



MTiP 2025

BOOK OF ABSTRACTS

THE 2nd INTERNATIONAL CONFERENCE ON
CHILDREN'S MUSIC THERAPY

THE 2ND INTERNATIONAL CONFERENCE ON
CHILDREN'S MUSIC THERAPY
**MUSIC THERAPY IN PEDIATRICS:
NAVIGATING A FIELD IN FLUX**

P: paper R: roundtable W: workshop #: poster

Program

KEYNOTES FRIDAY	3
Collaborative reasoning for team and program development in the pediatric hospital	3
Research in clinical Neuromusicology: creative AI, Music Therapy and Health-care application in Paediatric and Neonatal Neural Development	3
KEYNOTES SATURDAY	4
Enhancing Liberation Care through Music Therapy in Paediatric Intensive and Palliative Care at QCH.....	4
Early intervention and prevention of pain, stress, and trauma in a multidisciplinary perspective	4
1 P Understanding Child and Parent Experience of receiving Music Therapy in a Children’s Hospice setting: a qualitative study of child and parent experiences and perspectives.....	5
2 R Music therapy in acute paediatric neurorehabilitation: Advancing practice and research.....	6
3 P Parenting pain away! Parents’ live lullaby singing facilitates participation and closeness during painful procedures in neonatal care.....	7
4 P Music Therapy in the process of accompanying children with cancer and their families	8
5 P Music Therapy Songwriting with Parents of Premature Infants: How does it impact their hospital experience and the parent-infant relationship?	9
6 P Interaction-focused music therapy for children with cancer and their families: a multicenter randomized-controlled pilot trial (INMUT).....	10
8 P The feasibility of clinical EEG to investigate neural response to ecologically valid musical stimuli in children	11
9 P Feasibility & acceptability of patient and family directed active music making during paediatric bone marrow transplant process.....	12
# 10 Giving Grief a Voice – Music therapy for children experiencing grief	13
11 P «There is a crack in every mandala. That’s how the light gets in».....	14
# 12 My Life is Music’ – group therapy working model for different patient groups.....	15
13 R Explorations of Cross-Cultural Supervisory Experiences: An Intersectional Feminist Lens	16
# 14 Integrative review of music and music therapy interventions on functional outcomes in children with acquired brain injury	17
# 15 Music therapy for young children with acquired communication impairments: An international survey of clinical practices	18
16 P Enhancing functional communicative and language abilities in young children with acquired communication impairments: A collaborative music therapy and speech and language therapy approach.....	19
17 P Implementation of music therapy in a pediatric palliative care team.....	20
18 W “A spoonful of music makes the medicine go down.” Playing (with) music in Music Therapy in Pediatric Oncology.....	21
19 R Building an Art Therapy Team for children in a University Hospital, a case example.....	22

20 P	Developing evidence-based practice in the PICU.....	23
21 P	Systematic prioritisation of music therapy resources in acute paediatric healthcare to reduce clinician moral distress	24
22 P	Tracing the generation of the <i>Sounding Relation</i> research project: Emerging methodology and preliminary analysis	25
# 23	Perinatal Family-centered care Music therapy Intervention: a protocol to support parenting and preterm development	26
24 P	Music Therapy in the long stay at Pediatric Intensive Care Unit: a family-centered care approach.....	27
25 P	Family-Centered Music Therapy as a form of support for mothers and prematurely born infants. The Polish context.....	28
26 P	Creative Music Therapy to improve long-term development at five years in very preterm infants: Results of a randomized pilot trial.....	29
27 R	Building bridges in neonatology and beyond – how to span the music bond with infants, families, and staff.....	30
28 W	The Rocky Horror NICU Show” - Challenges and Potentials of Distributions in (Neonatal) Music Therapy. A Forum Theatre Workshop.....	31
29 P	MustRa - Music Therapy in Radiation Treatment; results from a pediatric pilot study at Oslo University Hospital.....	32
30 P	Music & Me: exploring interdisciplinary practice through a collaborative songwriting project across Scotland’s children’s hospices	33
# 31	Arrhythmical bonding between mothers and their babies with special needs	34
35 W	Masterclass in supervision using reflective teams	35
36 P	Sequences of Vitality in Music Therapy. Applying 360-degree video technology in hospital-at-home in paediatric palliative care	36
39 P	‘Calm Melodies’. The development of recorded music to support patients requiring medical care in ‘low-stimulation’ environments.....	37
40 R	Centering Clinical Practice in Pediatric Music Therapy Research	38
# 41	Short term therapy in children's hospital wards	39
#42	Music therapy program implemented in the Neonatal and Pediatric Intensive Care Unit at the Hospital of Barcelona.....	40
43 P	Music Walk: Transforming the Hospital Environment. A Study on Patients, Caregivers and Staffs perception of Environmental Music Therapy at a Norwegian Pediatric Hospital Ward.....	41
44 P	Emergence of a new role as music caregiver for hospital staff through music imagery	42
45 P	Children's musical folklore and its potential in therapy process.....	43
47 P	Heart beat music in a Norwegian context	44
49 P	Resilience and Hope: using music therapy to support adolescents with suicidality in the hospital	45

KEYNOTES FRIDAY

Collaborative reasoning for team and program development in the pediatric hospital

Prof. Helen Shoemark (USA)

Biography: Prof Helen Shoemark is Director of Music Therapy at Temple University, Philadelphia, USA. Her current research is in the application of team science in the systematic development of creative arts therapies in acute health settings, and person-centred interventions to develop parental self-efficacy and pre-vocal expressive communication in hospitalized infants.

As an author she has published 34 articles, 27 book chapters and the edited book *Music Therapy in the Neonatal Care: Influences of Culture* (Barcelona publisher, 2020) with colleague Mark Ettenberger. She is currently an Associate Editor for the *Journal of Music Therapy*, was previously editor of the *Australian Journal of Music Therapy*.

Prof. Shoemark has more than 30 years' experience as a clinical music therapist, pioneering NICU music therapy research and practice in Australia. In 2019 the Australian Music Therapy Association named an award in her name for the best research presentation at their annual national conference.



Research in clinical Neuromusicology: creative AI, Music Therapy and Health-care application in Paediatric and Neonatal Neural Development

Artur C. Jaschke (Netherlands)

Biography: Dr. Artur C Jaschke is Lector in Music-based Therapies and Interventions and in Ecologies of clinical Neuromusicology: creative AI, Music Sciences and Health Care Applications at the department of Music Therapy at ArtEZ University of the Arts in Enschede the Netherlands.

He is specializing in the interrelation of music, technology and brain maturation in clinical and non-clinical populations as well as clinical Research Fellow cognitive neuroscience of music at the Neonatal Intensive Care Unit at the University Medical Center Groningen and the Cambridge Institute for Music Therapy Research (UK). He works as Research Associate at the University of Cambridge (UK).

KEYNOTES SATURDAY

Enhancing Liberation Care through Music Therapy in Paediatric Intensive and Palliative Care at QCH

Maggie James (Australia)

Biography: Maggie James is the Clinical Leader of the Music Therapy Department at Queensland Children's Hospital, one of the world's top 10 pediatric specialist hospitals.

With a background in Neurologic Music Therapy and an MBA, Maggie combines clinical expertise with strategic leadership to advance the role of music therapy in pediatric care for the past 21 years. She established Children's Health Queensland's first and long-standing Pediatric Intensive Care Music Therapy Program, which continues to provide vital support to critically ill children and their families.



Early intervention and prevention of pain, stress, and trauma in a multidisciplinary perspective

Prof. Trond H. Diseth (Norway)

Biography: Trond H. Diseth is head of Department and Professor of Medicine at the Department of Child and Adolescent Mental Health in Hospitals at Oslo University Hospital and the University of Oslo. He earned his medical degree in 1984, became a specialist in child and adolescent psychiatry, and obtained his doctoral degree (dr.med.) in 1997.

Trond has been employed at the Clinic of Paediatric and Adolescent Medicine, Rikshospitalet, since 1990. For over 35 years, he has gained clinical and research experience in multidisciplinary, comprehensive assessment, treatment, and follow-up of severely and/or chronically somatically ill children/adolescents and their families.

This work necessitates a holistic biopsychosocial understanding and approach, with particular emphasis on the perspectives of pain, stress, and trauma. Early intervention and the prevention of pain, stress, and trauma in connection with medical diagnostic and treatment procedures have been areas of special focus. He advocates for continued, closely integrated collaboration where music therapy occupies a natural and equal place, with music therapists actively participating as both clinicians and researchers within the multidisciplinary teams in the various paediatric and adolescent units at the hospital.

1 P Understanding Child and Parent Experience of receiving Music Therapy in a Children's Hospice setting: a qualitative study of child and parent experiences and perspectives

Victoria Kammin

Background

There is little evidence about the experiences of music therapy in children's palliative care from child and family perspectives and no studies that have explored these experiences of music therapy provision in children's hospices (Kammin et al, 2024). This study aims to address this lack of evidence and inform the future development of music therapy services in children's hospices.

Study design

This paper explores a qualitative study using thematic analysis of semi-structured individual interviews with children with life-limiting conditions supported by children's hospices and their families. The study sample includes children and young people aged 8-17 with a life-limiting diagnosis who are supported by a children's hospice and parents or legal guardians whose child/children have received music therapy in a children's hospice. Participants were recruited from 4 children's hospices in diverse geographical locations across England.

Data collection

Face to face individual interviews for children, young people and parents were used to collect data. Interviews began with the option of rapport building creative activities before the interview to support engagement.

Data analysis

Braun and Clarke's (2006) six-stage approach to conducting thematic analysis was taken to identify and describe experiences and perceptions of music therapy in children's hospices, including identifying, analysing and reporting patterns within the qualitative data.

The researchers worked closely with a parent advisory group who provided input throughout the study. This study aimed to provide important evidence to inform future policy and service developments in music therapy within children's hospices.



Biography: Victoria Kammin (MA Music Therapy, BA Music and English) has been involved in the practice, teaching and development of music therapy specialising in paediatric palliative care for over twenty years. She trained at the University of Roehampton, is undertaking her PhD at the University of York and is lecturer in music therapy at Queen Margaret University Edinburgh.

Affiliation: University of York, Queen Margaret University Edinburgh, Resonance Creative Therapy

Email: vlvk500@york.ac.uk

Keywords: Experiences, Music Therapy, Children's Hospice

2 R Music therapy in acute paediatric neurorehabilitation: Advancing practice and research

Janeen Bower¹, James Burns²

Advancements in medical and surgical care have led to increased survival rates among children (0-18 years) who sustain a severe acquired brain injury (ABI). Despite being a low incidence and heterogeneous clinical population, these patients present with multiple complex care and rehabilitative needs encompassing all areas of bio-psycho-social functioning. Within the acute healthcare context, the scope of a music therapist extends from intensive care, acute care and sub-acute rehabilitation necessitating immense flexibility to work within the multidisciplinary team and address the rapidly evolving needs of these patients and their families (Bower et al., 2021; Burns et al., 2024; Kennelly, 2013).

