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Dimensions of Culture: A Literature Review of Cross-Cultural Competencies for Music
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Music Therapy

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Abstract

With the rise in diversity of the population worldwide, mental health professionals are more likely to work with clients with a different culture. Owing to the uneven distribution of accessibility of music therapy, music therapists, especially, have a higher possibility to work cross-culturally. Cross-cultural music therapy is an intricate and sensitive practice involving multicultural issues and different levels of sentiments of the therapists. The existing research is not enough for supporting music therapists working under cross-cultural contexts. This literature review integrates studies in various cross-cultural settings including domestically cross-cultural work, international work, international student context, and cross-cultural supervision context. Findings were analyzed and organized by researchers all over the world, which revealed a group of coherent themes including cross-cultural working challenges, how music can serve as an instrumental role, and how a music therapist can experience personal growth in the clinical work. A cross-cultural competence framework is provided as an aerial view of cross-cultural music therapy process, which therapists can refer to when implementing cross-cultural practices.

Keywords: cross-cultural music therapy, cross-cultural competencies

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Introduction

There are approximately 195 countries in the world but only 53 countries have music therapy occurring (Gadberry, 2014), and of those 53 countries, only 20 countries have music therapy organizations (American Music Therapy Association, 2019). While music therapy only happens in some places, the increase of globalization and human movement implies that a growing amount of music therapists and music therapy companies or organizations will provide services internationally and cross-culturally. An increasing number of music therapists may deliver services in a foreign country for short-term or long-term programs. For instance, the organization, Music Therapy Without Borders offers services projects around the Caribbean and the globe, where music therapists explore new experiences and learn to practice music therapy abroad while immersing in a different culture (Music Therapy Without Borders, 2019). Boston Children's Foundation delivers their resiliency programs to equip parents, educators and practitioners with the capabilities to help the child trauma victims for a short period of time in the US and also in foreign countries such as Haiti and Taiwan (Boston Children's Foundation, 2019a, 2019c).

With the rise of globalization, music therapists are more likely to work with culturally diverse populations (Gadberry, 2014; Grimmer & Schwantes, 2018). A certain amount of music therapists may encounter the situations where they have to work in a cross-cultural context which means to facilitate cross-cultural music therapy. This can occur in the situations when the therapist goes into a therapy group with diverse cultures domestically, or when the therapist travels to the other countries and works or studies internationally.

Cross-cultural music therapy is defined as "situations in which a client and therapist are from different cultural backgrounds" (Valentino, 2006, p. 108). The definition by Ip-Winfield and Grocke (2011) highlights the importance of acknowledging difference in music therapy "in which important cultural differences exist between the therapist and client/s and /or among the clients themselves" (p. 61). Cross-cultural therapy can happen in a group of individuals with different cultures residing in the same country (Gadberry, 2014). In this paper, cross-cultural music therapy is considered in settings where significant differences in cultural or ethnic backgrounds exist between the therapist and the client from an international perspective.

Within the music therapy field, 68% of programs accredited by the American Music Therapy Association enrolled international students from 2008 to 2009 (Hsiao, 2011). During the period of pursuing the degree, students enter the clinical field for practicum learning. After completing the degree, a survey showed more than half of the international students planned to stay in America for employment (Hsiao, 2011). The students may experience a number of sophisticated transition issues practically and psychologically when working cross-culturally at internship sites or places of employment post-graduation.

When working cross-culturally, music therapists are dealing with a series of difficulties around sensitivity and bias with themselves as well as with their clients. Young (2009) concluded that cultural issues were not addressed and discussed formally enough in the supervision of music therapy internship. Cultural issues have been seen as one of the vital facets while discussing challenges in music therapy clinical work (Grimmer & Schwantes, 2018). Valentino (2006) indicated that, "cultural context defines reality and determines patterns of relating, of meaning-making, and of self-experience" (p. 108). This perspective considers all humans as having a lived experience, explicitly, and implicitly of a cultural context. Within these

contexts cultural alignments and differences will occur. When there are cultural differences among the therapist and the client, the risk of misunderstanding each other increases. A lack of cultural awareness may cause harm to the client-therapist relationship establishment and sustenance, and consequently, impact therapy outcomes.

Music has been viewed as an effective medium which can bridge the gaps in culturally diverse contexts (Cominardi, 2014; Gadberry, 2014; Ip-Winfield & Grocke 2011; Silverman, Smith, & Burns, 2013; Valentino, 2006). The cross-cultural components of music open up a new channel for people from different background to share experiences, address difficulties, and integrate diversities. The unique and flexible qualities of music create the openness that allows for the acceptance and the connection to take place in the cross-cultural therapy. Gadberry (2014) highlighted the accessibility of the music, and its possibility it brings to form new communication ability between the therapist and the clients.

