

2016

Multicultural Considerations in Music Therapy Research

Seung-A Kim Ph.D., L.C.A.T., MT-BC
Molloy College, skim@molloy.edu

Cochavit Elefant

Follow this and additional works at: https://digitalcommons.molloy.edu/mustherapy_fac



Part of the [Music Therapy Commons](#)
DigitalCommons@Molloy Feedback

Recommended Citation

Kim, Seung-A Ph.D., L.C.A.T., MT-BC and Elefant, Cochavit, "Multicultural Considerations in Music Therapy Research" (2016).
Faculty Works: Music Therapy. 8.
https://digitalcommons.molloy.edu/mustherapy_fac/8

This Book Chapter is brought to you for free and open access by the Music Therapy at DigitalCommons@Molloy. It has been accepted for inclusion in Faculty Works: Music Therapy by an authorized administrator of DigitalCommons@Molloy. For more information, please contact tochter@molloy.edu, thasin@molloy.edu.

Chapter 8

MULTICULTURAL CONSIDERATIONS IN MUSIC THERAPY RESEARCH

Seung-A Kim • Cochavit Elefant

Our society has become more diverse in the past decade, as evidenced by the influx of immigrants, multiracial and minority groups, and the increasing age gap between generations (Population Reference Bureau, 2015). Consequently, culture has been regarded as a significant construct among researchers. By proposing Culture-Centered Music Therapy, Stige (2002) encourages “all music therapists [to be] more culture-centered in their work and thinking, not by labeling their work as such but integrating cultural perspectives in their thinking” (p. 5). As our own worldviews influence all aspects of music therapy (Dileo, 2000; Wheeler & Baker, 2010), cultural factors provide a significant foundation to all music therapy research. With this perspective, music therapy researchers are essentially multicultural researchers. Moreover, this professional role is not only part of a scholarly endeavor, but also “our ethical and moral obligation” (Vera & Speight, 2003, p. 270).

In response to cultural pluralism (Kallen, 1924), music therapy researchers have attempted to examine the impact of culture in music therapy (Kim & Whitehead-Pleaux, 2015). As the wealth of culture-oriented research increases, the types of questions researchers are asking have evolved through clinical work and training. In addition, music therapists frequently find themselves working in multicultural settings, and engagement in globally collaborative research is on the rise. Moreover, the unique nature of culture becomes an informative and comprehensive access point for music therapists, providing a glimpse of how individuals experience and react to music. Each culture includes a distinct subset of characteristics that defines how groups of people feel, experience, and respond to different musical experiences (Saarikallio, 2012). Despite the growing literature regarding culture and music therapy, resources on multicultural considerations in music therapy research are scarce. Thus, this chapter aims to provide a current review of previous studies, a discussion on culture-related issues and challenges in music therapy research, and recommendations for future studies. To understand how culture affects the research process, it is important to first have a concrete understanding of culture and its nature.

Culture-Related Issues and Challenges in Research

Culture is a multifaceted and dynamic phenomenon that can be interpreted in many different ways. To support further discussion, this chapter adopts the nature of culture as described by Ruud (1998): “Cultural performance is linked to the individual’s situatedness, a way of perceiving and giving meaning to the world informed by a certain perspective. This perspective is rooted in the private life world of the person” (p. 54). Culture is fluid and ranges significantly depending on the individual’s relationship to various social groups. **Culturally informed research** by definition is concerned with cultural issues involved in music therapy research. More specifically, it is concerned with whether a study is conducted on a specific culture or more than one culture in- and outside the country, or whether a study examines the music and health of the members of marginalized cultural groups in music therapy. Therefore, the culturally informed researcher respects the existence of cultural plurality and promotes social justice, liberation, and community empowerment. **Multicultural** refers to multiple cultures and indicates contrasting identities interacting or relating to one another in some way. This can include the identities of an individual or the identities of many people. Among a wide range of individual identities, multicultural refers to a part of a person’s race, ethnicity, age, gender, sexual orientation, language, religious or spiritual affiliation, marital status, ability, education, socioeconomic status, affiliation, and lifestyle. All of the different factors of one’s identity coexist and interact with other distinct cultures in a given society. The terms *multicultural* and *cross-cultural* are used interchangeably in this chapter. Multicultural research is complex, contextual, and inclusive of multiple perspectives. In addition, multicultural research includes cultural and musical plurality as well as its own conceptual limitations.

Culture is dynamic and complex in nature, which makes it difficult to describe with respect to one perspective (Ponterotto, Costa, & Werner-Lin, 2002). Due to its multifaceted nature, different schools of thought can interpret culture in various ways. The idea of culture has both implicit and explicit meanings. On the one hand, certain behaviors in culture, such as specific traditions and customs, are observable and explicit. On the other, expectations or hidden norms embody implicit meanings, making a group’s cultural nuances subtle. The concept of *implicit meanings* rests on the belief that there are principles that regulate the culture. From an outsider’s perspective, many of these implicit traits must be inferred. Culture can also be conceptualized on two levels: internal or external. **Internal culture** relates to a personal variable (e.g., one’s values, knowledge, religion), while **external culture** relates to political and organizational aspects in a social and ecological context, including economic status and climate. Therefore, research that includes a cultural perspective must account for the implicit, explicit, internal, and external aspects (Berry, Poortinga, Breugelmans, Chasiotis, & Sam, 2011; Sam & Berry, 2006).