This roundtable discussion is chaired by the co-founders of the international Acute Paediatric Neuro Music Therapy Network, and aims to explore key issues in music therapy clinical practice and the development of evidence-based practice for children with ABI in the acute healthcare context. Topics to be discussed include:

- Defining the unique role of music therapy for children with an ABI across the rehabilitation trajectory, from coma to functional rehabilitation.
- Addressing the complexities in designing intervention and assessment research with the population.
- Translating scientific and neuroscientific theories into clinical practice.
- Navigating the ethical and moral dilemmas that arise in the treatment of this vulnerable population.

This roundtable will present ongoing research in paediatric neurorehabilitation, share practical experiences, and produce actionable recommendations for clinical practice.



Biography:

Dr. Janeen Bower (PhD, RMT), a Postdoctoral Fellow at the University of Melbourne, has 20 years of clinical experience, most recently as Team Lead of Music Therapy at the Royal Children's Hospital Melbourne. Her research interests include music and neurosciences. She co-founded the Acute Paediatric Neuro Music Therapy Network.

James Burns (MA, BA) is a PhD Researcher at the University of Limerick, Ireland and Music Therapist at Children's Health Ireland at Temple Street, Dublin. He is co-founder of the Acute Paediatric Neuro Music Therapy Network, and his research interests include music therapy in paediatric acquired communication impairments and collaborative practices.

Affiliation: ¹The University of Melbourne, Australia,

²University of Limerick, Limerick/ Children's Health Ireland at Temple Street, Dublin, Ireland

Email: janeen.bower@unimelb.edu.au, James.Burns@ul.ie

Keywords (3-5): Acute neurorehabilitation, paediatrics, clinical practice, research

3 P Parenting pain away! Parents' live lullaby singing facilitates participation and closeness during painful procedures in neonatal care

Alexandra Ullsten

Parents need a global movement to overpower infants' procedural pain and democratize neonatal pain management. Parents as active partners in neonatal pain management, is a currently ongoing concept across neonatal intensive care units (NICUs) and healthcare globally, but few NICUs have fully embraced parent inclusion. Parent-provided pain management is more than simply a humane and compassionate thing to do. The inclusion of parents has been scientifically proven to be one of the most effective ways to reduce pain associated with repeated painful procedures in early life and parents report a desire to participate.

Cutting-edge results are presented from the ongoing interdisciplinary, multicenter, mixed methods project "Parents as pain management in Swedish neonatal care (SWEpap)", an internationally pioneering study incorporating parents' lullaby singing. This study, informed by music therapy research, mobilizes parents' pain alleviating resources striving to close the knowledge-to-practice gap and facilitate change of clinical practice. New qualitative results from the project show that parents and nurses found the combined parent-provided interventions with skin-to-skin contact, breastfeeding, and parents' live lullaby singing feasible promoting parental participation, self-efficacy and confidence in both parents and nurses. The parents' singing brought them closer to their infant providing a safe place for the dyad while shifting focus from the painful procedure to their infant's well-being. This presentation also includes the latest results and video excerpts from SWEpap's randomized controlled trial, which tested the efficacy of combined parent-provided pain management with parents' lullaby singing, skin-to-skin contact, and breastfeeding during routine blood sampling in 225 healthy newborns.



Biography: Alexandra Ullsten (PhD, Post doc, Music & Art Therapist) is specialised in music therapy as procedural support in neonatal and paediatric care. She is member of the international research network Pain in Early Life (PEARL) and the principal investigator of the interdisciplinary multi-centre research project SWEpap - parents as pain management in Swedish neonatal care.

Affiliation: Centre for Clinical Research and Education, Central Hospital Karlstad, Region Värmland, Sweden & School of Health Sciences, Örebro University, Sweden.

Email: Alexandra.ullsten@regionvarmland.se

Contributors: Martina Carlsen Mistic^{1,2}, Emma Olsson^{1,2}, Jenny Ericson^{3,4,5}, Ylva Thernström Blomqvist^{6,7}, Mats Eriksson¹
¹Faculty of Medicine and Health, School of Health Sciences, Örebro University, Örebro, Sweden, ²Department of Pediatrics, Faculty of Medicine and Health, Örebro University, Örebro, Sweden, ³School of health and welfare, Dalarna University, Falun, Sweden.
⁴Center for Clinical Research Dalarna, Uppsala University, Falun, Sweden. ⁵Department of Pediatrics, Falun Hospital, Falun, Sweden, ⁶Neonatal Intensive Care Unit, University Hospital, Uppsala, Sweden, ⁷Department of Women's and Children's Health, Uppsala University, Uppsala, Sweden.

Keywords: Infant, parent-led pain management, music therapy

4 P Music Therapy in the process of accompanying children with cancer and their families

Linda Horváthová

Each year around 150 out of every 1 000 000 children fall ill with an oncology disease. For this age group oncology diseases are the third leading cause of death. Currently, thanks to multimodal treatment it is possible to cure more than 75% pediatric patients (Kolenová,2014). However, this treatment is not easy to get through. Its demanding nature and lengthy duration cause physical collateral damage as well as bruises on the soul. Psycho-social-spiritual care is therefore an essential part of treatment in pediatric oncology. In the course of treatment, patients are often hospitalized for long periods of time and socially isolated. Music therapy in the oncology department uses music in prophylactic, curative as well as in palliative care and holds potential to help a broad spectrum of patients who suffer from treatment side-effects (Stanczyk, 2011).

Bringing joyful experiences and 'other culture' into the hospital environment can therefore benefit patients in improving their adaptation to hospitalisation, improving their coping strategies, which in turn promotes better collaboration with healthcare staff. Music can also serve as a means of distraction when coping with painful procedures.

The aim of this paper is to present the practice of a music therapist at the Department of Paediatric Haematology and Oncology in Bratislava: the importance of including music therapy in the care of hospitalised children, to define the methods used, to present the impact of musical interventions on physiological and psychological aspects, and to bring the stories (and music) of children and their families to the forefront.



Biography: I graduated from the Master's program in Therapeutic Pedagogy, Psychology (specialization Counseling Psychology) and Music Therapy. I am completing my psychotherapy training in Virginia Satir's Systemic Family Therapy. I work in paediatric oncology, and in private practice I am involved in therapy, delivering workshops and lecturing courses in Art Therapies.

Affiliation: Department of Paediatric Haematology and Oncology in Bratislava, Slovakia

Email: umeleckaterapia@gmail.com

Keywords: paediatric oncology, paediatric palliative care, music, art

5 P Music Therapy Songwriting with Parents of Premature Infants: How does it impact their hospital experience and the parent-infant relationship?

Isabelle Dalhaug

Introduction

Music therapy is increasingly recognized as a valuable psychosocial support in a Neonatal Intensive Care Unit (NICU), addressing the needs of premature infants and their parents. This paper explores *music therapy songwriting* as a tool to support parents of premature infants in a Norwegian NICU. Preliminary studies indicate its potential to enhance parental experience and strengthen the parent-infant relationship. This study aims to investigate this further, filling existing research gaps and contributing to implementation in NICU care.

Method

This qualitative study employs a hermeneutic phenomenological perspective, using semi-structured interviews and an adapted Interpersonal Process Recall (IPR) methodology for data collection. Thematic analysis of interview transcripts and the songs provided a nuanced perspective of the parents' experiences. Participants included three families who met the inclusion criteria, receiving 3-5 music therapy sessions focused on songwriting. Ethical considerations included informed consent, managing the researcher's dual role, and reflecting on the music therapist's influence on the process.

Findings

Four main themes emerged from the analysis. *Music therapy songwriting* was (1) something for the parents, (2) that brought them into a *positive spiral*, (3) made them think about the future with their



infant, and (4) became a valuable memory.

Biography: Isabelle Dalhaug (MA MT) graduated as a music therapist from the Grieg Academy, at the University of Bergen, in spring 2024. She currently works at Helse Bergen's Rehabilitation Clinic. Her master's thesis focused on songwriting with parents of premature infants in the NICU, and she is eager to contribute to the field.

Affiliation: Helse Bergen

Email: isabelle99@live.no

Keywords: Music therapy songwriting, NICU, experience, psychosocial support

6 P Interaction-focused music therapy for children with cancer and their families: a multicenter randomized-controlled pilot trial (INMUT)

Constance Boyde, Christina Hunger-Schoppe

Background

Paediatric oncology patients and their families are in a life-threatening situation for which music therapy has proven to be a cross-lingual field of action. It offers the possibility of strengthening competences and making conflicts tangible. Apart from complementing evidence-based biomedical care, there is little research on the feasibility and effectiveness of involving family members in the music therapy process.

Methods

This assessor blinded, multicentre RCT involves 32 parent-child dyads investigating music therapy with children and family members (INMUT-KB; n = 16) compared to music therapy with children alone (MUT-K; n = 16) at baseline (pre-T1), initial music assessment (T1/T2), music therapy sessions (T3-T9), final music assessment (T10), final psychometric assessment (post-T10) and 3-month follow-up (cat-T11).

Results

Results demonstrate improvement in primary outcome of parent-child interaction (APCI; mutual attunement, nonverbal communication, emotional parental response), secondary outcomes in quality of life (KINDL), psychopathology (SCL-9k), systemic functioning (EXIS), psychosocial burden (BAS), resources (WIRF) and goal attainment (GAS). In some cases, self- and external perception showed significant differences. Third outcomes present feasibility of recruitment, implementation of research methodology and data collection.

Discussion

The involvement of family members in the music therapy process appears to be both feasible and beneficial. Limitations in the implementation of the study protocol arise from the need to match the



planned interventions with the treatment protocols of the study families.

Biography: Constance Boyde (Dipl. Music Therapist) has a Diploma in Piano and Instrumental Pedagogy (Dresden University of Music), Diploma in Music Therapy (Witten/Herdecke University). Since 2011, music therapist at Herdecke Community Hospital in the departments of paediatrics and child and adolescent psychiatry. Since 2021 PhD student and researcher at the Department of Clinical Psychology & Psychotherapy III, Witten/Herdecke University.

Affiliation: Witten/Herdecke University, Herdecke Community Hospital

Email: constance.boyde@uni-wh.de

Keywords: music therapy, paediatric oncology, family, assessment of parent-child interaction (APCI), quality of life

8 P The feasibility of clinical EEG to investigate neural response to ecologically valid musical stimuli in children

Janeen Bower

Practical applications of music to support the rehabilitation of children following brain injury are grounded in an expanding knowledge of the neural processing of music and its effects on non-musical functions (Koelsch, 2009). However, the paediatric population remains underrepresented in the evidence. Furthermore, much of the existing music neuroscience research utilises deconstructed musical elements (e.g. pure tones) limiting the clinical applicability of findings (Bower et al., 2021).

