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Music Therapy in the United States has undergone some dramatic changes in the past few years. Prior to 1998 there were two music therapy associations in the US - the American Association for Music Therapy (AAMT) and the National Association for Music Therapy (NAMT). While originally separated in the early 1970's due to philosophical differences, the 1990's brought the opportunity for discussion, collaboration, and eventually talk of unifying into one association. In January of 1998 the unification of the two previous association became a reality and the American Music Therapy Association (AMTA) was born. In 2000 the AMTA celebrated 50 years of music therapy in the US.

American Music Therapy Association

The AMTA mission is to "advance public awareness of the benefits of music therapy and increase access to quality music therapy services in a rapidly changing world" (www.musictherapy.org). There are two main publications of the association. *The Journal of Music Therapy* is the research journal and focuses on both qualitative and quantitative research. *Music Therapy Perspectives* focuses on clinical practice, academics and administration and appeals to the music therapy clinician as well as those outside the field of music therapy. The association also publishes a newsletter, holds an annual national conference, publishes a member sourcebook and provides other special services. AMTA has approximately 3500 members and is divided into eight geographical regions. Each region also publishes a newsletter and holds an annual conference.

AMTA also has a seat on the National Coalition of Arts Therapies Associations (NCATA). This group also has representatives from the American Art Therapy Association (AATA), the American Dance Therapy Association (ADTA), the American Society for Group Psychotherapy and Psychodrama (ASGPP), the National Association for Drama Therapy (NADT) and the National Association for Poetry Therapy (NAPT). The coalition was formed to support collaboration between the various arts therapies modalities.

The Certification Board for Music Therapy

The CBMT is the official credentialing agency in the US for music therapy. Its mission is to "evaluate individuals who wish to enter, continue and/or advance in the discipline of music therapy through a certification process, and to issue the credential of MT-BC [music therapist - board certified] to individuals who demonstrate the required level of competence" (www.cbmt.com). Certificants who graduate from approved training programs in the US or pursue alternate route certification must past an objective, multiple choice examination to receive the MT-BC credential. This entry-level credential must be maintained through documentation of continuing education in the field, which includes conference attendance, continuing education workshops, scholarly activities, etc.

Professional Issues in the US

Education and Training

Music therapy differs from other arts therapies in the US in that one can become a MT-BC at either the bachelors or master's level. Art therapy, dance therapy, drama therapy, psychodrama, and poetry therapy all require training at the master's level to enter the field. The different entry-level training required by the various modalities has served and continues to serve as a fertile area for discussion.

Music Therapy training in the US is "competency based" which means that rather than requiring training programs to provide specific courses or specific curriculum, training programs must demonstrate how competencies accepted as the minimum requirement for those practicing music therapy are taught. It allows for great flexibility and creativity on the part of educators to create diverse training programs.

As part of the unification process that occurred in 1998, much attention was given and continues to be given to education and clinical training in the US. There are ongoing discussions on several issues in this area. One discussion is on levels of practice and focuses on what training is required when one functions as an adjunctive or supportive therapist versus the training one needs to function as a primary therapist. There is also discussion on how these different levels of practice are addressed in bachelor's programs versus master's programs versus doctoral programs versus institute training. Another discussion centers on the need for an advanced credential in music therapy. The current credential is accepted as the entry-level credential in the field. Some professionals believe that this entry-level credential is sufficient to cover all of music therapy practice in the US. Others think that both the breadth and depth of music therapy practice has expanded beyond what can be taught in entry-level training. Those professionals support the development of an advanced credential that would reflect advanced training. This too is a very fertile area of discussion and debate.

Multicultural Issues in Music Therapy Training

The US has always been called a "melting pot" in that many of our ancestors came from different parts of the world. This trend continues and raises some very interesting issues for music therapists and music therapy educators in the US.

There are several things that bear consideration. Students from many other countries come to the US to study music therapy. Some will stay in the US to work after completing their training, while others will return to their home countries to practice. Educators are discussing how best to acknowledge and work with the various cultures international students bring to their training in the US. Educators are also discussing how best to prepare international students to appropriately adapt and integrate their training into their home culture.

Many diverse cultural groups are represented within the many clinical sites in the US. In some sites students or professionals may work exclusively with Hispanic clients, Eastern European Immigrants, Mexican American clients, African American clients, Asian American Clients or with various religious groups such as Christian, Catholic or Jewish clients. How do educators best prepare students, whether American or international, for working with such diverse cultures within the US? How do professionals who may be from one culture learn to respect and work with the clients from a very different culture?

This blend of various cultures can be both stimulating and complicated. The complexities have recently come to the fore in publications in the US (Bradt, 1997; Moreno, 1988; Moreno, Brotons, Hairston, Mawley, Keil, Michel, and Rohrbacher, 1990; Toppozada, 1996). Estrella (2001) recently articulated multicultural competencies for music therapists. This is an area that is likely to receive increasing attention from the music therapy community in the US. The upcoming AMTA conference in October 2001 will have several five-hour courses as well as

concurrent sessions that will focus on multicultural issues.

In Closing

In closing I would like to echo the message from Dorit Amir from the inaugural issue of *Voices*. I believe that viewing ourselves as citizens of the world, sharing our differing perspectives, and embracing our diverse cultures constitute a crucial part of the development of the field of music therapy. I look forward to participating in a world forum for music therapy.

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