Through acknowledging and being aware of the cultural issues, therapists can employ cultural differences effectively as the positive boost of the therapeutic relationship. Making good use of cultural sensitivity can help the therapist understand the client more and deeper (Chan, 2014). By understanding the difficulties and recognizing the importance of cultural issues, music therapists are able to use music as a helper to facilitate culturally sensitive therapy for their clients.

Cross-cultural music therapy is therefore an intricate and multidimensional context for the therapist conducting it. However, there has been inadequate literature discussing cross-cultural music therapy. Limited resources are available for therapists who work cross-culturally to support their work and transition process. This paper seeks to provide an outline of the challenges that music therapists may encounter in cross-cultural settings. In addition, it aims to

use the findings from this study to explore and put forth the possible strategies that music therapists can apply for dealing with their cross-cultural working.

Literature Review

With the development of technology, transportations and social media break the physical barriers and make the cultures more permeable with each other. People have more opportunities to meet and live with individuals coming from disparate regions and cultures. According to American Psychiatric Association (APA) (2017), there are 63% of White, 17.8% of Hispanic, 13.3% of Black, 5.7% of Asian, 1.3% of American Indian or Alaska Native, and 0.2% of Native Hawaiian or other Pacific Islander in the United States in 2016. The APA also reported that around 18% of adults have a diagnosable mental disorder and an estimated 43% of them receive mental health treatment or counseling. The statistics indicate there is an increasing trend for mental health professionals to work with colleagues, partners, or clients from a different culture domestically (2016).

Besides working domestically, there are amounts of mental health professionals working internationally. White (2013) pointed out more than 90% of mental health resources concentrate in high-income countries, while about 80% of the population in the world live in low-and middle-income countries. He went so far as to report that "there are huge inequalities in the availability of resources to support mental health needs across the globe" (p. 182). Regarding the maldistribution of resources, several organizations are providing recovery and relief efforts abroad such as the global health education programs of Child Family Health International (Child Family Health International, 2019), the mental health program of The Carter Center (The Carter Center, 2019), and the Rainbowdance of Boston Children's Foundation (Boston Children's Foundation, 2019b). A core practice of these programs is that professionals travel to other countries with their specialties to help people with relevant needs to those specialties. In this situation, professionals will work with people from a distinct cultural background and will also

immerse in the culture themselves. Therefore, cross-cultural contexts can occur in situations where a therapist works with individuals with a nonidentical culture out of his or her living region.

Among mental health treatments, music therapy is an emerging field worldwide. A body of research has discussed the capabilities of music therapy as a means for people to optimize their quality of life. Researchers published studies on music therapy serving effectively for various populations to address their needs in different settings of daily life (Bruscia, Dileo, Shultis, & Dennerly, 2009; Berger, 2016; Chonga, & Kimb, 2010; Ridder, Stige, Qvale, & Gold, 2013; Sauer, Fopma-Loy, Kinney, & Lokon, 2016; O'Donnell, 1998).

Cross-cultural music therapy can occur in many places where the culture of the therapist is significantly dissimilar from clients, even if the therapist belongs to the dominant culture. For example, when an American therapist works in a Chinese school in the United States. This is the setting that the therapist is one of the members of the dominant culture but entering a group of people with a different culture. On the contrary, when the therapist goes into a region with the other dominant culture will be another setting where cross-cultural therapy happens. This will be the experience international professionals and students come across.

According to the American Music Therapy Association (2017), there were people from 29 countries around the world enrolled in the membership. This indicated music therapists coming from other countries may be working with clients in America who do not have shared cultural experiences. Additionally, over than 100 students took the survey which implied international music therapy students may be practicing cross-cultural music therapy in the United States.

When discussing cross-cultural music therapy, themes that arise include, multicultural competencies, international music therapy context, and the international student context. The specific areas of interest and concern are acculturative stress, access to international training, the challenges may encounter, and how music can aid the therapist. The forth-coming section examines literature about these areas.

Challenges Music Therapists May Encounter

Cross-cultural music therapy is influenced by personal experience, professional training, the background context, the level of acculturation, and the musical preference (Ip-Winfield & Grocke, 2011). There are various challenges that a music therapist may encounter while working with clients from a different background. Sometimes therapists may not even realize they are dealing with these challenges, or they have no idea of what issues they are facing. This situation can endanger the relationship with clients and influence therapy effectiveness. If therapists understand the issues and challenges that they may be going over beforehand, they can prepare for the coming tasks and smoothen their therapy process. The following content identifies several areas that can affect the therapist's cross-cultural work and also provide strategies of using music as a helper.