We will present the results of a study that explored the feasibility of pre-existing clinical electroencephalogram (EEG) to investigate the neural response to song in children. EEG holds enormous potential for use with children due to its exceptional temporal resolution, high tolerance for movement and portability (Barkovich et al., 2019). These features enable data collection in naturalistic settings in a non-invasive manner that does not require children to remain motionless.

Results of the study revealed distinct changes in EEG frequency components specific to the song condition, which were not observed in either speech or noise comparative conditions. Notably, all children approached for recruitment agreed to participate and successfully completed the experimental session, demonstrating that the that the study design was acceptable and likely low burden for participants and their families. Additionally, the EEG data collected via the clinical system were of high quality.

This study design offers exciting potential for ongoing collaborations between clinicians and scientist, ensuring knowledge is relevant and translatable to real-world settings. It also suggests possibility for extending this approach to clinical methods of brain scanning including MRI/fMRI.



Biography: Janeen Bower (PhD) is a postdoctoral fellow at The University of Melbourne. She has 20 years of clinical experience, most recently as Team Lead at the Royal Children's Hospital Melbourne. Her research interests include translatability of music neuroscience research and music therapy in acute paediatric neurorehabilitation.

Contributors: Dr Sebastian Corlette, Dr Mengmeng Wang, Professor Wendy Magee, Professor Cathy Catroppa, Professor Felicity Baker.

Affiliation: The University of Melbourne

Email: janeen.bower@unimelb.edu.au

Keywords: Music, neuroscience, EEG, paediatrics, song

9 P Feasibility & acceptability of patient and family directed active music making during paediatric bone marrow transplant process

Prof. Annie Heiderscheit

Bone marrow transplant (BMT) is an aggressive and complex medical treatment for children with certain types of cancer and other diseases. The BMT process entails replacing the patient's diseased bone marrow with the healthy marrow of a donor. Throughout the treatment patients are isolated to reduce the risk of infection. Patient's experience a variety of challenging symptoms and side effects during the process including nausea, vomiting, diarrhoea, fatigue, pain, discomfort, extreme muscle weakness, and emotional distress. Children often need a parent or caregiver present with them throughout treatment. This process can cause significant stress and anxiety for the patient and their family. This study feasibility and acceptability explored a patient and family directed active music making intervention during the BMT process. Ten patients between the ages of 7-13 years of age, their parents, and family members participated in the study during the BMT process. Participants reported engaging in active music making 3–4 times per week and completed 121 journal forms reporting their music making experiences over the average of 35.5 days of hospitalization. Participants and their family members indicated using active music making to manage pain, discomfort, stress, anxiety, and boredom, foster relaxation and sleep, for enjoyment, and to connect. Patients, parents and family members reported feeling engaging in making music provided them an opportunity to make a choice, discover how music could serve as a resource, and how it fostered a sense of empowerment when they engaged in making music to support their child or loved one.



Biography: Annie Heiderscheit (Ph.D., MT-BC, LMFT) is Professor of Music Therapy at Anglia Ruskin University and Director of the Cambridge Institute for Music Therapy Research. She has presented, written, and published extensively on her research and clinical work with individuals across the lifespan and their families.

Affiliation: Anglia Ruskin University and the Cambridge Institute for Music Therapy Research

Email: Annie.Heiderscheit@aru.ac.uk

10 Giving Grief a Voice – Music therapy for children experiencing grief

Hannah Kate Healy

Grief is a response to loss. Loss can include many things, it could be the bereavement of a grandparent, a parent, a sibling, or a significant person in life. It could also include the loss of a connection with someone due to separation, family circumstances or children with a parent in prison. Children in many contexts can experience grief and it is very important there are resources available to support them. Children in medical settings may experience grief because of their illness, separation, or loss of independence. The grieving process is similar in children and adults, however for children, behaviours and coping styles may present differently (Black and Adams, 1993).

This poster combines findings from an integrative literature review (paper pending publication) and interviews with expert music therapists (paper pending publication), exploring the use of music therapy for children experiencing grief. The review synthesised existing research on music therapy interventions for grief, particularly focusing on children impacted by various forms of loss. Qualitative interviews with experienced music therapists provided practical insights into the complexities and considerations when working with grieving children. This presentation will present the results of this research in a practical and resource focused presentation.



Biography: Hannah (PhD Candidate, Ma MT, NMT, Ba (Hons)) is a PhD student researching music therapy and grief, with a specific focus on children experiencing grief due to prison loss. Hannah currently works for the Irish prison service and engages in community music therapy, running choirs and wellbeing groups for adults and children.

Affiliation: University of Limerick

Email: Hannah.healy@ul.ie

Keywords : Grief, children, music therapy

11 P «There is a crack in every mandala. That`s how the light gets in»

Marte Lie Noer

This paper focuses on how elements from Group Music Imagery (MI) and Active Music Therapy supported an adolescent with anorexia nervosa (AN) in the context of inpatient family-based treatment. Systemic and relational perspectives connected to the notion of music and health will be presented.

Adolescents with AN in need of inpatient treatment are often withdrawn and taciturn, with a high level of stress symptoms and a lack of motivation. Life threatening underweight causes poor mental and physical states. The case presented here illuminates the importance of aesthetic and nonverbal language for this condition and context characterized by isolation and coercion. Musical and bodily expressions, shared mandalas and music exemplified a nourishing communication during ongoing compulsory treatment. In Group MI with peers, the adolescent gained experiences of emotional regulation and a sense of agency fostering the ability to make choices and empower herself. Her vital signals of relaxation while surrounded by music were present, complemented by inner creativity articulated through expressive drawings.

The paper questions whether this music therapy process creates intersubjectivity in the given relational context. The Therapist, an integral part of the multidisciplinary team, collaborates in a setting where Group MI is also available for the parents. Descriptions and feedback from family members, the adolescent, and team imply a positive difference and ripple effects out to their interactions based on ecological principles.



Biography: Marte (Music Therapist, EAMI GIM Therapist) has 30 years of clinical experience. Works at the Departments of Child and Adolescent Pediatrics and Psychiatry, based at the Regional Center of Eating Disorders, University hospital of North of Norway. Teaching at the Arctic University of Norway. Member of the Nordic GIM Institute (NGI).

Affiliation: The Departments of Child and Adolescent Pediatrics and Psychiatry, University hospital of North of Norway, Tromsø.

Email: marte.lie.noer@unn.no

Keywords: Anorexia nervosa, adolescents, nonverbal communication, `musical ecology`

12 My Life is Music' – group therapy working model for different patient groups

Reetta Keränen¹, Hanna Hakomäki²

'My Life is Music' is a group therapy working model that centers on listening to self-chosen music and therapeutic dialogical discussion. A closed group for 4 to 6 patients has eight meetings and it is conducted by a music therapist and other health care professional. The music is chosen by the participants, but the themes of the meetings are facilitated by the therapists, and reflective homework are given. Within this frame the model can be modulated to address specific therapeutic goals of different patient groups. We will present two implementations of the working model from Helsinki University Hospital.

At the Helsinki Pediatric Pain Center, the group therapy is offered to adolescents who have persistent pain. The use of music is combined with acceptance and commitment therapy (ACT) approach. The goal is to share experiences with peers and find ways to live adolescent life despite pain.

In child psychiatry, group therapy is offered to pre-adolescents with symptoms of anxiety and depression, as well as separately to their parents. The goal is sharing, encouragement and getting to know yourself with peer support. Parent group also uses music and reflective homework, the purpose of which is to support the communication and mentalization of parents and their children.

Based on these clinical experiences and feedback informed treatment questionnaires, the working model seems to be feasible, well admitted by the patients and it addresses patients' therapeutic goals. We will present preliminary findings from a feasibility study carried out at the Helsinki Pediatric Pain Center.



Biography: Reetta Keränen (music therapist MA, doctoral researcher) is working at the Helsinki Pediatric Pain Center. In her doctoral research she is focusing on the use of music therapy for adolescents with persistent pain.

Hanna Hakomäki (PhD Music Therapist, Family and Couple Psychotherapist, Supervisor) is working at the Helsinki University Hospital, Child Psychiatry with children with severe mental disorders and complex family situations.

Affiliation: ¹The Finnish Center for Children and Adolescent Pain Management and Research, University of Helsinki, The Centre of Excellence in Music, Mind, Body and Brain

²Helsinki University Hospital, Child Psychiatry

Email: reetta.keranen@hus.fi

Keywords: group therapy, music listening, pediatrics, persistent pain, child psychiatry

13 R Explorations of Cross-Cultural Supervisory Experiences: An Intersectional Feminist Lens

Rebecca E. Hames, Jasmine Edwards, Lauren Ragan, Erica Wan

While the value of supervision is well documented in music therapy literature and guidelines for practice, professional music therapists frequently have trouble accessing robust and ongoing supervision to support continued clinical growth and self-development. The presenters suggest that the supervision process necessitates an intentional and grounded exploration of the social locations of all participants, be it supervisor and supervisee, or amongst peers. This roundtable discussion will highlight the overlapping supervision experiences of four pediatric medical music therapists with different social locations and thus, different experiences of privilege and oppression across contexts. The presenters will share their supervisory experiences through a lens of intersectional feminism, focusing on the ways in which differences in cultural identity impact the supervision process and relationship. They will also describe ways of creating safety within these relationships and how facilitating these conversations inform and enhance the work they do with families and patients. Presenters will model an exploration of these themes inviting participants to more deeply understand lived experiences, increase awareness of how stereotypes and tropes are reinforced within systems of institutional power, and learn how to challenge them within supervision and clinical spaces. Participants will leave with the understanding that clinical supervision in its myriad forms- individual, peer-to-peer, and group; is well suited for explorations of how identity manifests within both clinical and collegial dynamics, all in the interest of ethical and comprehensive care of diverse therapy participants.



Biography: Rebecca Hames (MA, MT-BC; Music Therapist; Bachelor of MT and MA of Arts in MT) is a medical music therapist who has worked across the lifespan since 2014, currently serving in the NICU. She received her BMT from Loyola University New Orleans, Louisiana and her MA from SRH Hochschule Heidelberg, Germany. Her research and advocacy explores students' financial barriers to music therapy education.