Culture exists within the context of a particular situation permeating social, biological, physical, psychological, historical, and practical effects (Stige, 2002; Stige, Ansdell, Elefant, & Pavlicevic, 2010). Similarly, music is also played within a certain context. For example, in the Venda culture in South Africa, music is an integration of arts and is inseparable from singing, dancing, and other forms of art. Within this context, music is experienced in everyday life as a community act. In contrast, Western culture is more readily displayed in isolated

performances at concerts, where music is shared on a physical stage (Saarikallio, 2012).

Social constructivism (Berger & Luckman, 1967; Gergen, 1999) emphasizes multiple realities in society that make interpretations of culture both diverse and individualistic. We actively create our own identities through social and historical constructs. The meaning of reality is fluid and is expressed through the use of language. Ultimately, culture influences how people assign meanings to phenomena such as music and health. From this perspective, a style of music is viewed differently from culture to culture, as is the concept of health and illness (Aigen, 2014; Moreno, 1988; Spector, 2012). In collectivistic societies, integration of body, mind, and spirit is emphasized. These societies also view health as a social concept that embraces community health. For example, Asian clients may believe that an imbalance between yin and yang, rather than a biological cause, causes illness. Traditionally, Western medicine is known to have more of an evidence-based practice that diagnoses and treats patients according to tangible data. Even though many diseases are common across cultures, it is important that translations of any data or pertinent information be accurate and capture the sensitive nuances that exist within a culture.

Moreover, although common symptoms of a disease may be found across cultures, the reaction to a disease may be culture-specific. *Hwabyeong*, anger syndrome, is an example of a culture-bound syndrome that is only found among Koreans (Kim, 2013b). A behavior is considered normal or abnormal depending on the norms of the society (e.g., being thin may be considered healthy or unhealthy depending on the culture; Berry et al., 2011; Zhang & Cross, 2011).

The term *culture* has often been considered to be singular. However, modern anthropologists found the need to refer to cultural plurality to strengthen the value and complexity of cultural diversity (Chiang, 2008; Hall, 1976). Similarly, ethnomusicologists consider music to be plural to emphasize its diverse nature (Mastnak, 1993; Rohrbacher, 2012). There is not one *music*, as had been seen with ethnocentric bias, but there are *musics*. Stige (2002) considers that “although the possibility of universals in music should not be neglected, the traditions of music-making around the world are so diverse that it is meaningful and necessary to talk about musics in plural” (p. 94). DeNora (2000, 2003), a music sociologist, uses the concept of *affordance* and *appropriation* to look at what music can offer the person in relation to a certain situation. *The potential of musical affordance* is that it affords something specific in relation to the person’s perception of it and may offer extra-musical benefits. The idea of musical affordance is relevant when understanding diversity in social and cultural contexts (Stige et al., 2010).

Most conclusions from past research studies on the music therapy profession were based on data drawn from a middle-class, white-male demographic, emphasizing the characteristics of in-group dynamics (Chase, 2003; Dileo, 2000; Saarikallio, 2012). These norms were considered *desirable and typical* (Dileo, 2000; Kim & Whitehead-Pleaux, 2015). Inevitably, this Eurocentric attitude has caused not only conceptual limitations but also possible biases that cannot be applied to a diversifying population (Baker, 2014; Bennett, 2001). For example, fundamental constructs between individualism and collectivism differ drastically, skewing interpretations drawn by researchers. When research is focused on self-concept within the

orientation of individualism, the design may not be appropriate in a society where an interdependent self operates through a collectivist construct. For example, Kim (2011) noted in her study of international music therapy students studying in the United States that when personality traits assessments were developed within Western theoretical foundations and examined across cultures, the data became questionable due to the lack of validity and the inability to replicate and compare accurate results. “The fundamental problem remained that when research does not adequately incorporate culture as a central and specific contextual variable, behavior is misidentified and pathologized, and, in some cases, psychologists are at risk of perpetuating harm” (American Psychological Association, 2003, p. 388). Therefore, it becomes important for researchers to be clear on their perspectives regarding the group of interest or study. A researcher’s perspective determines how extrinsic factors affect shared psychological functions as a result of different behaviors, and observed behaviors are the results of the interactions between the researcher and the surrounding context.

Multicultural Considerations in Designing Music Therapy Research

Cultural Awareness of the Researcher

When the research process is initiated, a researcher’s worldviews inherently influence the types of questions that are asked. Wheeler and Baker (2010) identified how the diverse worldviews of 12 experienced music therapy educators/clinicians representing 16 countries affected their work in multicultural settings. Within a grounded theory framework, they identified multiple cultural factors (e.g., ancestry, childhood musical experiences, family and generational factors, traumas, spirituality) that shaped the participants’ worldviews. Their worldviews impacted practice and education.

To minimize cultural biases that may influence a particular study, researchers must thoroughly examine their own cultures, have a good awareness of the similarities and differences between their own cultures and the culture of the participants in the study, and select a culturally appropriate theory-driven inquiry during the phase of conceptualization. Without this process, researchers “may build their cultural biases into the definition and operationalization of constructs. ... Language and culture are so intrinsically tied that disentangling the effects of linguistic and cultural biases is not easy” (Sanchez, Spector, & Cooper, 2006, p. 197). Further, it is recommended to reflect on the researcher’s process regarding culture. Baker (2014) provides an example of her own reflection during her conceptualization process: “My limited pre-understandings of [therapeutic songwriting] practice with people from older and younger generations, and from non-Christian religious backgrounds, affected the depth with which I could relate to and reflect on the experiences of the research participants and the questions posed to them during their interviews” (p. 148). Just

as Baker recognized her biases as a Western-trained music therapist and member of the dominant ethnic group, other researchers must take time to reflect on and analyze their own biases and understandings of potential multicultural impact on a study.

