THE PRACTICE OF TEACHING THERAPEUTIC SONGWRITING:
A SURVEY OF EDUCATORS AND INTERNSHIP SUPERVISORS

A Thesis
by
KRISTIN KING

Submitted to the Graduate School
at Appalachian State University
in partial fulfillment of the requirements for the degree of
MASTER OF MUSIC THERAPY

December 2016
Hayes School of Music

THE PRACTICE OF TEACHING THERAPEUTIC SONGWRITING:
A SURVEY OF EDUCATORS AND INTERNSHIP SUPERVISORS

A Thesis
by
KRISTIN KING
December 2016

APPROVED BY:

Cathy H. McKinney, Ph.D., LCAT, MT-BC
Chairperson, Thesis Committee

Melody Schwantes Reid, Ph.D., MT-BC
Member, Thesis Committee

Jennifer Snodgrass, Ph.D.
Member, Thesis Committee

William L. Pelto, Ph.D.
Dean, Hayes School of Music

Max C. Poole, Ph.D.
Dean, Cratis D. Williams School of Graduate Studies

Abstract

THE PRACTICE OF TEACHING THERAPEUTIC SONGWRITING:
A SURVEY OF EDUCATORS AND INTERNSHIP SUPERVISORS

Kristin King, MT-BC
B.A., Berklee College of Music
M.M.T., Appalachian State University

Chairperson: Cathy H. McKinney

The purpose of this study was to determine how therapeutic songwriting is currently being taught within American Music Therapy Association-approved music therapy programs and national roster internship sites. An online questionnaire was distributed to determine if songwriting is being taught, where within the curricula it is included, what methods educators employ, and what specific songwriting techniques are being taught to students. Respondents (n = 84) included music therapy program directors and music therapy faculty from AMTA approved schools, and internship supervisors and internship directors from AMTA roster internship sites. Results indicated that songwriting is being taught to some extent by the majority of university programs and internship sites through a variety of methods that cover a range of methods and techniques. Open-ended responses demonstrated a need for clarification of the expected songwriting competence of students, and that respondents believe a greater emphasis should be placed on songwriting education. The study also addressed recommendations for future research and considerations for university programs and internship sites.

Acknowledgments

First, I would like to express my gratitude to Dr. Cathy McKinney for not only being my thesis chairperson and providing exceptional support throughout this process, but for acting as a mentor and guide over the past four years. I am grateful for her encouragement and expertise, which were invaluable to me in the development of this thesis.

I would also like to thank Dr. Jennifer Snodgrass and Dr. Melody Schwantes for providing support and feedback during this process: Dr. Jennifer Snodgrass for her valuable experience and differing perspectives in the field of composition, and Dr. Melody Schwantes for her commitment to excellence in music therapy research.

Additionally, I would like to thank my other teachers and supervisors within the music therapy and expressive arts worlds for their authentic concern for my wellbeing as a student, and for challenging me to become the best therapist that I can be.

Finally, I would like to thank the friends and family who consistently believed in me and supported me throughout this process. I would like to thank my parents and sister for their unconditional love and reassurance, my friend Kristin Neel for providing much needed self-care time and humor, and to my partner Tanner McDowell who has listened to and supported me every step of the way.

Table of Contents

List of Tables

CHAPTER 1

Introduction

The importance of education in music and the arts has been both challenged and supported since the philosophers in ancient Greece began to formulate the educational systems that inform our education systems today (Walker & Ebooks, 2007). Those who support the continued education of music understand that music is deeply rooted in every culture in the world, and therefore an understanding of music has the ability to not only deepen our connection to our histories, but strengthen our understanding of the human condition. Before the invention of the classroom or even music notation, songs were passed down as stories were, by way of aural traditions (Baker, 2015a). Today, music is often taught within programs present in grade schools to universities. In fact, the process of teaching music is a degree in itself, with degrees in music education that can be acquired at the bachelors, masters, and post-doctorate levels. That being said, practices of music education are continually developing, and the optimal method of teaching certain subjects is still being explored (Deemer, 2016; Walker & Ebooks, 2007).

Performance, composition, and listening are three subjects that have been focused on within music curricula of Western music education, although often unequally (Walker & Ebooks, 2007). Recently, more contemporary views have been explored that consider the importance of creativity, diversity, and integration within the foci of improvisation, composition, and performance (The College Music Society, 2014). These newer perspectives

in music education were born from concerns regarding students' lack of experience in the creative process, particularly within improvisation and composition. Music composition is a difficult subject to teach in particular, and traditionally is given much less attention than the subject of performance. This is most likely due in part to the numerous rules and techniques associated with the art of composition. Resultantly, education in composition is taught and written about by those with extensive experience in composing themselves. As Walker and Ebooks (2007) explained:

> Many of these pedagogues attempted the impossible: to produce simplistic rules about musical structure and content from the work of highly inventive and unpredictable composers of the past which students were then expected to learn verbatim, without debate, and to be examined on such rules for a grade at the end of the course. (p. 23)

While this approach to teaching composition certainly provided a set of guidelines, it removed the spirit and humanness from such compositions instead of supporting the connection to one's thoughts and feelings—to the inherent connection to music that exists within our species' history. The question still remains of how to "achieve a framework in which optimal levels of creativity and excellence are achieved in all areas" (The College Music Society, 2014). However, the demands of teaching composition using more meaningful methods often requires great depth of knowledge and experience that many music educators do not possess. In order to teach the art of composition effectively, "music educators need to have both experience and comfort in the creative process of composing" (Deemer, 2016, p. 41).

In addition to these challenges in teaching composition, new pressures from the popular music world emerged, creating even larger hurdles for music educators to traverse (Walker & Ebooks, 2007). As classical music styles decreased in popularity in favor of more current forms of music still popular today, so did the stress on music educators to teach those newer styles and techniques of composing and performing music. While these styles have been incorporated into music education, there is still largely an emphasis on Western classical tradition when it comes to learning how to compose music. However, some universities have embraced the new culture of composition and have created degrees in what is commonly known today as 'songwriting' (Petersons.com, 2016). These programs teach the necessary tools to write contemporary styles of songs with emphasis on both music and lyric creation, often with the goal of selling songs commercially.

Songwriting as a Music Therapy Technique

However, there is another, more beneficial use for songwriting that has been developed in another sect of the music field. Music therapy, or the therapeutic use of music and the relationships developed therein to foster growth and healing in individuals with various needs, has developed a therapeutic use for songwriting (see Baker & Wigram, 2005). Within the scope of music therapy, there are a variety of orientations, methods, and techniques employed by music therapists in order to support a variety of needs and populations. Bruscia (2014) identified composition to be a significant method of therapeutic intervention, defining music within music therapy as, "the human institution in which individuals create meaning and beauty through sound, using the arts of composition, improvisation, performance, and listening," (p. 41). More specifically within the umbrella of therapeutic composition is the use of songwriting, which is the composition of an original

song or part of a song with varying degrees of support by the therapist, promoting a therapeutic relationship, and thereby supporting expression of needs, feelings, and thoughts (Baker & Wigram, 2005; Bruscia, 2014).

While songwriting often results in a tangible product, songwriting is a process oriented approach to therapy in which the process of writing the song can reflect the therapeutic journey of the client, while also acting as an artifact of the journey (Baker & Wigram, 2005). The therapist's role is to shape the music experience in such a way as to support the client's process and movement towards greater wellness, using the structure of the experience as, "the primary aim, process, and outcomes of therapy," (p. 120). In guiding the client through the songwriting process, clinical goals may be addressed including increased organization and planning skills, increased abilities in problem solving, increased sense of self-responsibility, development of skills to support written and verbally communicated experiences, increased exploration of interpersonal and intrapersonal themes, and increased ability to join individual parts into an integrated whole.

Definitions

Songwriting. Since there are variations when it comes to the purpose of songwriting as a method of composition, it is important to clarify the differences in these definitions and purposes. In general, songwriting may be defined as the composition of an original song or part of a song for personal, professional, or commercial purposes. More specifically, an original song would be structured using the inspirations and innovations of one's own mind and would include some combination of music elements including but not limited to melody, harmony, chords, and lyrics. A partial composition would include those songs which are considered unfinished, are created in collaboration with others, or are created in combination

4

with a pre-existing work. Songs for personal purposes are defined here as songs that are not intended to be sold commercially, or used within a professional context such as within a music therapy setting. While personal songs may be created in a professional context such as for the purpose of professional development as a music therapist, that song will be considered to be of personal use unless the song was created with or for a client. A song written with and for client would be classified as therapeutic songwriting, which is detailed in the following paragraph. Professional use may include any song written with the purpose of being used within a professional context. Commercial purposes may be defined as songs created with the intent of selling them to others.

Therapeutic songwriting. In contrast to general definitions of songwriting, therapeutic songwriting refers to the composition of an original song or part of a song within a therapeutic context, most commonly utilized by board-certified music therapists (Baker & Wigram, 2005; Bruscia, 2014). A therapeutic context may be defined as the presence of one or more clients who are being supported by a professionally trained therapist through the means of a therapeutic relationship and evidenced-based interventions (Bruscia, 2014; Davis, Gfeller, & Thaut, 2008). More specifically, therapeutic songwriting would entail the therapist composing an original song either with or for the client, providing varying degrees of support, with the intent of achieving therapeutic goals. Such goals may fall under therapist or client-identified foci including social, emotional, communication, physical, cognitive, educational, and physiological domains (Baker & Wigram, 2005; Bruscia, 2014).

Music therapy education and clinical training. Therapeutic songwriting is most commonly utilized as a therapeutic intervention by music therapists. This is due to the training and education required to become a board-certified music therapist, and therefore

competency in using music-based interventions. Music therapists are required to hold a bachelor's degree, a bachelor's equivalent, or higher from an AMTA-approved degree program, and must complete a minimum of 1,200 supervised clinical hours with a minimum of 900 hours being completed during their required clinical internship at a site that meets the AMTA Standards (American Music Therapy Association, 2016d; Goodman, 2011). After all educational requirements have been fulfilled, individuals are eligible to sit for the board-certification exam to become a board-certified music therapist (MT-BC). Within undergraduate music therapy programs, students' coursework includes education in musical foundations, clinical foundation, music therapy foundations, and general education (Goodman, 2011). In addition, there are *AMTA Competencies* that all AMTA-approved degree programs are expected to use as a standard of education for their students (American Music Therapy Association, 2015b; 2016a).

CHAPTER 2

Review of Related Literature

This chapter explores the presence of therapeutic songwriting within current literature including approaches, applications, and education. It includes methods of teaching and learning songwriting within degree programs and internship sites. Finally, based on given evidence, the present study and its purpose are described.

Approaches to Therapeutic Songwriting

In songwriting with clients, there are multiple factors that influence the songwriting process. Consideration of the present therapeutic need must be taken into account when choosing from a variety of songwriting methods including varying levels of client involvement and structure. Methods present in the literature include fill-in-the-blank, song parody, instrumental writing, notational activities, integrative/strategic songwriting, rapping over pre-composed music/remixing, mash-up songs, pastiche and hodge-podge original songwriting within known structures, rapping over original music, song collage, and improvised song creations (Baker, 2015a; Baker & Wigram, 2005; Bruscia, 2014; Wheeler, Polen, & Schultis, 2005). In addition, Baker (2014) explored various factors present within the therapeutic songwriting process and their impact on effectiveness of implementation by the music therapist. Common influences that emerged from interviews with music therapy clinicians and researchers, included environmental, group, individual, sociocultural, musical, client-therapist relational, and personal factors. The findings suggested that sensitivity is

needed in implementing therapeutic songwriting with diverse populations, emphasizing the importance of awareness in navigating multicultural issues and in considering of factors that may support or hinder the songwriting process and therapeutic relationship.

Most recently, Baker (2015a) created guidelines for therapeutic songwriting, providing maps by which practitioners may better integrate songwriting into their practice. These include careful application of lyric content to convey meaning, enhancement of the music to embellish the emotional content of the lyrics, constructing identity through the construction of a song, facilitating connections with others through collaboration, working with and recognizing defenses and blocks within the process or lyrics, working with a variety of genres and cultural music, and having a good handle on basic music technology in order to transform and deliver a client's song effectively. She also provided a graphed continuum of methods that considered the amount of structure provided, and the level of emphasis on lyric verses music creation. In addition, she categorized songwriting methods within different models of practice, and connected them to a theoretical orientation, helping to further clarify and focus on specific techniques available within the broad scope of songwriting.

Applications of Therapeutic Songwriting

Several survey studies have been conducted that sought to determine the prevalence of therapeutic songwriting within the music therapy community. Baker, Wigram, Stott, and McFerran (2008) surveyed 477 board certified music therapists (MT-BCs) practicing in 29 countries, focusing on the approach to clinical songwriting within work with a single population. Out of 477 survey responses, 419 reported using songwriting within their music therapy practice, the highest frequency being within the mental health and developmental disability populations, and lowest frequency within the dementia/aged care,

neurorehabilitation, and oncology/palliative care populations. Most commonly addressed goals addressed through songwriting included developing self-esteem and confidence, supporting choice and decision making, developing a sense of self, externalizing the internal, telling stories, and gaining clarity and insight. In addition, the researchers found that songs were most likely to be completed within a single session unless working in neurorehabilitation (Baker, Wigram, Stott, & McFerran, 2009). Songwriting was more frequently used within the individual setting but with varying incidence depending on the population. Lyrics were most often created prior to the music, with the therapist holding more or less responsibility in their creation depending on the context. Brainstorming and fill-in-the-blanks techniques were the most commonly used techniques for the creation of lyrics both overall and in age-related care.

Similarly, Jones (2006) surveyed 302 music therapists on their use of original songs to address clinical goals within music therapy. The survey sought to determine the frequency of usage, targeted goals, and client populations in the use of original songs. Consistent with the findings of Baker et al. (2008; 2009), Jones found that original songs were mostly employed in school settings and were less regularly used within the older adults and mental health populations. Goal areas addressed included emotional expression, cognitive-academic learning, behavioral, social, communication, and social-communication.

Research shows that songwriting is not only being used by clinicians, but is viewed as a valuable and effective intervention, with emphasis on the importance of the quality of music. Baker (2015b) investigated perspectives on the role of music in the therapeutic songwriting process through interviews with 45 music therapists from 11 different countries. Content analyses of the interviews revealed themes including music's power to communicate

experience and emotion, the clinical purpose of music to support the therapeutic process and outcomes, and the reflection and expression of identity within the music. Overall, the findings suggested that the music component of the songwriting process is an essential and acutely important part of songwriting. More specifically, the music could be written to reflect and thus, further enhance the emotional quality of the lyrical content. In addition, Baker suggested that the therapist's examination of the created music, not only the lyrics, is vital to fully understanding the client's expressed experience.

Songwriting in Music Therapy Education

While the use of therapeutic songwriting within certain music therapy populations is present within current practices of music therapists, it is less clear how these music therapists acquired the skills required to facilitate songwriting interventions. Jones (2006) sought not only to determine what methods of songwriting were being employed, but how music therapists acquired the songwriting skills and their perceived level of ease in implementing songwriting. In response to questions about the ease of the songwriting process, over half of the respondents reported that original songwriting was generally an easy task, while 25% reported that songwriting was sometimes or almost always easy. However, only 37% reported learning skills in songwriting within their undergraduate curriculum, with more (39%) reporting that they learned songwriting skills independently on the job. Others reported learning skills at internship, graduate school, or within a continuing music therapy education (CMTE) course. Reasons cited for not using original songwriting within their clinical work included lack of relevance to population, poor quality of therapist songwriting, the preference to use in-session songwriting, lack of knowledge, lack of time, and the belief that songwriting and clinical work should remain separate.

It is apparent that songwriting is not only an important skill to develop, but also one that requires knowledge in a variety of techniques and methods by which to meet a variety of client needs. However, published methods of songwriting often lack specificity, encouraging the student therapist to simply 'go for it,' instead of giving specific techniques that may be used to inform the songwriting process (Wheeler, Polen, & Schultis, 2005). In fact, "many music therapy students and therapists do not have the skills to make up accompaniments spontaneously and so are afraid to attempt compositions," (p. 106). While advising individuals to simply 'go for it' may be helpful to the student or professional who thrives on spontaneity and possesses skills in improvisation, for others this is a daunting task. Baker and Wigram (2005) noted that "it is interesting that only limited attention is paid to teaching these methods to therapists during their basic training and there are no advanced courses offered in these techniques," (p. 264). They attributed this partially to a lack of defined methods within music therapy in general, pointing out that, "there is a paucity of therapy techniques in certain areas, and sometimes a lack of certainty in teaching . . . Students are often advised, or even encouraged to think that they will develop their own "method" and that there is no single of identifiable procedure for music therapy intervention which they can incorporate" (p. 18).

