person. However, my research was causing me to pay closer attention to this. I'd begun to investigate how my decisiveness could impact negatively upon indecisive individuals, and my intention to increase patience and spaciousness in my practice helped me try something new with Katarina. Instead of trying to motivate her, I relaxed, connected with myself, and began singing a song I wanted to practice but didn't know well, making mistakes and laughing at myself as I went along. This seemed to draw Katarina into engaging with the music in a gentle way:

Katarina became immersed in the music more deeply in her third session, and we both lost track of time. She also began talking more freely about her father and things outside the residence as we made music. This gave me hope that a therapeutic relationship was developing where I had been somewhat doubtful of this – I believe partly because of my inability to read the signs of highly moderate self-contained people easily, meaning it's difficult for me to know how they are experiencing me and what they are needing. I think one of the factors that helped our connection was that I demonstrated being gently immersed in the music, and also laughed at myself when I made mistakes.

In this session, I was soft, and not-knowing, and vulnerable (through making mistakes), and this better reflected Katarina's own state of being. Malekoff (2014) emphasises the vulnerability that is naturally stimulated when working with adolescents:

Teenagers bring out our flaws and imperfections and evoke their own often well-conceived insecurities, fear, and anxieties in us. That is their job. If you want to make a career of working with teenagers, don't expect the work to look or be perfect or polite... don't sweat it if you sometimes look and feel awkward, uneasy, and amateurish. It is their job to make us feel that way (p.31).

However, being exposed in this way was not always easy because of an underlying fear of intimacy. This became a motivating factor in developing closure processes.

Developing Closure Processes

During Cycle Three, I realised I needed to pay more attention to closures because in the youth justice setting it was difficult to determine when the young people would be discharged meaning every session could potentially be the last one. However, I also realised that I was avoiding closures, which I discovered was motivated by a fear of intimacy:

The first thought I have is that I'm scared of intimacy, and goodbyes can be very intimate, and maybe this is what I'm avoiding – dealing with someone acknowledging their feelings for me or affirming me, avoiding being emotional or vulnerable about my own feelings, needs, and wants. And this might be playing out in my music therapy practice as not paying enough attention to closures.

This came up in my case study last year, in which I didn't leave enough time for the closure process, so it was rushed, and my teacher questioned me about this suggesting it could be an avoidance of the closure process... I've experienced a lot of separation in my close relationships, and lots of comings and goings, and therefore tend to perceive goodbyes as temporary. So, I often leave without paying a lot of attention to goodbyes. I say a quick "see ya later", or at social occasions, I just leave without saying goodbye at all.

I later wondered if there was also some counter-transference going on. Ending therapy is a hugely important part of the therapeutic process, and this can be particularly challenging when participants have a history of trauma or relational instability and attachment issues. Kim (2014), explores endings in music therapy with children on the Autistic spectrum. She notes that many children who have experienced trauma or abuse can have overwhelming responses to the end of therapy, including extreme distress, anxiety, and sometimes fear of death and dying. She also emphasises the need for the therapist to explore their counter-transference experiences in the ending process through supervision and post-session reflective journaling. Although the population Kim (2014) discusses is different to the group of young people I was working with, there are likely to be some similarities because many of the young people had experienced trauma, some were on the Autistic spectrum, and many had experienced instability and displacement, often having been placed in numerous different care situations, and experiencing many traumatic endings to relationships. A high

proportion of these young people had also had friends and close family members die by suicide and accidents – often more than one.

As such, I reflected on my own avoidance of closure in the context of these young people's experience of endings, and I sensed that my experience was mirroring the young people's avoidance of closure. This was exacerbated by the fact that none of us knew exactly when it would be the last session for each individual because this was entirely dependent on the outcome of their court case. It was as if we all lived with this instability by paying little attention to the endings of sessions. This revealed closure as a significant strategy to develop more motivation:

It feels very important to put some time into thinking about how I can approach closure in each of my sessions more consciously – so that in every session there is a sense of completion. It would be good to look for some literature on closures and transitions because this seems to be a major area of difficulty for many people – the big birth and death, and then all the little births and deaths that happen every day – for example, lots of people struggle with going to sleep (from babies to older people), and others struggle with waking up and getting moving in the mornings. And many people struggle with the transitions between work and home, week-days and weekends, and so on. And of course, this also plays out in groups – where people struggle in various ways to 'arrive' or 'settle', and also to 'leave'. And every individual in a group session could have a different pattern and experience of these transitions, making group work naturally complex.