Just as it is important for researchers to be aware of their own values and cultural heritage (Baker, 2014), there is a fundamental necessity for researchers to begin the research process with a comprehensive knowledge about the participants' cultural beliefs and values, as well as to withhold any preconceptions. The most important requirement would be to openly listen to what the participant is saying, doing as much as possible to avoid bias or misinterpretation. Therefore, dialogical interaction among the participants should be a requirement in the study. Member checking and constant reflection will also help ensure the validity of the study. Conducting research with varied cultural groups requires sensitivity to individual as well as social contexts to have a culturally and linguistically unbiased data collection method.

Not only is a lack of diversity and representation in samples problematic, but using a convenience sample is limiting in regard to the usefulness of the findings of the study (Berry, 2006; Worthington, Soth-McNett, & Moreno, 2007). Comparing multiple samples at different locations per country can also minimize the differences between the samples (Wong & Wong, 2006). In addition, when designing studies, samples should reflect the diversity of the study so that the findings can be more representative. Although Public Health Service Act 492B requires that researchers must include women and minority groups as participants in clinical research and to report ethnic and racial data of participants (in the United States; National Institutes of Health, 2014), published studies do not always contain this information.

Measurements

When a researcher designs a data collection method originally developed for a specific culture, cultural considerations must be made before applying findings to other cultures (Saarikallio, 2012). Kim (2011) noted that language is not an exclusive reflection of culture. That is, most assessment tools and instruments are developed in English, but even when participants' primary language is English, they may interpret the questionnaire differently from the author's original intention if their culture is different from the one in which it was created. For example, it would be possible that some participants may try to endure and overcome stress because they may think that they should be able to manage it on their own.

In some cases, researchers still use a research instrument despite reports stating the method to be ineffective due to the lack of instrumentation measuring cultural differences (Berry et al., 2011). When the instrument does not fit the local culture, the findings are questionable. Even if researchers use standardized measures that are widely accepted, culture-related issues still exist. In discussing a current international randomized controlled study of improvisational music therapy's effectiveness for children with autism spectrum disorders (ASD; Geretsegger, Holck, & Gold, 2012), Carpena expressed, "The majority of the assessment/diagnostic tools used to diagnose for ASD were developed and tested in the United

States and UK. This may compromise their cultural and linguistic validity in other countries and cultures. In addition, this makes it difficult to acquire the tools and receive adequate training for administration” (J. Carpente, personal communication, October, 2015).

Although there are benefits to using existing instruments, a revised and more comprehensive instrument may be necessary to address potential culture-related issues. Thus, it is crucial that validity for diverse ethnic and racial groups be tested in order to develop culturally oriented measurements (Ip-Winfield & Grocke, 2011) when conducting international research.

Translations

When the same measure is used across cultures, an accurate sample comparison may not be possible if samples interpret the measure differently. Additionally, many texts can be misinterpreted or fail to capture the right nuance when translated, which may lead to cultural and linguistic bias (Sanchez, Spector, & Cooper, 2006). Kim (2011) identified practical challenges that may have occurred in her study when translating the survey for international music therapy students:

While most of the participants primarily use languages other than English, the survey was constructed in English. It is unrealistic that the questionnaires be administered in 25 different languages because the validity of the translations would be questionable. It is also possible that translations may change the structure of the instrument. In order to replicate the study in another language, future work is necessary to provide psychometric evidence in a translated instrument. (p. 88)

There are some inherent issues related to translating an instrument into another language. Even skillful translators may not write comparable questions due to cultural differences between the two languages. Moreover, translations that convert the text to its original language should be carefully considered to ensure that the linguistic integrity and scale value of items are appropriately adjusted and represented (American Psychological Association, 2003; Sanchez, Spector, & Cooper, 2006). This also applies to interpretivist research methods such as an interview that needs to be translated to English. It is recommended that translators be not only linguistically competent but also culturally competent. For this reason, Schwantes (2011) employed a college student rather than a professional interpreter as an interpreter for their study with Mexican migrant farmworkers.

Participants’ Responses

The response bias of a participant can influence the results of a study. Sometimes information given by participants in a study may be shared in reporting the results in a way that could reveal their identities (Wheeler & Baker, 2010). Some questions may not be culturally appropriate for a specific group, but be acceptable for another. This may affect how much participants share and how they share their personal information with the researchers. Participants from some countries may prefer extreme responses, while others may avoid them. In some cases, participants may answer in a way they believe is right or the interviewer may unintentionally lead the participants.

Results may also be influenced by how instructions are presented or phrased. Participants may interpret words differently or respond to questions in a unique and unexpected manner. Thus, it is necessary to incorporate the concerns and needs of the target community when selecting the research design and sampling (Marshall & Batten, 2003; Vera & Speight, 2003), as well as acknowledging in-group heterogeneity of the racial/ethnic group sample.

Action research (particularly participatory action research) considers the cultural and social values of the participants, as it includes them as collaborators and owners of the research. Music therapy research often uses action research, in which questions are raised by the participants or negotiated between the participants and the researcher. Because the questions are not determined solely by the researcher, this process is collaborative in nature and can bring a more individualized perspective. Action research can lead to empowerment and the participants' voices being heard within their community or on an international level. Elefant (2010) published her participants' requests for community change, demonstrating how collaborative efforts can address the needs in a target community. Other examples of action research in music therapy are by Stige (2002) and Warner (2005).