Language Barrier. According to the Linguistic Society of America, there were 6,909 distinct languages reported in 2009 (Anderson, 2010). When working cross-culturally with people from different areas, cultures, or countries, the therapist may not have a shared language with clients. Graberry (2014) highlighted language barrier can cause anxiety, sadness, frustration, and the feeling of inadequate and disconnected to the music therapist. Therapists can experience negative feelings while being confronted with language barriers. Language issues

also affect acculturative stress, cause isolation, and influence communication ability (Kim, 2011).

Cominardi (2014) indicated, "music comes into all our interactions as a transverse vehicle of complex language networks, leading to the coexistence of different cultures and social identifications, comparisons and exchanges" (p. 3). If music therapists are skilled in using music for non-verbal or other ways of communicating, language barriers would not be a concern (Ip-Winfield & Grocke, 2011). Music can become a sharing common language, create communications, and as the medium bridges the gap in culture (Cominardi, 2014). Relying on music more and follow the flow of the music can decrease the necessity of verbal communications. Utilizing improvisation appropriately as a musical transition can open up a channel of communicating.

In addition to using music, creative arts can be another doorway to expressing without being trapped by language. Cominardi (2014) highlighted three disparate dimensions of improvisation for facilitating a culturally diverse group. These improvisations include (a) sound-musical improvisation, which uses music to discover new and free ways of interacting through instruments; (b) graphic-pictorial improvisation, which utilizes visual art to explore connections in colors and graphics and also provides sensory-perceptual stimuli; and (c) motor-environment improvisation, which encourages expression of body movements and extends the experience to space and time dimensions.

Moreover, facial expressions and body language are helpful as an alternative means of intercourse. Children learn facial expressions and gestures prior to verbal language. They express their needs to caregivers through non-verbal communication such as smile and sad faces of infants, and pointing and visual attention of toddlers. Mandal and Ambady (2004) highlighted,

"facial expressions of emotion are uniformly understood, expressed or experienced across cultures" (p. 28). Facial expressions of emotions embody signals without using language in a universally similar manner, which indicated it can be a way for a therapist to perceive a client's feelings when there exists hardship in using language. Based on these studies, and from a cross-cultural perspective, therapists' awareness of how culture influences the multisensory relational environment, and the interpretation of facial expressions in that environment, is a potential powerful key skill to harness.

Differences in Music Preferences. In Ip-Winfield and Grocke's (2011) study, the statistic showed the most frequently used repertoire styles in aged care by music therapists were songs with "cross-cultural appeal" (p. 70). Further, culturally specific songs were used constantly for cross-cultural group therapy (p. 71). These results indicated that there are needs of clients to listen to or sing the songs that have connections to their culture. Music of culture can elicit people's strong associations (Brown, 2001). Culturally specific music connects to the client's hometown and helps them enhance the sense of self-identity (Chan, 2014). Therefore, music therapists should be mindful of the music preferences of clients when providing therapy.

Music idioms of culture are related to the feeling of inclusion within the music therapy group (Gadberry, 2014). Culturally specific musical idioms contain musical language carrying meaningful contexts of culture or social system. Music therapists, therefore, have an opportunity to foster the ability to incorporate diverse music styles into their practice. Having the repertoire from the client's culture can enhance the connection with them. The research on this topic supports the perspective that learning culturally proper musical idioms is one way to understand clients deeper. By adding musical idioms into provided music, therapists are able to create a safer and familiar musical space for clients.

When encountering clients with a dissimilar cultural background, music therapists can possess an open-minded attitude to form a culturally sensitive therapeutic relationship. Chan (2014) illustrated therapists can learn from the client in cross-cultural music therapy. Through discussing cultural music together, the therapist and clients enhance interaction, created connections, understand the client's cultural factors, and also minimize cultural and linguistic barriers. Music offers a common space for the therapist and clients to share with each other. Furthermore, clients can experience empowerment during the process of sharing their own culture.

Rhythms, melodies, keys, harmonies, and even meters of music can be varied from culture to culture. Gadberry (2014) found the differences of music in music therapy group can be addressed by another approach. When music itself is different from the therapist's culture, he or she can use improvisation to deal with the situation. It is risky to rashly use music from client's culture without any knowledge of that. On the contrary, if using the therapist's own repertoire and improvisation techniques properly, the interval of differences in music could be compensated.

Based on the client's preferences, music therapists can play improvised music and well-known music as well. By rephrasing the lyrics and melodies, the therapist can form a new and free way to engage clients. Through observing and communicating, the therapist can get the sense of the client's musical preferences. With the information obtained from clients, the therapist can lean on music and improvise creatively to exert the cross-cultural ability of music.