The suggestion that there is a lack of clarity within teaching methods of songwriting is interesting, indeed, given the fact that composition is cited in both the *Professional* and *Advanced Music Therapy Competencies* (AMTA, 2015b; 2016a), which provide the foundation for music therapy education in AMTA-approved academic programs and which delineate required skills for the practice of music therapy. Under music foundations in the *Professional Competencies*, individuals are required to be able to "compose songs with

11

simple accompaniment," and to "develop original melodies, simple accompaniments, and short pieces extemporaneously in a variety of moods, styles, vocally, and instrumentally" (AMTA, 2016a). The *Advanced Competencies* include the ability to "design and employ a broad range of compositional experience in order to address therapeutic needs" (AMTA, 2015b).

In relation to these composition competencies, Goodman (2011) suggested that it is necessary to incorporate music therapy specific composition skills into the curriculum since most students will only learn these skills in a non-therapeutic context. *Professional Competencies* do not specify learning to write in specific genres as the *Advanced Competencies* do (AMTA, 2015b; 2016a), and it is recommended that the entry-level student begin to build these skills up, "foreshadowing the introduction of the song-writing process with clients" (p. 35). Goodman cited songwriting music therapy classes to be less frequent within university programs, emphasizing population-focused course work over intervention-based classes that are more present in graduate level education. Several general methods of teaching music therapy were mentioned including experiential, lecture, collaborative, and problem-based learning. Experiential training was defined as the most effective approach in teaching therapeutic skills, since it allows students to develop self-awareness, participate in self-inquiry, actively engage in the process to be applied, and learn from their mistakes.

Methods to Develop Songwriting Skills

A few studies have been conducted that look at the use of experiential learning within an educational setting to develop songwriting skills as well as interpersonal learning. Krout, Baker, and Muhlberger (2010) explored the use of Skype to engage students in collaborative songwriting with peers to apply current technology and to develop and practice their

12

songwriting skills. Participants were graduate and undergraduate students who had received

some instruction on clinical songwriting; none had previously written a song with clients.

Students completed eight songs each, working with peers from different universities, given a

songwriting protocol involving a step-by-step process for creating collaborative songs.

Considerations within the instructions included leadership, determining a focus/theme,

deciding the order of creation (lyric or music) and adapting theme development accordingly,

crafting rhyme, creating music and melody, determining song form, and defining

accompaniment. Following songwriting experiences, students were asked a series of

questions about their perception of collaborative songwriting. Students reported that

songwriting was not as difficult or intimidating as they expected it to be, although they were

anxious beforehand due to inexperience. In addition, the process increased students'

awareness of their strengths and weaknesses and allowed for increased self-reflection and

processing (Baker & Krout, 2011; Krout, Baker, & Muhlberger, 2010).

Baker and Krout (2012) repeated this process with a different group of students,

looking at the professional and personal gains acquired through the use of collaborative peer

songwriting by music therapy students. Students reported that peer-collaborative songwriting

was an effective way to reflect on their experiences, to deepen understanding of songwriting

as an effective treatment method, and to support personal and professional growth. In

deepening their understanding of songwriting as an effective treatment, students commented

on the importance of developing skills in songwriting, having a toolbox of methods and

techniques, understanding the power of songwriting to allow for communication and

organization of experience, and understanding how songwriting can facilitate expression of

complex emotions. Participating in collaborative peer songwriting allowed for students to

practice their songwriting skills, deepen their appreciation and understanding of songwriting as a therapeutic intervention, and increase their awareness of their own areas of growth as a music therapist-in-training.

Other methods of teaching songwriting and composition are present outside of music therapy literature and are being employed by music education educators. In reflection of general music education, Morin (2002) listed three distinct phases of learning how to compose: (a) expanding the composition base, (b) selecting aesthetic content, and finally (c) composing music. In order to teach the student how to effectively compose, the student's composition toolbox must contain the right tools including certain skills, contexts, styles, and rhythms that can be accessed spontaneously when faced with a compositional assignment. Ginocchio (2003) suggested the use of extramusical associations wherein the students compose music in reflection of, or in association with the arts including fine art, film, literature, or culture.

There is also discussion amongst music educators concerning the necessity to develop other music skills in support of skills in composition. As suggested by Baker (2015b), the music element of songwriting is essential and acutely important to supporting the therapeutic process effectively. Therefore, having a command of one's musical skills is a prerequisite to being able to write effective songs. However, these skills may be more challenging to develop depending on the program and individual student. Hsaio (2014) explored the gatekeeping practices of program directors and internship directors and found that inadequate development of music skills was the most commonly referenced issue of students with severe competency problems within both university programs and internship sites.

Deemer (2016) proposed the importance of developing multiple musical roles in order to foster deeper understanding and increased artistry in general. Such roles include that of the composer, as well as the performer, listener, and improviser. Deemer also suggested that improvisation is linked to skills in composition wherein, "the invisible work of the improviser involves anticipatory listening and composition in the moment" (p. 39). Robinson, Bell, and Pogonowski (2011) advised that music teachers should acquire college-level courses in both improvising and composing in order to fully understand the subtleties in working with students creatively. In a proposed seven-step model for creativity in the music classroom, the authors suggest engaging students in composition by merging ideas developed through improvisation.

In a review of educational composition techniques, Webster and Barrett (2014) cited several approaches including composition in relation to problem solving, noting that one goes through similar processes in solving a problem as they do in composing: recognizing the problem, generating initial ideas, creating a draft, development, revision, and reviewing the final product through rehearsal and presentation. Student reflection on the composition process was also encouraged in order to support not only the development of skills, but to help determine understanding of the assignment. In music therapy, these are concepts that are applied in a different manner, but are still of importance. The student music therapist must develop the ability to assess the client's needs and develop interventions that support growth. Within the songwriting process, a student would need to facilitate this process for the client in a similar manner to that mentioned by Webster and Barrett (2014). Finally, the student's understanding of the purpose of the experience of composition is vital to further understanding of therapy and how one can most effectively support the therapeutic process.

Songwriting Education in Internship

While music therapy program curricula is an important component of student learning, clinical internships are also an important step within the accumulation of skills and experience in becoming a music therapist. While songwriting has shown in the literature to be prevalent in a variety of settings, there is little research that investigates how songwriting may be utilized or required of students during their clinical internship within a variety of settings. However, there are some studies that suggest the need for increased focus on music skills, which is a stepping stone to developing skills in songwriting as suggested by Baker (2015b).

In a survey of internship directors on their perception of interns' functional music skills upon entering internship, Jenkins (2013) found that while students were rated as being competent in voice skills, they were rated below competency on all other music skills. It was shown that internship directors tended to rate voice and guitar skills as more important than other skills, including improvisation. Based on the results, it was recommended that music therapy programs place more emphasis on developing guitar, piano, percussion, and improvisation skills. In congruence with this finding, Wheeler (2002) found that one of the primary concerns of music therapy students entering internship was a need for better music skills, and that some students felt they did not have the background in order to effectively support their clients.

Tanguay (2008) investigated the supervisory practices in place at AMTA national roster internship sites through survey of internship directors. Respondents reported the most frequently employed techniques used in supervision included co-leading, live observation, reviewing assignments, didactic instruction, verbal discussion, and teaching music skills.

Less frequently used techniques included audio review, facilitating reflective processes, role-playing, and experiential music therapy processes. As far as education in practicing supervision, directors reported that the strongest influences on their supervisory style were first-hand experiences and learning as they went. In addition, experiential supervision techniques were reported by 55% of respondents to be an area in which they would benefit from further training.

Songwriting is identified by the AMTA as a Professional Competency (AMTA, 2016a), and therefore sufficient education in songwriting is a necessity within music therapy programs. In addition, research in music therapy has shown therapeutic songwriting to be an effective intervention across multiple populations, and therefore it is important that music therapists possess the tools to implement songwriting within their own clinical work. While there are published books on therapeutic songwriting methods and techniques in music therapy available, it is unclear whether these techniques are being taught to students and subsequently translated into practice. Given the present evidence, there is a need for a better understanding of how methods of songwriting are currently being taught within music therapy programs and internship sites. In the literature there is a lack of information about the manner in which songwriting and composition are taught within music therapy programs, what methods are most effective, and how continued learning in songwriting is supported during clinical internships.

The purpose of this study is to clarify how therapeutic songwriting is included within the curriculum of music therapy programs and clinical internship sites. In addition, this study seeks to gather information about how educators have acquired skills in songwriting, and

their level of perceived self-competency in teaching songwriting methods. The resulting eleven research questions are as follows:

1. Is songwriting being taught within music therapy programs and internship sites?

2. What methods are being employed in order to teach songwriting to students and interns?

3. What training have university faculty and internship supervisors and directors received in therapeutic songwriting?

4. How competent do university faculty and internship supervisors and directors perceive themselves to be in teaching songwriting?

5. How competent do respondents consider their students to be in songwriting, and are there differences between respondent groups?

6. What are respondents' personal opinions concerning:

   a. the importance of music therapist competence in songwriting?

   b. the sufficiency of current competencies related to songwriting?

   c. emphasis on teaching songwriting to preprofessional students?

CHAPTER 3

Method

This chapter describes the inclusion criteria for the respondents to the survey and the survey itself. It also outlines procedures employed and the method by which the data were analyzed.

Respondents

Study respondents included music therapy program directors and faculty of AMTA-approved music therapy university programs, and internship directors and supervisors at AMTA national roster internship sites within the United States. The university-affiliated internship directors were not surveyed since there is no centralized list of names, sites, and contact information. Applicable respondents were identified through roster lists provided by the AMTA of full-time music therapy faculty, program directors, and internship program directors. They survey was initially sent to a total of 302 individuals. Due to faulty e-mail addressed, 20 did not receive the initial invitation or follow-up emails, resulting in 282 successfully delivered e-mail messages. Of those who received the invitation and follow-up e-mails, 87 (30.9%) fully completed and submitted the online survey. These respondents consisted of 43 music therapy faculty and program directors, 41 internship directors and supervisors, and 3 who did not fit into any of these roles.

Instrument

The researcher designed an online questionnaire (see Appendix A–B) to survey respondents about how they addressed therapeutic songwriting education within their program or internship site. The researcher created two different survey forms in order to tailor the questions to the respondent depending on whether they were associated with a school or an internship site. Each survey collected information on demographics, whether songwriting is being taught, how therapeutic songwriting is taught, respondent's personal acquisition of skills, and perceived competence. Individuals from music therapy programs were also asked to indicate school size, region, number of students and faculty, in which educational contexts songwriting is taught, and perceived student competence upon beginning internship. Internship directors and supervisors were asked to indicate internship region, number of staff and interns, internship setting and populations, in which clinical contexts songwriting is taught, and perceived student competence upon beginning and completion of internship. Questions concerning demographics, teaching methods, and acquisition of skills were presented in multiple-choice form, and occasionally gave the option to add one's own answer. Response options for questions concerning perceived competence were Likert-scales. To enhance content validity, the survey included content based on methods and techniques present within the current literature and was reviewed by a panel of experts including three music therapy faculty members and one national roster internship director prior to distribution as Wigram (2005) recommended.

In the creation of this survey, the researcher modeled Likert-based questions after Vagias (2006) and drew questions concerning songwriting training and level of difficulty from Jones' (2006) survey on songwriting practices in writing for clients. Petersons.com

(2016) and Collegedata (2016) provided information on college size categories and available classes, and information on theoretical orientations was taken from Baker (2015a) and Davis, Gfeller, and Thaut (2008). Music therapy competencies, regions, and populations were derived from information provided by the American Music Therapy Association (2015, 2016a, 2016b, 2016c). Definitions of songwriting techniques and methods, as well as methods of teaching songwriting also were based on current literature (Baker, 2014; Baker, 2015a; Baker 2015b; Baker & Krout, 2011; Baker & Krout, 2012; Baker & Wigram, 2005; Bruscia, 2014; Ginocchio, 2003; Goodman, 2011; Jenkins, 2013; Krout, Baker, & Muhlberger, 2010; Morin, 2002; Tanguay, 2008; Webster & Barrett, 2014; Wheeler, 2002; Wheeler, Polen, & Shultis, 2005). Many of the remaining questions were designed based off of the researcher's own curiosity related to the subject including questions that gathered respondent opinions on the importance of songwriting, education, and sufficiency of competencies.

Procedure

Upon the acquisition of contact information of potential respondents and approval from the university institutional review board, the researcher e-mailed the survey to each potential respondent. The initial invitation briefly explained the nature and significance of the study, provided informed consent, and included a link to the online survey (see Appendix C). The time estimation for the completion of the surveys was estimated to be 10-15 minutes. The researcher sent reminders to potential respondents two weeks after distribution and again one week before the deadline.

Data Analysis

Data were analyzed using descriptive statistics, including counts and frequencies. Certain demographics including years within the field, years teaching, and education level were also analyzed for means and standard deviations. When the majority of program faculty appeared to report differently than the majority of internship supervisors, these differences were analyzed using frequencies and using the Mann-Whitney test to demonstrate the probability of finding differences by chance. Responses to open-ended questions were first separated by answer-types, tabulated, and examined for patterns or themes. Once themes were established, answers were organized under these themes by answer-type and analyzed for frequency of answer-type by theme. Counts and frequencies were derived and described.

Ethics

The university IRB on human subjects research approved the proposal. They deemed the risks to potential respondents to be minimal and expected to cause no more discomfort than one would experience in everyday life. Data were stored on a password-protected computer. In addition, the survey was anonymous and did not ask for any directly identifying information. Information that had the potential for respondents to be indirectly identified was kept confidential by the researcher.

CHAPTER 4

Results

This chapter describes the results derived from data analysis. Data are described concerning demographics, songwriting education trends, self-perceived competence, and perception of student competence.

Demographics

Out of 282 successfully sent emails to recipients, a total of 88 music therapists responded to the survey resulting in a response rate of 31.2%. Out of the possible number of potential respondents successfully contacted, 27.4% ($n = 157$) music therapy faculty and program directors responded, and 32.8% ($n = 125$) of internship supervisors and directors responded. Out of 88 surveys, 87 were complete with all or most questions answered. Of the respondents, there were 34 AMTA national roster music therapy internship directors (39.1%), 27 music therapy faculty (31%) and 16 music therapy program directors from AMTA approved programs (18.4%), 7 AMTA national roster internship supervisors (8%), and 3 individuals who did not fit into any of these roles (3.4%). It is possible that the three who did not fall into these categories were not from AMTA approved programs, or were retired and did not currently hold one of these positions. Therefore the total number of survey respondents who met the survey criteria and whose data were included was 84. When data concerning music therapy faculty and program directors are grouped together, respondents within these roles will be referred to as 'university faculty.'

Table 1
Years Experience for University Faculty

	Faculty (n = 27)		Program Director (n = 16)		Total (n = 43)	
	M	**SD**	**M**	**SD**	**M**	**SD**
Years since receiving MT-BC, RMT, CMT, or ACMT	22.2	11.4	25.1	9.0	23.3	10.5
Years Teaching	11.8	11.7	15.7	9.1	13.3	10.9
Years Teaching at Current Institution	8.5	9.9	10.7	7.4	9.3	9.0

Table 2
Years Experience for Internship Directors and Supervisors

	Internship Supervisor (n = 7)		Internship Director (n = 34)		Total (n = 41)	
	M	**SD**	**M**	**SD**	**M**	**SD**
Years since receiving MT-BC, RMT, CMT, or ACMT	14.0	9.4	17.3	11.0	16.8	10.7
Years Supervising	5.0	6.0	11.0	8.4	10.0	8.3
Years Supervising at Current Facility	5.0	6.0	8.2	7.9	7.7	7.6

Overall, respondents had been working in the field an average of 20 years. Music therapy program directors had been in the field the longest ($M = 25.1$; $SD = 9$), followed by faculty, internship directors, and internship supervisors (see Tables 1 and 2). Respondents reported having taught or supervised an average of 13.3 and 10 years respectively, and had worked an average of 9.3 and 7.7 years at their current institution or facility.

In reference to how respondents best categorized their theoretical orientation, university faculty most commonly aligned with cognitive-behavioral theory, followed closely by eclectic or integrative theories, and humanistic theories (see Table 3). Only one individual

aligned with neurologic orientations, and two individuals each reported preference for

behavioral and feminist approaches. Three of the individuals who chose "other" stated that

their schools taught multiple theoretical approaches, indicating that they interpreted the

question to be in reference to their program's curriculum. Overwhelmingly, internship

directors and supervisors reported their preference for a humanistic orientation, with the next

most common being cognitive-behavioral, medical, and eclectic approaches (see Table 3).

Only one individual aligned with a community orientation, and two individuals each reported

preference for neurologic and psychodynamic orientations.