Research Design

Researchers need to explore varied options for research designs to examine the complexity of the phenomenon of culture more efficiently. When choosing a research design, they must consider cultural issues and whether they use a certain methodology due to familiarity. In addition, researchers need to consider etic and emic perspectives when doing multicultural research (Berry et al., 2011). The **etic perspective** is the outside view, knowledge, and values that researchers bring with them to the field. The **emic perspective** is the insider view of openness, which will help the researcher to gain the knowledge. Stige (2002) suggests that researchers should apply these two perspectives, since both inform each other in a dialectical manner. A wide range of research methods is recommended (Ponterotto et al., 2002). In addition, this flexibility allows for alternative explanations: "Findings are more convincing when they are based on diverse sources of evidence, multiple sources of data, and different research methods" (Berry et al., 2011, p. 25), as objectivist and interpretivist methods are seen as complementary. When conducting objectivist studies, a longitudinal design is ideal to examine changes between two or more time periods with the same subjects (Berry, 2006). Further, quasi-experimental designs, such as two- or three-group comparisons, are

recommended, as it is impossible to obtain information about change with a single-group design. For example, the musical response of counterparts in the home country, immigrants, and non-immigrants may be useful in providing a comprehensive overlook of a certain topic. Action research (Stige, 2002) and mixed methods (Ortiz, Sosulski, & Sherwood, 2012) are also recommended, as these methods include a broad range of perspectives and voices. The mixed methods paradigm contains both objectivist and interpretivist methods. Therefore, this paradigm utilizes multiple types of data and fits well with multicultural views.

Interpretation of Findings Across Cultures

When examining the equivalence of concepts and data throughout the research process, the researcher must take into account three levels of equivalence: structural, metric, and scale equivalence (Berry et al., 2011). *Structural equivalence* is the evidence of conceptual equivalence. *Metric equivalence* can validate changes in scores over measurement occasions. The assessment scores collected from different groups should be comparable maintaining *scale equivalence*. “A lack of comparability, or inequivalence, can be the consequence of many sources of cultural bias. Ultimately, it is the task of a researcher to make it plausible that the interpretation of cross-cultural data is not distorted because of inequivalence. This can be done more easily when different levels of equivalence are distinguished” (Berry et al., 2011, pp. 26–27). When analyzing data, the two levels of analysis (cultural and individual levels of variance) must be taken into account. Statistical techniques examining data at different levels and relationships are available to help researchers test their interpretations or inferences.

Disseminating Findings

Culturally informed researchers are encouraged to think beyond conventional methods of dissemination. Also, they “are encouraged to find ways for the results to be of benefit to the community and to represent the participants’ perspectives accurately and authentically” (American Psychological Association, 2003, p. 390). For example, communicating with the participants and communities closely and collaborating with them can help facilitate the research process. Researchers may hire a research assistant or interpreter from their community and consider publishing in magazines or community newsletters to reach research participants, community leaders, and policy makers (Vera & Speight, 2003). In this way, the community can better utilize findings, especially when studies include demographic information regarding age, sex, occupation, ethnic, and racial information.

Ethical Concerns About Power Relationships

There is an inherent power imbalance in the relationship between the researcher and the participant (Marshall & Batten, 2003; Vera & Speight, 2003). If the researcher is from a dominant social group and is studying participants from a minority group, this unequal power relationship can be exacerbated due to sociopolitical factors. Thus, it is important for researchers to be aware of this issue and examine their own assumptions and biases toward the participants, while sensitively executing their study with the participants. Informed consent must be written at their level of comprehension and reviewed with them thoroughly and in a culturally oriented manner.

Doing Research in Different Countries

While conducting research in different countries presents practical and organizational problems, other unforeseen challenges can occur in addition to the cultural and language issues discussed above. These may include the need for funding for long-distance travel and transport of equipment, knowledge regarding foreign administrative structures, and understanding norms and traditions to ensure politically and culturally correct communication (Sarrikalio, 2012, p. 479). It is also important to ensure identical procedures in different locations.

Examples of Culture-Oriented Music Therapy Research

The cultural implications for music therapy research are significant, because culture affects the entire research process. Although there are few publications that focus on the cultural implications for music therapy research, researchers have demonstrated an increasing interest in examining cultural and international issues in music therapy. Unlike other allied professions, research methods in music therapy have been relatively varied, ranging from objectivist to interpretivist to mixed methods. This section discusses multicultural paradigms that can be considered in music therapy research and existing studies. Different research designs that have high utility when exploring music and health in a sociocultural context are presented. The last section will include recommendations for future studies.

Multicultural Research Paradigms

Influenced by postmodernism, there are a few paradigms that influence multicultural research. The following research examples describe how these paradigms are commonly used in multicultural research.

Acculturation. Research based on acculturation theory (Gilboa, Yehuda, & Amir, 2009;

Kim, 2011, 2013a; Sam, 2006) offers a foundation for understanding individuals who encounter cultural adjustments. Kim (2011) surveyed international music therapy students to identify predictors of acculturative stress while studying in the United States. Five measurements—demographic information, English proficiency, Acculturative Stress Scale for International Students (ASSIS; Sandhu & Asrabadi, 1994), Neuroticism and Openness to Experience of the Big Five Inventory (John, Donahue, & Kentle, 1991), and Music Therapy Student Academic Stress Inventory (MTSASI; Kim, 2011)—and open-ended questions were used. The findings showed that a larger cultural gap between the host culture and the student’s culture might cause a higher level of acculturative stress. English proficiency, neuroticism, and music therapy stress were identified as predictors of acculturative stress. A recommendation from the study was that international students should be aware of their acculturative stress and develop management skills, including early prevention as needed.