Jasmine Edwards (MA, LCAT, MT-BC), Lauren Ragan (MA, MT-BC), Erica Wan (MT-BC)

Affiliation: University of California San Francisco, UCSF Benioff Children's Hospital Oakland

Email: Rebecca.Hames@ucsf.edu

Keywords: Intersectional Feminism, Race, Supervision, Cultural Reflexivity

14 Integrative review of music and music therapy interventions on functional outcomes in children with acquired brain injury

James Burns, Hannah Healy, Rebecca O'Connor, Prof. Hilary Moss

Acquired brain injury (ABI) can result in a multitude of impairments to physical, cognitive, communicative, psychological, and psychosocial functioning. Music interventions are emerging as a valuable form of intervention in the rehabilitation of children with ABI, stimulating brain functions involved in movement, cognition, speech, emotions, and sensory perceptions. To date, the literature detailing the impact of music and music therapy interventions on functional outcomes in children with ABI has not been reviewed systematically. The aim of this study was to conduct an in-depth investigation into the current research surrounding this area. This review sought to identify, evaluate, synthesise, and discuss the findings of existing studies and endeavoured to illuminate the diverse data sources and unrestricted study designs in order to shed light on the current state of the field and identify avenues for future research. Whitemore and Knaf's five-stage integrative review framework was employed, which includes (a) problem identification, (b) literature search, (c) data evaluation, (d) data analysis and synthesis, and (e) presentation of the findings. A total of 388 articles were retrieved, and 8 studies met the inclusion criteria. Analysis and synthesis resulted in 3 overarching themes: outcomes of using music therapy in paediatric ABI, music therapy as a motivator in paediatric ABI rehabilitation, and collaboration. The review highlights the pivotal role of music as a motivational catalyst that promotes adherence to rehabilitative intervention. Nevertheless, it underscores a significant gap in empirical research within the field, emphasizing the necessity for larger, more rigorous studies.



Biography: James Burns (MA, BA), is a PhD Researcher at the University of Limerick, Ireland and Music Therapist at Children's Health Ireland at Temple Street, Dublin. He is cofounder of the Acute Paediatric Neuro Music Therapy Network, and his research interests include music therapy in paediatric acquired communication impairments and collaborative practices.

Affiliation: 1. University of Limerick, Limerick, Ireland. 2. Children's Health Ireland at Temple Street, Dublin, Ireland.

Email: James.Burns@ul.ie

Keywords: music, music therapy, integrative review, paediatric, acquired brain injury

15 Music therapy for young children with acquired communication impairments: An international survey of clinical practices

James Burns

Introduction

Acquired communication impairments (ACIs) can significantly hinder the development and functioning of language and communication in children, impeding their social interactions and self-expression. Music therapy is emerging as a favourable practice in supporting children with ACIs; however, a deeper understanding of the clinical practices of music therapists with this population is required to advance service provision.

Method

This study employed an online cross-sectional descriptive survey to investigate current approaches, clinical interventions, and outcome measures used by music therapists working with young children with ACIs to address language- and communication-oriented goals. Fifty-four music therapists across ten countries completed a 16-item online questionnaire. Descriptive statistics and conventional content analysis were used to analyse the data.

Results

Respondents demonstrated a notable preference for humanistic and integrative approaches in their clinical practice. Among the diverse range of interventions employed by music therapists, song singing, vocal improvisation, and music and play emerged as the most effective techniques for supporting individuals with ACIs in achieving their communication goals. Additionally, collaborative endeavours with speech and language therapists were considered the most impactful approach to intervention. Respondents also sought alternative non-standardised evaluation methods, driven by a scarcity of suitable measures, to evaluate the effectiveness of their work.



Discussion

There exists a high degree of heterogeneity in clinical practices amongst music therapists working with children with ACIs, reflecting diverse backgrounds and approaches. The absence of clear trends or dominant approaches emphasises the necessity for further research to establish evidence-based practices for this population.

Biography: James Burns (MA, BA) is a PhD Researcher at the University of Limerick, Ireland and Music Therapist at Children's Health Ireland at Temple Street, Dublin. He is cofounder of the Acute Paediatric Neuro Music Therapy Network, and his research interests include music therapy in paediatric acquired communication impairments and collaborative practices.

Affiliation: 1. University of Limerick, Limerick, Ireland. 2. Children's Health Ireland at Temple Street, Dublin, Ireland.

Email: James.Burns@ul.ie

Keywords: Music therapy; acquired communication impairments; paediatrics; clinical practice; survey

16 P Enhancing functional communicative and language abilities in young children with acquired communication impairments: A collaborative music therapy and speech and language therapy approach.

James Burns

Acquired communication impairments can significantly impact the development and functioning of language and communication in young children. Integrating music therapy (MT) and speech and language therapy (SLT) can synergistically nurture the rehabilitation of early interaction and pre-verbal communication skills following accident, illness, or injury. This study aims to illustrate the application of collaborative working between these disciplines through the presentation of two case studies. The first case involves a 4-year-old boy diagnosed with Rasmussen's Encephalitis, who underwent a functional hemispherectomy in pursuit of long-term seizure freedom. The second case features a 3-year-old boy who suffered a left MCA stroke secondary to Moyamoya disease. Prior to these events, both children's language skills were developing typically for their age but subsequently exhibited a rapid decline in speech and language abilities. As part of a wider therapeutic programme at an inpatient rehabilitation hospital, the children received 30-minute collaborative MT and SLT sessions, twice weekly, for the duration of their admission.

Sessions were video recorded, and data pertaining to (i) oral motor, (ii) receptive communication / auditory perception, (iii) expressive communication, and (iv) social skills was captured using the Individualised Music Therapy Assessment Profile (IMTAP; Baxter et al., 2007). IMTAP scores showed a consistent increase and video recording suggest that this collaborative approach holds considerable promise in enhancing communicative abilities. Further research is necessary to explore the efficacy of collaborative working in inpatient rehabilitation as the interdisciplinary nature of these services makes it difficult to solely attribute observed improvements to integrated therapy.



Biography: James Burns (MA, BA) is a PhD Researcher at the University of Limerick, Ireland and Music Therapist at Children's Health Ireland at Temple Street, Dublin. He is cofounder of the Acute Paediatric Neuro Music Therapy Network, and his research interests include music therapy in paediatric acquired communication impairments and collaborative practices.

Co-presenter/contributor: Ms. Rebecca O'Connor, Ms. Rebecca Woods, Ms. Eimear Lee, Ms. Julianna Little, Dr Susan Finn, Dr Irwin Gill, Prof Hilary Moss

Affiliation: 1. University of Limerick, Limerick, Ireland. 2. Children's Health Ireland at Temple Street, Dublin, Ireland.

Email: James.Burns@ul.ie

Keywords: Music therapy; speech and language therapy; collaboration; acquired communication impairments; paediatrics

17 P Implementation of music therapy in a pediatric palliative care team

Merethe Wolf Lindvall

In Norway, the growth of dedicated pediatric palliative care (PPC) teams has improved a lot following the government guidelines for PPC wards published in 2016. The recommendation was that every pediatric ward should have their own PPC team, both to increase competence and to improve the quality of the service for children in palliative care and their families.

At Haukeland University Hospital, the PPC team was established in 2019 with the intention to build a broad interdisciplinary group that could offer advisory and executive services. As a music therapist, I have been part of the team from the beginning, working together with physicians, special nurses, physiotherapists, a social worker and a priest. We have worked systematically to gain knowledge and develop a service that strives to embrace the holistic palliative perspective that these families often desperately need, in addition to medical treatment, psychological, social- and spiritual/existential support. Although we still have a long way to go, we have gained valuable experiences in meeting children, youth and families going through the most difficult time of their life.

In this paper, I will discuss how the role of the music therapist has developed and also how music therapy can play an important role as psychosocial support for children and families within the frame of the palliative care team.



Biography: I am a music therapist (MT MA) working at the Children and Youth Clinic since 2016. The position is divided into 50% clinical work and 50% pediatric palliative care. For the last years I have been working on developing music therapy within the pediatric palliative care team.

Affiliation: Haukeland University Hospital, Bergen, Norway

Email: merethe.wolf.lindvall@helse-bergen.no

Keywords: music therapy, pediatric palliative care, interdisciplinary

18 W “A spoonful of music makes the medicine go down.” Playing (with) music in Music Therapy in Pediatric Oncology

Inge Bracke, Britt Raymaekers

Since October 1990, music therapy has been a vital part of the psychosocial support for cancer patients (aged 0 to 18) at the paediatric oncology department of the University Hospital in Leuven, Belgium. Based on an integrative multi-theoretical conceptual framework, various clinical music therapy methods are implemented to support this young patients and their parents during cancer treatment.

Over the past 30 years, we have filled our mental music box with music, songs, musical games, and improvisational forms that can give young patients confidence, safety, predictability, control, and autonomy in the often unpredictable and sometimes frightening hospital environment. This musical toolbox helps to develop a safe and trustworthy relationship. It helps the patients express themselves in a creative, musical, playful, non-verbal, and symbolic way. Singing, playing and creating music for or with the patients and their parents also brings joy and connection and can ease the discomfort of the hospital stay: “A spoonful of music makes the medicine go down.”

During the workshop, we aim to briefly introduce our methodology and, in particular, actively try out different musical games and music therapy interventions with the participants. We want to show and let the participants experience how the use of music in different variations facilitates the development of trust in the therapeutic relationship, and how this contributes to free playful musical expression. In this way, we also want to create a dialogue between the participants to share experiences from their clinical



practice.

Biographies: Inge Bracke (MA MT), graduated in Music Education (1987/LUCA School of Arts in Leuven), and in Music Therapy (1990/Universität für Musik und Darstellende Kunst in Vienna). Since 1990 she works as a music therapist at the University Children’s Hospital UZ Gasthuisberg (Leuven /Belgium), and teaches music to children with special needs.

Britt Raymaekers (MA MT) graduated in 2023 as a Master in Music Therapy at LUCA School of Arts in Leuven. Since 2023, she works as a music therapist at the University Children’s Hospital UZ Gasthuisberg in Leuven. (Belgium). She also teaches music to adults with special needs.

Affiliation: University Hospital Gasthuisberg Leuven, Belgium

Email: inge.bracke@uzleuven.be
britt.raymaekers@uzleuven.be

Keywords: pediatric oncology, therapeutic relationship, transitional space, unpredictable hospital environment, musical games

19 R Building an Art Therapy Team for children in a University Hospital, a case example

Hanna Hakomäki¹, Leena Repokari², Minna Ståhl³, Reetta Keränen⁴, Sofia Bister⁵, Emma von Weissenberg⁶

Music therapy is widely utilized in pediatric hospitals in the United States across various target groups, whereas in Europe, its use is less common. Our presentation discusses how music therapy is gaining a foothold at the HUS Helsinki University Hospital, Children and Adolescents in Finland.

As an achievement of ten years of development work, we currently have an arts therapy team that includes four music therapists, an art therapist, and a dance-movement therapist. We will give details how this progress has been achieved: what the initial steps were, the administrative requirements, how knowledge, interest, and results have been disseminated, and what has been required from the organization, its leadership, and staff.

Our presentation emphasizes international collaboration, determination, and the will to implement new treatment and therapy methods for the benefit of children. We will provide more detailed information on how the use of music therapy has expanded in child psychiatry as well as in the pain management of children and adolescents. Additionally, we will introduce recent expansions in the target groups of music therapy.