Table 3
Theoretical Orientations

	University Faculty ($n = 43$)		Internship Supervisors and Directors ($n = 41$)		Total ($n = 84$)	
	%	Count	%	Count	%	Count
Humanistic	18.6%	8	41.5%	17	29.8%	25
Cognitive-Behavioral	25.6%	11	14.6%	6	20.2%	17
Eclectic/Integrative	20.9%	9	12.2%	5	16.7%	14
Psychodynamic	9.3%	4	4.9%	2	7.1%	6
Behavioral	4.7%	2	7.3%	3	6.0%	5
Medical	0.0%	0	12.2%	5	6.0%	5
Neurologic	2.3%	1	4.9%	2	3.6%	3
Interpreted question in reference to curriculum	7.0%	3	0.0%	0	3.6%	3
Other	7.0%	3	0.0%	0	3.6%	3
Feminist	4.7%	2	0.0%	0	2.4%	2
Community	0.0%	0	2.4%	1	1.2%	1
Educational	0.0%	0	0.0%	0	0.0%	0
Total	100.0%	43	100.0%	41	100.0%	84

Table 4
University Program Regions

	Current Study (n = 42)		AMTA	
	%	**Count**	**%**	**Count**
Great Lakes	26.2%	11	22.1%	17
Mid-Atlantic	21.4%	9	23.4%	18
Southeastern	19.1%	8	23.4%	18
Southwestern	14.3%	6	9.1%	7
New England	7.1%	3	3.9%	3
Western Region	7.1%	3	7.8%	6
Midwestern	2.4%	1	10.4%	8
Chose not to report	2.4%	1	--	--
Total	100%	42	100%	77

Music therapy program and demographics. University faculty came from a wide spread of university and college sizes, with the majority reporting from large universities with 15,000 or more students (35.7%), followed closely by small schools (33.3%), and medium schools (31%). One respondent left this question unanswered. Most individuals reported that their school was located in the Great Lakes Region, followed by the Southeastern and Southwestern regions (see Table 4). The music therapy programs present in this study are relatively representative of those currently active per region (American Music Therapy Association, 2016b). The largest group of respondents came from the Great Lakes, Mid-Atlantic, and Southeastern regions, which contain the highest number of schools as reported by AMTA (2015a). The 35 university faculty who had access to information about the number of students who were declared music therapy majors indicated that there were an average of 66 declared music therapy undergraduates, 15 equivalency or equivalency/ master's students, and 8 post MT-BC Master's or doctoral students. In reference to music

therapy faculty who were on staff, 53.5% of respondents indicated that their school employed both full time and part time faculty. An average of two full time and three part time faculty were employed, with an average of four music therapy faculty being employed overall.

Music therapy internship site demographics. The internship sites of the supervisors and directors were most commonly reported to be located in the Southeastern and Great Lakes Regions, followed by the Western and Mid-Atlantic regions (see Table 5). A wide variety of settings and ages were reported (see Tables 6 and 7). The most commonly reported settings included mental health facilities, hospice/bereavements services, geriatric facilities, and developmental centers. Internship directors and supervisors worked with a wide variety of ages with over 70% working with adults and older adults. Respondents indicated that an average of five full time music therapists and three part time music therapists were employed at their internship site, with almost half (45%) reporting that they employed music therapists in both categories. Two respondents reported that they could accommodate over 28 students. Of the remaining respondents ($n = 39$), an average of two interns were reported.

Table 5
Regions of Internship Sites

| | Internship Directors and Supervisors ($n = 41$) | |
	%	**Count**
Southeastern	26.8%	11
Great Lakes	24.4%	10
Western Region	19.5%	8
Mid-Atlantic	17.1%	7
Midwestern	9.8%	4
Choose not to report	2.4%	1
New England	0.0%	0
Southwestern	0.0%	0
Total	100.0%	41

Table 6

Internship Settings (*n* = 41)	%	Count
Hospice/Bereavement Services	24.4%	10
Mental Health Facility	24.4%	10
Developmental Center	22.0%	9
Geriatric Facility	22.0%	9
Children's Hospital or Unit	19.5%	8
Community Based Service	17.1%	7
Addiction Services	12.2%	5
General Hospital	12.2%	5
Child/Adolescent Treatment Center	7.3%	3
Early Intervention Program	7.3%	3
Elementary School	7.3%	3
Middle/High School	7.3%	3
Oncology	7.3%	3
Private Practice	7.3%	3
Other	7.3%	3
Physical Rehabilitation	4.9%	2
Correctional/Forensic Facility	0.0%	0

Table 7

Internship Age Groups (*n* = 41)	%	Count
Young adults (ages 19-30)	75.6%	31
Older Adults (ages 55-65)	75.6%	31
Senior Adults I (ages 65-75)	73.2%	30
Senior Adults II (over the age of 75)	73.2%	30
Adults I (ages 30-40)	70.7%	29
Adults II (ages 40-55)	70.7%	29
Adolescents (ages 14-18)	51.2%	21
Young children (ages 5-10)	43.9%	18
Preadolescents (ages 10-13)	41.5%	17
Children under 5 (birth to age 5)	39.0%	16

Songwriting Education in Music Therapy Programs

In response to whether or not songwriting and therapeutic songwriting respectively were required as a part of music therapy curriculum, the majority (69.8%) of university faculty indicated that their curricula required both songwriting and therapeutic songwriting. Of the remaining respondents, 14% ($n = 6$) indicated that their curricula required only songwriting, 11.6% ($n = 5$) indicated that their curricula required only therapeutic songwriting, and 4.7% ($n = 2$) indicated that neither was required. Overall, therapeutic songwriting was required by 81.4% of programs. Of the two respondents who indicated that neither songwriting nor therapeutic songwriting were required as a part of the curriculum, both indicated that they taught songwriting to their students despite the lack of requirement. Of the six individuals who only required songwriting as a part of the curriculum, two indicated that they taught songwriting to their students, and two indicated that they taught both songwriting and therapeutic songwriting. Of the five individuals whose curriculum required only therapeutic songwriting, one indicated they taught songwriting, and one indicated that they taught therapeutic songwriting. Finally, of the individuals who reported a curriculum requiring both songwriting and therapeutic songwriting, 20 indicated that they taught both, and 7 reported teaching therapeutic songwriting only.

Overall, 100% of university faculty reported that either songwriting (therapeutic and non-therapeutic) was required, or that they taught songwriting (therapeutic or non-therapeutic) despite the lack of requirements. Overall, 14% indicated that they do not teach songwriting or therapeutic songwriting, and 86% indicated that they teach songwriting, therapeutic songwriting, or both ($n = 37$). Of the respondents who indicated that they personally teach songwriting, 62.8% indicated that they teach songwriting ($n = 27$), 76.7%

reported that they teach therapeutic songwriting ($n = 33$), and 53.5% indicated that they teach

both ($n = 23$). Of those who teach both songwriting and therapeutic songwriting, 78% listed

teaching the same classes for both forms of songwriting. The majority of respondents

reported that students were taught songwriting skills within music therapy skills classes,

followed by music therapy classes based on population, and within practicum (see Table 8).

It is important to note that respondents were asked to indicate any context in which students

are taught songwriting skills, and were not limited to listing only the classes they teach

personally. The majority of respondents reported that therapeutic songwriting is taught within

music therapy skills classes, followed by within practicum, and within music therapy classes

based on population. Music therapy-specific songwriting classes were also reportedly

available to students, and in which 19.4% indicated teaching songwriting and 17.7%

indicated teaching therapeutic songwriting, specifically.

Table 8
Context in which Songwriting and Therapeutic Songwriting is taught

	Songwriting ($n = 36$)		Therapeutic Songwriting ($n = 34$)	
	%	**Count**	**%**	**Count**
General core music classes	27.8%	10	0.0%	0
Composition classes	19.4%	7	2.9%	1
Songwriting (non-MT specific)	13.9%	5	0.0%	0
Songwriting in music therapy	19.4%	7	17.7%	6
Within other MT classes based on population	55.6%	20	61.8%	21
Within other MT classes based on skills	80.6%	29	82.4%	28
Within Practicum	52.8%	19	64.7%	22

Songwriting Education in Internship Sites

All music therapy internship directors and supervisors indicated that they utilized therapeutic songwriting at their facility. When asked if interns are expected to use therapeutic songwriting as a potential music therapy intervention during their internship, 97.6% answered affirmatively. Respondents indicated that when working with individual clients, interns were most likely to individually write songs with their clients, collaborate with the music therapy team to write songs with clients, individually write songs for their clients, and collaborate with the music therapy team to write songs for clients (see Table 9). They noted that interns were most likely to individually write songs with their client groups, collaborate with the music therapy team to write songs with their client groups, and collaborate with the music therapy team to write songs for their client groups. When asked whether interns were expected to possess songwriting skills upon entering internship, 61% of respondents indicated that this was expected.

Table 9
Context in which Interns Write Songs with Clients

	Individual Clients ($n = 40$)		Client Groups ($n = 40$)	
	%	Count	%	Count
Interns do not work with individual clients.	5.0%	2	0.0%	0
Interns do not work with groups of clients.	0.0%	0	7.5%	3
Individually write songs for clients	60.0%	24	35.0%	14
Collaborate with fellow interns to write songs for clients	15.0%	6	15.0%	6
Collaborate with MT team members to write songs for clients	47.5%	19	40.0%	16
Individually write songs with clients	95.0%	38	82.5%	33
Collaborate with fellow interns to write songs with clients	22.5%	9	35.0%	14
Collaborate with MT team members to write songs with clients	67.5%	27	72.5%	29

Of the internship respondents (82.5%; $n = 33$) who indicated that songwriting was taught regularly at their facility, 97% ($n = 32$) indicated that they regularly taught songwriting to their interns. One respondent indicated that while interns were neither expected to use songwriting during internship nor already to possess skills, songwriting was regularly taught to interns during their internship. However, 17% ($n = 7$) of respondents indicated that while interns were expected to use therapeutic songwriting during their internship, these skills were not regularly taught and most ($n = 6$) of those individuals also expected their interns to already possess skills in songwriting upon beginning internship.

Methods of Teaching Songwriting

Respondents reported using a wide variety of methods to teach songwriting to their students and interns. Over 70% of university faculty used class experientials and teacher generated examples, and over 60% used in-class presentation of songs, personal songwriting assignments, and songwriting in clinical settings for individual and client groups (see Table 10). Overwhelmingly, these individuals indicated that song parody was the most common songwriting method taught to students, followed by fill-in-the-blank, blues, improvisational songwriting, and writing completely original songs with clients (see Table 11). All university faculty who indicated that they encourage students to "just go for it" (21.6%), also selected at least six additional songwriting methods that they teach. The songwriting techniques most commonly taught were chord structure, rhythmic structure, melody writing, and lyric structure (see Table 12). Most respondents indicated that they place an equal focus on both lyrics and music when teaching songwriting, followed by mostly focusing on lyrics and some on music (see Table 13). Finally, other commonly addressed factors related to songwriting

included group dynamics, indications for more/less songwriting structure, and indications for

more/less therapist control (see Table 14).

Table 10
Methods of Teaching Songwriting

	University Faculty (n = 37)		Internship Directors/ Supervisors (n = 32)	
	%	**Count**	**%**	**Count**
Songwriting within a clinical setting with individual clients	64.9%	24	84.4%	27
Songwriting within a clinical setting with a group of clients	64.9%	24	81.3%	26
Teacher generated examples	73.0%	27	75.0%	24
Writing songs for individual clients in a clinical setting	54.1%	20	71.9%	23
Inside/outside class experientials	78.4%	29	70.6%	12
Personal reflection of songwriting experiences	46.0%	17	62.5%	20
Writing songs for groups of clients in a clinical setting	56.8%	21	56.3%	18
Personal songwriting assignments	64.9%	24	53.1%	17
Songwriting prompts given for hypothetical clinical situations	56.8%	21	53.1%	17
Lecture	59.5%	22	34.4%	11
Group collaboration	56.8%	21	34.4%	11
Song Listening	43.2%	16	34.4%	11
Individual tutoring	16.2%	6	34.4%	11
Live or recorded in-class presentation of songs	64.9%	24	25.0%	8
Peer collaboration	48.7%	18	25.0%	8
Other:	0.0%	0	5.0%	1
Online collaboration	5.4%	2	0.0%	0

Table 11
Songwriting Methods Taught to Students/Interns

	University Faculty (*n* = 37)		Internship Directors/ Supervisors (*n* = 32)	
	%	**Count**	**%**	**Count**
Song parody	91.9%	34	84.4%	27
Blues	89.2%	33	78.1%	25
Fill-in-the-blank	89.2%	33	78.1%	25
Improvisational songwriting	83.8%	31	81.3%	26
Completely original songwriting with clients	75.7%	28	78.1%	25
Completely original songwriting for clients	64.9%	24	59.4%	19
Integrative/strategic songwriting	62.2%	23	43.8%	14
Creating original raps over either original or pre-composed music	54.1%	20	43.8%	14
Instrumental writing	35.1%	13	28.1%	9
Song Collage	29.7%	11	28.1%	9
Notational activities	27.0%	10	25.0%	8
Pastiche	27.0%	10	21.9%	7
Mash-up songs	24.3%	9	28.1%	9
Students encouraged to just "go for it"	21.6%	8	56.3%	18
Other:	2.7%	1	0.0%	0

Table 12
Songwriting Techniques Taught to Students/Interns

	University Faculty (n = 35)		Internship Directors/ Supervisors (n = 32)	
	%	**Count**	**%**	**Count**
Chord Structure	94.3%	33	81.3%	26
Rhythmic Structure	82.9%	29	56.3%	18
Melody writing	77.1%	27	53.1%	17
Lyrical structure	60.0%	21	75.0%	24
Rhyme structure	48.6%	17	43.8%	14
Tonality	48.6%	17	28.1%	9
Arranging	45.7%	16	37.5%	12
Metaphor	45.7%	16	12.5%	4
Prosody	45.7%	16	28.1%	9
Perspective writing (first-person, second/you-person, third-person)	42.9%	15	37.5%	12
Imperfect rhyming (i.e. cat, sad, rap)	40.0%	14	37.5%	12
Perfect rhyming (i.e. cat, bat, sat)	31.4%	11	31.3%	10
Instrumental writing	28.6%	10	25.0%	8
Simile	22.9%	8	12.5%	4

Table 13
Songwriting Teaching Focus

	University Faculty (*n* = 35)		Internship Directors/ Supervisors (*n* = 31)	
	%	**Count**	**%**	**Count**
Equal focus on both lyric and music creation	77.1%	27	64.5%	20
Mostly focused on lyrics with some focus on music creation	17.1%	6	32.3%	10
Mostly focused on music with some focus on lyric creation	5.7%	2	3.2%	1
Completely focused on lyric creation	0.0%	0	0.0%	0
Completely focused on music creation	0.0%	0	0.0%	0
Total	100.0%	35	100.0%	31

Table 14
Other Factors Addressed in Relation to Songwriting

	University Faculty (*n* = 36)		Internship Directors/ Supervisors (*n* = 32)	
	%	**Count**	**%**	**Count**
Therapeutic dynamics	69.4%	25	87.5%	28
Individual dynamics	63.9%	23	84.4%	27
Group dynamics	77.8%	28	81.3%	26
Indications for more/less therapist control	75.0%	27	81.3%	26
Indications for more/less songwriting structure	75.0%	27	78.1%	25
Multicultural considerations	69.4%	25	62.5%	20
Contraindications for songwriting	55.6%	20	53.1%	17
Environmental considerations	36.1%	13	53.1%	17
Sociocultural dynamics	69.4%	25	46.9%	15

Internship directors and supervisors also indicated a wide range of teaching methods with over 80% asking their interns to implement songwriting with individual clients and client groups. Over 70% of these individuals indicated they used teacher-generated examples and asked interns to write songs for individual clients in a clinical setting (see Table 10). The most common songwriting method taught by internship directors and supervisors was song parody, followed closely by improvisational songwriting, fill-in-the-blank songwriting, blues, and methods for writing original songs with clients (see Table 11). All individuals who indicated that they encourage students to "just go for it" (56.3%), also selected at least three additional songwriting methods that they teach. The most common songwriting techniques taught were chord structure, lyrical structure, rhythmic structure, and melody writing (see Table 12). Most respondents indicated that they place an equal focus on both lyrics and music, followed by individuals who focused mostly on lyrics and some on music (see Table 13). Other factors related to songwriting that were commonly addressed included therapeutic dynamics, individual dynamics, group dynamics, indications for more/less therapist control, and indications for more/less songwriting structure (see Table 14).

Songwriting Experience and Self-Perceived Competence

All respondents indicated that they acquired skills in songwriting most commonly either on the job (79.8%) or independently (75%), and 16.7% indicated learning songwriting either independently or on the job exclusively. Over 58% of music therapy internship directors and supervisors also indicated learning skills within their music therapy undergraduate or equivalency studies and during internship (see Table 15). Only 37.2% of music therapy faculty and program directors indicated being taught songwriting skills in their undergraduate or equivalency studies. In reference to songwriting skills attained within

higher education programs and internship sites, 29.8% did not receive education in

songwriting within a music therapy specific course or within internship, and 22.6% indicated

receiving no education in songwriting within their undergraduate or graduate degree

programs. Overall, most respondents found the process of songwriting with clients to be

neither easy nor difficult (59%), followed by individuals who found this process to be easy,

and those who found the process difficult (see Table 16). Only seven individuals (8.4%)

found the songwriting process with clients to be very easy, and none found the process to be

very difficult.