Developing Sustainable Self-Care Strategies

As a result of my growing awareness about my habits, I began to think about how to introduce self-care strategies, particularly in terms of a time-management system that considered my natural learning style and the institutional framework I was working in.

I may need to timetable a combined tea-break and lunch break after my working day at 2.30 where I go offsite and go for a walk in the park, so I get the alone time I need to relax and integrate the morning.

In addition, I restructured my programme and reduced the number of individual sessions I was doing from nine to seven, which allowed for time between each session to take notes and prepare for the next session. I also began maintaining session rituals better to give myself enough time before and after every session, which naturally reduced the intensity that arose when I was rushing. This enabled me to slow down in all the transitions between sessions,

allowing me to move around the institution at a more moderate pace, and I began to feel more grounded.

Grounded-ness is one aspect of group-work with teenagers that Malekoff (2014) emphasises. He writes, “to work with teenagers one has to be light and fluid and flexible and grounded all at once in order to effectively adjust to the changing tides of equilibrium and disequilibrium and the shifting sands of conflict, playfulness, calm, constructing activity, fighting, tension regulation, attending to task, and affectionate feelings” (p.26). In other words, one must be able to adapt to the multiple subtle changes happening all the time without losing one’s centre.

Educating Other Professionals

The final strategy I identified that could increase patience and spaciousness in my work, stemmed from my concern about teacher expectations in group music sessions. This suggested that educating other professionals about the music therapy work might provide a good way to reduce anxiety and stress. This has been noted as important within music therapy literature, particularly in educational settings (Hadley & Quin, 2005; Ledger, 2010; Strange et al, 2017). McFerran (2010) points out, music therapists are different from parents and teachers (p.47). However, as a relatively new profession, many of the professionals whom music therapists work alongside may initially not understand the role of the music therapist.

On reflection, I wondered why I did not do this when some of the other students in my class did presentations to other professionals about music therapy in their context. However, the time constraints in the residence placed a lot of pressure on the teaching staff and the care-team making it difficult to see a way to make time for such a presentation. I also felt uncertain about the relevance of the therapeutic framework to the youth justice environment. Additionally, my previous experience in Kaupapa Māori environments had created a sensitivity in me in terms of offering suggestions or trying to “educate” people about what an external cultural framework might be able to achieve, and I sensed that it was best to wait to be invited to share, rather than ‘push’ the agenda of music therapy. However, had I continued working in the environment, I imagine the possibility for this to happen may have emerged after time.

Summary

Cycle Three reaffirms Cycle Two findings in emphasising the value of reflexivity and ongoing self-development in terms of continuing to critique the use of my strengths and being willing to keep developing the qualities that balance those strengths. Cycle Three also illustrated the importance of understanding my own habits in relation to the context. For example, in group sessions I brought my own experience of endings and completions into the room, which mirrored the young people's expectations, but also prevented me from containing the music sessions adequately. In addition, Cycle Three identifies the professional challenges of being a music therapist in a relatively young profession, and the importance of educating people about it.

Concluding Discussion:

Reflecting on the Action Research Process

I began this research journey questioning how I might build therapeutic relationships with the young people in the youth justice residence in which I was working. At Cycle One, I wondered how I could be open to the process in respect to my previous experience of working with a similar population combined with new information about the young people in the present. This made me wonder if it might be harder than I expected. Through Cycle One, it became evident that the openness I sought was supported by setting clear intentions to foster openness. However, I also noticed patterns of relating with young people that I began to question because they revealed strong personal habits that effectively shut down my ability to be open in certain situations. My ability to identify these moments was supported by reflexive inquiry in conjunction with colleagues and supervisors. In exploring these habits in Cycle Two, I became aware of the powerful unconscious processes involved with my habitual reactions (that privileged assertiveness over patience and spaciousness) and the discomfort and hard work that is required to disrupt them. In further seeking how I might create new habits in Cycle Three, I identified five key strategies for developing patience and spaciousness in my work. These included fostering comfort with stuck-ness, conflict, and chaos; fostering openness, not knowing, curiosity, and vulnerability; developing closure processes; developing sustainable self-care strategies; and educating other professionals about music therapy.