Portraiture. Through a constructivist paradigm that employs *portraiture*, the ethnic identity of five Indian men and women were examined through Culturally Centered Music and Imagery (CCMI; Swamy, 2012). The emphasis in portraiture (Davis & Lawrence-Lightfoot, 1997) includes a focus on goodness, social, and cultural context examinations. In her study, Swamy used Indian music to explore identity-based imagery within a globalized context. After considering social, cultural, ethnic, local, and regional influences, Indian music was selected by carefully examining its music theory system, its symbolism, and metaphors within the context of Indian culture and society. The results showed that CCMI was useful in examining cultural or “ethnic unconscious” (p. 230). Furthermore, it is suggested that this approach may be an effective medium for adults during immigration or acculturation.

Critical Theory. Another multicultural paradigm, critical theory (Habermas, 1984), can be found in Hadley’s study (2013) of the experience of race in music therapy, where a narrative study is introduced to the field. Within an interpretivist framework, this study provides a way of discovering a narrative of an individual’s unique voice. She points out that while a therapist’s self-awareness has been emphasized, race or ethnicity has not been explored in music therapy. The subjectivity and bias of the researcher are considered to enrich the work rather than distort the truth. It is commonplace for the researcher’s relationship and life experience to influence the study in this way. Hadley explains that with “‘thin descriptions,’ such narratives misrepresent the complex ways in which identities are actually thick and complex social phenomena. When this happens, the identities of people are in many ways distorted, and they feel oppressed by the dominant narrative and its resultant thin descriptions” (p. 5). Using a purposive sample, the author chose 17 music therapists with diverse racial backgrounds who were located in different countries. They shared their experiences in a therapeutic setting. The conversations were recorded and transcribed. The author and the music therapists collaborated to make the final narrative products, employing narrative techniques in a conversational way. Sharing and reflecting on each person’s experiences can bring out unique and authentic voices that would normally be unheard. Thus, some studies use narrative methods to explore multicultural topics.

Community Music Therapy. Community Music Therapy (Stige & Aarø, 2012; Stige et al., 2010) emphasizes cultural and social issues that concern people and practices of health musicking in the community. Community Music Therapy is in line with current discourse on music, culture, and society and areas such as ethnomusicology, music sociology, health promotion, and community psychology (Stige & Aarø, 2012). It expands the boundaries of music therapy practices and considers the social context and the empowerment of the client. Stige (2002) argues that when working in Community Music Therapy, the community “is not only a context for the work but also a context to be worked with” (p. 113). The use of music and musicking is to help people find their voices and to collaborate and connect with others in and beyond their own community, and it “encourages musical participation and social inclusion, equitable access to resource, and collaborative efforts for health and well-being in contemporary societies” (Stige & Aarø, p. 5).

Musicking is a central foundation of Community Music Therapy (Stige et al., 2010) and can be useful when thinking of music in multicultural research. *Musicking*, a term suggested by Christopher Small (1998), considers music not just as an object (e.g., composition, song) but also as an activity where people participate in a variety of forms. By definition, Small described musicking aptly in his own words: “To music is to take part, in any capacity, in a musical performance, whether by performing, by listening, by rehearsing or practicing, by providing material for performance (what is called composing), or by dancing” (p. 5). Small describes in broad strokes, and implies that participating in musicking can mean to form a relationship with music and to establish meaningful connections by being either passively or actively interacting with the medium. Stige and Aarø (2012) discuss musicking as a social action and interaction and examine musical activities as they involve communal musicking of a group of people. “Communal musicking is an eminent vehicle for collective action, collaboration, and group cohesion. ... Music also allows for social bonding and the expressions of traditions and values” (p. 127).

Research Methods

Participatory Action Research

Through a liberal lens, *participatory action research* (McTaggart, 1997; Stige, 2005) is an appropriate research method for enabling participant expression to produce changes as needed. This methodology encourages participants to gain new perspectives, make personal changes, and initiate changes within their community. This approach was born out of a desire to change and give voice to the voiceless. Using a dialogical approach and negotiations, the academic researcher and the participants are able to go beyond their boundaries and make improvements in their community. Participatory action research “not only involves active lay participation in the research process, it also involves shared ownership of the research ... it is aimed at solving

problems as they are experienced by a group or community” (Stige, 2002, p. 277). It empowers participants to be part of the challenge as well as the solution. In Kleive and Stige’s study (1988) that incorporated participatory action research, music therapists and Upbeat, a group of adults with developmental disabilities in Norway, brought about social change in the municipality where they lived. Change occurred when the group’s musical experiences became more inclusive and was heard by the local community. Similarly, Elefant (2010) conducted a participatory action study with the *Renanim* choir, a group of people with multiple physical disabilities, who also had a significant impact in the local community. Another example is Schwantes’ (2011) research with Mexican farmworkers who migrated to the United States.

Phenomenological Inquiry

Kenny (2006) expresses, “Culture is its own unique kind of container with implied signals that are difficult to observe. Culture is lived within a context, but not in a laboratory. So we have thick descriptions to help us find knowledge and truth about the lives lived within these contexts. We have stories” (n.p.). To gain the essence of a multicultural phenomenon and understand common experiences that people may have, music therapists employ **phenomenological** methods to further understand this unique human connection. Gilboa (2015) conducted a multicultural study, interviewing seven former and present leaders of music therapy training programs in Israel. His study investigated multicultural thoughts and considerations in the music therapy training sites. Additionally, Gilboa researched how training courses adapt to the complexity of multicultural issues related to Israeli students. He formulated a model known as *spheres*. This model refers to different fields (spheres) in which multicultural interactions occur in music therapy training, which include the multicultural background of the student, a multicultural mosaic of the students in the program, and cultural and multicultural issues that arise in clinical work (including fieldwork). The results show that multiculturalism in training courses is very complex and that there is a need for dialogue between all spheres.