Table 15
Sources of Songwriting Education

	University Faculty (n = 43)		Internship Supervisors and Directors (n = 41)		Total (n = 84)	
	%	**Count**	**%**	**Count**	**%**	**Count**
On the job	69.8%	30	90.2%	37	79.8%	67
Independently	74.4%	32	75.6%	31	75.0%	63
During Internship	41.9%	18	58.5%	24	50.0%	42
Music therapy undergraduate or equivalency studies	37.2%	16	63.4%	26	50.0%	42
Music therapy graduate studies	34.9%	15	31.7%	13	33.3%	28
General music undergraduate or equivalency studies	27.9%	12	31.7%	13	29.8%	25
CMTE course	20.9%	9	24.4%	10	22.6%	19
Other:	11.6%	5	14.6%	6	13.1%	11
Online class	0.0%	0	2.4%	1	1.2%	1

Table 16
Difficulty of Writing Songs with Clients

	University Faculty (*n* = 42)		Internship Supervisors and Directors (*n* = 41)		Total (*n* = 33)	
	%	**Count**	**%**	**Count**	**%**	**Count**
Neither easy nor difficult	69.1%	29	48.8%	20	59.0%	49
Easy	11.9%	5	22.0%	9	16.9%	14
Difficult	14.3%	6	17.1%	7	15.7%	13
Very easy	4.8%	2	12.2%	5	8.4%	7
Very difficult	0.0%	0	0.0%	0	0.0%	0
Total	100%	42	100%	41	100%	83

Of the total respondents who indicated that they teach either songwriting or therapeutic songwriting (*n* = 69), 55.9% indicated that they find the process of songwriting with clients to be neither easy nor difficult, while 17.6% found the process easy, and 16.2% found the process difficult. Most indicated that they learned songwriting skills on the job (82.4%), or independently (73.5%). Less that 50% indicated learning songwriting skills within their music therapy undergraduate, equivalency, graduate, or general music classes.

The majority of respondents felt either extremely or moderately competent teaching various songwriting methods regardless of method (see Tables 17 and 18). The only exceptions are original rap writing and pastiche methods in which at least 43% of individuals felt either extremely or moderately competent. Individuals felt the most competent in teaching fill-in-the-blank and song parody methods, with more than half indicating extreme competence in teaching improvisational songwriting, and completely original songwriting both for and with clients. The songwriting method of which individuals felt the least

competent was songwriting pastiche. Individuals who indicated teaching songwriting

followed similar trends.

Table 17
Perceived Competency in Teaching Songwriting Methods

	Extremely competent		Moderately Competent		Somewhat Competent		Slightly Competent		Not at all Competent	
	%	#	%	#	%	#	%	#	%	#
Fill in the Blank (*n* = 82)	82.9%	68	15.9%	13	1.2%	1	0.0%	0	0.0%	0
Song Parody (*n* = 82)	72.0%	59	23.2%	19	3.7%	3	1.2%	1	0.0%	0
Instrumental Writing (*n* = 81)	14.8%	12	51.9%	42	23.5%	19	8.6%	7	1.2%	1
Notational Activities (*n* = 82)	24.4%	20	39.0%	32	24.4%	20	12.2%	10	0.0%	0
Strategic Songwriting (*n* = 81)	38.3%	31	38.3%	31	9.9%	8	8.6%	7	4.9%	4
Original Rap Creation (*n* = 82)	12.2%	10	31.7%	26	29.3%	24	15.9%	13	11.0%	9
Song Collage (*n* = 78)	26.9%	21	29.5%	23	16.7%	13	15.4%	12	11.5%	9
Mash-Up (*n* = 80)	23.8%	19	27.5%	22	21.3%	17	13.8%	11	13.8%	11
Pastiche (*n* = 77)	15.6%	12	29.9%	23	11.7%	9	22.1%	17	20.8%	16
Improvisational Songwriting (*n* = 82)	50.0%	41	28.0%	23	17.1%	14	2.4%	2	2.4%	2
Completely Original songwriting with clients (*n* = 83)	50.6%	42	28.9%	24	14.5%	12	4.8%	4	1.2%	1
Completely original songwriting for clients (*n* = 83)	49.4%	41	31.3%	26	12.0%	10	3.6%	3	3.6%	3

Table 18
Perceived Competency in Teaching Songwriting Techniques

	Extremely competent		Moderately Competent		Somewhat Competent		Slightly Competent		Not at all Competent	
	%	#	%	#	%	#	%	#	%	#
Prosody (*n* = 77)	29.9%	23	46.8%	36	15.6%	12	2.6%	2	5.2%	4
Rhyme Structure (*n* = 80)	40.0%	32	40.0%	32	12.5%	10	7.5%	6	0.0%	0
Lyrical Structure (*n* = 80)	46.3%	37	40.0%	32	8.8%	7	5.0%	4	0.0%	0
Chord Structure (*n* = 80)	56.3%	45	33.8%	27	8.8%	7	1.3%	1	0.0%	0
Rhythmic Structure (*n* = 79)	50.6%	40	40.5%	32	7.6%	6	1.3%	1	0.0%	0
Tonality (*n* = 78)	44.9%	35	43.6%	34	7.7%	6	3.8%	3	0.0%	0
Metaphor (*n* = 79)	40.5%	32	32.9%	26	15.2%	12	7.6%	6	3.8%	3
Simile (*n* = 77)	36.4%	28	32.5%	25	18.2%	14	9.1%	7	3.9%	3
Perspective Writing (*n* = 78)	38.5%	30	34.6%	27	12.8%	10	11.5%	9	2.6%	2
Melody Writing (*n* = 80)	47.5%	38	35.0%	28	12.5%	10	5.0%	4	0.0%	0
Arranging (*n* = 80)	25.0%	20	50.0%	40	18.8%	15	6.3%	5	0.0%	0
Instrumental Writing (*n* = 78)	19.2%	15	41.0%	32	29.5%	23	9.0%	7	1.3%	1

Similarly, the majority of respondents felt either extremely or moderately competent teaching various songwriting techniques regardless of technique (see Tables 19 and 20). Individuals felt the most competent in teaching chord structure, rhythmic structure, and arranging techniques. Individuals felt the least competent in teaching perspective writing, and prosody. Those who taught songwriting reported competence in a wider variety of techniques

than overall respondents, with over half indicating extreme competence in chord structure, rhythmic structure, lyric structure, tonality, and melody writing techniques.

Table 19
Teachers' Perceived Competency in Teaching Songwriting Methods

	Extremely competent		Moderately Competent		Somewhat Competent		Slightly Competent		Not at all Competent	
	%	#	%	#	%	#	%	#	%	#
Fill in the Blank (*n* = 68)	85.3%	58	13.2%	9	1.5%	1	0.0%	0	0.0%	0
Song Parody (*n* = 68)	75.0%	51	20.6%	14	2.9%	2	1.5%	1	0.0%	0
Instrumental Writing (*n* = 68)	17.6%	12	50.0%	34	22.1%	15	10.3%	7	0.0%	0
Notational Activities (*n* = 66)	27.3%	18	36.4%	24	25.8%	17	10.6%	7	0.0%	0
Strategic Songwriting (*n* = 68)	41.2%	28	38.2%	26	10.3%	7	5.9%	4	4.4%	3
Original Rap Creation (*n* = 68)	14.7%	10	27.9%	19	30.9%	21	16.2%	11	10.3%	7
Song Collage (*n* = 65)	29.2%	19	29.2%	19	13.8%	9	15.4%	10	12.3%	8
Mash-Up (*n* = 66)	27.3%	18	22.7%	15	21.2%	14	13.6%	9	15.2%	10
Pastiche (*n* = 64)	17.2%	11	29.7%	19	12.5%	8	21.9%	14	18.8%	12
Improvisational Songwriting (*n* = 68)	57.4%	39	22.1%	15	17.6%	12	1.5%	1	1.5%	1
Completely Original songwriting with clients (*n* = 69)	56.5%	39	26.1%	18	11.6%	8	4.3%	3	1.4%	1
Completely original songwriting for clients (*n* = 69)	52.2%	36	33.3%	23	7.2%	5	2.9%	2	4.3%	3

Table 20
Teachers' Perceived Competency in Teaching Songwriting Techniques

	Extremely competent		Moderately Competent		Somewhat Competent		Slightly Competent		Not at all Competent	
	%	#	%	#	%	#	%	#	%	#
Prosody (*n* = 61)	36.1%	22	49.2%	30	13.1%	8	1.6%	1	4.9%	3
Rhyme Structure (*n* = 66)	43.9%	29	40.9%	27	10.6%	7	4.5%	3	0.0%	0
Lyrical Structure (*n* = 66)	51.5%	34	39.4%	26	7.6%	5	1.5%	1	0.0%	0
Chord Structure (*n* = 66)	59.1%	39	34.8%	23	6.1%	4	0.0%	0	0.0%	0
Rhythmic Structure (*n* = 65)	55.4%	36	38.5%	25	6.2%	4	0.0%	0	0.0%	0
Tonality (*n* = 64)	50.0%	32	39.1%	25	9.4%	6	1.6%	1	0.0%	0
Metaphor (*n* = 63)	47.6%	30	28.6%	18	17.5%	11	6.3%	4	3.2%	2
Simile (*n* = 61)	44.3%	27	27.9%	17	19.7%	12	8.2%	5	3.3%	2
Perspective Writing (*n* = 63)	46.0%	29	30.2%	19	14.3%	9	9.5%	6	1.6%	1
Melody Writing (*n* = 66)	53.0%	35	33.3%	22	12.1%	8	1.5%	1	0.0%	0
Arranging (*n* = 66)	30.3%	20	48.5%	32	16.7%	11	4.5%	3	0.0%	0
Instrumental Writing (*n* = 63)	23.8%	15	39.7%	25	30.2%	19	6.3%	4	1.6%	1

In regards to perception of overall competence in teaching songwriting, 84.1% of individuals reported that they were very or moderately competent, and 14.7% of individuals felt somewhat or slightly competent. Of those who indicated teaching songwriting, 85.3% of individuals reported that they were very or moderately competent, and 14.7% indicated that they rated themselves to be only somewhat or slightly competent.

Perceived Competence of Students

University faculty were asked to indicate their perceived competence of most students within their program as they begin internship (see Table 21). Most commonly, faculty reported that their students were moderately competent, followed closely by those who rated their students to be somewhat competent. The majority of program directors indicated that they perceived students to be somewhat competent, followed by those who indicated their students to be only slightly competent. Overall, most university faculty found students entering internship to be somewhat competent (46.5%) in songwriting upon entering internship, and none indicated that students to be not at all competent.

Table 21
University Faculty's Perceived Competence of Students

	Faculty ($n = 27$)		Program Directors ($n = 16$)		Total ($n = 43$)	
	%	**Count**	**%**	**Count**	**%**	**Count**
Very competent	7.4%	2	0.0%	0	4.7%	2
Moderately competent	48.1%	13	18.8%	3	37.2%	16
Somewhat competent	40.7%	11	56.3%	9	46.5%	20
Slightly competent	3.7%	1	25.0%	4	11.6%	5
Not at all competent	0.0%	0	0.0%	0	0.0%	0
Total	100%	27	100%	16	100%	43

When asked to indicate their perceived competence of most music therapy interns upon entering and upon completion of internship (see Table 22), most internship directors and supervisors found interns to be only slightly competent upon entering internship, and two followed respondents indicated that most interns were not at all competent. Most individuals indicated that their interns grew in competency over the course of their internship, with

44

82.5% indicating that interns were either moderately or very competent in songwriting upon completion of internship. Internship directors and supervisors reported that interns improve songwriting competence significantly during internship, with 45% reporting an increase of one competency level, and 42.5% reporting an increase of two competency levels. Most individuals reported that interns moved from slightly to moderately competent (38.9%) by the end of internship, followed by those who reported their interns moving from somewhat to moderately competent (27.8%).

Table 22

Internship Supervisors and Directors' Perceived Competence of Interns

	Before Internship ($n = 40$)		After Internship ($n = 40$)	
	%	**Count**	**%**	**Count**
Very competent	0.0%	0	12.5%	5
Moderately competent	10.0%	4	70.0%	28
Somewhat competent	37.5%	15	17.5%	7
Slightly competent	47.5%	19	0.0%	0
Not at all competent	5.0%	2	0.0%	0
Total	100%	40	100%	40

Differences were apparent between how university faculty and internship directors and supervisors perceived student competence to be in songwriting upon entering internship. While 37.2% of university faculty found students to be moderately competent, only 10% of internship directors perceived the same level of competence in beginning interns. In addition, while only 11.6% of university faculty perceived their students to be only slightly competent and none to be not at all competent, 52.5% of internship directors and supervisors perceived beginning interns to be slightly or not at all competent. A Mann-Whitney test was used to

determine the probability of finding these or more extreme differences by chance, and results indicated that there is a significant difference in how these two groups perceive student competence at the beginning of internship ($p < .0001$).

Importance of Songwriting Competence

All respondents combined stated that it is either very or somewhat important for music therapists to be competent in therapeutic songwriting (see Table 23), with 65.5% stating that it is very important. Reasons included the importance of developing music skills, being prepared to work within a variety of clinical settings, using songwriting to address many goals and need areas, and the use of songwriting to support self-expression and relationship building. Individuals cited the importance of having a broad understanding, "as well as knowledge of the subtitles and nuances that go into songwriting in all its forms." Respondents stated that therapists who are not highly comfortable with songwriting methods may never offer this option to clients, and therefore, "rich therapeutic opportunities will be lost," and that songwriting can be, "an integral part in empowering clients to tell their stories, express themselves, and explore their creativity."

Table 23
Importance of Music Therapist Competence in Songwriting

	University Faculty ($n = 43$)		Internship Supervisors and Directors ($n = 41$)		Total ($n = 84$)	
	%	**Count**	**%**	**Count**	**%**	**Count**
Very important	60.5%	26	70.7%	29	65.5%	55
Somewhat important	39.5%	17	29.3%	12	34.5%	29
Neutral	0.00%	0	0.00%	0	0.00%	0
Not very important	0.00%	0	0.00%	0	0.00%	0
Not at all important	0.00%	0	0.00%	0	0.00%	0

Sufficiency of Professional and Advanced Competencies

On a scale of insufficient to very sufficient, respondents most commonly rated the

AMTA Professional Competencies (2016a) related to songwriting as being somewhat or very

sufficient (64.6%), followed by those who rated the competencies as neutral and somewhat

insufficient (see Table 24 and 25). In general, university faculty and internship directors

followed these same trends when considered as separate groups. *Advanced Competencies*

(AMTA, 2015b) were most commonly rated as somewhat or very sufficient (60.3%),

followed by those who rated the competencies as neutral and somewhat insufficient. In

general, university faculty and internship directors and supervisors followed these same

trends when considered as separate groups. However, more program directors were neutral in

regard to the sufficiency of advanced competences in comparison to those program faculty

who found the competencies to be very sufficient. Responses were found to commonly fall

under one of the following categories: specificity and clarity, educational applications and

skills, and appropriateness of competency.

Table 24
Sufficiency of *Professional Competencies* Related to Songwriting

	University Faculty (*n* = 43)		Internship Supervisors and Directors (*n* = 41)		Total (*n* = 84)	
	%	**Count**	**%**	**Count**	**%**	**Count**
Very sufficient	23.3%	10	27.5%	11	25.0%	21
Somewhat sufficient	39.5%	17	35.0%	14	36.9%	31
Neutral	16.3%	7	15.0%	6	16.7%	14
Somewhat insufficient	9.3%	4	17.5%	7	13.1%	11
Insufficient	11.6%	5	5.0%	2	8.3%	7
Total	100%	43	100%	40	100%	84

Table 25

Sufficiency of *Advanced Competencies* Related to Songwriting

	University Faculty (*n* = 43)		Internship Supervisors and Directors (*n* = 41)		Total (*n* = 84)	
	%	**Count**	**%**	**Count**	**%**	**Count**
Very sufficient	20.9%	9	25.0%	10	22.9%	19
Somewhat sufficient	34.9%	15	40.0%	16	37.4%	31
Neutral	25.6%	11	12.5%	5	19.3%	16
Somewhat insufficient	11.6%	5	17.5%	7	14.5%	12
Insufficient	7.0%	3	5.0%	2	6.0%	5
Total	100%	43	100%	40	100%	83

Specificity and clarity. Issues with specificity and clarity of competencies were mentioned regarding both *Professional* and *Advanced Competencies* (AMTA 2015b; 2016a), regardless of the sufficiency level indicated by respondents. Specificity refers to either an appropriate amount or lack of specificity within each level of competency, and clarity refers to the language used within each competency to describe expectations. Those who found the competencies to be either insufficient or somewhat sufficient indicated that the competency was too vague, needed defined methods and techniques, and needed to incorporate therapeutic considerations in the language of the professional competency. Respondents stated that "students have to do infinitely more than [described by the competencies] in a clinical setting," that the professional competency, "is not a competence related to the use of songwriting to meet specific therapeutic needs," and that the wording of the competency, "can be interpreted differently depending on how a music therapist defines simple [compositions]."