Synthesising the Findings

In synthesising the findings of each cycle and reflecting back on the literature and my beginning assumptions, I identified four interrelated aspects that were involved with developing relationships in the context of the youth justice residence:

- Understanding context
- Self-knowledge and self-inquiry
- Working across difference
- Shared music-making

These will each be discussed separately.

Understanding Context

My initial approach to building relationships was underpinned by an understanding of the socio-political context of Youth Justice in Aotearoa New Zealand, and the knowledge that the young people I was working with were some of the most marginalised youth in the country, and were especially vulnerable because of this. This caused me to question the term *therapy* from the onset, which resulted in avoiding the use of the word *therapy* in the programme I developed because I knew many of the young people had been diagnosed and pathologized again and again and were not likely to want any more ‘therapizing’. Moreover, I was concerned that the term *therapy* implied individualistic notions of pathology that failed to account for the socio-political context in which people live. *Therapy* suggests the individual needs to change rather than the society. But the truth for marginalised individuals is that without societal change, no amount of personal *therapy* is likely to have a lasting impact on the lives of their communities. Rather, therapy may be able to help a young person cope better with the multiple levels of marginalisation they face every day.

My approach was also underpinned by my previous experience in Kaupapa Māori spaces, which meant that I was ‘ok’ with the young people teasing me, and with not understanding certain jokes that required cultural shared experience that I did not have. As such, I found my way around the institution with relative ease, without trying to impress anyone, gain friends, or prove I was a ‘good white person’. I was also ok with *not* knowing what was happening lots of the time, with people *not* being particularly interested in me, *not* asking me about the work, and quietly getting to know me over time. I believe my journey would have been significantly different had I not previously developed these capacities working in Kaupapa Māori spaces as a Pākehā.

These understandings about context influenced the way that I used music in my work. In group sessions, I had to find ways to work with a range of skills the young people possessed. Some of them were dealing with brain-injuries or trauma, alcohol and drug-use, and learning disabilities such as ADHD. Individual sessions became particularly useful in working with young people diagnosed with such conditions, because their focus and concentration was greatly improved outside the group setting. This supported them to develop a sense of achievement and hopefulness about their ability to learn. While collective cultural approaches are hugely valuable in many contexts, I found that within the context of the

residence, individual music sessions provided young people a chance to have some time-out from the intensity of the group environment, in which they lived every other moment of the day. Coming to music seemed to be a welcome relief. They could experience the attention and focus of just one other person, and not have to deal with the often complex and challenging social dynamics in the unit.

My findings also illustrated how my interpretations about the context were problematic at times. One of the subsidiary questions I asked was about the impact of other people in the environment on building relationships. This became an issue in terms of my perception of staff expectations about my role in group music sessions, which resulted in me defaulting to my habit pattern of being confrontational in challenging situations and limited the potential for building rapport in those moments. In other words, my perception of the culture of the environment reaffirmed my own habit pattern, and required critical reflection on my part to disrupt. This may have been exacerbated by the lack of knowledge on the part of other professionals in the institution about what music therapy is. This is an issue that many music therapists have encountered because of working in larger institutions where they need to educate other professionals about the value of music therapy (Hadley & Quin, 2005; Ledger, 2010; Strange et al, 2017). However, in some ways my habit pattern was useful in this context because of the need for the residence to manage high-risk situations and maintain the safety of all the young people and staff. Preventing harm is an important role.

The other aspect of the context that I failed to fully consider was the need to develop closure processes in relation to the short-duration of time spent with the young people, who stayed in the residence for an average of only three-six weeks. Eventually, I saw this in the context of my own personal habit of avoiding closure and began to develop closure processes that accommodated for the short duration of stay. This included focussing more consciously on ensuring each session felt complete, in case it was the last session. This illustrates the next significant factor in building relationships – that of self-knowledge and self-inquiry.

Self-knowledge and Self-inquiry

A good part of the three action research cycles involved exploring my own unconscious beliefs and assumptions that underpinned my personal habits. As such, the idea that what I bring to the table, both consciously and unconsciously, has a powerful and unquestionable impact

upon developing relationships, has been strongly reinforced. All three cycles illustrated the way in which my habits provided the lens through which I interpreted the therapeutic process, engaged with the young people during challenging moments, facilitated groups, interacted with other staff in the institution, managed my time, and engaged with youth in individual music sessions. The challenges involved with disrupting habit patterns were also highlighted. This included valuing the exploration of discomfort to reveal the beliefs and assumptions embedded within those habitual reactions, and working consciously and committedly in establishing new habit patterns.