Kim (2008) employed a phenomenological method to study cross-cultural music therapy supervision. Kim examined the supervisee’s experiences in cross-cultural music therapy supervision by interviewing seven music therapy supervisees with diverse cultural backgrounds. The study concluded that a supervisor’s ability to have cultural empathy, openness, and nonjudgmental attitudes is an important factor in cross-cultural supervision. Acceptance and acknowledgement of supervisees bring out more effective outcomes. Cross-cultural supervision was explored in a study that examined eight Korean female music therapists’ individuation process within a cultural context in the Nordoff-Robbins certification training program in New York (D. M. Kim, 2010). Several important themes were extrapolated from the comprehensive data collected: a tendency to be obedient to authority, fear of self-expression, professional devaluation, being submissive, feeling guilty, and taking leadership. Some themes were related to the participants’ common sociocultural factors. D. M. Kim suggests this study should be replicated with trainees from diverse backgrounds and hopes that

these findings can help trainers understand this process to better provide culturally sensitive training.

Ethnographic Interview and Grounded Theory

Utilizing *grounded theory* methodologies, the need for a multicultural perspective in music therapy can be demonstrated. Baker (2014) examined how sociocultural factors impacted the therapeutic songwriting process with 45 experienced music therapists. She identified 26 categories through interviews. These were further analyzed, and seven factors were identified: music's diverse roles in different sociocultural groups; music therapists' knowledge or and skills in playing multicultural music; sociocultural diversity of group members; language; social diversity and the therapeutic relationship; religious beliefs; and gender, generational issues, and ethnicity. Baker concluded that understanding the group membership, the therapeutic relationship, and the therapist's approach affects the songwriting process. Clients' attitudes toward health, treatment, dying, and death are sociocultural. For example, an individual's religious and spiritual beliefs can be expressed through music, and a song does not necessarily "cure but creates the opportunity for the community to seek healthcare advice from the gods" (p. 3).

Mixed Methods

The complexity of a multicultural topic requires varied and flexible research approaches in which both objectivist and interpretivist methods may be appropriate when collecting, analyzing, and interpreting data. Few research studies have used the *mixed methods* approach. In a study by Gilboa et al. (2009), a mixed methods design was used on a musical communal project with a group of 12 university students of various cultural origins living in Israel. Pre- and post-questionnaires were used quantitatively to examine the influences that the group had on a student's feelings and opinions. Interpretivist methods (Alvesson & Sköldbberg, 2009) were implemented to explore whether the project enhanced multicultural relations among students of various cultures. The results of the study revealed that students expressed more acceptance and openness toward the *other* from different cultural groups. Music was a major influence in these developments. The researchers avoided bicultural (conflicting) groups and opted for a "diffuse multicultural possibility in which no defined schism exists" (Gilboa, Yehuda, & Amir, 2009, p. 10). Group process enabled most students to identify with their own cultural roots in addition to their overarching Israeli culture.

Another example of a mixed methods study can be found in Schwantes' (2011) research, which explores the effects of culturally appropriate music therapy interventions on 125 Mexican farmworkers' mental health. The research aimed to identify music that was meaningful to the migrant farmworkers and described their relationship with the music

therapist. The research, a mixed methods design inspired by participatory action research, utilized a randomized control trial. Schwantes' use of the principles of participatory action research emphasized the value of migrant knowledge, deriving questions from their perspective as well as helping them to reflect on their situation in order to improve their lives, which enabled participants to transform their oppression into empowerment. Although this research was a mixed methods study, the researcher used a flexible protocol, which took into account cultural aspects including idioms and customs, for the objectivist portion. Although the results did not show significant improvement in depression, anxiety, and social isolation scores for the farmworkers who participated in music therapy, those who participated in group music-making between sessions were able to improve their scores in all categories. The participants found focus group interviews helpful and valued their relationship with the researcher.

Conclusion

Engaging in research is ultimately a multicultural act that involves intra- and interpersonal levels of work including individuals and their community within cultural contexts. In this collaborative act, researchers need to come with the authentic intent of wanting to learn from the participants and their community. Therefore, music therapy researchers must continue to be culturally informed in any topic of their study; see beyond the practices, values, and norms of the client's culture; and understand the specific context that may influence the client. Additionally, just as culture permeates through all dimensions of life, it inherently becomes impossible to ignore culture when conducting research. As Kenny (2006) asserts, "We can only function well as global citizens if we embrace the diversity of life, which includes the diversity of standards of practice and research protocols" (n.p.). Research that embeds cultural sensitivity can therefore be achieved through a holistic collaborative effort between researchers and participants, with explicit and well-oriented goals and expectations as well as potential impact for the community being observed.

References

- Aigen, K. S. (2014). *The study of music therapy: Current issues and concepts*. New York, NY: Routledge.
- Alvesson, M., & Sköldbberg, K. (2009). *Reflexive methodology: New vistas for qualitative research* (2nd ed.). London, UK: Sage.
- American Psychological Association. (2003). Guidelines on multicultural education, training, research, practice, and organizational change for psychologists. *American Psychologist*, 58, 377–402.
- Baker, F. A. (2014).

An investigation of the sociocultural factors impacting on the therapeutic songwriting process.