Those who indicated that the competency was sufficient or very sufficient also found a need for increased specificity and clarity of language. However, there were also those who expressed that including some generality in language gives flexibility for interpretation and does not "[limit] the creativity one can have with developing songs." In reference to the advanced competency, one individual expressed that, "to be specific would not recognize that not all uses of compositional experiences are applicable to specific clientele or specific settings," and that specific methods may not be relevant to an advanced student's chosen specialty area.

Educational application and skills. Respondents also indicated considerations for applying competencies to educational settings such as programs and internship sites. These responses had less to do with the competencies themselves, and more to do with their implementation within educational settings. Those who rated the *Professional Competencies* (AMTA, 2016a) as insufficient, somewhat sufficient, or were neutral indicated that within education settings there is a need for increased focus on compositional and related competencies, music skills overall, and specific methods and techniques related to songwriting including instrumental writing, vocal writing, improvisational, and structured approaches. Internship supervisors in particular wrote that "most interns [do not] come in with the needed music skills to be successful" with "minimal exposure to [songwriting] techniques." Those who found the competency to be very or somewhat sufficient suggested that most students develop these skills overtime. Multiple respondents also pointed out the feasibility of including even more material within undergraduate curricula, and that there is only so much that effectively can be taught and learned at the undergraduate level. One individual emphasized the need for master's level entry in order to better address the

limitations of what can be addressed, and that "to write competency statements that are more specific or in-depth than these is to not recognize the limitations of undergraduates."

In reference to the *Advanced Competencies* (AMTA, 2015b), no respondents addressed educational applications of this competency. This may have been due to the nature of graduate curricula being more open ended and focused on specializations, and therefore less focused on reinforcing compositional skills considered to be taught at undergraduate levels.

Appropriateness of competency. Multiple respondents wrote about how appropriate the competencies were in regard to expectations of student level. Individuals who found the *Professional Competencies* (AMTA, 2016a) related to songwriting to be somewhat or very sufficient indicated that these competencies were sufficient for entry level music therapy professionals, and that the competencies included enough to begin. Some emphasized that at the professional level only basic skills should be expected, that the competency should not detail advanced practice, and that the *Professional Competencies* must consider what all entry-level music therapists can do.

Individuals also addressed the appropriateness of the Advanced Competency (AMTA, 2015b) based on student level. Some respondents simply stated that the competency was appropriate for advanced levels. However, one music therapy faculty member who found the competency to be insufficient stated that expectations of the advanced competency were very basic and should instead be the standard for undergraduate level students: "At the undergraduate or entry level to our profession, students have to do infinitely more than this in a clinical setting. These competencies are in no way indicative of real-world clinical expectations."

Table 26

Emphasis on Teaching Songwriting to Preprofessionals

	University Faculty (n = 43)		Internship Supervisors and Directors (n = 41)		Total (n = 84)	
	%	**Count**	**%**	**Count**	**%**	**Count**
Strongly Agree	19.1%	8	27.5%	11	23.2%	19
Agree	45.2%	19	40.0%	16	42.7%	35
Undecided/Neutral	33.3%	14	30.0%	12	31.7%	26
Disagree	2.4%	1	2.5%	1	2.4%	2
Strongly Disagree	0.0%	0	0.0%	0	0.0%	0
Total	100%	42	100%	40	100%	82

Emphasis on Preprofessional Songwriting Education

Respondents were presented with the question, 'should greater emphasis be placed on teaching songwriting methods and techniques to preprofessional music therapy students?' Respondents rated their agreement on a scale of strongly disagree to strongly agree (see Table 26). Overall, the majority of respondents indicated that they agreed or strongly agreed with placing greater emphasis on songwriting education, followed closely by those who were undecided or neutral. When considered as separate groups, university faculty and internship supervisors and directors demonstrated similar trends. Through an open ended response, 53.6% of respondents elaborated on their rating. Responses were found to commonly fall under one of the following categories: the context and content of songwriting education, or the development of songwriting skills.

Context and content of songwriting education. Respondents who disagreed or were neutral expressed that programs must consider the limitations of their curricula, that students learn songwriting skills better in clinical settings, and the lack of consistency between

programs. One neutral individual identified that, "programs absolutely should be addressing compositional methods, [but] many programs do not address the competencies sufficiently, and that some do not teach methods at all." Another individual stated that, "lack of development of basic skills…is a problem with the programs themselves, not the standards and competency documents."

Of individuals who agreed or strongly agreed, many also expressed concern for curriculum limitations and lack of consistency among schools in teaching songwriting skills. Both internship supervisors and university faculty identified that they, "do not know if [emphasizing songwriting] is achievable given the limitations in adding more music therapy content," given the limited time available to teach all necessary skills in both undergraduate programs and internships. Others reported feedback from students that there are needs for more emphasis on songwriting and for increased focus on the variety of songwriting methods and techniques taught. Multiple internship directors also noted the lack of songwriting competence demonstrated by students who had no experience in therapeutic forms of songwriting prior to internship. These respondents emphasized that the more experience these students have in songwriting before internship, the less anxious they will be in using songwriting clinically, and that there is not enough time to address these basic skills within the six months allotted. Individuals wrote that students need to learn to "utilize their creativity to create original songs and experiences."

Development of songwriting skills. Different processes and factors in developing songwriting skills were also mentioned by individuals regardless of opinion. Responses suggested that songwriting skills are dependent on a variety of factors including time over which learning takes place and the student's abilities and ease of learning, general music

skill, and flexibility. Many commented that songwriting "is a skill that does not come naturally to many students," and that "some students excel while others need assistance." In addition, one internship director noted the need for emphasis on more varied forms of songwriting, that "songwriting can go much farther than the basic fill-in-the-blank…but for many, that is the only thing they have come to their internship ready to do." Another respondent identified that songwriting can be "daunting, [but] a higher level of musicianship often leads to a higher degree of creativity and risk taking in writing songs."

Summary

Results of this study indicate current trends in teaching songwriting including methods of teaching, methods and techniques of songwriting, perceived competence of the self and students, and opinions regarding competencies and songwriting education. In addition, an analysis of open-ended responses revealed relevant themes.

CHAPTER 5

Discussion

This chapter presents a discussion of the results for each research question and in light of the previous literature. In addition, it provides recommendations, highlights limitations, and makes suggestions for future research.

Is songwriting being taught within music therapy programs and internship sites?

The response rate of this study indicates that in general, this study may be generalized to at least those schools and internship sites which are AMTA-affiliated. Results indicate that songwriting is being taught to some extent by the majority of university programs and internship sites. Therapeutic songwriting specifically is being taught by the majority of university faculty who responded to this survey, and by the majority of internship supervisors and directors. Within internship sites, most supervisors and directors reported that therapeutic songwriting is regularly taught and almost all personally taught songwriting to students. The university faculty respondents who indicated that they personally did not teach therapeutic songwriting either taught in programs that included songwriting as a part of the curriculum, or they taught non-therapeutic songwriting. These findings demonstrate that songwriting is being addressed in some way by all university programs, although not all of these programs reported that they require songwriting to be taught. Within these instances, respondents reported that songwriting is taught despite the lack of requirements, suggesting that

university faculty consider songwriting to be an important component of undergraduate education.

There were several differences between groups that are interesting to note, and may or may not be related to trends in songwriting education. Overall, respondents were from a variety of orientations and regions. It is interesting to note that university faculty reported a preference for cognitive-behavioral orientations, while internship directors and supervisors preferred humanistic orientations. It might be expected that these differences would be due to overall region differences; however, these are more likely due to individual educational backgrounds. For example, while many of those who indicated a preference for cognitive-behavioral orientations resided primary in the Great Lakes region, there was a similar number of individuals from the Great Lakes region who reported a preference for humanistic orientations. However, the spread of orientations among university faculty themselves seemed to relate to the size of the school in question, since those who indicated cognitive-behavioral preferences most commonly indicated working within a large school.

Individuals who indicated they did not teach songwriting were also from a variety of music therapy regions and a variety of theoretical orientations. However, there was a surprisingly high number of internship directors who did not teach songwriting, preferred humanistic orientations, and were from the Mid-Atlantic region. Out of the seven internship directors who reported from this region, four did not teach songwriting and were humanistic in approach. This is surprising given that music-centered approaches are most often associated with humanistic orientations, and if one considers the importance of the music element in creating therapeutic songs (Baker, 2015a).

The most common internship site settings reported were hospice/bereavement services, mental health facilities, developmental centers, geriatric facilities, and children's hospitals/units. This is consistent with the populations most commonly served by music therapists reported by AMTA (2015a) which were the mental health, developmental disabilities, medical/surgical, and older adult populations. The higher percentage of individuals serving adults and older adults than children is also consistent with trends present within the field. All internship sites reported using therapeutic songwriting as a potential intervention at their facility. Considering that individuals have reported using songwriting less with geriatric, hospice, and mental health populations (Baker et al., 2008; 2009; Jones, 2006), it is interesting to note that populations and ages served had no impact on whether or not songwriting was used as a potential intervention, or on whether or not songwriting was taught by music therapists at internship sites. In fact those who reported that songwriting was not taught were from a variety of internship settings including geriatric facilities, children's hospitals, general hospitals, schools sites, hospice/bereavement services, mental health facilities, and community based services.

Context of songwriting education. Overall, respondents reported teaching songwriting within a variety of contexts with the largest focus being with music therapy specific classes. Only a small portion of respondents indicated teaching therapeutic songwriting within a music therapy and songwriting-specific course. This finding is consistent with Goodman (2010) who suggested that songwriting music therapy classes are less frequent within university programs. Curiously, slightly more respondents indicated teaching nontherapeutic songwriting within music therapy songwriting classes specifically, suggesting that there may be more of an emphasis on general methods of songwriting rather

than the focusing on therapeutic considerations within songwriting. There is also the possibility that while songwriting and therapeutic songwriting were defined, there was confusion between the two terms of those taking the survey.

The least common context in which interns wrote songs was with their fellow interns. Most internships could accommodate two interns on average, so the potential for collaborating with peers is present, but not as often taken advantage of. Of course this could be for a variety of reasons including the format of the internship, how often interns work together in general, and the experience level of each intern.

What methods are being employed in order to teach songwriting to students and interns?

In general, a wide variety of methods are being employed to teach songwriting to students within both university programs and internship sites. Not surprisingly, internship directors and supervisors reported a greater focus on students writing within clinical setting with clients, than did university faculty, who were more likely to use experiential methods and teacher generated examples. Again, peer collaboration as well as online collaboration were a lot less common than other methods, despite the presence of studies that explored using Skype and peer collaboration as a method of teaching songwriting (Baker & Krout, 2011; 2012). It is promising to see the emphasis on using experiential methods given the present literature, which indicates the effectiveness of using experiential methods of teaching (Goodman, 2011; Tanguay, 2008). In addition, approximately half of respondents indicated using songwriting prompts given for hypothetical clinical situations which is a form of problem-solving, a method that may support decision making skills in a therapeutic context (Webster & Barrett, 2014). However, less than half of university faculty reported the use of

self-reflection of songwriting experiences, which was also cited as an important step in developing songwriting skills (Baker & Krout, 2011; Krout, Baker, & Muhlberger, 2010; Webster & Barrett, 2014).

      Songwriting Methods and Techniques. Wheeler, Polen, and Shultis (2005) suggested that many music therapy students are advised to simply "go for it" and that there is, "no single of identifiable procedure for music therapy intervention which they can incorporate," when being taught how to write songs within the music therapy context. Within this study, one fifth of university faculty and more than half of internship supervisors and directors advised students to just "go for it." However, each who did listed additional methods. It is encouraging that multiple methods of songwriting are being taught to students and interns, although there are definite trends in the most popular methods. Not surprisingly, the most commonly taught songwriting methods were song parody, fill-in-the-blank, and blues. This is consistent with literature that found fill-in-the-blank to be the most commonly used method to write lyrics in songs (Baker, Wigram, Stott, & McFerran, 2009). Interestingly, improvisational songwriting was also a commonly listed method, which is not a method that is obviously present within songwriting literature and newly mentioned in Baker's (2015a) book on therapeutic songwriting written only last year. This particular method was not defined within the survey, so it is unclear how individuals may have interpreted the definition of this method.

      It makes sense that chord structure, rhythmic structure, melody writing, and lyrical structure would be the most commonly taught techniques, since chords, rhythm, melody, and lyrics are the main components that make up a song. Less commonly taught techniques such as metaphor and simile, may be given less focus since they are likely to have been covered in

English classes in earlier educational settings. It is possible that similar assumptions are made about other techniques, such as tonality, instrumental writing, and arranging, that may be taught in general music classes. However, considering the classical foundations that are common within most undergraduate music programs, these techniques would look very different in the context of a more contemporary style.

Baker (2015b) pointed out the importance of an equal focus on music and lyrics in writing songs within a therapeutic context. In comparison to Baker et al. (2009) who found that lyrics were given a larger emphasis overall, the present study found that respondents who were teaching songwriting placed an equal emphasis on both lyrics and music. Baker (2014) also described various therapeutic considerations when writing songs in a clinical context. Respondents in the present survey were asked to report which of these they addressed when teaching songwriting to students and interns. Half or more of respondents addressed every consideration listed by Baker with two exceptions: only about one third of university faculty addressed environmental considerations, and fewer than half of internship directors and supervisors addressed sociocultural dynamics. Most commonly addressed considerations included therapeutic dynamics, individual dynamics, group dynamics, and indications for more or less therapist's control and songwriting structure. When considering choices to make when songwriting with clients, it may be less obvious to consider environmental factors than those that appear directly connected to the songwriting process, such as therapeutic dynamics and level of control. In addition, according to Hadley and Norris (2016), sociocultural considerations and strategies for meeting related competencies are still being developed within the music therapy field. It would follow that similar

considerations in more specific applications, such as songwriting, may not often be considered.

What training have university faculty and internship supervisors and directors received in therapeutic songwriting?

According to Jones (2006), music therapists who reported writing original songs most commonly learned songwriting skills independently or on the job, and fewer learned these skills within their undergraduate music therapy program. In the present survey, most learned songwriting skills either on the job or independently, and half reported learning these skills in their undergraduate degrees. That being said, there were far fewer university faculty members who reported learning songwriting skills in undergraduate or equivalency studies than internship directors and supervisors. It is likely that there would have been less focus on songwriting skills in undergraduate curricula when university faculty, who have been in the field longer on average, were earning their degrees. Individuals who reported earning their music therapy credentials in the 70s and 80s also reported learning songwriting skills in undergraduate classes, but less frequently than those who earned their credentials in the 90s and on. This demonstrates that songwriting is being taught in undergraduate curricula with increasing frequency. In addition, about one third of individuals reported learning songwriting skills within their music therapy graduate studies. This is understandable given that graduate studies tend to focus less on learning new music skills, and focus more on developing those skills in advanced contexts. In a discussion of recommended qualifications of music teachers, Robinson, Bell, and Pogonowski (2011) advised acquiring college-level courses in composing in order to fully understand the subtleties in working with students creatively. In the present study, those respondents who reported learning independently or on

the job exclusively also reported a wide range of self-perceived overall competence in teaching songwriting, which indicates that education alone does not necessarily determine one's knowledge of competence in teaching songwriting. However, it is safe to assume that a solid education in songwriting methods and techniques would more likely support the development of these skills and greater competence in teaching overall.

The majority of individuals in this study reported that the process of writing a song with clients was neither easy nor difficult, however in Jones' (2006) study over half of respondents found songwriting to be a generally easy or almost always easy task. Considering that music therapy is often facilitated from an individualized perspective, it makes sense that respondents would find the songwriting process to be neither easy nor difficult, since this process would look different from client to client, and may also differ based on population and needs.

How competent do university faculty and internship supervisors and directors perceive themselves to be in teaching songwriting?

The majority of respondents to this survey reported that they felt either extremely or moderately competent in teaching all methods and techniques of songwriting except original rap writing and pastiche methods. It is probable that individuals were unfamiliar with the pastiche method, since pastiche is not often mentioned in the literature, and is newly listed by Baker (2015b) as a songwriting method. As expected, respondents felt the most competent in teaching fill-in-the-blank and song parody methods (Baker, Wigram, Stott, & McFerran, 2009). The majority of both all respondents and those who teach songwriting indicated that they are moderately competent in teaching songwriting to students or interns. Deemer (2016) suggested that in order to teach the 'art of composition' effectively, one must have both

comfort and experience in the creative process. While the current study indicated that there is more certainty amongst teachers who teach songwriting than previously thought (Wheeler, Polen, & Schultis, 2005), it may be argued that the most common songwriting methods being taught do not require much knowledge in songwriting as an art. Therefore, it is unclear to what depth songwriting is taught to students, and if there is more of a focus on the product or process in writing a song.