My findings suggest that I will continue to practice music therapy within the limitations of my own conditioning, and it's unlikely I will miraculously break habits that I've been practicing all my life (albeit unconsciously). However, I can make a conscious commitment to self-development, radical reflexivity, feedback through supervisory and mentor-type relationships, and by being willing to keep stepping into unfamiliar cultural space. This supports the literature on habits, which acknowledges the process of changing habits as a life-long process of self-development (Riso & Hudson, 1999; Vago, 2014). It also confirms the idea inherent within social justice approaches to music therapy that I cannot separate my personal and professional worlds, and that stepping into unfamiliar personal/cultural space is vital for self-development (Huygens, 2010; Hadley, 2003a, 2003b). My habits – which include personal and cultural elements – will require ongoing inquiry, as does fostering the openness that *beginner's mind* implies, which is an essential quality within the therapeutic relationship. Interestingly, these things sit in apparent opposition to each other. The qualities of openness, curiosity, and vulnerability that are viewed as essential to developing a therapeutic alliance, and which are inherent to *beginner's mind* suggests that I must suspend my prior judgements and 'forget' who I am for a moment. In contrast, the process of exploring my habits requires me to investigate my identity as inscribed by power relationships in the world such as race, ethnicity, gender, class, ability, sexual orientation and so on. However, perhaps this aptly illustrates the dichotomy present in all relationships – I come together with you, different from you, and although the past manifests itself through me I must be open to being changed by you and re-created. This inevitably requires working across difference.

Working Across Difference

At the beginning of the study, I was interested about the limits that my being Pākehā might place on developing relationships with the young people, given I was no longer part of a Kaupapa Māori process in which I was de-centred as a Pākehā, and had already established trusting relationships with staff. Interestingly, I did not write much about this until later in the year, when I was weaving the exegesis together and reflecting on earlier journal notes. However, there were many occasions in which working across ethnic difference was evident. One aspect of this involved my use of Te Reo Māori. Quite a few Pacific Island youth I worked with had grown up with their language, but only two Māori youth had been privileged to grow up with their language. At the beginning I felt a bit unsure how much language to use because I did not want to come across as an ‘expert’ (when I’m not), or stimulate embarrassment or shame for the young people who didn’t have any language knowledge. I wanted my use of Te Reo Māori it to be inclusive rather than exclusive. As such, I ended up using the language sparingly – mostly through songs requested by the young people because this supported their language knowledge, rather than demonstrating my own language knowledge. I sensed that for some young people my engagement with Te Reo Māori stimulated interest and curiosity that facilitated rapport-building. However, for others it appeared to stimulate distrust and confusion. For example, one girl, who was fluent in Te Reo seemed really irritated by my use of Māori words, and it felt as if my use of Te Reo as a Pākehā was a barrier to forming rapport her, rather than providing a point of connection.

For the most part, the ethnic difference between myself and the young people was not acknowledged verbally. However, there were a few exceptions. Sometimes my use of Te Reo Māori resulted in someone asking me if I *understood* Māori or if I *was* Māori – perhaps because my pronunciation was very good. At other times, the young people teased me when singing Māori waiata, getting the tune wrong, or singing differently than they expected. This would stimulate laughter, and they would say things like “that’s not how it goes – you sing it like a *Palagi* [white person] Miss”. I would laugh along with them, affirm their knowledge, and ask them to teach me. While I rarely asked which ethnic groups the young people identified with, this sometimes emerged through individual music sessions when I would ask if the young person had favourite songs in other languages, and this would sometimes result in discussions about ethnicity.

I later reflected in my journal about my failure to write about significant moments in which the young people had been curious about me as a Pākehā in relation to my concern at the beginning of the year about this being a potential barrier to building relationships. However, this was less of an issue than I thought it would be, partly because music-making became a strong point of connection and shared experience, and partly because I was relatively relaxed and natural in the environment because of the things I've previously learned in Kaupapa Māori settings. This reaffirmed my initial assumption that the skills I'd previously developed in Kaupapa Māori space alleviated some of the issues I *might* have encountered had I not developed comfort with being an 'outsider', and confirms the literature about the various skills that Pākehā need to develop to work across ethnic difference successfully (Jones & Jenkins, 2008; Huygnes, 2010; Bell, 2014). It also suggests that shared *music-making* was a *significant mitigating factor* in working cross-culturally in this context.