Biography: Hanna Hakomäki (MT, Family and Couple Psychotherapist, Supervisor, PhD) graduated as a music therapist in 1990, completed her PhD at 2013 and has now worked for eight years at the HUS Helsinki University Hospital, Child Psychiatry with children suffering from severe mental health disorders and complex family dynamics.

Leena Repokari (MD, PhD, Child psychiatrist, Child and adolescent psychotherapist)

Minna Ståhl (MD PhD)

Reetta Keränen (MT, PhD fellow)

Sofia Bister (Music Therapist, Psychotherapist)

Emma von Weissenberg (MT-BC)

Affiliation:

- ¹ HUS Helsinki University Hospital, Child Psychiatry, Finland
- ² Head of Child Psychiatry, HUS Children and Adolescents;
- ³ Head of the Finnish Center for Children and Adolescent Pain Management and Research, HUS New Children's Hospital;
- ⁴ The Finnish Center for Children and Adolescent Pain Management and Research, HUS New Children's Hospital;
- ⁵ MuM, HUS Children and Adolescents;
- ⁶ HUS Children and Adolescents.

Email: hanna.hakomaki@hus.fi

Keywords: administration, collaboration, development, child psychiatry, pediatrics

20 P Developing evidence-based practice in the PICU

**Janeen Bower, Jo Rimmer, Lauren Miller, Jack Thomas, Stefanie Zappino,
Kate Masterson**

Children (0-18 years) are admitted to a paediatric intensive care unit (PICU) due to critical, life-threatening illnesses and/or injuries that require the highest level of care and monitoring by a skilled multidisciplinary team of doctors, nurses and allied health professionals. The treatments administered in the PICU are frequently noxious, painful and stress-inducing for both the child and their family. Consequently, admission to a PICU may result in significant iatrogenic complications, including PTSD, cognitive impairment and developmental delay (Ko et al., 2022).

Music-based interventions, including music therapy, are incorporated into the care of individuals in a PICU as a holistic, low-burden, non-invasive, and non-pharmacological treatment aimed at supporting recovery and wellbeing (Lorek et al., 2023). Emerging evidence describes that music interventions may reduce anxiety and the perception of pain (Bush et al., 2021), promote sleep hygiene and reduce stress related to noxious auditory experiences (Rossetti et al., 2023), and optimise the physiological state of children admitted to the PICU.

We will present the results of an ongoing scoping review of music-based interventions in the PICU and extrapolate these results to propose recommendations for clinical practice and future research. At the time of submitting this abstract, database searches have been completed, and data extraction and analysis are underway by a multidisciplinary team of clinicians and researchers.



Biography: Janeen Bower (PhD), is a postdoctoral fellow at The University of Melbourne. She has 20 years of clinical experience, most recently as Team Lead of Music Therapy at the Royal Children's Hospital Melbourne. Her research interests include translatability of music neuroscience research and music therapy in acute paediatric neurorehabilitation.

Affiliation: The University of Melbourne & The Royal Children's Hospital Melbourne Australia

Email: janeen.bower@unimelb.edu.au

Keywords: PICU, evidence-based medicine, music therapy, music medicine

21 P Systematic prioritisation of music therapy resources in acute paediatric healthcare to reduce clinician moral distress

Jo Rimmer¹, Dr. Janeen Bower², Lauren Miller²

The Royal Children's Hospital Melbourne (RCH) in Australia is a leading tertiary and quaternary centre for paediatric healthcare, guided by the strategic vision that 'every child has the right to live their best possible life and reach their potential'. This vision extends traditional models of bio-medical care to embrace a comprehensive approach to wellbeing. Aligned with advancing medical and surgical care and this focus on childhood thriving, there is increasing demand for holistic services such as music therapy.

Demand for the music therapy services at RCH surpasses the department's clinical resources. This challenge necessitates that the music therapy team make critical decisions about timely access, and frequency, of music therapy services. Having to provide less than ideal service for families, or decline music therapy in some cases, can lead to moral distress among team members. To reduce this experience of moral distress and to maximize ethical allocation of music therapy resources, the team reflexively developed a prioritization framework to support explicit decision making. This framework is concurrently embedded in the cultural context of the Australian acute healthcare system and the humanistic foundation of the music therapy program at the RCH.

During this presentation, the music therapy team will outline their prioritization framework and identify core bioethics principles which have informed its development. De-identified cases will be explored to highlight the framework's ongoing implementation in daily clinical practice. This discussion contributes to the broader development of sustainable music therapy services in acute paediatrics and emphasizes the importance of clinician wellbeing.



Biography:

Jo Rimmer (Registered Music Therapist)

Dr. Janeen Bower (Postdoc. Research Fellow & Registered MT, PhD, MMus (Thpy))

Ms. Lauren Miller (Registered Music Therapist, MMusThy)

Affiliation: ¹The Royal Children's Hospital Melbourne

²Melbourne University

³University of Queensland

Email: jo.rimmer@rch.org.au

Keywords: Prioritisation, moral distress, resource allocation

22 P Tracing the generation of the *Sounding Relation* research project: Emerging methodology and preliminary analysis

Prof. Claire Ghetti, Eva Vukich

Research often involves a process of gradual evolution: of ideas, of methods and of knowledge generation. This paper presentation will start by tracing the evolution of the *Sounding Relation* research project, a qualitative-dominant, mixed methods study of parental contributions to parent-infant attunement within the context of neonatal music therapy. We will describe how the study developed from pivoting upon the accumulated knowledge and findings of a related clinical trial. Grounded by principles of centering parents, identifying resources, and acknowledging contextual situatedness, the project uses video microanalysis to explore complex interactions among parents, infants, music, music therapists and the cultural context. We will detail how interdisciplinary dialogue entered our iterative process of adjusting the research questions, data selection, focus, and analysis. Through analytical examples, we will illustrate how the methodology of microanalysis evolved during early stages of the project. We will relate how the project continues to evolve as a collaboration among a PhD candidate, post-doctoral researcher, principal investigator, interdisciplinary core team researchers, user representatives and reference group members. Our aim is to trace processes of evolution related to research, in a manner accessible to both seasoned researchers and those just beginning to become interested in research. As part of this tracing, we will also reflect upon the uncertainty and discomfort that can arise with the use of emergent processes in qualitative research. We hope to highlight nuanced processes of research development that are sometimes less transparent or overlooked in traditional presentations of research projects.



Biography:

Claire Ghetti (PhD, Professor of Music Therapy). Claire's research centers on how music and the relationships that are enabled through musicking serve as resources that help buffer against traumatization and create positive growth in intensive medical contexts. She is Principal Investigator of a mixed methods research project centering families within the context of neonatal music therapy.

Eva (MA, MT-BC, PhD Candidate) is a research fellow at UiB, exploring how parents and their premature infants make or

sustain their relationship during NICU admission. They are curious about how research and the arts can more closely align with community-based activism for reproductive justice and system transformation.

Affiliation: The Grieg Academy – Department of Music, University of Bergen

Email: claire.ghetti@uib.no
eva.vukich@uib.no

Keywords: methodology, microanalysis, user involvement, research development, NICU

23 Perinatal Family-centered care Music therapy Intervention: a protocol to support parenting and preterm development

Barbara Sgobbi

The birth of a very premature infant is a critical event in the life of a family and has a significant emotional, social, health, and economic impact on infants and their parents. We have structured an integrated psychological and music therapeutic protocol, Perinatal Family-centered care Music therapy Intervention, designed to stabilize the physiological states of premature newborns, improve the wellbeing of caregivers and support the relationship between infants and parents. Music therapy does this by facilitating affective communication and an emotional connection between them. Music therapy session activities engage the parent and infant reciprocally in physical, sensory and emotional experiences. The methodologies that have been used provide early intervention from the first days of hospitalization in the Neonatal Intensive Care Unit and make use of music therapy sessions (live and recorded). These techniques are used individually or in combination, depending on the stage of hospitalization, the stability of the newborn and the objectives to be pursued. Such therapy becomes a support for the born prematurely and her parents during hospitalization and after discharge. This stimulates parents to take an active role in the son's care and treatment and allows the baby to find the affectivity and the bonding experience interrupted by premature birth. From research made on this protocol we have found out that it positively influences the outcome in the short and long term.



Biography:

Barbara Sgobbi (MA-MT) has a master of arts in clarinet, opera singing and music therapy from University Conservatory of Music in Italy. She is NICU, PICU music therapist at Hospital Del Ponte Varese and professor for the Music Therapy program at the Pavia Medicine University.

Contributors: Maria Elena Bolis (MS), Massimo Agosti (MD)

Affiliation: Filippo Del Ponte Hospital Varese Italy

Email: barbarasgobbi@gmail.com

Keywords : NICU, Music therapy, Family centered care

24 P Music Therapy in the long stay at Pediatric Intensive Care Unit: a family-centered care approach

Barbara Sgobbi, Andrea Ambrosoli

A child's long stay in PICU is a traumatic event for him and his family. Spending days intubated, in a coma, risks compromising the child's neurological and behavioral system. Furthermore, this can cause anxiety, stress and depression in parents. Our approach is a family-centered music therapy, in which the involvement of parents in the practice of music is essential to manage parental stress and support the child. Through improvised music therapy we stimulate brain neuroplasticity to allow the activation of a wide range of brain structures in the child to support vital parameters (heart rate, oxygen saturation, deep sleep, relaxation). This allows the child to reach states of global physiological, affective and relational well-being. Music therapy is also applied during painful medical procedures. The sound element used is based on musical tastes and also includes the universal, intersubjective sound aspects of music (tempo, rhythm, timbre, melody, scales and harmony). In addition, attention to the environment is important so that music can dissuade harmful noises according to bioethical principles. The music therapy techniques used are linked to the medical procedures of the department and the stability of each child. An integrated music therapy approach with the family better supports the neurobehavioral and relational functions of the long-term hospitalized child.



Biography:

Barbara Sgobbi (MA-MT) has a master of arts in clarinet, opera singing and music therapy from University Conservatory of Music in Italy. She is NICU, PICU music therapist at Hospital Del Ponte Varese and professor for the Music Therapy program at the Pavia Medicine University.

Andrea Ambrosoli (MD)

Affiliation: Filippo Del Ponte Hospital Varese Italy

Email: barbarasgobbi@gmail.com

Keywords : PICU, Music therapy, Family centered care, Music improvisation

25 P Family-Centered Music Therapy as a form of support for mothers and prematurely born infants. The Polish context

Sara Knapik-Szweda

The subject matter of this presentation is based on the analysis and interpretation of the responses of eighty-five mothers of prematurely born children who, along with their children, participated in family-centered music therapy (Family-Centered Music Therapy) in the neonatal ward of a Polish hospital.

The aim of the study was to attempt to understand and reveal the subjective meanings that mothers found in the music therapy process, based on the family-centered model. An important area of inquiry was the significance of music therapy in the process of building relationships between the parent and the child.