A suggestion of receiving cross-cultural training was provided for music therapists to enable them to successfully meet the needs of a diverse client population and to increase the quality of the therapy (Gadberry, 2014; Ip-Winfield & Grocke, 2011; Valentino, 2006). These

studies have shown that it is important for a therapist to have knowledge of different music from other cultures when working with cultural differences. Using music as part of an individual's cultural experience, can become a major factor in developing therapeutic relationships (Chan, 2014). Learning songs with a different language and unfamiliar musical elements can also be overwhelming for therapists. However, what the studies discussed above suggest is that therapists can count on their clients because they are the expert of their own individual cultural location. Therefore, the studies illuminate the benefits of receiving professional training such as music lessons, workshops, and conferences. It can advance a music therapist's culturally sensitive music proficiency to handle music differences in culture in practices.

Therapist-Client Relationship. When working with clients from a disparate culture, the plight of building a positive therapist-client relationship may come to the therapist. For example, a "therapist's lack of awareness of cultural differences during cross-cultural therapy may create impediments to the acceptance of the client" (Valentino, 2006, p. 109). A healthy therapist-client relationship cannot be formed if a therapist is not accepted by the client. Studies such as this suggest that therapists need to be culturally sensitive while trying to establish connections with clients.

Valentino (2006) put forward findings that show, "when the client and the therapist are from different cultural backgrounds, a higher probability exists for the misunderstanding or misinterpretation of the client's world-view by the therapist" (p. 109). The same word or the same posture may have totally opposite meanings to two diverse cultures. Verbal communications and non-verbal cues vary depending upon the culture. Misunderstandings can cause the crack of the therapist-client relationship and make it become fragile. In order to avoid

the happening of that, the therapist must equip cultural humility and be able to use cross-cultural empathy which is imperative for deep and true understanding.

Valentino (2006) outlined four fundamental skills for a therapist to use empathy competently and sensitively to build therapist-client relationships in a cross-cultural therapy setting. The first one was the self-awareness of the therapist's own culture. With the recognition of his or her cultural identity, the therapist will be able to step outside his or her cultural context, check their biases, and view the world from the client's perspectives. "It [cultural empathy] requires the therapist to acknowledge his/her own cultural identity and cultural biases, as well as obtain knowledge to recognize and understand the client's unique cultural background and personal cultural experiences" (Chan, 2014, p. 98).

The second skill Valentino put forward was knowledge of cultural factors. Cultural values can affect the ability of a client to build a therapeutic relationship with a therapist (Hyejin, 2017). Therapists have to acquire knowledge of the unique factors of a client's culture. A respectful attitude is recommended to therapists while trying to learn cultural knowledge. Cultural humility and knowledge can help a therapist understand clients from different facts, decrease the risk of misinterpretations, and gain trust from clients. For example, traditions, religions, strategies of coping problems, patterns of communication, ways of thinking, behaviors of processing or expressing emotions, attitude toward complex or private themes. When administering assessments and establishing a treatment plan, music therapists should be cognizant of the client's values (Brown, 2001). Clients always know their individual cultural location the best. An open-minded and modest attitude is suggested while working with clients and always confirm rather than assume.

The third skill of Valentino's framework was the use of empathy. There were two dimensions of empathy including cognitive empathy which is the ability to perceive client's meaning correctly and being able to respond back, and affective empathy which is the capacity of receiving and resonating with client's experience. In Chan's (2014) case vignette, cultural empathy was developed through using culturally specific music which enhanced interaction, created connections, and minimized cultural and linguistic barriers.

The last skill was the ability to communicate empathy effectively. "In order to be effective and allow the client to feel understood and open to treatment, empathy must be communicated" (Valentino, 2006, p. 110). Shapiro (2005) stated that "a music therapist should try to communicate with a client in a culturally respectful way. This can be done through listening, conversation, playing music together, and learning songs and language from each other" (p. 30). Empathically communication can occur through verbal dialogues and also musical conversations. While playing music together, "moments of mutuality, confirmation, and meaning of 'being seen', touched, or understood that lead to change, self-understanding, or self-acceptance" (p. 32). Through creative arts, communications of empathy can be facilitated in a gentle but in-depth way depending on the client's responses.

The research reflects the success of building and maintaining a successful relationship with a client requires a continuous process during therapy. Furthermore, that an effective therapeutic relationship needs to be based on trust and respect to each other which lead to the fulfillment of understanding and acceptance. Through utilizing culturally appropriate empathy, a therapist can deeply listen to and truly understand what is being communicated and what needs to be addressed. These points are further grounded by the ideas of Stige when he suggests that

"client and therapist are both learners of culture" (2002, p. 215). A cohesive therapist-client relationship needs sensitivity and openness of a therapist.