How competent do respondents perceive their students or interns to be in songwriting, and is there a difference in perception between groups?

    Perceived competence upon beginning internship. The majority of university faculty perceives their students to be somewhat competent in songwriting upon beginning internship. Interestingly, internship directors perceive the beginning intern to be less competent than do the university faculty at the same point in training. While students may learn songwriting methods and skills in a variety of class settings, their competence in facilitating and utilizing songwriting methods may be assessed differently in a clinical situation than in a classroom setting. In addition, the results of a Mann-Whitney test confirmed that these differences were very unlikely to have occurred by chance. This indicates that while university faculty may perceive their students to be at a level of songwriting suited for beginning internship, internship supervisors and directors may have higher expectations of these same students. It is possible that internship supervisors and directors focus on songwriting skills needed for the entire internship, which would account for different perceptions. How one defines competence may also be a factor in differences of opinion, indicating a need to further explore how to clearly define what is expected of students at all levels.

Perceived competence at the completion of internship. Upon completion of internship, internship supervisors and directors perceived their interns to be at a significantly higher competence level in songwriting than when they began, which indicates that therapeutic songwriting is learned and applied across the internship. It is apparent that internship directors and supervisors believe that their students make great gains in their songwriting abilities during internship. It is unclear exactly why these gains may occur. One explanation may be that students are able to apply the basic songwriting skills that they learn in their undergraduate programs to their clinical work during internship, and therefore have a chance to develop these skills more fully. Another possibility is that by engaging in songwriting experiences in internship, interns are able to connect more fully to the powerful effect songwriting can have on clients and the therapeutic relationship developed therein.

What are respondents' personal opinions concerning various topics?

Importance of music therapist competence in songwriting. All respondents indicated that it is important for music therapists to be competent in therapeutic songwriting. While many respondents commented that the need for competence in songwriting is dependent on the setting of therapy, most agreed that songwriting is a complex, flexible intervention that allows for a broad variety of experiences that may be individualized based on client need. Most also agreed that although songwriting may not be applicable for every client, therapists should still have the ability to offer songwriting as a potential intervention when appropriate. If it is appropriate, it is important to be versed in a variety of songwriting methods and techniques in order to best meet the needs of your client. In other words, fill-in-the-blank and song parody may not always be the appropriate method! In addition, therapists can create songs for the purposes of creating highly individualized therapy sessions, written

to encompass specific needs or goals. As noted by one respondent, "having a knowledge base and tools to approach the task is an important foundation, but at some point each person needs to find what works best for their approach and population."

Sufficiency of songwriting-related competencies. It is important to note that while much of the data in this survey point to the fact that songwriting is being taught within university programs and internship sites, respondents are still concerned that students are not getting the skills they need as evidenced by the opinion section of this survey. This could mean that although songwriting is being taught, there is a great variety in the quality of what is being taught or learned, an element of songwriting which cannot be determined by closed-answer questions in this survey. While this survey asked what methods and techniques were taught, it did not seek to determine the frequency or depth of which methods and techniques are taught nor the quality or depth of learning.

Interestingly, while respondents rated the sufficiency of the *Professional* and *Advanced Competencies* (AMTA, 2015b, 2016a) as being both insufficient and sufficient, reasons given for these ratings were often similar regardless of the rating giving. Across the board, respondents indicated that the professional competency was vague and unspecific. It would seem that these comments demonstrate a need for a better understanding of what is expected of students, and what should be expected of students, but may also reflect the intention of the competencies to allow for academic freedom in preparing students to become professionals. The professional competency indicates that students should be able to "compose songs with simple accompaniment" (AMTA, 2016a). If this competency is assessed at the most basic level, it may be interpreted to mean that a student has the ability to compose a song using at least one effective method, and is only expected to use beginning-

level music theory skills. When assessed at a higher level of expectation, one might interpret this language to mean that a student will be able to compose a song using any applicable method using music that is simple, but still effective. The issue with this competency is that there is a lack of definition of what is meant by "compose" and by "simple". Similar issues were mentioned in relation to the advanced competency, especially in terms of what is meant by "broad range of compositional experiences" (AMTA, 2015b). On the other hand, there were some individuals that indicated that the lack of specificity in the competency allowed for flexibility and does not limit creativity. In addition, they pointed out the importance of recognizing the limits of what can be learned within an undergraduate curriculum and acknowledging realistic expectations of all undergraduate students.

Clearly there is a need to find a balance between what is enough education for students to be basically competent in utilizing songwriting, and what can be realistically covered within an undergraduate music therapy education. The question that needs to be asked is, what is the most basic level of competency needed by all students to implement songwriting effectively? This is a difficult question to answer given the wide range of songwriting methods and techniques that are possible. One solution offered by a respondent is to replace the current professional competency with the advanced one, which is to "design and employ a broad range of compositional experiences in order to address therapeutic needs," (AMTA, 2015b). They argue that new professionals are expected to do "infinitely more" than the basic competency defines. Other respondents also mentioned the need to incorporate therapeutic considerations into the professional level competency, which are currently absent. Goodman (2011) similarly suggested that entry-level students need to begin to develop the awareness of how songwriting fits into a therapeutic context since even entry-

level students will likely compose within clinical contexts. However, bringing the advanced competency to the professional level may exasperate the already limited time that programs have to teach students all the necessary knowledge and skills they need to be successful music therapists. Other respondents indicated the need for master's level entry into the field, wherein skills such as songwriting could be given more attention and be less limited by curriculum length.

What is true is that songwriting is a skill that takes time to develop and therefore cannot possibly be taught in all its nuances within the timeline of an undergraduate curriculum, or even a graduate curriculum. As some individuals pointed out, songwriting is a skill that music therapists will need to continue to develop as is necessary for providing effective therapy for their clients. Songwriting is not a skill that is developed consistently among all individuals, and some may learn songwriting more easily than others. For this reason, it seems even more necessary to determine what songwriting skills are necessary to teach students so that they are competent enough to implement basic songwriting in a wide variety of clinical situations. As one individual stated, "songwriting does not need to be complex to meet a client's needs, but it needs to be implemented effectively for a therapeutic purpose." Likewise, it may be important to define what is considered to be an advanced use of therapeutic songwriting.

Emphasis on songwriting education. It is clear that respondents think that (a) it is important for music therapists to be competent in songwriting, and (b) that the competencies related to songwriting are somewhat unclear as to their expectations and intention. While the current survey shows that songwriting is being taught in some capacity within university programs and internship sites, most people agree that greater emphasis should be placed on

teaching songwriting to preprofessional students. Both university faculty and internship directors and supervisors indicated that they were unsure what opportunities to learn songwriting skills were being offered within undergraduate curriculums, a concern on which this survey hopefully shreds light.

The concern that undergraduate curricula are too time-limited is still present, as well as those who are concerned that students are not developing more music skills which would then make learning a topic such as songwriting possible. Others expressed the need for more emphasis on all major intervention areas named by Bruscia (2014) including composition, improvisation, listening, and recreating. As one individual stated, "a higher level of musicianship often leads to a higher degree of creativity and risk taking in song writing," and, "students should be as musically competent as possible." Wheeler, Polen, and Schultis (2005) also indicated that music therapists often do not have the music skills necessary to improvise, and therefore feel that they cannot compose. This opinion would support the notion that the music element in songwriting is acutely important when writing songs in clinical contexts (Baker, 2015b; Jenkins, 2013; Wheeler, 2002).

As evidenced by the gap in perceived competence of students between university programs and internship sites, it may also be important to determine what level of songwriting skills undergraduate students are expected to have developed by the time of internship, and what skills can be developed or learned within the internship setting. Multiple internship directors and supervisors expressed their experiences with interns who either had no skills in songwriting or were lacking in skills. Many identified that students knew how to use song parody and fill-in-the-blank, yet had a lack of knowledge in other methods, such as the ability to improvise and be flexible in their songwriting. In addition, it was recognized

that while songwriting may not be appropriate for every client, it is important to possess the skills so that one can offer them in clinically appropriate situations. In other words, a student's composition toolbox must contain the right tools so that these can be accessed easily when faced with a compositional task (Morin, 2002). It is important then to not only teach a variety of methods to fit a variety of clinical situations, but to teach students when and why songwriting would be implemented, why it would be contraindicated, and what considerations need to be made in going through the songwriting process (Baker, 2014; Webster & Barrett, 2014).

As one respondent wrote, "the more practice students have with this skill, the easier it will be for them to work clinically," especially since this is not a skill that is necessarily innate in all students. As established above, songwriting is an important therapeutic experience that is important for individuals to have the skills to offer to their clients, but the process of learning skills often takes time. "As an undergraduate student," wrote one individual, "I found the songwriting process [to be] threatening because I had never done it before. I composed one song. After internship, when I felt more competent, my mind felt freer to compose." Another wrote, "on occasion, an intern will come into internship never having written a song themselves and they are, quite frankly, terrified. Once they see how simple the process can be, then we can work to understand the therapeutic appropriateness." This is consistent with reports of students who expressed anxiety due to inexperience before engaging in the songwriting process, but found songwriting to be easier than they had expected upon reflection (Baker & Krout, 2011; Krout, Baker, & Muhlberger, 2010). As is indicated by these individuals, songwriting can be a daunting task without any guidance or knowledge in the subject. This was suggested by Baker and Wigram (2005) as well, who

commented that often students are encouraged to develop their own methods, but do not have any tools from which to start. Methods of learning songwriting take time to develop and the ease of writing will vary by student, but given a beginning methods set, a student will feel more competent to begin developing those skills both in the context of school, internship, and on their own.

Recommendations

Songwriting has been shown to be a valuable therapeutic tool that music therapists are using in their work with a variety of populations (Baker, Wigram, Stott, & McFerran, 2008; 2009). As such, it is an important method of music therapy to teach students within the education setting so that they are prepared when they eventually work in clinical settings with clients. It is recommended that opportunities for learning therapeutic songwriting continue to be integrated into university programs and internship sites, and that a variety of methods and techniques are considered when designing the content of that which is taught. Although there are only a small number of programs that reported not teaching songwriting to students, it is concerning that these programs do not offer their students these opportunities, especially given the present competencies. Similarly, it may be important for internships to consider the need to incorporate opportunities for learning songwriting, especially when those students are expected to implement songwriting clinically. Educators should continue to utilize a variety of teaching methods, and should place more emphasis methods that might support self-awareness of strengths and needs, and peer collaboration (Baker & Krout, 2011; Krout, Baker, & Muhlberger, 2010).

This study demonstrates a need for continued clarification in what is expected of students at different levels. Based on previous literature and this study, it is recommended

that the *Professional* and *Advanced Competencies* (AMTA, 2015b, 2016a) related to songwriting and composition skills be further defined so that there is less room for confusion and disparate expectations of students between university programs and internship sites. It may be beneficial to define what methods and techniques of composition are necessary to ensure that our students are prepared to work in a variety of settings and with a variety of individual needs. It may be helpful to consider Baker's (2015a) tables that detail a spectrum of songwriting structures to begin to consider methods beyond those which most students seem adequately competent (i.e., fill-in-the-blank).

While this study demonstrated that songwriting is being taught, respondents' opinions also demonstrated a need for greater emphasis on songwriting. Therefore, it is also recommended that music therapy programs and internship sites individually evaluate how they are meeting competencies related to songwriting and to consider areas that may need increased focus. While not specified by the professional competency, it may be necessary to take the initiative to teach students not only a variety of methods, but therapeutic considerations within the songwriting process specifically (Goodman, 2011). While individual student ability is important to keep in mind, it is important that we are providing beginning tools to students so that they are not overwhelmed or underprepared when they are expected to implement compositional experiences (Morin, 2002). It may also be beneficial to look at not only teachers' opinions regarding the need for further emphasis on songwriting education, but students' perspective as well that could reveal benefits to teaching songwriting that educators may be unaware of (Baker & Krout, 2011; Krout, Baker, & Muhlberger, 2010; Wheeler, 2002).

Considering the large difference between how university programs and internship sites perceive the songwriting competence of the students and interns, it is recommended that these expectations be made more transparent. Some of these expectations gained clarity through this survey, but more current research is needed to determine to what extent these differences exist, including competencies beyond those related to composition. Determining which entry-level songwriting methods and techniques are necessary for students to be competent in working with clinical settings will also help to clarify these expectations.

Recommendations for entry-level songwriting skills. Given the importance of both lyrics and music in writing songs with clients to support therapeutic processes (Baker, 2015a; 2015b), it seems important for music therapy students to receive skills that would support essential knowledge in both of these areas. While respondents reported addressing music and lyrics equally when teaching songwriting, the most common methods taught were fill-in-the-blank and song parody forms, both of which focus on lyric creation. While methods such as these provide much needed structure for clients who require increased therapist support to be successful in songwriting experiences, other clients might be better supported given less-structured and more musically-based forms of songwriting that do not limit their creative potential. As such, it is important that teachers introduce songwriting considerations when teaching methods of songwriting including more or less therapist control and varying levels of structure.

As suggested by the literature and results of the present survey, it is a given that students need to possess a foundation in music skills including understanding of chord structures, rhythmic structures, melody writing, tonality, vocal writing, and instrumental writing. However, it may be necessary to connect these musical concepts to more

contemporary applications to further support student understanding. With the development of music skills, students would be more capable of writing effective music to support and carry the lyrical content, and thus, more prepared to work in less structured forms including completely original songwriting. Further, within therapeutic songwriting, developing songs that accurately validate and carry clients' expressed experiences requires the development of therapeutic skills such as empathetic listening and therapeutic verbal skills. Therapists must also be able to develop music which appropriately supports the present needs and emotions of their clients. Thus, having an understanding of the use of prosody, the congruence between the music and lyrics or between elements of the song and a client's experience, would be a vital skill for music therapists to develop. In addition, it would be important for students to develop self-awareness and evaluation skills, which are not only important to therapy work in general, but in thinking critically about which songwriting approaches will best support the present therapeutic need, and self-evaluating the effectiveness of those choices.

Finally, it is important to consider the level of structure given to students when teaching songwriting skills. While providing songwriting methods and techniques is an important step in supporting songwriting competence (Baker, 2014; Morin, 2002; Webster & Barrett, 2014), it is also important to encourage students to develop their own voices and creativity when writing songs. This researcher recommends that when teaching songwriting, both freedom and structure should be introduced simultaneously, thus supporting individual ingenuity while providing methods and techniques from which to begin.

Limitations

There were several limitations to this study. Since this study only included the responses from individuals of AMTA-approved schools and AMTA national roster internship

sites, the results are only representative of those AMTA affiliated respondents. In addition, it is unclear how representative this study is of the present programs and internship sites within the United States, since there was no way to determine whether there were multiple respondents from the same school or internship.

Due to the nature of the survey questions, the quality of the songwriting education being provided to student could not be determined. Respondents were only asked if they taught certain methods and techniques, but not to what extent. Therefore, there was no way to know where a method was taught once or on multiple occasions over time. In addition, while this survey defined certain methods and techniques, it did not define all of them including improvisational songwriting. Therefore, it is unclear how respondents interpreted these methods and techniques, and thus, their competence in teaching these items.

Future research is recommended on this topic that considers the quality and depth of those songwriting methods and techniques that are being taught. In addition, research that considers which methods and techniques are necessary for entry-level students to be clinically competent would help to clarify differences in expectations and help clarify current competencies related to composition.

Conclusion

This study sought to understand the nature of teaching songwriting within university programs and internship sites, and in doing so to bring awareness to the importance of songwriting education in preparing students for clinical work. This study demonstrated that therapeutic songwriting skills are being taught in the majority of university programs and internship sites using a variety of methods. In addition, it uncovered some of the opinions

about the importance of songwriting interventions, competencies, and the need to place great emphasis on songwriting in preprofessional education.

It is this researcher's personal opinion that there is a balance in which to teach and to write songs. It is essential to connect to the profound feelings and emotions which are reflected and magnified by writing songs; however, it is equally essential to hold the tools in order to do this effectively. In this way, students can make informed decisions in supporting the songwriting process when working clinically based on client need, rather than falling back on the one or two methods that they are comfortable with.

More research is necessary to identify the songwriting skills that are necessary for entry-levels students to attain, as well as what level of competence is appropriate to expect of these students. It is clear that respondents value songwriting as an intervention and agree that it is necessary to ensure that students have skills in this composition, but as Deemer (2016) pointed out, it is difficult to teach composition methodically without removing the humanness and connection to ones thoughts and feelings. Given the nature of music therapy, it is extremely important for our music therapy students to connect to the humanness in songwriting so that they can meet human needs with such interventions. Therefore it is important that we continue to develop ways of teaching and integrating songwriting that are both more intentional but also organic so that we can connect students not only to the tools they need, but to the potentially powerful experience that writing a song can provide.