The research method was an online survey, containing twenty-three questions, which was sent to mothers participating in music therapy in neonatal intensive care units (NICUs) and neonatal wards. The questionnaire served to collect information to create a subjective characterization of the studied group. A purposive sampling method was used. Data was collected from February 2023 to August 2023. The quantitative and qualitative data obtained were part of a larger survey study. For the purposes of this presentation, the focus was on the qualitative data obtained — specifically on three open-ended questions, which were categorized through qualitative analysis using Reflexive Thematic Analysis (Braun and Clarke, 2019; Braun, Clarke et al., 2019).

Given the research problem addressed, the aforementioned qualitative analysis of an inductive nature was applied, and hypotheses and quantitative analysis were avoided. The responses suggest that the use of therapy through music can support and assist mothers and increase the potential for building relationships with their child.



Biography: Sara Knapik-Szweda (MT-C, PhD) is an Assistant Professor at the University of Silesia in Poland. She works in premature infants and newborns in two hospitals in Poland, with autistic children and seniors in Muzka (her private Music Therapy Center). Her research interests include Family-Centered Music Therapy and Resources-Oriented Music Therapy. She is the author of the first Polish book titled 'The Significance of Music Therapy Techniques in Supporting the Development of Children with Autism.'

Affiliation: University of Silesia, Faculty of Social Science

Email: sara.knapik-szweda@us.edu.pl

Keywords: premature infants, mothers, family-centered music therapy, qualitative analysis

26 P Creative Music Therapy to improve long-term development at five years in very preterm infants: Results of a randomized pilot trial

Friederike B. Haslbeck

Introduction

In our randomized controlled pilot resting-state fMRI study, we showed that Creative Music Therapy (CMT) has a beneficial effect on functional brain connectivity in very preterm infants (VPT: born < 32 weeks gestation) concerning the induction of (i) a lower thalamocortical processing delay, (ii) more robust functional networks, and (iii) higher functional integration in predominantly left prefrontal, supplementary motor and inferior temporal brain regions. However, we could not demonstrate a treatment effect on longitudinal neurodevelopment in VPT infants at two years.

Methods

Here, we present the prespecified secondary outcomes at five years of corrected age. Eighty-two infants were randomized to either CMT or standard care. During hospitalization, a specially trained music therapist provided CMT 2-3 times a week. The secondary outcomes were the Mental Processing Index of the KABCII Kaufman Assessment Battery for Children and motor and neurosensory development at age five. The outcomes were compared between groups according to the treatment assigned to randomization using the independent t-test and Fisher's Exact test for continuous and nominal variables.

Results

We will report on the baseline characteristics of participants and non-participants in the five-year follow-up and the evidence for a possible difference in the secondary outcome observed between groups.

Discussion

We will discuss the evidence of an association between music therapy and cognitive, motor, and neurosensory outcomes at five years of corrected age with the previous results of a positive impact of CMT on brain connectivity at term equivalent age but no treatment effect at two years.



Biography: Friederike B. Haslbeck (Dr.rer.med., PhD) is a violinist, music therapist, and senior researcher in the Zurich Newborn Research Group, Department of Neonatology, University (Hospital) Zurich. She lectures at the University of the Arts Zurich and runs the Creative Music Therapy in Neonatology training, holding numerous publications on music therapy in neonatal care.

Affiliation: University Hospital Zurich, Zurich, Switzerland

Email: friederike.haslbeck@usz.ch

Keywords (3-5): Creative Music Therapy, Neonatology, Neurodevelopment

27 R Building bridges in neonatology and beyond – how to span the music bond with infants, families, and staff

Friederike B. Haslbeck, Alexandra Ullsten, Kirsty Jane, Helen Shoemark

Music therapy in neonatal care is a growing field of interest, with several meta-analyses indicating beneficial effects on the infants, the parents, and the parent-infant bond. Parental singing may be particularly helpful and sustainable. However, singing in an intensive care environment after the traumatic experience of premature and complex birth may be challenging for many parents, and various music therapy approaches in neonatal care recommend multiple methods to approach, integrate, or educate the parents and staff with varying success.

Therefore, the interdisciplinary, international speakers aim to discuss these challenges with the audience. They start by sharing their insights on how they span the bond with the infants, their families, and the staff through music, based on extensive experience in clinical practice, research, implementation strategies, and training. Strategies such as integrating, engaging, and gently inviting staff and parents with culturally sensitive responsiveness without overwhelming or educating are introduced, as well as typical pitfalls and challenges. We share experiences encouraging parents' vocalizations as a preventive and protective intervention during painful procedures. We will also reflect on engagement with parents who have lived experiences with an infant with an uncertain future.

Further strategies, methods, theories, and experiences in neonatal care will be encouraged to be shared in lively discussions with the audience about how to approach and encourage parents and staff to use music and voice as a vehicle for well-being in neonatal care and beyond to build interdisciplinary and genuinely collaborative, participatory, relational bridges between families and health-care providers.



Biography: Friederike B. Haslbeck (Dr.rer.medic., PhD) is a violinist, music therapist, and senior researcher in the Zurich Newborn Research Group, Department of Neonatology, University (Hospital) Zurich. She lectures at the University of the Arts Zurich and runs the Creative Music Therapy in Neonatology training, holding numerous publications on music therapy in neonatal care.

Affiliation: University Hospital Zurich, University of the Arts, Zurich, Switzerland

Email: friederike.haslbeck@usz.ch

Keywords: Family-centered care; caregivers; empowerment

28 W The Rocky Horror NICU Show” - Challenges and Potentials of Distributions in (Neonatal) Music Therapy. A Forum Theatre Workshop

Friederike B. Haslbeck, Alexandra Ullsten, Mark Ettenberger

Alarms abruptly go off, machines and devices are hissing and buzzing, parents are busy feeding or sleeping, infants suffer from painful procedures, and staff comes and goes. Disturbances, interruptions, and inconveniences are part of everyday work in the music therapist’s practice in the neonatal intensive care unit (NICU) and other hospital settings.

However, some disruptions are beneficial and welcome and may create favorable circumstances for the music therapy service and therapist. Parents sing along, staff and students stay to observe, siblings want attention, and the head of the department comes by.

Our workshop performs four challenging everyday scenarios that music therapists from many clinical settings will recognize. Instead of delivering premade solutions, we engage the audience to suggest and explore creative and therapeutically meaningful solutions to the exemplified disturbances. Based on the principles of forum theatre developed by Augusto Boal, our workshop takes an interactive and participatory format such that the knowledge and capacities of the workshop participants may be brought to bear on exploring viable strategies and solutions on the stage. In our workshop, spectators are transformed into “spect-actors.” The workshop participants may redesign the presented disturbances by stopping the scenario at any point and replacing a character.

We aim to empower the participants and facilitate spontaneity and creativity, awareness, communication, confidence, education, problem-solving, and community development. Therefore, we strive to widen the horizon of therapeutic responsiveness from the macro level of environmental circumstances to the micro level of the tiniest infants’ signs.



Biography: Friederike B. Haslbeck (Dr.rer.medic., PhD) is a violinist, music therapist, and senior researcher in the Zurich Newborn Research Group, Department of Neonatology, University (Hospital) Zurich. She lectures at the University of the Arts Zurich and runs the Creative Music Therapy in Neonatology training, holding numerous publications on music therapy in neonatal care.

Affiliation: University Hospital Zurich, University of the Arts, Zurich, Switzerland

Email: friederike.haslbeck@usz.ch

Key words: forum theatre; disturbances; creativity

29 P MustRa - Music Therapy in Radiation Treatment; results from a pediatric pilot study at Oslo University Hospital

Julie Mangersnes¹, Margit Louise Fremmerlid²

Background

A pilot study was performed April 2021 – July 2022, at Oslo University Hospital Radiumhospitalet to explore implementation of music therapy for children and youths undergoing radiation therapy. Music therapy in pediatrics has been a part of the service at other locations within Oslo University Hospital (OUS) for decades, but so far not implemented as procedural support for the current population. There is also a need for more research on the use of music therapy for this population.

Methods

The pilot study was exploratory, including both quantitative and qualitative data focusing on patient and parents' experiences, the use of anesthesia, and interdisciplinary staff perspectives. All patients 1-18 years referred to radiation therapy at OUS in the given period were screened, and 13 patients recruited voluntarily. Adapted music therapy interventions were developed and tested in collaboration with patients and the interdisciplinary team, using a flexible clinical protocol including both receptive and expressive methods before and/or during radiation treatment. The collected data included intervention variables from log notes, self-report questionnaires on patients' and parents' experiences with the music therapy service and focus group interviews on the interdisciplinary team perspectives. Quantitative data were analyzed using descriptive statistics, and qualitative data with content analysis.

Results

Results showed a high satisfaction of music therapy, and positive impact related to early assessment of psychosocial needs and resources, the use of non-medical coping strategies, and increased interdisciplinary coordination and communication.



Biography: Julie Mangersnes (MA-MT, NICU-MT (RBLmodel/ certified trainer)) is a music therapist in pediatrics at Oslo University Hospital. Her research experience is with pediatric oncology patients, adolescents suffering from Chronic Fatigue Syndrome, NICU (LongSTEP study), and as project leader for this current radiation therapy pilot study.

Margit Louise Fremmerlid (B.Med. Staff Specialist, Anesthetist)

Affiliation: ¹Department of Child and Adolescent Mental Health in Hospitals, Oslo University Hospital.

²Department of Anesthesia, Intensive Care and Preoperative Medicine, Radiumhospitalet, Oslo University Hospital

Email: julie.mangersnes@gmail.com

Keywords: music therapy, radiation therapy, pediatric oncology, procedural support, interdisciplinarity

30 P Music & Me: exploring interdisciplinary practice through a collaborative songwriting project across Scotland's children's hospices

Polly Harris, Dr Rachel Drury, Janet McLachlan

Music & Me was a large-scale collaborative songwriting project designed to celebrate the diverse voices within Children's Hospices Across Scotland (CHAS) (see Drury, Harris and McLachlan, 2025). The project involved 178 individuals including babies, children and young people, their families, and staff and volunteers. The resulting song and accompanying music video represent a rich musical collaboration across services offered through the 2 children's hospices in Scotland, and also highlights successful interdisciplinary practice between music therapy and community music - an angle not often found in the research literature (Tsirir, Hockley and Dives, 2022).

Within its post-pandemic context, the Music & Me project was situated in a period of flux and was designed to build bridges between a community that had been severely impacted by the national lockdowns. The medium of songwriting was used as a platform for authentic collaboration (Baker, 2015) and highlighted the many ways in which genuine 'voice' can be included. The project used hybrid ways of working to facilitate this and nurture a sense of community and connection. In doing so, it embraced changes to practice experienced through the pandemic and harnessed this learning in the evolution to post-pandemic approaches.

