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Reflections and analysis to improve clinical practice:

**A student music therapist's journey with a
preschool child with special needs**

*A dissertation presented in partial fulfilment of the requirements for the degree
of Master of Music Therapy*

at the New Zealand School of Music, Wellington,
New Zealand.

Catherine Joy Wilkinson

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*‘The start of training is only the beginning of a lifelong process
of change, reflection and learning.’*

Bunt and Hoskyns (2002a), p.25

Abstract

This qualitative study critically examines the researcher's music therapy clinical practice with a preschool child with global developmental delay. The researcher/student music therapist critically examined and refined her clinical practice using an action research model. Each cycle consisted of a plan, action, data collection, reflection, and analysis. The researcher was the main participant. The child, his mother and a speech-language therapist were co-participants with different roles. The child and his mother participated in the sessions. The speech-language therapist observed three sessions through a window. Feedback from the child's mother and the speech-language therapist contributed to the reflective data. Important issues that developed through the cycles related to early intervention techniques (having fun, being playful and spontaneous, and being in close proximity). Other important issues that developed were, the use of the voice and guitar; confidence; professionalism with parents and other health professionals; self-awareness; and the understanding of early childhood development (especially in the area of communication). Related literature on aspects of music therapy practice, music therapy in early intervention, music therapy and communication, and action research are described. These results cannot be generalised. However, they may firstly, illustrate relevant trends in early intervention, and secondly, enable the researcher to adapt skills learnt to use in future practice in early intervention.

17,400 words

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This research was submitted for ethical approval from the Central Regional Ethics Health and Disability Committee – Reference: CEN/06/10/091. It was deemed not necessary to be approved, but I used the committee’s advice to keep both the co-participants and myself safe.

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