References

American Music Therapy Association. (2015a). *Member survey and workforce analysis: A descriptive statistical profile of the AMTA membership.* Retrieved from http://www.musictherapy.org/assets/1/7/15WorkforceAnalysis.pdf

American Music Therapy Association. (2015b). *AMTA advanced competencies.* Retrieved from http://www.musictherapy.org/members/advancedcomp/

American Music Therapy Association. (2016a). *AMTA professional competencies.* Retrieved from http://www.musictherapy.org/about/competencies/

American Music Therapy Association. (2016b). *AMTA regions and student organizations.* Retrieved from http://www.musictherapy.org/about/regions/

American Music Therapy Association. (2016c). *Organization directory search.* Retrieved from https://netforum.avectra.com/eweb/DynamicPage.aspx?Site=amta2&WebCode=OrgSearch

American Music Therapy Association. (2016d). *Scope of music therapy practice.* Retrieved from http://www.musictherapy.org/about/scope_of_music_therapy_practice/

Baker, F. A. (2014). An investigation of the sociocultural factors impacting on the therapeutic songwriting process. *Nordic Journal of Music Therapy, 23*, 123–151. doi:10.1080/08098131.2013.783094

Baker, F. A. (2015a). *Therapeutic songwriting: Developments in theory, methods, and practice.* New York, NY: Palgrave Macmillan.

Baker, F. A. (2015b). What about the music? Music therapists' perspectives on the role of

    music in the therapeutic songwriting process. *Psychology of Music*, *43*, 122–139.

    doi:10.1177/0305735613498919

Baker, F., & Krout, R. E. (2011). Collaborative peer lyric writing during music therapy

    training: A tool for facilitating students' reflections about clinical practicum

    experiences. *Nordic Journal of Music Therapy, 20*, 62–89.

    doi:10.1080/08098131.2010.486132

Baker, F., & Krout, R. E. (2012). Turning experience into learning: Educational contributions

    of collaborative peer songwriting during music therapy training. *International*

    Journal of Music Education, 30, 133–147. doi:10.1177/0255761411427103

Baker, F., & Wigram, T. (2005). *Songwriting: Methods, techniques, and clinical applications*

    for music therapy clinicians, educators, and students. Philadelphia, PA: Jessica

    Kingsley Publishers.

Baker, F., Wigram, T., Stott, D., & McFerran, K. (2008). Therapeutic songwriting in music

    therapy, Part I: Who are the therapists, who are the clients, and why is songwriting

    used?. *Nordic Journal of Music Therapy, 17*, 105–123.

    doi:10.1080/08098130809478203

Baker, F., Wigram, T., Stott, D., & McFerran, K. (2009). Therapeutic songwriting in music

    therapy, Part II: Comparing the literature with practice across diverse clinical

    populations. *Nordic Journal of Music Therapy, 18*, 32–56.

Bruscia, K. (2014). *Defining music therapy* (3rd ed.). Gilsum, NH: Barcelona Publishers.

Collegedata. (2016). *College size: Small, medium or large.* Retrieved from http://

    www.collegedata.com/cs/content/content_choosearticle_tmpl.jhtml?articleId=10006

Davis, W. B., Gfeller, K. E., & Thaut, M. H. (2008). *An introduction to music therapy: Theory and practice* (3rd ed.). Silver Spring, MD: American Music Therapy Association.

Deemer, R. (2016). Reimagining the role of composition in music teacher education. *Music Educators Journal, 102*, 41–45. doi: 10.1177/0027432115626253

Ginnochio, J. (2003). Making composition work in your music program. *Music Educators Journal, 90*, 51–55.

Goodman, K. D. (2011). *Music therapy education and training: From theory to practice*. Springfield, IL: Charles C Thomas.

Hadley, S., & Norris, M. S. (2016). Musical multicultural competency in music therapy: The first step. *Music Therapy Perspectives, 34,* 129–137.

Hsaio, F. (2014). Gatekeeping practices of music therapy academic programs and internships: A national survey. *Journal of Music Therapy*, *51*, 186–206. doi:10.1093/jmt/thu010

Jenkins, C. (2013). Functional musicianship of music therapy students: Entering internships as perceived by internship directors. *Music Therapy Perspectives, 31*, 175–180.

Jones, J. D. (2006). Songs composed for use in music therapy: A survey of original songwriting practices of music therapists. *Journal of Music Therapy, 43*, 94–110.

Krout, R. E., Baker, F. A., & Muhlberger, R. (2010). Designing, piloting, and evaluating an on-line collaborative songwriting environment and protocol using Skype telecommunication technology: Perceptions of music therapy student participants. *Music Therapy Perspectives, 28*, 79–85.

Morin, F. (2002). Finding the music 'within': An instruction model for composing with

 children. In T. Sullivan & L. Willingham (Eds.), *Creativity and music education* (pp.

 152–177). Edmonton, AB, Canada: Canadian Music Educators Association.

Petersons.com. (2016). *Schools and programs.* Retrieved from https://www.petersons.com/

 college-search.aspx

Robinson, N. G., Bell, C. L., & Pogonowski, L. (2011). The creative music strategy: A

 seven-step instructional model. *Music Educators Journal, 97*(3), 50–55.

Tanguay, C. L. (2008). Supervising music therapy interns: A survey of AMTA national

 roster internship directors. *Journal of Music Therapy, 45*, 52–74.

The College Music Society. (2014, November). *Transforming music study from its

 foundations: A manifesto for progressive change in the undergraduate preparation of

 music majors*. Missoula, MT: Author.

Vagias, W. M. (2006). *Likert-type scale response anchors*. Retrieved from

 https://www.clemson.edu/centers-institutes/tourism/documents/sample-scales.pdf

Walker, R., & Ebooks, C. (2007). *Music education: Cultural values, social change and

 innovation*. Springfield, IL: Charles C Thomas.

Webster, P. R., & Barrett, J. R. (2014). *The musical experience: Rethinking music teaching

 and learning.* New York, NY: Oxford University Press.

Wheeler, B. L. (2002). Experiences and concerns of students during music therapy practica.

 Journal of Music Therapy, 39, 274–304.

Wheeler, B. L., Polen, D. W., & Shultis, C. L. (2005) *Clinical training guide for the student

 music therapist.* Gilsum, NH: Barcelona Publishers.

Wigram, T. (2005) Survey research. In B. L. Wheeler (Ed.), *Music therapy research* (2nd ed.)

(272–281). Gilsum, NH: Barcelona Publishers.

APPENDIX A

**The Practice of Teaching Therapeutic Songwriting:
A Survey of Educators and Internship Supervisors**

<u>Music Therapy Educators Version</u>

A.   *Demographic Data*

1.   Please indicate which of the following roles **best** applies to you:

   a. Music Therapy faculty
   b. Music Therapy Program Director
   c. I am none of the above.

('None of the above' leads to survey completion and a final thank you.)

2.   In what **year** did you…

   a. First begin teaching music therapy as faculty: _____
   b. First begin teaching music therapy at your current instituition as faculty: _____

3. In what year did you first become a music therapist, either RMT, CMT, ACMT, MT-BC, or other (whichever came first)
   a. Please list year: _____

4. If applicable, please indicate which undergraduate classes you are currently teaching or have taught in the past year by listing them by title below:

   a. _____
   b. _____
   c. _____
   d. _____

5. If applicable, please indicate which graduate or doctoral classes you are currently teaching or have taught in the past year by listing them by title below:
   a. _____
   b. _____
   c. _____
   d. _____

B. School Demographic Data

1. Please indicate the size of your college or university:
   - ☐ Small (>5,000 students)
   - ☐ Medium (5,000 – 15,000 students)
   - ☐ Large (<15,000 students)

2. Please list the number of declared music therapy majors in the current year who are:
   - a. _____ Undergraduate
   - b. _____ Equivalency ONLY
   - c. _____ Equivalency/Master's
   - d. _____ Post MT-BC Master's
   - e. _____ Doctoral
   - f. _____ I do not have this information.

3. Please indicate the region in which your school resides:
   - ☐ Great Lakes
   - ☐ Mid-Atlantic
   - ☐ Midwestern
   - ☐ New England
   - ☐ Southeastern
   - ☐ Southwestern
   - ☐ Western Region
   - ☐ Choose not to report

4. Please list your current number of music therapy faculty who are:
   - a. _____ Full Time Faculty
   - b. _____ Part Time Faculty

5. How would you best categorize your theoretical orientation **(mark one)**?

   - ☐ Behavioral
   - ☐ Medical
   - ☐ Neurologic
   - ☐ Educational
   - ☐ Cognitive-Behavioral
   - ☐ Psychodynamic

   - ☐ Humanistic
   - ☐ Feminist
   - ☐ Community
   - ☐ Other:

   _____

C. Definition of Songwriting:

Songwriting: The composition of an original song or part of a song for personal, professional, or commercial purposes.

Therapeutic Songwriting: The composition of an original song or part of a song with or for a client with varying degrees of support by a therapist, thereby promoting a therapeutic relationship, and supporting expression of needs, feelings, and thoughts (Baker & Wigram, 2005, Bruscia, 2014).

Based on these definitions, please answer the questions below:

1. Is **songwriting** a required part of the curriculum within your music therapy program?
   ☐ Yes
   ☐ No

2. In what context is **songwriting** taught to students? **(check all that apply)**

   ☐ General music classes (i.e. piano, voice, aural skills, theory)
   ☐ Composition class (i.e. classical/jazz/contemporary composition)
   ☐ Songwriting (non-MT specific) (i.e. Commercial songwriting)
   ☐ MT Songwriting (class specifically for MT songwriting techniques)
   ☐ Within other MT classes
       ☐ Classes based on population (i.e. Music Therapy in Mental Health)
       ☐ Classes based on skills (i.e. Functional Techniques for the MT)
       ☐ Practicum
   ☐ Other: _____

3. Do *you* teach **songwriting** within your music therapy program?
   ☐ Yes
   ☐ No

   If Yes, please specify in which courses:

   _____

4. Is **therapeutic songwriting** a required part of the curriculum within your music therapy program?
   ☐ Yes
   ☐ No

   If Yes, in what course(s)?

   _____

5. In what context is **therapeutic songwriting** taught to students? **(check all that apply)**

       ☐ General music classes (i.e. piano, voice, aural skills, theory)
       ☐ Composition class (i.e. classical/jazz/contemporary composition)
       ☐ Songwriting (non-MT specific) (i.e. Commercial songwriting)
       ☐ MT Songwriting (class specifically for MT songwriting techniques)
       ☐ Within other MT classes
              ☐ Classes based on population (i.e. Music Therapy in Mental Health)
              ☐ Classes based on skills (i.e. Functional Techniques for the MT)
              ☐ Practicum
       ☐ Other: _____

6. Do *you* teach **therapeutic songwriting** within your music therapy program?
       ☐ Yes
       ☐ No

If Yes, in what course(s)?

_____

If you answered **no** to question 3 AND 6, please skip to **section E**.
Otherwise, continue to **section D**.

D. Songwriting Education Methods

1. What methods do you employ in order to teach songwriting to students? **(check all that apply)**

   ☐ Lecture (presentation of related information)
   ☐ Song Listening
   ☐ Teacher generated examples
   ☐ Inside/Outside Class Experientials
   ☐ Individual tutoring
   ☐ Online collaboration
   ☐ Peer collaboration
   ☐ Group collaboration
   ☐ Live or Recorded in-class presentation of song
   ☐ Personal reflection of songwriting experience
   ☐ Personal songwriting assignments (song created for self individually or with peers, but not with/for an individual or group in a clinical setting)
   ☐ Songwriting prompts given for hypothetical clinical situations
   ☐ Writing songs for individual clients in a clinical setting
   ☐ Writing songs for groups of clients in a clinical setting
   ☐ Songwriting in a clinical setting with individual clients
   ☐ Songwriting in a clinical setting with a group of clients
   ☐ Other: _____

2. What therapeutic songwriting methods do you teach students? **(check all that apply)**
   ☐ Students encouraged to just "go for it"
   ☐ Fill-in-the-blank
   ☐ Song parody *(Rewriting all or some of the lyrics of a pre-recorded while maintaining the original melody)*
   ☐ Instrumental writing
   ☐ Notational activities
   ☐ Integrative/strategic songwriting *(song parody using therapist-composed songs with a specific therapeutic purpose)*
   ☐ Creating original raps over either original or pre-composed music
   ☐ Song Collage *(lyrics taken from pre-composed music and rearranged to form new song)*
   ☐ Mash-up songs *(music taken from two or more pre-recorded songs and blended together to form a new work)*
   ☐ Pastiche *(Musical motifs, styles, or techniques borrowed from one or more sources and integrated into an original work)*
   ☐ Blues
   ☐ Improvisational songwriting

☐ Completely original songwriting
    ☐ With clients
    ☐ For clients
☐ Other:

_____

3. What songwriting techniques do you teach to students? **(check all that apply)**

    ☐ Prosody
    ☐ Rhyme structure
        ☐ Perfect rhyming *(i.e. cat, bat, sat)*
        ☐ Imperfect rhyming *(i.e. cat, sad, rap)*
    ☐ Lyrical structure
    ☐ Chord Structure
    ☐ Rhythmic Structure
    ☐ Tonality
    ☐ Metaphor
    ☐ Simile
    ☐ Perspective writing (first-person, second/you-person, third-person)
    ☐ Instrumental writing
    ☐ Melody writing
    ☐ Arranging

4. When you teach songwriting, what focus is placed on lyric creation versus music creation?

    ☐ Completely focused on lyric creation
    ☐ Mostly focused on lyrics with some focus on music creation
    ☐ Equal focus on both lyric and music creation
    ☐ Mostly focused on music with some focus on lyric creation
    ☐ Completely focused on music creation

5. What other factors related to songwriting do you teach? **(check all that apply)**
    ☐ Environmental considerations
    ☐ Group dynamics
    ☐ Individual dynamics
    ☐ Sociocultural dynamics
    ☐ Therapeutic dynamics
    ☐ Multicultural considerations
    ☐ Contraindications for songwriting
    ☐ Indications for more/less songwriting structure
    ☐ Indications for more/less therapist control

E. Personal Experience with Teaching Songwriting

1. Have you used songwriting as a therapeutic intervention?
   - ☐ Yes
   - ☐ No

2. How did you acquire skills in songwriting? **(check all that apply)**

   - ☐ General music undergraduate or equivalency studies
   - ☐ Music therapy undergraduate or equivalency studies
   - ☐ During Internship
   - ☐ Music therapy graduate studies
   - ☐ CMTE course
   - ☐ Online class
   - ☐ On the job
   - ☐ Independently
   - ☐ Other:_____

3. How difficult would you rate the process of writing a song with or for a client/patient?

Very Easy	Easy	Neutral	Difficult	Very difficult
5	4	3	2	1

4. How competent would you rate yourself to be in **teaching** each of these songwriting methods to students?

	Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
Fill in the Blank	5	4	3	2	1
Song Parody	5	4	3	2	1

Song Parody: *Rewriting all or some of the lyrics of a pre-recorded song while maintaining the original melody.*

Instrumental Writing	5	4	3	2	1
Notational Activities	5	4	3	2	1
Strategic Songwriting	5	4	3	2	1

Strategic Songwriting: Song parody using therapist-composed songs with a specific therapeutic purpose

Original Rap Creation	5	4	3	2	1
Song Collage	5	4	3	2	1

Song Collage: Lyrics taken from pre-composed music and rearranged to form new song

Mash-Up	5	4	3	2	1

Mash-Up: Music taken from two or more pre-recorded songs and blended together to form a new work

Pastiche	5	4	3	2	1

Pastiche: Musical motifs, styles, or techniques borrowed from one or more sources and integrated into an original work

Improvisational Songwriting	5	4	3	2	1
Completely Original songwriting *with* clients	5	4	3	2	1
Completely original songwriting *for* clients	5	4	3	2	1

5. How competent would you rate yourself to be in **teaching** the following songwriting techniques to students?

	Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
Prosody	5	4	3	2	1
Rhyme Structure	5	4	3	2	1
Lyrical Structure	5	4	3	2	1
Chord Structure	5	4	3	2	1
Rhythmic Structure	5	4	3	2	1
Tonality	5	4	3	2	1
Metaphor	5	4	3	2	1
Simile	5	4	3	2	1
Perspective Writing	5	4	3	2	1
Melody Writing	5	4	3	2	1
Arranging	5	4	3	2	1
Instrumental Writing	5	4	3	2	1

6. How would you rate your **overall competency in teaching** songwriting to students?

Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
5	4	3	2	1

7. How competent do you perceive most students within your program to be in songwriting **as they begin internship**?

Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
5	4	3	2	1

F. Personal Opinion

1. How important is it for music therapists to be competent in therapeutic songwriting?

Very Important	Somewhat Important	Neutral	Not Very Important	Not at All Important
5	4	3	2	1

Please explain your answer:

_____
_____

2. How sufficient do you find the current *AMTA Professional Competencies* related to songwriting to be? (American Music Therapy Association, 2016a)

A.2.1: Compose songs with simple accompaniment.
A.4.2: Develop original melodies, simple accompaniments, and short pieces extemporaneously in a variety of moods and styles, vocally and instrumentally.