Psychological challenges. According to the body of knowledge, there will be a lot to deal with in practicing music therapy cross-culturally either when a therapist works with individuals from different cultural backgrounds domestically or enters a foreign environment internationally. Experiencing culture shock and culture acclimation can be dramatic and scared to a therapist (Grimmer & Schwantes, 2018). Gadberry's (2014) study identified the feeling of frustration, inadequate, disconnection, and being isolated like an outsider that a therapist may have in the process of adapting to cross-cultural work. Also, for international workers, accommodating to all new things is energy consuming and can feel uncomfortable, helpless, and self-doubt.

Acculturative stress affects a therapist's mental well-being and has a profound effect on careers. Kim (2011) conducted an online survey of acculturative stress among international music therapy students. The study indicated international students experienced social anxiety in class as well as in fieldwork. Results showed the level of stress was higher when grappling with specific culturally related challenges. Proper resources such as supervision and personal therapy can be helpful to support this process and lower the stress level.

The importance of supervision in music therapy practices has been discussed in several studies. Therapists can examine the quality of therapy by having supervision. Transference and countertransference issues can be unearthed during the discussion with a supervisor. Proper supervision can provide a second opinion and emotional support for a therapist. Positive supervisory experience strengthens a therapist's self-esteem and increased motivation for his or her clinical work (Kim, 2008).

Hyejin (2017) found personal therapy was beneficial for a therapist's personal, professional, and musical development. The results declared personal therapy can assist a therapist to accept reality, acknowledge dark sides, and come across personal issues. A therapist can also learn from his or her personal therapist and becomes more mature as the role of a therapist. Through personal therapy, a therapist can know himself or herself further, and this change of mindset can influence his or her music. Hyejin summarized the experiences from participants, "as a positive self-image and confidence emerged, they were able to create new relationships with music" (p. 59). Participating in a personal therapy can provide assistance for a therapist to handle psychological challenges encountered in his or her own practices.

Results

The literature in this study revealed four key areas in music therapy that can be considered as a cross-cultural way of practice: identify challenges, music as solutions, resources, and personal growth (see table 1).

When identifying challenges, music therapists may consider language barrier (Gadberry, 2014), differences in music preferences (Ip-Winfield & Grocke, 2011), the therapist-client relationship (Chan, 2014), and psychological challenges (Gadberry, 2014). Music therapists can especially utilize music as solutions for challenges in sessions such as forming communications through improvisation (Cominardi, 2014), creating a common space (Sliverman, 2013), being a cultural ambassador (Shapiro, 2005). Appropriate resources are indispensable to provide decent therapy. Music therapists may acquire resources via having supervision (Young, 2009), multicultural training (Valentino, 2006), and personal therapy (Hyejin, 2017). Finally, personal growth like self-confidence, fulfillment, independence, development, and meaningfulness can be awaited as achievements to music therapists working on cross-cultural music therapy (Gadberry, 2014; Grimmer & Schwantes, 2018).

Table 1

Areas of Cross-Cultural Practice

Identify Challenges	Music as Solutions	Resources	Personal Growth
<ul style="list-style-type: none"> ∪ Language barrier ∪ Differences in music preferences ∪ Therapist-client relationship ∪ Psychological challenges 	<ul style="list-style-type: none"> ∪ Form new communications: Improvisation ∪ Create a common space ∪ Cultural ambassador 	<ul style="list-style-type: none"> ∪ Supervision ∪ Multicultural training ∪ Personal therapy 	<ul style="list-style-type: none"> ∪ Self-confidence ∪ Fulfillment ∪ Independence ∪ Development ∪ Meaningfulness

Translating Results into Clinical Practice

The framework below (see figure 1) highlights those areas as a cross-cultural framework. It provides a procedure of practice and process of learning for music therapists who work with culturally diverse clients a procedure to cope with complex therapy process.

Preparation—identifying challenges is suggested to be the first area of practice to pay attention to when considering a cross-cultural practice. The figure describes the process of carefully thought-out areas that may pose as challenging in the therapeutic encounter to prevent estrangement of clinical discourse. The challenges may be language barriers, differences in music preferences, therapist-client relationship, and psychological challenges.

After recognizing potential challenges, two main procedures are provided in the framework to manage and address those challenges during the therapy process. Inside the therapy, a music therapist can exploit music as solutions for identified challenges. Outside the therapy, a music therapist can seek resources to support his or her work. These two procedures are recommended to undertake at the same time to assure the quality of ongoing therapy.