Shared Music-Making

Unfortunately, I didn't pay much attention to the role of music in relationship-building in my journals, despite this being a subsidiary question. I suspect I neglected this partly because I'm a novice action-researcher, partly because it 'went without saying', and partly because my action research was focussed on improving practice and the music-making was not a particularly problematic aspect of my practice. In reflecting on this, I believe music-making was hugely important and inherently intertwined with developing mutual trust, respect, and rapport. Not only did the music provide a language to speak across difference (age, culture, ethnicity, and authority), it also created a point of connection simply because music was a significant positive factor in the young people's lives. As McFerran (2010, p.74) aptly writes, "Teenagers relate to music. Music plays an important role in society. Musical engagement can be health promoting. And most importantly, music can be fun". More specifically, the process of being interested in the young person's musical preferences and learning songs they wanting to learn was crucial in building positive relationships. This established initial rapport, and as the connection developed I could introduce new songs and styles to expand skills and awareness. Improvisational games, song-writing, and free-style rapping also featured in my music sessions and these strategies all seemed to help the connection with the young people deepen. My collection of waiata Māori and contemporary songs also seemed to create a point of shared interest for many of the young people. Such strategies are commonly cited with

music therapy literature, in which music is positioned as a powerful tool for addressing the identify-formation issues facing adolescents and other challenges facing at-risk-youth (McFerran, 2010; Hadley & Yancy, 2012).

Concluding Comments

In synthesising the findings of this study, the process of building relationships in youth justice in Aotearoa is seen to involve knowledge of the context, self-knowledge and self-inquiry, an ability to work across difference, and shared music-making.

However, the findings of this study are limited in that I explored the process of building therapeutic relationships solely based on my perceptions and interpretations of my and young people's interactions, which are influenced by my personal/cultural conditioning and life experience. I do *not* know how the *young people* experienced their relationships with me, or the level of trust and respect that they associated with their relationships with me. However, this would provide an interesting future study, particularly in terms of further understanding what is involved with building relationships across difference.

Glossary

All definitions have been retrieved from maoridictionary.co.nz, except the definitions of Pākehā, which is my own.

Aotearoa	Māori name for New Zealand
Kaupapa	Topic, policy, matter for discussion, plan, purpose, scheme, proposal, agenda, subject, programme, theme, issue, initiative
Kauapa Māori	A philosophical doctrine incorporating the knowledge, skills, attitudes and values of Māori society
Māori	Normal, usual, natural, common, ordinary Indigenous person of Aotearoa (a new use of the word resulting from Pākehā contact in order to distinguish between people of Māori descent and the colonisers)
Mātauranga Māori	The body of knowledge originating from Māori ancestors, including the Māori world view and perspectives, Māori creativity and cultural practices
Pākehā	White person of European descent born in Aotearoa New Zealand
Reo	Language, dialect, tongue, speech.
Tikanga	Correct procedure, custom, habit, lore, method, manner, rule, way, code, meaning, plan, practice, convention, protocol - the customary system of values and practices that have developed over time and are deeply embedded in the social context.
Waiata	Song, chant, psalm
Whakapapa	Genealogy, genealogical table, lineage, descent

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Appendices

Example of Consent Form

Note: This was written on Victoria University Letterhead

PERMISSION TO CONDUCT RESEARCH

One copy to be kept ONSITE at [REDACTED]

One copy to be kept at the Music Therapy Department at Victoria University of Wellington

To the Manager

My name is Meg Stone, and I'm the music therapy student placed at [REDACTED].

As part of my requirements for my study, I'm required to undertake a research project based on my placement experience, and write an exegesis that describes this process. I'm writing because I'm required to seek written permission from the Site Manager to undertake this research.

My research seeks to explore my experience as a music therapy student in the process of developing therapeutic relationships with the young people. I'm using Action Research, which is a methodology in which the researcher seeks to improve his/her practice by researching themselves. This means the study is low risk, because I'm not researching the young people, but rather my own engagement and actions. The data is being generated by means of journals, supervision notes, and notes from conversations and meetings with staff. The Victoria Human Ethics Committee has given generic approval to NZSM526 Master of Music Therapy Programme for studies of this type (Approval #22131, 2015).