- Nordic Journal of Music Therapy*, 23(2), 123–151. doi:10.1080/08098131.2013.783094
- Bennett, C. (2001). Genres of research in multicultural education. *Review of Educational Research*, 71, 171–217. doi:10.3102/00346543071002171
- Berger, P. L., & Luckman, T. (1967). *The social construction of reality: A treatise in the sociology of knowledge*. London, UK: Penguin.
- Berry, J. W. (2006). Design of acculturation studies. In D. L. Sam & J. W. Berry (Eds.), *The Cambridge handbook of acculturation psychology* (pp. 129–141). Cambridge, UK: Cambridge University Press.
- Berry, J. W., Poortinga, Y. H., Breugelmans, S. M., Chasiotis, A., & Sam, D. L. (2011). *Cross-cultural psychology research and applications* (3rd ed.). Cambridge, UK: Cambridge University Press.
- Chase, K. M. (2003). Multicultural music therapy: A review of literature. *Music Therapy Perspectives*, 21, 84–88. doi:10.1093/mtp/21.2.84
- Chiang, M. M. (2008). *Research on music and healing in ethnomusicology and music therapy* (Unpublished master's thesis). University of Maryland, College Park, MD.
- Davis, J., & Lawrence-Lightfoot, S. (1997). *The art and science of Portraiture*. San Francisco, CA: Jossey-Bass.
- DeNora, T. (2000). *Music in everyday life*. Cambridge, UK: Cambridge University Press.
- DeNora, T. (2003). *After Adorno: Rethinking music sociology*. Cambridge, UK: Cambridge University Press.
- Dileo, C. (2000). *Ethical thinking in music therapy*. Cherry Hill, NJ: Jeffrey Books.
- Elefant, C. (2010). Giving voice. Participatory action research with a marginalized group. In B. Stige, G. Ansdell, C. Elefant, & M. Pavlicevic, *Where music helps: Community Music Therapy in action and reflection* (pp. 199–215). Farnham, UK: Ashgate.
- Geretsegger, M., Holck, U., & Gold, C., (2012). Randomised controlled trial of improvisational music therapy's effectiveness for children with autism spectrum disorders (TIME-A): Study protocol. *BMC Pediatrics*, 12(2). doi:10.1186/1471-2431-12-2
- Gergen, K. (1999). *An invitation to social construction*. Thousand Oaks, CA: Sage.
- Gilboa, A. (2015). Ebony, ivory, and other shades of music therapy training in Israel: Some multicultural thoughts and considerations. In K. D. Goodman (Ed.), *International perspectives in music therapy education and training: Adapting to a changing world* (pp. 130–158). Springfield, IL: Charles C Thomas.
- Gilboa, A., Yehuda, N., & Amir, D. (2009). Let's talk music: A musical-communal project for enhancing communication among students of multi-cultural origin. *Nordic Journal of Music Therapy*, 18, 3–31. doi:10.1080/08098130802610999
- Habermas, J. (1984). *The theory of communicative action* (Vol. 1). Boston, MA: Beacon Press.

- Hadley, S. (2013). *Experiencing race as a music therapist: Personal narratives*. Gilsum, NH: Barcelona.
- Hall, E. (1976). *Beyond culture*. New York, NY: Doubleday.
- Ip-Winfield, V., & Grocke, D. (2011). Group music therapy methods in cross-cultural aged care practice in Australia. *Australian Journal of Music Therapy*, 22, 59–78.
- John, O. P., Donahue, E. M., & Kentle, R. L. (1991). *The big five inventory—Versions 4A and 54*. Berkeley, CA: University of California, Berkeley, Institute of Personality and Social Research.
- Kallen, H. M. (1924). *Culture and democracy in the United States*. New York, NY: Boni and Liveright.
- Kenny, C. B. (2006). A world of full of voices. *Voices: A World Forum for Music Therapy*, 6, n.p. doi:10.15845/voices.v6i2.248. Retrieved from <https://voices.no/index.php/voices/article/view/248>
- Kim, D. M. (2010). Towards musical individuation: Korean female music therapists' experiences in the Nordoff-Robbins Music Therapy certification training. *Arts in Psychotherapy*, 37, 353–362. doi:10.1016/j.aip.2010.09.005
- Kim, S. A. (2008). The supervisee's experience in cross-cultural music therapy supervision. *Qualitative Inquiries in Music Therapy*, 4, 1–44.
- Kim, S. A. (2011). Predictors of acculturative stress among international music therapy students in the U.S. *Music Therapy Perspective*, 29, 126–132. doi:10.1093/mtp/29.2.126
- Kim, S. A. (2013a). Bringing my Asian identity to light through acculturation. In S. Hadley (Ed.), *Experiencing race as a music therapist: Personal narratives* (pp. 151–162). Gilsum, NH: Barcelona.
- Kim, S. A. (2013b). Re-discovering voice: Korean immigrant women in group music therapy. *Arts in Psychotherapy*, 40, 428–435. doi:10.1016/j.aip.2013.05.005
- Kim, S. A., & Whitehead-Pleaux, A. (2015). Music therapy and cultural diversity. In B. L. Wheeler (Ed.), *Music therapy handbook* (pp. 51–63). New York, NY: Guilford Press.
- Kleive, M., & Stige, B. (1988). *Med lengting liv og song* [With longing, life, and song]. Oslo, Norway: Samlaget.
- Marshall, A., & Batten, S. (2003). Ethical issues in cross-cultural research. In W. M. Roth (Ed.), *Connections' 03* (pp. 139–151). Retrieved from <http://education2.uvic.ca/Research/conferences/connections2003/10Marshall105.pdf>
- Mastnak, W. (1993). Non-Western practices of healing-music and applications for modern psychotherapy. *Irasm*, 24, 77–84. doi:10.2307/836990
- McTaggart, R. (1997). Guiding principles of participatory action research. In R. McTaggart (Ed.), *Participatory action research: International contexts and consequences* (pp. 25–44). Albany, NY: State University of New York Press.
- Moreno, J. (1988). Multicultural music therapy: The world music connection. *Journal of*