Through the whole process of therapy work above, the coming consequence for the therapist himself or herself will be personal growth. Therapists can anticipate a positive prospect of this cross-cultural music therapy practice. Although the proceeding is arduous, it will pay back with precious experience. The experience will bring self-confidence, fulfillment, independence, development, and/or meaningfulness to the therapist in the end, and it is going to be specialized for each therapist.

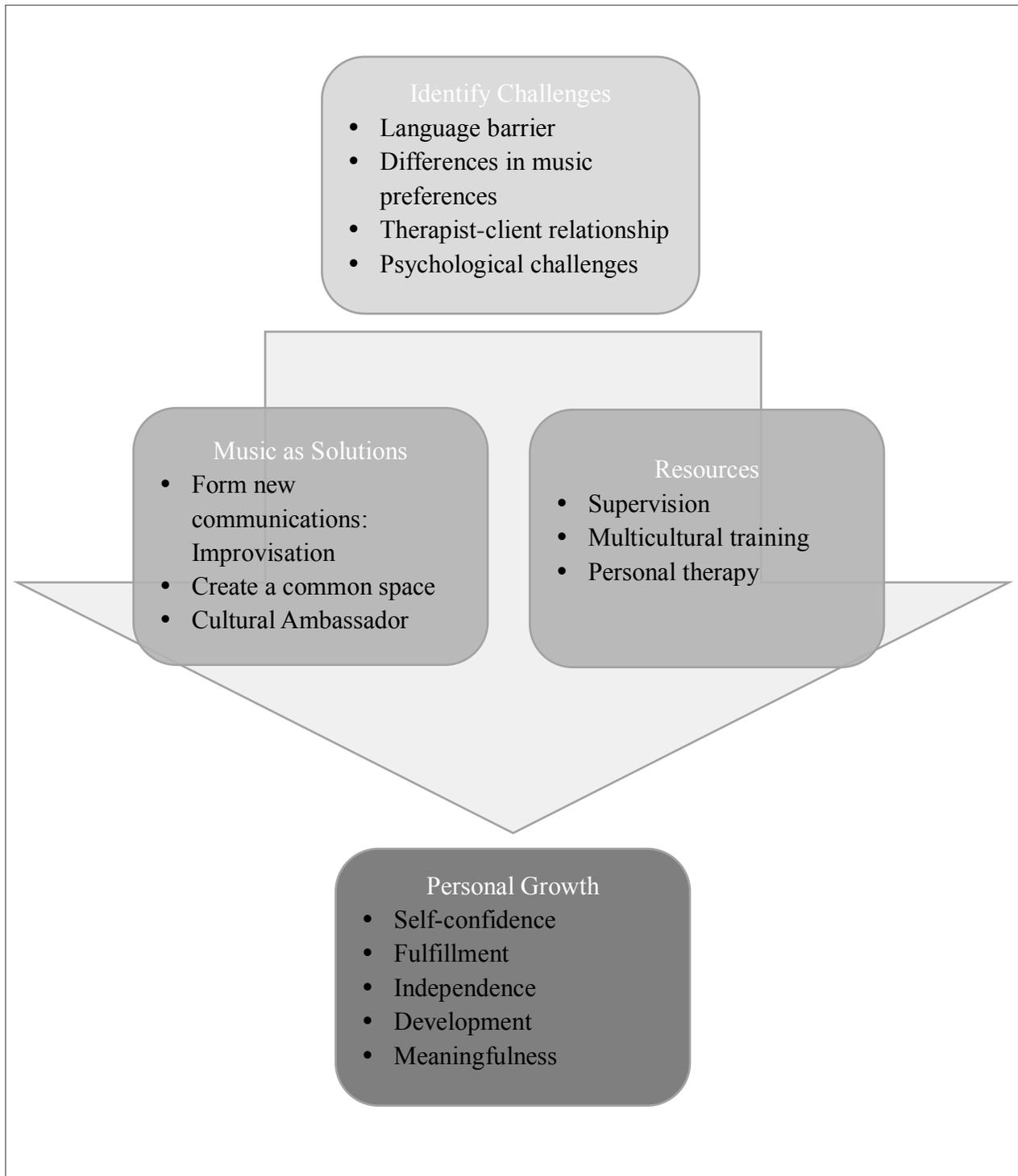


Figure 1. Cross-cultural competencies framework: The procedure for practice and process of learning of a cross-cultural music therapy practice.

Discussion

The findings from this study revealed four main areas of practice to be considered from a cross-cultural perspective. A cross-cultural procedure of practice and process of learning is provided in a framework for music therapists who work with culturally diverse clients to cope with the complex process. The framework identifies challenges a music therapist may face in practicing cross-cultural music therapy. These challenges can cause different levels of influence on therapy process which may lead to negative consequences. In order to deal with challenges in facilitating effective therapy, how can a music therapist use music practically? When working with clients from nonidentical cultures, in what way can a music therapy equip cross-cultural competencies? These become salient themes to be addressed in this paper.