The written exegesis describing my research will include excerpts from this data that contains my responses and interactions with young people and staff. All the personal information identifying young people and staff will be removed and they will be given pseudonyms. However, I will include general information about the nature of the facility and the issues typically facing this population. I will ensure that all sections that refer to the institution, staff, and young people are reviewed by my clinical liaison, [REDACTED], for accuracy before I submit the exegesis for marking.

Informed consent will be gained from key staff members, should I include quotes from conversations and meetings.

I can provide a summary of the research once it has been marked if you request this.

I will take all steps to ensure my research is conducted in an ethically safe manner, to protect the rights of the young people in residence, their families, and staff who care for them. If you agree to the research being undertaken in this facility, please sign below.

I..... have read and understood the above information and I give my permission on behalf of [REDACTED] for Meg Stone to conduct the above research.

Signed..... Date.....

You have the right to withdraw consent for this research up until November 1st 2017 by contacting [REDACTED]
[REDACTED]

Examples of Data Analysis

Cycle One: Beginner's Mind		Deductive Analysis						
Raw Data	Beginner's Mind				Full mind			
	Openness	Acceptance non-judgement	Being ok not knowing	Being in the moment	Non-acceptance	Attachment to prior knowledge/experience	success versus failure	Goal orientation
Recalling action: There were moments when I wondered if what I was doing was engaging the young people in a genuine way, and at times I questioned whether or not I should change the flow of what we were doing or keep going to see where we would end up. I felt concerned about whether the session would meet their expectations or not.	O		O		X		X	X
Justifying my interaction style: My assumption is that a confrontational communication style is the dominant language of these young people, and that they will connect with me more quickly if I'm able to communicate with them in their dominant language at least some of the time					X	X	X	X
Planning: There was an aspect of intuition in planning the second session. I allowed myself to be open to ideas, and drifted into a dreamy space, and then the ideas emerged, and I ran with these, rather than critique them too much. Perhaps this was because I wanted to hold that sense of openness in the planning process too.	O	O	O	O				
Questioning my interaction style: In exploring these assumptions, it has become really clear how attached I am to my habit patterns and how I can easily justify them as valid within this context of a youth justice facility. However, it is also clear that there is another way, and this process has helped open me up to the possibility of another way. I don't need to abandon my default strategy - it will always be there. However, if I'm to develop as a person and practitioner, I need to at least be open to another possibility,	O					X		

Cycle Two: Creating Space for Softness in Challenging Situations			
Raw Data	Interrogation of Data	Theme	Strategies
Nelly came in in a really bad space (I later found out that she is due to be discharged next week, and she was probably very anxious about this). She paced the room and tried to take control of the space using a loud voice, sitting on my table, coming and going from the group. I did not want to step into a confrontational space with her quickly. When she sat on the table behind me, I felt anger rise up in me. I wanted to “bite”, or take the “bait”.	I interpreted her behaviour as controlling. I also made a conscious decision not to engage in confrontation behaviour. However, I was still angry because of my interpretation.	Habits are embedded with unconscious beliefs	Understanding the nature of Habits
I did not feel enlivened in myself, and I guess I interpreted this at some level as a failure. Now that’s interesting to look at because I must unconsciously interpret success as being connected to feeling good. But of course, that’s not always true. Sometimes I have been successful in something and it has just been jolly hard work. Perhaps what I’m seeking is the experience of flow, those peek moments, where everything seems connected and in harmony.	I’m uncomfortable because my habitual pattern of seeking intensity was not met.	Change is sometimes uncomfortable	Paying Attention to Discomfort
I wonder why I didn’t ask N what was happening for her, or take a guess that she was having a hard day. I wonder what would have happened if I’d done that.	I’m questioning my actions.	Habits are embedded with unconscious beliefs	Engaging in Reflexive Inquiry
I have a judgement about indirect expressions of power, and only feel comfortable around direct expressions of power or direct negotiations about power. At the core of this discomfort lies fear of my own powerlessness and vulnerability, and also a fear of betrayal and persecution. When people express power indirectly, I immediately interpret this as a betrayal of some sort. I think, they are no longer “with me” so they must be “against me”	I’m exploring my underlying assumptions about power.	Habits are embedded with unconscious beliefs	Identifying unconscious beliefs and assumptions
How do I foster or cultivate acceptance of my own sense of powerlessness or vulnerability in a real way? How do I feel this in myself safely, and bring this into the therapy space? How can I “be with” other people’s emotional expressions of powerlessness and vulnerability with more comfort and acceptance? How can I disentangle myself from their experience so that I don’t place myself inside their experience? And how can I interpret other people’s expressions of indirect power differently.	I’m questioning how I might become open to something new.	Changing habits requires ongoing practice	Preparing for the ongoing work of changing habits