In this presentation, we will reflect on how Music & Me supported families during a time of uncertainty and isolation, providing a valuable contrast to its position within a medicalised setting. We will describe the collaborative process and explore how interdisciplinary practice has enriched our work alongside the legacy of Music & Me for everyone involved.



Biography: Polly (MSc Music Therapy) is a music therapist based in Glasgow. She has worked for Nordoff & Robbins since 2019, in partnership with CHAS (Children's Hospices Across Scotland) since 2020. With a particular interest in children's palliative care, Polly provides music therapy at the Royal Hospital for Children (Glasgow) and online across Scotland.

Dr Rachel Drury (CHAS; Royal Conservatoire of Scotland)
Janet McLachlan (Nordoff & Robbins)

Affiliation: Nordoff & Robbins

Email: polly.harris@nordoff-robbins.org.uk

Keywords: songwriting; collaboration; interdisciplinary; music; children's hospice

31 Arrhythmical bonding between mothers and their babies with special needs

Gabriel F. Federico, Nuria Escudé

During gestation, a rhythmic bond between mother and baby begins to be established, which ends after birth. In cases where the newborn requires special care, or the mother suffers from depression, an alteration in the rhythm that was being built occurs and a link arrhythmia is produced.

This arrhythmia may have three different points of view or aspects: the baby may have special needs, and the mother may be fine, the mother may have special needs and the baby may be normal, or both are in good health conditions but the bond they build is not.

This theoretical concept tries to understand the different types of relationships that occur when the dyad presents an imbalance, to have a theoretical platform from which to approach and sustain a music therapy treatment.

The role of the music therapist in this stage of life is fundamental to allow the mother and child to find that lost rhythm they need to build the relationship. In this paper we will discuss the type of approach that is developed in the stage that goes from the neonatology discharge until the child is two years old and starts his rehabilitation treatments or his school life.



Biography: Gabriel F. Federico is a Music Therapist & master in psychoanalyst, creator of the Focal Obstetric Music Therapy model, writer and lecturer.

University teacher in Argentina, Brazil and Spain, perinatal music therapist of the perinatal mental health team of different public hospitals in the city of Buenos Aires, Argentina and as an international consultant for the Mariposas Project in several cities in California, USA.

Affiliation: Director of the C.A.M.I.N.O. Center (Argentine Center for Music Therapy and Research in Neurodevelopment and Obstetrics).

Email: contacto@gabrielfederico.com

Keywords: Bonding, mother & baby, imbalance, Arrhythmical

35 W Masterclass in supervision using reflective teams

Tone L. Steinhardt, Linn B. Herner, Stine Camilla Blichfeldt-Ærø

As music therapists working in high-paced hospital environments, we acknowledge the importance of clinical supervision to maintain the quality and relevance of our clinical work, and to articulate our work for interdisciplinary collaboration. We also hold supervision and peer support to be important factors in preventing burnout, which has shown as a challenge in our profession and for healthcare personnel in general.

Using reflective teams in supervision is a much-appreciated method at our ward at Oslo University Hospital, and we wish to share it with the conference participants in a masterclass format. We hope that this will allow for a mutual clinical deep dive by exchanging relevant experiences, methodology, and shared reflection around clinical cases.

In this workshop, three prepared cases will be presented one by one, by three music therapists in the format of a dialogue. Workshop participants are invited to partake in the reflective teams. The dialogue sessions will be led by Ragnhild Fretland, a specialist in clinical psychology and experienced supervisor. We will also open up for comments and short discussions including the masterclass audience at the end of each case.



Biography: Tone Leinebø Steinhardt (MA MT) is working with children and adolescents at S-BUP Oslo University Hospital (OUS), Rikshospitalet. Her main interests are in palliative care, development of service and procedural support.

Linn B. Herner is a specialist in clinical neuropsychology with broad experience from working with children in hospitals, including collaboration with music therapists. Her special field is interdisciplinary assessment, understanding and treatment of long-term pain, fatigue and complex functional, somatic symptom states.

Stine Camilla Blichfeldt-Ærø is a music therapist, PhD. She has been working and developing the Music Therapy Service in Pediatrics at Oslo University Hospital since 2001. Her PhD thesis explored receptive music therapy for adults in cardiac surgery.

Affiliation: Department of Child and Adolescent Mental Health in Hospitals, Oslo University Hospital

Email: tleinebo@ous-hf.no

36 P Sequences of Vitality in Music Therapy. Applying 360-degree video technology in hospital-at-home in paediatric palliative care

Monika Overå, prof. Gro Trondalen

This paper investigates the application of 360-degree video technology in analysing sequences of vitality in paediatric palliative care within hospital-at-home. We highlight a specific sequence where this advanced technology revealed a significant impact of music therapy. We address: How do sequences of vitality occur in a hospital-at-home music therapy session?

360-degree cameras offer a future-directed, unique, non-intrusive and deep-dive method for data collection, enabling therapists to fully immerse in the therapy environment (Reyna, 2018). However, the influence of these cameras on the paediatric patients' and the music therapists' experiences needs to be discussed. Bridging Interpretative Phenomenological Video Analysis (IPVA) (Lee and McFerran, 2015) and music analysis, we highlight the use of a 360-degree video camera to unveil sequences of vitality in music therapy. We suggest that each participant, patient and family member experience this sequence uniquely yet share a common experience in this dynamic and complex context.

The music therapy approach is inspired by developmentally informed theory, emphasizing the musical resources and the therapeutic relationship. The presentation examines the potential, limitations, and ethical considerations of employing the innovative 360-degree video technology in analysing sequences of vitality in music therapy.



Biography: Monika Overå (MA-MT) is a Ph.D. Fellow, EAMI reg. GIM therapist and Head of Music Therapy Master's Program at the Norwegian Academy of Music, Oslo, Norway. She has clinical experience as a music therapist in substance abuse treatment and paediatrics.

Gro Trondalen (PhD, Music Therapist, Fellow of AMI) is professor in music therapy at the Norwegian Academy of Music in Oslo, Norway. Trondalen is an experienced teacher, music therapy clinician, researcher, and supervisor.

Affiliation: Norwegian Academy of Music and Akershus University Hospital

Email: monikov@nmh.no

Keywords: Video analysis, Palliative care, Hospital-at-home, Vitality

39 P 'Calm Melodies'. The development of recorded music to support patients requiring medical care in 'low-stimulation' environments

Lauren Miller, Janeen Bower, Bec Blakeney, Jack Thomas, Stefanie Zappino, Jo Rimmer, Emma Davison

The music therapy team at the Royal Children's Hospital, Melbourne (Australia) often work directly with infants and children to support state regulation, reduce distress and agitation, promote sleep health, and improve perceptions of pain and discomfort. The clinicians also necessarily provide recommendations for effective and appropriate recorded music for these infants and children, to use when the music therapist is not able to be present. However, over many years the team have identified significant limitations of commercially available recorded music that would adequately support a 'low stimulation' auditory environment.

In order to address this, the music therapy team have independently developed a set of 'low stimulation nursery rhymes' informed by clinical experience and training, music therapy literature, and anecdotal evidence. This recorded music package was created on site in the hospital's recording studio and at the time of this conference, will have been trailed across multiple areas of music therapy practice.

During this presentation, the music therapy team will discuss their clinical experiences and feedback that highlighted the need for this project, the process and considerations undertaken in order to create the recorded music, and the subsequent outcomes and feedback from patients, family and the wider medical team following the project implementation. Additionally this presentation will address future considerations and potential further use of the recorded music product created. This discussion contributes to the broader development of clinical practice and patient care.



Biography: Lauren Miller (Registered Music Therapist, MMusThy) is a clinician working as part of the Music Therapy team at the Royal Children's Hospital Melbourne, Australia. Working primarily in the Children's Cancer Centre and the Palliative Care Team, Lauren provides clinical services to patients and their families receiving care at the RCH, and has 15 years of clinical experience.

Affiliation: The Royal Children's Hospital, Melbourne, Australia

Email: lauren.miller@rch.org.au

Keywords: Quality Improvement Project, Low Stimulation, Recorded Music

40 R Centering Clinical Practice in Pediatric Music Therapy Research

**Prof. Sheri L. Robb, Constance Boyde, Filippo Giordano, prof. Claire Ghetti,
Elizabeth Harman, Ilan Sanfi, Alexandra Ullsten**

Timely translation of research findings into clinical practice is an international concern. There is evidence that only a small proportion of scientific discoveries make their way into routine clinical practice. Collaboration between clinicians and researchers helps to ensure that studies will yield data that are clinically informative, relevant, actionable, and implemented. During this roundtable, an international panel of pediatric music therapy researchers will share findings from their respective programs of research highlighting: (1) main findings; (2) what was learned beyond the main findings; (3) how findings inform clinical practice; and (4) challenges they have encountered that hinder timely and/or meaningful translation of findings into clinical practice. Audience members and panelists will then engage in dialogue about facilitators and barriers to building and sustaining clinician-researcher partnerships, designing clinically meaningful research, applying evidence to practice, and conducting practice-based research.



Biography & Affiliation:

Sheri L. Robb (PhD, MT-BC) is a board-certified music therapist and Walther Professor of Supportive Oncology in the Indiana University Schools of Nursing and Medicine. Her research focuses on development and testing of music interventions to manage distress and improve positive health outcomes in children with cancer and their caregivers.

Constance Boyde: Herdecke Community Hospital; Witten/Herdecke University, Germany

Filippo Giordano (DiMePre-J): University of Bari, Bari, Italy Pediatric Hematology-Oncology Unit,
University Hospital of Policlinico, Bari, Italy

Claire M. Ghetti (PhD): Professor, The Grieg Academy – Department of Music, University of Bergen,
Bergen, Norway

Elizabeth Harman (PhD): Postdoctoral Research Scholar, Indiana University, Indianapolis, IN, USA

Ilan Sanfi (PhD): Fenrisus, Aarhus. Psychiatry and Social Service, Central Denmark Region, Department of
pediatrics and adolescent medicine, Aarhus University Hospital, Denmark

Alexandra Ullsten (PhD): Postdoctoral Researcher, Music & Art Therapist. Centre for Clinical Research and
Education, Central Hospital Karlstad, Region Värmland, Sweden & School of Health Sciences,
Örebro University, Sweden

Email: shrobb@iu.edu

Keywords: research; clinical practice; practice-based research; implementation science

41 Short term therapy in children's hospital wards

Hanna Hakomäki¹, Reetta Keränen²

A new art therapy project, launched in fall 2024, has introduced innovative encounters with various art forms in pediatric somatic and psychiatric wards. Techniques from music therapy, art therapy, and dance-movement therapy have been offered to children in specialized healthcare, providing various openings for mental and physical self-expression and movement, interaction and pain reduce, for example. Sometimes the treatment in the wards is very short-term. Some therapy sessions may have been just a single meeting, or the process spanned 2–5 sessions, but could the child benefit from art therapies even then?

