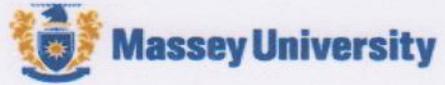


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A MUSIC THERAPY STUDENT'S EXPLORATION OF SINGLE SESSION MUSIC THERAPY FOR CHILDREN ON A PAEDIATRIC WARD USING ACTION RESEARCH METHODOLOGY

DEGREE MASTER OF MUSIC THERAPY

SUBJECT MUSIC THERAPY

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A MUSIC THERAPY STUDENT'S EXPLORATION OF SINGLE SESSION MUSIC
THERAPY FOR CHILDREN ON A PAEDIATRIC WARD USING ACTION RESEARCH
METHODOLOGY

A dissertation presented in partial fulfilment of the requirements for the degree of

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Abstract

This study aimed to answer the question “How can I, as a music therapy student in a paediatric ward, provide children with beneficial single session music therapy?” In order to answer this question, action research methodology was employed. This methodology allowed the researcher to monitor and question her actions in order to improve her practice. Furthermore, principles from music therapy and other disciplines were applied and adapted. The researcher’s practice would be made more appropriate, therefore, for a paediatric ward where only brief information about the children was provided and limited time was available to work with them. There were four cycles in the study. The challenges and concerns that emerged through the course of this research were 1) how to approach the children or get the music therapy session underway, 2) how to provide suitable sessions for the different needs and developmental stages of the children; 3) how to be more aware of the children’s needs, and 4) how to maintain my inspiration. All the findings from these concerns were formulated into some helpful principles that played an important role during the course of this study. The principles are: 1) being flexible; 2) keeping the patients’ and the therapist’s control in balance; 3) being sensitive to children’s responses and to their needs; 4) being familiar with background knowledge; 5) being able to build a rapport in a short time; 6) being available; 7) being open-minded; and 8) being able to reduce the therapist’s anxiety. It is recommended that these principles be employed in other contexts where the therapist has little time at his/her disposal to assess or establish a rapport with the children, and where it is hard to predict the situation or plan the session ahead.

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