Awareness of the Potential Issues: Identify Challenges

Firstly, a music therapist who works cross-culturally is suggested to have the awareness of what issues may come up. It is necessary to acknowledge and identify these culturally relevant challenges. A therapist can be more prepared if knowing that there are culturally specific factors addition to common themes, they may have to address during the cross-cultural work. By identifying the challenges such as language barrier (Gadberry, 2014; Ip-Winfield & Grocke, 2011), different music preferences of a client (Chan, 2014; Ip-Winfield & Grocke, 2011), the adversity of building therapeutic alliance with clients (Chan, 2014), and the rise of emotional issues (Gadberry, 2014), a therapist can have the mindset beforehand rather than trip over these obstacles accidentally.

Music as Solutions for Challenges of Cross-Cultural Music Therapy

After knowing the challenges may encounter in the cross-cultural work, a music therapist ought to delve into how music can serve as an activator to support him or her during this working

process. "Music comes into all our interactions as a transversal vehicle of complex language networks, leading the coexistence of different cultures and social identifications, comparisons and exchanges" (Cominardi, 2014, p. 3).

Music as an Activator for New Communications: Improvisation. As an intermedium of communication, music bridges the language barrier. Comparing to other mental health practitioners relying on verbal communication mainly, music therapists are skilled in using music to communicate (Ip-Winfield & Grocke, 2011). Improvisation can be one of the techniques used for forming cross-cultural communications (Gadberry, 2014). Improvising allows a client to express freely and allows the therapist to enter the client's world musically. Through improvisation, a therapist and client are able to interact without the limitation of language or verbal expressions. "Improvisations in music therapy seek to build strong experiences of equality and being-togetherness through a temporal leveling-out of all social roles" (Stige, 2002, p. 223)

Music as a 'Common Space Between'. Music as one of the expressive arts creates a common space which is less threatening and non-judgmental for client's self-expression. Sliverman (2013) argued the art-making process gave clients "a sense of safety and of distance that allowed them to address difficult and deeply private topics" (p. 220). The safe space permits clients to reflect and reprocess their issues. Within the cross-cultural contexts, clients are able to explore themselves through a multicultural lens. "The collaborative nature of the arts allowed for a diversity of opinions to exist together" (p. 220). Lark (2005) concluded that arts had the potential to engage people, provide the space for witnessing, and promote the occurrence of changes.

Music as Cultural Ambassador. Music can be seen as a role of cultural ambassador in cross-cultural working. A music therapist and a client can share their own culture's music with

each other. By being able to share the music of the culture, the empowerment heightens self-esteem and individuality of clients. Participating in other's musical culture can be influential in strengthening self-identity, increasing connections, and enhancing collaboration and mutuality (Chan, 2014; Shapiro, 2005). Having the opportunity to exposure to unfamiliar music may lead to new expressions and experiences, and clients may also become more flexible and tolerant (Shapiro, 2005, p.31). For music therapists, learning about the music of various cultures can expand their repertoire. As a result, this can help a music therapist "better relate to a wider range of clients in a therapeutically sensitive manner" (Shapiro, 2005, p. 29).

Resources for Music Therapists Working Cross-Culturally

To realize the need for help is important for providing a high quality of therapy. Also, having the courage to reach out to others is necessary for taking care of the therapists themselves. Knowing the access to adequate resources can assist therapists when suffering from obstacles. Besides leaning on music, music therapists can seek support outside the therapy such as supervision, personal therapy, and professional training.

Culturally Sensitive Supervision. Appropriate supervision is often helpful for a therapist to step outside and review his or her work more comprehensively. Supervision is "a balance between new ideas and a resource of knowledge and experience" (Kim, 2008, p. 5). Supervisors can provide the objective and professional third person's perspective which is often not affected by emotions or therapist-client relationships.

Additionally, immigrants and international students may experience cross-cultural supervision. Kim (2008) stated cultural misunderstandings and differences can have a negative impact on the supervisory relationship and on supervisee's self-identity, which can result in lowering the effectiveness in working with clients. Young (2009) concluded that not only the

students or supervisees needed cross-cultural training for advanced clinical capabilities, music therapy supervisors were suggested to have ongoing training in multicultural competence for offering culturally sensitive and appropriate relationships in both clinical and supervisory contexts.