It seems that there are many questions to answer: How art therapies affect the child's overall care? What significance these encounters might hold for the children and their parents? How healthcare staff perceive art therapies – do they enhance or disrupt treatment? How does a therapist prepare for a one-time session? How are the therapeutic methods and perspectives selected for these encounters? How can insights gained from these sessions be integrated into the child's overall treatment plan? How does the fact that the child is in inpatient care – returning to the ward and staff's care after therapy rather than going home – affect the nature of the encounter?

In this poster we present the first clinical experiences and future research needs based on them.



Biography: Hanna Hakomäki (Music Therapist, Family and Couple Psychotherapist, Supervisor, PhD) graduated as a music therapist in 1990, completed her PhD at 2013 and has now worked for eight years at the HUS Helsinki University Hospital, Child Psychiatry with children suffering from severe mental health disorders and complex family dynamics.

Reetta Keränen (MT MA, doctoral researcher)

Affiliation: ¹HUS Helsinki University Hospital, Children and Adolescents, Child Psychiatry, Finland

² HUS Helsinki University Hospital, The Finnish Center for Children and Adolescent Pain Management and Research; University of Helsinki, The Centre of Excellence in Music, Mind, Body and Brain

Email: hanna.hakomaki@hus.fi

Keywords: short term therapy, single session, music therapy, pediatrics, psychiatric ward

#42 Music therapy program implemented in the Neonatal and Pediatric Intensive Care Unit at the Hospital of Barcelona

Núria Escudé, Lita Aristizabal

This paper presents a music therapy program implemented in the Neonatal and Pediatric Intensive Care Units (NICU and PICU) at the Hospital of Barcelona. The program operates twice a week, focusing on providing therapeutic musical interventions to support patients during their critical care. The initiative aims to enhance the emotional and psychological well-being of both the young patients and their families. Through tailored music sessions, trained therapists engage with children to promote relaxation, reduce stress, and foster a sense of connection. Additionally, the program offers emotional support to family members, helping them cope with the challenges of having a loved one in intensive care. Preliminary outcomes suggest that this integrative approach not only aids in the emotional process but also strengthens family bonds during a vulnerable time.

Biography



Núria Escudé, Director of the Master's Program in Music Therapy at the University of Barcelona and the Catalan Institute of Psychology and Music Therapy. Clinical psychologist and music therapist at Hospital del Mar and Hospital de Barcelona.

Luisa Aristizábal, Clinical psychologist and music therapist from the University of Barcelona. Works at Hospital de Barcelona in the Internal Medicine Unit, NICU, and PICU, and at Centre Fórum Parc de Salut Mar in the Palliative Care Unit.

Affiliation: University of Barcelona

Email: nuriescude@yahoo.es

litamusicoterapia@gmail.com

Keywords: music therapy, neonatal care, pediatric care, emotional support, family bonding, critical care

43 P Music Walk: Transforming the Hospital Environment. A Study on Patients, Caregivers and Staffs perception of Environmental Music Therapy at a Norwegian Pediatric Hospital Ward

Sofie Mortvedt, Silje Måseide

Introduction

What does “music walk” have to offer in a Norwegian pediatric hospital environment? That was the question we asked ourselves when we started the implementation of environmental music therapy in the hospital milieu. This presentation will present the study “Environmental Music Therapy for Patients, Caregivers and Staff at a Norwegian Pediatric Hospital Ward”. The study will be carried out in 2024-2026.

Methodology

Environmental music therapy (EMT) at hospitals is a noninvasive mind–body intervention that considers the physical, psychological, and cultural needs of patients, caregivers, and staff (Canga, 2012). Studies have shown that the purposeful use of live music, showed positive effects on stress level and reduced the perception of noise for patients and caregivers when applied in treatment areas (Rossetti, 2020, Zhang, Doherty & Mahoney, 2018). In the current study, music therapy is tailored to meet the immediate needs of patients and caregivers in pediatric care. Music therapists at the hospital, collaborates with a professional musician to use environmental music therapy with the aim of reducing stress and improving the treatment environment. The data material includes questionnaires for patients and caregivers alongside semi-structured focus group interviews with staff, and log notes. Data will be analyzed using descriptive statistics, and a modified grounded theory approach.

Preliminary results of the work will be presented as case vignettes, concretized through a review of the environmental music therapy techniques adapted to the patient group through quotes from patients, caregivers and staff in pediatric care. Additionally, there will be shown recordings and videos from the project.



Biography: Sofie Mortvedt (MA MT) is a music therapist working at Oslo University Hospital, Ullevål Hospital in the pediatric section. She is also a violinist, and uses her musical training in her work.

Affiliation: Oslo University Hospital, Ullevål

Email: sofimo@ous-hf.no

Keywords: Environmental Music Therapy, Hospital Milieu, Professional Musicians, Pediatrics

44 P Emergence of a new role as music caregiver for hospital staff through music imagery

Ilan Sanfi

Lack of medical staff, high emotional demands, compassion fatigue, and burnout are unfortunately common factors that medical staff may experience in today's health care system in many European countries.

This paper addresses how receptive music therapy can be used to promote stress-relief and self-care in hospital staff. After a short outline of this relatively new clinical field of music therapy (Brooks et al., 2010) we present our method of specially composed music imagery journeys, which was developed and used in the MICO Project (www.micostudy.com, Sanfi et al., 2021). Subsequently, we developed the method further for medical staff. The aims and process of composition and production of the music journeys will also be outlined. Next, we summarize where and how the music journeys are used in Denmark for self-care in health care workers, including in paediatrics. We will share our experience of the clinical application of the music journeys as well as pilot data from hospitals in Denmark. The relative new role as music caregiver for hospital staff will also be addressed. Finally, we will discuss the use of technology to scale up dissemination of music-based tools to patients and staff at hospitals.

Biography: Ilan Sanfi is a trained music therapist, PhD, GIM therapist, and composer. He works as a music



therapist at Aarhus University Hospital plus Fenrisus, where he also does research on music imagery for stress-relief in staff working with vulnerable patients.

Affiliation: Aarhus University Hospital plus Fenrisus, Central Region Denmark

Email: ilan@sanfi.dk

Keywords: music imagery, stress-relief in staff, music caring as a supplementary role for music therapists, dissemination of music-based self-help tools through technology

45 P Children's musical folklore and its potential in therapy process

Maria Latysheva

In the process of treatment, it is essential for the child to maintain a connection with life and its realities, with nature, daily routines, and toys. It is also important to support the child's cognitive interests and play activities. However, the environment in a hospital is limited and sometimes meager. How can music help?

Children's musical folklore meets all the stated needs, as various genres have been evolved over time and have accompanied the child's development for centuries. I would like to discuss the therapeutic potential and possible areas of application of children's folklore genres (lullabies, nursery rhymes, finger games, so-called "lap songs", etc). We will analyze the neurofoundations of brain development when working with folklore material.

In addition to its influence on the child's development, the use of children's folklore also addresses sociocultural needs, taking into account the uniqueness of each child.

As specialists, our role extends beyond just incorporating folklore into our session. We could also create educational courses and methodological guides for parents and caregivers about using folklore, fostering attachment behaviors between parents and infants. Establishing routine interactions through shared singing and play creates emotional bonds that promote the harmonious development of a child even in hospital settings.

I will provide examples from Slavic folklore – these can be utilized in practice or serve as models when working with folklore from other countries (specifically for the conference, author is adapting traditional material into English), thus, the information will be relevant for specialists from different countries.



Biography: Maria is a musicologist and AMPP (Russia) working with special needs

inclusive educator. She is a specialist of the children. As a researcher her work overlaps between music therapy and music education, and she is an author of scientific articles and workbooks for children. She has presented at different conferences (in particular at Online Conference Music Therapy-2024).

Affiliation: Specialist, Association of Music Psychologists and Psychotherapists (Russia); member of the Public Relations Commission of World Federation of Music Therapy (term 2023-2026); Children's Development Center "Esther" (Moscow).

Email: avosta4music@gmail.com

Keywords: children's musical folklore, nursery rhymes, therapeutic potential

47 P Heart beat music in a Norwegian context

Jens Erik Aasmundseth

In the autumn of 2021, my colleague came across an article about the work of American music therapist Brian Schreck, who pioneered the use of heartbeat recordings as a way to connect with patients and families through recording projects. Just weeks later we bought ourselves a couple of digital stethoscopes and asked a family who already had participated in music therapy at the hospital if they would like to also participate in creating their own song with the heartbeat of their child. I have since finished a master thesis about heart beat music, and have been involved in creating heart beat music with more than 50 families.

I've found that thought it is of great value to the families to have a physical product in the form of a unique song after participating, the process of creating them offers so much that resonate with the national and international guidelines for good pediatric palliative care in meeting the families' psychosocial needs. It offers a safe space where both tears and laughter have their place, where families from several generations can connect through making music without needing any prior knowledge, and it offers a safe space to express emotions with written words, music or conversation.

In this paper I would like to show and discuss three different cases of families who participated in creating heart beat music, and what their experiences have been.



Biography: Jens Erik Aasmundseth (Music Therapist, MA). For the past three years I have worked as a music therapist at the childrens hospital in Bergen, Norway. My main focus has been creating heart beat music with families within palliative and perinatal care.

Affiliation: Haukeland University Hospital, Bergen, Norway

Email: jenserikaasmundseth@gmail.com

Keywords: Music therapy, heart beat music, pediatric palliative care

49 P Resilience and Hope: using music therapy to support adolescents with suicidality in the hospital

Juan Pedro Zambonini

In this workshop, we will explore the use of music to fuel patients' life drive. The ideas presented here emerged from a model of care developed in the Emergency Department of the Children's Hospital of Philadelphia, where music therapy was used to stabilize patients by offering them experiences aimed at reducing their stress, supporting their hope, and increasing their resilience. The model of care was built around those three key elements: stress reduction, hope (Snyder et al., 1997), and resilience (Ginsburg & Jablow, 2015). Participants will explore the use of songwriting, therapeutic music lessons, music listening, and lyrics discussion as feasible, evidence-based interventions to offer to adolescents with suicidality who seek care at a children's hospital (Zambonini, 2024). Integration between research and practice will be discussed throughout the workshop, including theory-based protocols and the possibilities of generating evidence for such intervention protocols in the hospital setting.



Biography: Juan Pedro Zambonini (PhD, MT-BC) is an Argentine music therapist and researcher working as clinical research lead in the Psychiatry department of the Children's Hospital of Philadelphia. His clinical experience includes working in the Emergency Department, PICU, General Pediatrics Unit, and the NICU. His research interests include psychoneuroimmunology, intervention research, adolescence, and knowledge production in music therapy.

Affiliation: Children's Hospital of Philadelphia

Email: zamboninj@chop.edu

Keywords: psychiatry, adolescents, hope, resilience, stabilization