Sufficient	Somewhat sufficient	Neutral	Somewhat insufficient	Insufficient
5	4	3	2	1

Please explain your answer:

_____
_____

3. How sufficient do you find the current *AMTA Advanced Competencies* related to songwriting to be? (American Music Therapy Association, 2015b)

II.A.7.2: Design and employ a broad range of compositional experiences in order to address therapeutic needs.

Sufficient	Somewhat sufficient	Neutral	Somewhat insufficient	Insufficient
5	4	3	2	1

Please explain your answer:

_____
_____

4. To what degree to you agree with this statement:

"I believe that a greater emphasis should be placed on teaching songwriting methods and techniques to preprofessional music therapy students."

Strongly Agree	Agree	Undecided/ Neutral	Disagree	Strongly Disagree
5	4	3	2	1

Please explain your answer:

_____
_____

APPENDIX B

The Practice of Teaching Therapeutic Songwriting:
A Survey of Educators and Internship Supervisors

<u>Music Therapy Internship Site Version</u>

A. Demographic Data

1. Please indicate which of the following roles **best** applies to you:

    a. Music therapy internship supervisor of an AMTA-approved site
    b. Music therapy internship director of an AMTA-approved site
    c. I am none of the above.

    ('None of the above' leads to completion of survey and a final thank you.)

2. In what year did you first become a music therapist per RMT, CMT, ACMT, MT-BC, or other (whichever came first)?

    Please list year: _____

3. In what year did you first begin supervising interns?

    Please list year: _____

4. In what year did you first begin supervising interns at your current facility?

    Please list year: _____

B. *Internship Site Demographic Data*

1. Please indicate the region in which your internship resides:
   - ☐ Great Lakes
   - ☐ Mid-Atlantic
   - ☐ Midwestern
   - ☐ New England
   - ☐ Southeastern
   - ☐ Southwestern
   - ☐ Western Region
   - ☐ Choose not to report

2. Please list your current number of music therapists on staff who are:
   a. _____ Full Time Staff
   b. _____ Part Time Staff

3. Please indicate the maximum number of interns you can accommodate at one time:
   _____

4. In what setting does your internship take place?

   Mark all that apply:
   - ☐ Addiction Services
   - ☐ Child/Adolescent Treatment Center
   - ☐ Children's Hospital or Unit
   - ☐ Community Based Service
   - ☐ Correctional/Forensic Facility
   - ☐ Developmental Center
   - ☐ Early Intervention Program
   - ☐ Elementary School
   - ☐ General Hospital
   - ☐ Geriatric Facility
   - ☐ Hospice/Bereavement Services
   - ☐ Mental Health Facility
   - ☐ Middle/High School
   - ☐ Oncology
   - ☐ Physical Rehabilitation
   - ☐ Private Practice
   - ☐ Other: _____

5. What ages are the populations with which you work?

   Mark all that apply:
   - ☐ Children under 5 (birth to age 5)
   - ☐ Young children (ages 5-10)
   - ☐ Preadolescents (ages 10-13)
   - ☐ Adolescents (ages 14-18)
   - ☐ Young adults (ages 19-30)
   - ☐ Adults I (ages 30-40)

☐ Adults II (ages 40-55)
☐ Older Adults (ages 55-65)
☐ Senior Adults I (ages 65-75)
☐ Senior Adults II (over the age of 75)

6. Based on the populations and ages listed in questions 16 and 17, please indicate the primary population that you serve: _____

7. How would you best categorize your theoretical orientation **(mark one)**?

☐ Behavioral   ☐ Psychodynamic
☐ Medical   ☐ Humanistic
☐ Neurologic   ☐ Feminist
☐ Educational   ☐ Community
☐ Cognitive-Behavioral ☐ Other: _____

C. Definition of Songwriting

Songwriting: The composition of an original song or part of a song for personal, professional, or commercial purposes.
Therapeutic Songwriting: The composition of an original song or part of a song with or for a client with varying degrees of support by a therapist, thereby promoting a therapeutic relationship, and supporting expression of needs, feelings, and thoughts (Baker & Wigram, 2005, Bruscia, 2014).

Based on these definitions, please answer the questions below:

1. Is **therapeutic songwriting** utilized as a music therapy intervention at your facility?
   - ☐ Yes
   - ☐ No

2. Are music therapy interns expected to use **therapeutic songwriting** as a potential music therapy intervention?
   - ☐ Yes
   - ☐ No

3. If interns are expected to utilize therapeutic songwriting during internships, in what context do they write songs for or with **individual** clients/patients? **(check all that apply)**

   - ☐ Interns do not work with individual clients.
   - ☐ Individually write songs *for* clients
   - ☐ Collaborate with fellow interns to write songs *for* clients
   - ☐ Collaborate with MT team members to write songs *for* clients
   - ☐ Individually write songs *with* clients
   - ☐ Collaborate with fellow interns to write songs *with* clients
   - ☐ Collaborate with MT team members to write songs *with* clients

4. If interns are expected to utilize therapeutic songwriting during internships, in what context do they write songs for or with **groups** of clients/patients? **(check all that apply)**

   - ☐ Interns do not work with groups of clients.
   - ☐ Individually write songs *for* clients
   - ☐ Collaborate with fellow interns to write songs *for* clients

□ Collaborate with MT team members to write songs *for* clients
□ Individually write songs *with* clients
□ Collaborate with fellow interns to write songs *with* clients
□ Collaborate with MT team members to write songs *with* clients

5. Are music therapy interns expected to already possess skills in **therapeutic songwriting** upon beginning internship?
□ Yes
□ No

6. Are skills in therapeutic songwriting regularly taught to music therapy interns at your facility?
□ Yes
□ No

7. Do *you* regularly teach **therapeutic songwriting** skills to music therapy interns at your facility?
□ Yes
□ No

If you answered **no** to question 5, please skip to **section E**.
Otherwise, please proceed to **section D**.

D. *Songwriting Education Methods*

1. What methods are employed in order to teach therapeutic songwriting to interns? **(check all that apply)**

   - ☐ Songwriting is not taught to interns.
   - ☐ Lecture (presentation of related information)
   - ☐ Song Listening
   - ☐ Supervisor generated examples
   - ☐ Experientials with MT team
   - ☐ Individual tutoring
   - ☐ Online collaboration
   - ☐ Collaboration with other interns
   - ☐ Collaboration with MT team
   - ☐ Presentation of song to MT team
   - ☐ Personal reflection of songwriting experience
   - ☐ Personal songwriting assignments *(song created for self individually or with peers, but not with/for an individual or group in a clinical setting)*
   - ☐ Songwriting prompts given for hypothetical clinical situations
   - ☐ Other: _____

2. What therapeutic songwriting methods are taught to interns? **(check all that apply)**

   - ☐ Songwriting is not taught to interns.
   - ☐ Students encouraged to just "go for it"
   - ☐ Fill-in-the-blank
   - ☐ Song parody *(Rewriting all or some of the lyrics of a pre-recorded while maintaining the original melody)*
   - ☐ Instrumental writing
   - ☐ Notational activities
   - ☐ Integrative/strategic songwriting *(song parody using therapist-composed songs with a specific therapeutic purpose)*
   - ☐ Creating original raps over either original or pre-composed music
   - ☐ Song Collage *(lyrics taken from pre-composed music and rearranged to form new song)*
   - ☐ Mash-up songs *(music taken from two or more pre-recorded songs and blended together to form a new work)*
   - ☐ Pastiche *(Musical motifs, styles, or techniques borrowed from one or more sources and integrated into an original work)*
   - ☐ Blues
   - ☐ Improvisational songwriting
   - ☐ Completely original songwriting with clients
   - ☐ Completely original songwriting for clients

☐ Other: _____

3. What songwriting techniques are taught to interns? **(check all that apply)**

    ☐ Songwriting is not taught to interns.
    ☐ Prosody
    ☐ Rhyme structure
        ☐ Perfect rhyming *(i.e. cat, bat, sat)*
        ☐ Imperfect rhyming *(i.e. cat, sad, rap)*
    ☐ Lyrical structure
    ☐ Chord Structure
    ☐ Rhythmic Structure
    ☐ Tonality
    ☐ Metaphor
    ☐ Simile
    ☐ Perspective writing (first-person, second/you-person, third-person)
    ☐ Instrumental writing
    ☐ Melody writing
    ☐ Arranging

4. When songwriting is taught, what focus is placed on lyric creation versus music creation?

    ☐ Completely focused on lyric creation
    ☐ Mostly focused on lyrics with some focus on music creation
    ☐ Equal focus on both lyric and music creation
    ☐ Mostly focused on music with some focus on lyric creation
    ☐ Completely focused on music creation
    ☐ Songwriting is not taught to interns.

5. What other factors related to therapeutic songwriting are taught within your internship? **(check all that apply)**

    ☐ Environmental considerations
    ☐ Group dynamics
    ☐ Individual dynamics
    ☐ Sociocultural dynamics
    ☐ Therapeutic dynamics
    ☐ Multicultural considerations
    ☐ Contraindications for songwriting
    ☐ Indications for more/less songwriting structure
    ☐ Indications for more/less therapist control

E. Personal Experience with Songwriting

1. Do you or have you used songwriting as a therapeutic intervention?
   - ☐ Yes
   - ☐ No

2. How did you acquire skills in songwriting? **(check all that apply)**

   - ☐ General music undergraduate or equivalency studies
   - ☐ Music therapy undergraduate or equivalency studies
   - ☐ During Internship
   - ☐ Music therapy graduate studies
   - ☐ CMTE course
   - ☐ Online class
   - ☐ On the job
   - ☐ Independently
   - ☐ Other:_____

3. How difficult would you rate the process of writing a song with or for a

Very Easy	Easy	Neutral	Difficult	Very difficult
5	4	3	2	1

   client/patient?
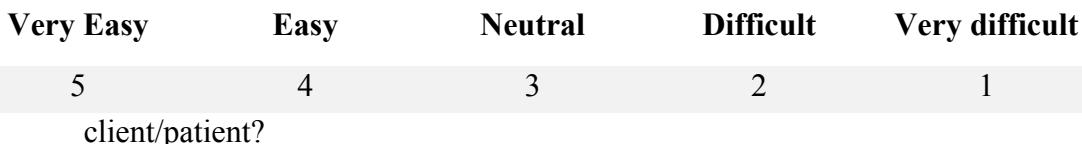
4. How competent would you rate yourself in **teaching** the following songwriting methods to interns?

	Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
Fill in the Blank	5	4	3	2	1
Song Parody	5	4	3	2	1

Song Parody: Rewriting all or some of the lyrics of a pre-recorded while maintaining the original melody.

	Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
Instrumental Writing	5	4	3	2	1
Notational Activities	5	4	3	2	1
Strategic Songwriting	5	4	3	2	1

Strategic Songwriting: Song parody using therapist-composed songs with a specific therapeutic purpose

Original Rap Creation	5	4	3	2	1
Song Collage	5	4	3	2	1

Song Collage: Lyrics taken from pre-composed music and rearranged to form new song

Mash-Up	5	4	3	2	1

Mash-Up: Music taken from two or more pre-recorded songs and blended together to form a new work

Pastiche	5	4	3	2	1

Pastiche: Musical motifs, styles, or techniques borrowed from one or more sources and integrated into an original work

Improvisational Songwriting	5	4	3	2	1
Completely Original songwriting *with* clients	5	4	3	2	1
Completely original songwriting *for* clients	5	4	3	2	1

5. How competent would you rate yourself in **teaching** the following songwriting techniques to interns?

	Extremely Competent	**Moderately Competent**	**Somewhat Competent**	**Slightly Competent**	**Not at All Competent**
Prosody	5	4	3	2	1
Rhyme Structure	5	4	3	2	1
Lyrical Structure	5	4	3	2	1
Chord Structure	5	4	3	2	1
Rhythmic Structure	5	4	3	2	1
Tonality	5	4	3	2	1
Metaphor	5	4	3	2	1
Simile	5	4	3	2	1
Perspective Writing	5	4	3	2	1
Melody Writing	5	4	3	2	1
Arranging	5	4	3	2	1
Instrumental Writing	5	4	3	2	1

6. How would you rate your **overall competency in teaching** songwriting to interns?

Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
5	4	3	2	1

7. How competent do you perceive most of your music therapy interns to be in songwriting **upon entering** internship?

Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
5	4	3	2	1

8. How competent do you perceive most of your music therapy interns to be in songwriting **upon completion** of internship?

Extremely Competent	Moderately Competent	Somewhat Competent	Slightly Competent	Not at All Competent
5	4	3	2	1

F. Personal Opinion

6. How important is it for music therapists to be competent in therapeutic songwriting?

Very Important	**Somewhat Important**	**Neutral**	**Not Very Important**	**Not at All Important**
5	4	3	2	1

      Please explain your answer:

_____

_____

7. How sufficient do you find the current *AMTA Professional Competencies* related to songwriting to be? (American Music Therapy Association, 2016a)

      A.2.1: Compose songs with simple accompaniment.
      A.4.2: Develop original melodies, simple accompaniments, and short pieces extemporaneously in a variety of moods and styles, vocally and instrumentally.

Sufficient	**Somewhat sufficient**	**Neutral**	**Somewhat insufficient**	**Insufficient**
5	4	3	2	1

      Please explain your answer:

_____

_____

8. How sufficient do you find the current *AMTA Advanced Competencies* related to songwriting to be? (American Music Therapy Association, 2015b)

      II.A.7.2: Design and employ a broad range of compositional experiences in order to address therapeutic needs.

Sufficient	Somewhat sufficient	Neutral	Somewhat insufficient	Insufficient
5	4	3	2	1

Please explain your answer:

_____
_____

9. To what degree to you agree with this statement:

   "I believe that a greater emphasis should be placed on teaching songwriting methods and techniques to preprofessional music therapy students."

Strongly Agree	Agree	Undecided/Neutral	Disagree	Strongly Disagree
5	4	3	2	1

Please explain your answer:

_____
_____

APPENDIX C

Survey Email Letter and Consent Form

Dear Music Therapy Program Directors, Faculty, Internship Directors, and Supervisors:

You are invited to participate in a research study concerning methods of teaching therapeutic songwriting within music therapy academic programs and internship sites. To participate in this study you must be one of the following: music therapy faculty, a music therapy program director, or a music therapy internship director or supervisor of an AMTA national roster site.

This study seeks to determine whether therapeutic songwriting is being taught, where in the curriculum songwriting is included, what methods educators are employing to teach songwriting, and what specific songwriting methods are being taught. In addition, this study seeks to gather information on how educators have acquired skills in songwriting, and their level of perceived self-competency in teaching songwriting methods and techniques. The expected survey completion time is approximately 10-15 minutes, and you may complete it from any computer or on most mobile devices.

By continuing to the research procedures, I acknowledge that I am at least 18 years old, have read the informed consent below, and agree to participate.

Informed Consent

If you agree to be part of the research study, you will be asked to answer a series of survey questions pertaining to this area of study including information on demographics, teaching methods, perceived competency, and sufficiency of competencies.

The content of this survey poses minimal risk, and should cause no more discomfort than you would experience in your everyday life. Participating in this study is completely voluntary. Even if you decide to participate now, you may change your mind and stop at any time. You may "choose not to report" on a survey question when this option is given, and may choose to not answer a survey question for any reason.

If you have questions about this research study, you may contact Kristin King (principal investigator) or Cathy McKinney (faculty advisor).

The Appalachian State University Institutional Review Board (IRB) has determined that this study is exempt from IRB oversight.

Thank you for considering to be a participant in this study. Your participation is greatly appreciated. Feel free to contact me or my faculty adviser if you have any questions or concerns.

Sincerely,

Kristin King, MT-MC   Cathy McKinney, PhD, LCAT, MT-BC
kingkw@appstate.edu   mckinneych@appstate.edu

Vita

Kristin King was born on the west coast of California. She attended the Berklee College of Music in Boston, Massachusetts for her undergraduate studies where she focused on a variety of topics such as contemporary writing, vocal writing, and songwriting. She received a Bachelor of Arts in Professional Music with an emphasis in Songwriting in August 2012 and began working towards a Master of Music Therapy degree at Appalachian State University in Boone, North Carolina, in August 2013. She completed her music therapy internship at Primary Children's Hospital in Salt Lake City, Utah, after which she earned her music therapy credentials (MT-BC). She is also an advanced trainee in the Bonny Method of Guided Imagery and Music. She currently works as a music therapist offering GIM sessions and working in the Seby B. Jones Cancer Center in Boone, North Carolina. In addition, she is currently a music therapy supervisor for undergraduate and equivalency students, and teaches a course in songwriting.

After graduation from Appalachian State University, Kristin plans to return to the west coast to pursue a job in music therapy working with kids and adults in various settings. She will continue her GIM training, which is projected to be completed in the summer of 2019. She hopes to continue incorporating songwriting in her work and to provide education to others in the form of courses and presentations for music therapists.