Multicultural Training. Studies supported that multicultural training can be advantageous for cross-cultural working therapists (Ip-Winfield & Grocke, 2011; Kim, 2008; Valentino, 2006; Young, 2009). Training fosters therapist's self-awareness, enriches cultural knowledge, and cultivates sensitive use of music therapy techniques (Valentino, 2006). With culturally sensitive supervision, music therapists have a higher possibility to provide culturally respectful services.

Appropriate Personal Therapy. Personal therapy is considered as an essential resource for mental health professionals. Hyejin (2017) asserted personal therapy help therapists "gain self-awareness that allows them to improve their therapeutic skills and understanding of therapeutic dynamics" (p. 55). The experience of personal therapy provides the opportunity for role reversal. Therapists get to put on a client's shoes and view things from the client's lens. The experience reinforces empathy of therapists and makes them realize more about what emotions or dilemmas their clients may be struggled with.

In addition, "personal therapy offers one possible way to work on therapists' countertransference" (Hyejin, 2017, p. 55). Therapists address their own issues in their personal therapy, which, in turn, can benefit their own practices indirectly. Therapists who work cross-culturally are dealing with multiple stresses at a time. For example, culture shock, acculturation, pressure to succeed, anxious about unfamiliarity, and feelings of self-doubt and inadequacy. Having personal therapy will support therapist's process of self-regulation and offer them a room

to take a deep breath as they need. Receiving personal therapy promotes the development of a therapist personal, clinical, and musical maturation.

Music Therapy and Self - Cultural - Identity: Personal Growth in Cross-Cultural Working

Working with culturally diverse clients is challenging. Music therapists will experience a transition process with a sense of uncertainty. It consumes a therapist's amount of energy and efforts to handle this complicated situation. Gadberry (2014) summarized music therapists will become more independent and confident, and find a new sense of self by having the experience of cross-cultural working. Grimmer and Schwantes (2018) found cross-cultural working builds a therapist's confidence through conquering all the intimidating challenges.

Cross-cultural music therapy practice offers therapists an opportunity to challenge themselves, push their limitations, and explore the possibilities. Although the process is going to be tough, it brings personal growth as the outcome to therapists. Therapists can learn special experience and unveil a new sense of self throughout. Grimmer and Schwantes (2018) concluded the work experience will be worthwhile in general, but the meaningfulness varies from individual's values.

Conclusion

Estrella (2001) highlighted, "If culture influences the way we see ourselves, experience emotions, define health and problems, and construct our worldview, then clearly culture must come into play as we assess, diagnose, plan treatment, and engage with our clients" (p. 42). Therapists, as human beings, are set up by society and their culture osmotically. The way a therapist views a client is relevant to his or her values which varies from culture to culture. Being aware of biases, therapists can avoid misinterpretation and overinterpretation. Through understanding the client's culture, a therapist can better individualize the treatment plan for clients. In Grimmer and Schwantes (2018) research, they pointed out culture helped a therapist recognize client potential and shape session planning and evaluation.

Culture plays an important role in our lives, it affects our way of thinking and acting. It is necessary to take cultural factors into consideration while doing cross-cultural work. Music therapists should not underestimate the influence of cultural differences. "Music therapy reaches across cultures" (Grimmer & Schwantes, 2018, p. 25), it creates the connection between a therapist and a client surpassing cultural differences.

"Therapy is partly about learning how to enter a culture, find your way in it, and sometimes even new ways 'beyond' it" (Stige, 2002, p. 215). Cross-cultural music therapy can be effective for the client and meaningful for the therapist if facilitating in a culturally sensitive and respectful way. Diverse population and needs of music therapy worldwide drive music therapists working cross-culturally. However, inadequate research can be found to support the music therapist's cross-cultural work. More studies of this area need to be done as a more generalized model for therapists' reference to implement culturally relevant client care.

This paper presents an integrated perspective based on previous studies. The research aims to untangle some of the complexity in cross-cultural contexts. The proposed framework provides a blueprint of a cross-cultural working process for music therapist's clinical practice. The result of these findings hopefully ignites new ideas around this cross-cultural context.

There are limitations to this paper. As this paper is discussing culture relevant issues in therapy, biases play a notable role. Each individual coming from a dissimilar cultural and growing background, everyone carries biases naturally. Most of the participants of the reviewed literature were from western culture. The studies were conducted in western countries as well. The perspectives of the researchers and the participants may be influenced by the western culture which would not be appropriate to fully inference the result to people with other cultures. Therefore, the research cannot represent all populations.

Furthermore, the provided framework has not been practically used for cross-cultural music therapy. More research is needed to examine the framework's effectiveness and utilization. Research that includes varied clinical settings and populations will support further investigations on strengths and weaknesses of the framework. Studies on this framework are expected to provide validation and future recommendations on improvements and modifications.

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