Music Therapy, 25, 17–27. doi:10.1093/jmt/25.1.17

- National Institutes of Health (NIH). (2014). *Inclusion of women and minorities as participants in research involving human subjects*. Retrieved from http://grants.nih.gov/grants/funding/women_min/women_min.htm
- Ortiz, V. D., Sosulski, M. R., & Sherwood, D. A. (2012). Competently mixing: Does a clinical practice cultural competence framework fit in mixed methods research? *Journal of Mixed Methods Research*, 6, 348–363. doi:10.1177/1558689812445196
- Ponterotto, J. G., Costa, C. I., & Werner-Lin, A. (2002). Research perspectives in cross-cultural counseling. In P. B. Pedersen, J. G. Draguns, W. J. Lonner, & J. E. Trimble (Eds.), *Counseling across cultures* (5th ed., pp. 395–420). Thousand Oaks, CA: Sage.
- Population Reference Bureau. (2015). *2013 world population data sheet*. Retrieved from <http://www.prb.org/Publications/Datasheets/2013/2013-world-population-data-sheet.aspx>
- Rohrbacher, M. (2012). The application of Hood's Nine Levels to the practice of music therapy. In B. D. Koen (Ed.), *The Oxford handbook of medical ethnomusicology* (pp. 265–307). New York, NY: Oxford University Press. doi:10.1093/oxfordhb/9780199756261.013.0012
- Ruud, E. (1998). *Music therapy: Improvisation, communication and culture*. Gilsum, NH: Barcelona.
- Saarikallio, S. (2012). Cross-cultural approaches to music and health. In R. R. Macdonald, G. Kreutz, & L. Mitchell (Eds.), *Music, health, and wellbeing* (pp. 477–490). Oxford, UK: Oxford University Press.
- Sam, D. L. (2006). Acculturation: Conceptual background and core components. In D. L. Sam & J. W. Berry (Eds.), *The Cambridge handbook of acculturation psychology* (pp. 11–26). Cambridge, UK: Cambridge University Press.
- Sanchez, J. I., Spector, P. E., & Cooper, C. L. (2006). Frequently ignored methodological issues in cross-cultural stress research. In P. T. P. Wong & L. C. J. Wong (Eds.), *Handbook of multicultural perspectives on stress and coping* (pp. 187–202). New York, NY: Springer.
- Sandhu, D. S., & Asrabadi, B. R. (1994). Development of an acculturative stress scale for international students: Preliminary findings. *Psychological Reports*, 75, 435–448. doi:10.2466/pr0.1994.75.1.435
- Schwantes, M. (2011). *Music therapy's effects on Mexican Migrant farmworkers' levels of depression, anxiety, and social isolation: A mixed methods randomized control trial utilizing participatory action research* (Unpublished doctoral dissertation). Aalborg University, Aalborg, Denmark.
- Small, C. (1998). *Musicking: The meaning of performing and listening*. Middletown, CT: Wesleyan University Press.
- Spector, R. E. (2012). *Cultural diversity in health and illness* (8th ed.). Upper Saddle River,

NJ: Prentice Hall.

Stige, B. (2002). *Culture-Centered Music Therapy*. Gilsum, NH: Barcelona.

Stige, B. (2005). Participatory action research. In B. L. Wheeler (Ed.), *Music therapy research* (2nd ed.; pp. 404–415). Gilsum, NH: Barcelona.

Stige, B., & Aarø, L. E. (2012). *Invitation to Community Music Therapy*. New York, NY: Routledge.

Stige, B., Ansdell, G., Elefant, C., & Pavlicevic, M. (2010). *Where music helps: Community Music Therapy in action and reflection*. Farnham, UK: Ashgate.

Swamy, S. (2011). *Temple of ancient knowing: Music therapy portraits of globalized Indian identity* (Unpublished doctoral dissertation). Lesley University, Boston, MA.

Vera, E. M., & Speight, S. L. (2003). Multicultural competence, social justice, and counseling psychology: Expanding our roles. *The Counseling Psychologist*, 31, 253–272.
doi:10.1177/0011000003031003001

Warner, C. (2005). *Music therapy with adults with learning difficulties and severe challenging behaviour. An action research inquiry into the benefits of group music therapy within a community home* (Unpublished doctoral dissertation). University of the West of England, Bristol, UK. Retrieved from
<http://europepmc.org/abstract/ETH/418450/reload=0;jsessionid=UmKJmgVFDawTA4jKt>

Wheeler, B. L., & Baker, F. A. (2010). Influences of music therapists' worldviews on work in different countries. *Arts in Psychotherapy*, 37, 215–227. doi:10.1016/j.aip.2010.04.006

Wong, P. T. P., & Wong, L. C. J. (Eds.). (2006). *Handbook of multicultural perspectives on stress and coping*. New York, NY: Springer.

Worthington, R. L., Soth-McNett, A. M., & Moreno, M. V. (2007). Multicultural counseling competencies research: A 20-year content analysis. *Journal of Counseling Psychology*, 54, 351–361. doi:10.1037/0022-0167.54.4.351

Zhang, M., & Cross, S. E. (2011). Emotions in memories of success and failure: A cultural perspective. *American Psychological Association*, 11, 866–880.
doi:10.1037/a0024025