Cycle Three: Creating More Space for Patience and spaciousness				
<p>Intensity Codes</p> <ul style="list-style-type: none"> • Being assertive and directive when I sensed the energy was stuck, conflicted, or chaotic • Raising my voice or using dynamic physical action • Concern about other people's expectations • Ignoring or avoiding time-frameworks • Moving intensely and quickly around the institution • Avoiding taking breaks <p>Avoiding preparation and planning</p>	Motivation	<p>Patience and spaciousness Codes</p> <ul style="list-style-type: none"> • Demonstrating a different energy when I want to change what was happening • Pacing myself • Being patient and spacious in response to stuck, conflicted, or chaotic energy <p>Moving fluidly between assertive and receptive states to contain and support</p>	Motivation	Strategies
During the song when things became particularly chaotic, and I raised my voice and thus contributed to the chaos. I became immersed in the chaos myself, and there was lots of different things going on in the room, and lots of information coming in that I was receiving, and it was difficult to process all of that, when at the same time I was wanting to keep the group focussed on the activity. So, in a way I was resisting the chaos and trying to contain it, but also becoming a part of it at the same time, and was unable to surrender to either.	Overwhelm	I sat back, and in doing so created space for him to feel his own energy more. When I asked what he wanted to do, he said guitar and keyboard. I checked about the drums and he said "no". However, a little later he requested we do some drums and he had a really good time doing this, and demonstrated some very good decision making.	Conscious intention to develop patience and spaciousness	Fostering comfort with stuck-ness, conflict, and chaos
In previous sessions with Jake, I would often become confused how to deal with his broken focus and indecision (which is probably a reflection of my fear of indecisive stuck energy), and I think I would generally react with assertive energy too quickly for him.	Confusion	I stepped back and allowed the group to be in considerable chaos, and attempted to mirror and match the play of various individuals, and support their choice of activity. I think I did this because I was tired (and struggling with a sinus infection that had not fully cleared up) and because I hadn't made a very clear session plan (again because of tiredness), and because I sensed the chaos was an important part of the group process, and that it was better for me to allow this to happen.	Not-knowing	Fostering openness, not knowing, curiosity, and vulnerability
The first thought I have is that I'm scared of intimacy, and goodbyes can be very intimate, and maybe this is what I'm avoiding – dealing with someone acknowledging their feelings for me or affirming me, avoiding being emotional or vulnerable about my own feelings, needs, and wants. And this might be playing out in my music therapy practice as not paying enough attention to closures.	Fear of intimacy			Developing closure processes
When I'm tired, I use coffee to energise me, but its false energy. My body gets hyped and slightly speedy and jittery. I have an ambiguous response to this experience. One part of me likes the intensity of the body-buzz. And the other part of me doesn't enjoy it because I feel ungrounded and uncentred.	Familiarity	I asked the group how we could get silence when it was too noisy. One person suggested yelling "shut up", and I said I didn't want to get a tired voice yelling. I suggested a couple of ideas and the group agreed that both hands in the air wiggling fingers would be the "be quite" signal...I felt good to try out a more silent and gentle way to facilitate silence, rather than a loud or physically dramatic one.	Conscious intention to develop patience and spaciousness	Developing sustainable self-care strategies
In group sessions, I feel this expectation (whether real or not) to get things moving and "give" people an experience... I think I underestimated how much I was affected by my perception of unspoken expectations of other staff and the teacher. I was aware at times that one staff member seemed uncomfortable with the chaos, and I suspected this might be because they expected me to be more 'in charge' because this is perhaps a more common teacher approach in the classroom.	Perception of other's expectations			Educating other professionals about music therapy