

Music Therapy for People with Intellectual Disabilities: Stigma Intervention Strategies

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Abstract. The research presented in the article aims to justify the application of the method of music therapy in the long-term perspective of the social worker's professionalization for people with intellectual disabilities. The object of the research is the impact of music therapy on persons with intellectual disabilities as a stigma research & intervention strategy in the context of the professionalization of social work. The aim of the article is to reveal the impact of music therapy on persons with intellectual disabilities in the context of the professionalization of social work. The object of the research was delved into from various angles in order to answer the research questions: How useful is music therapy for people with intellectual disabilities in the context of social work striving to overcome stigma and choosing music therapy as a strategy? How useful is the authorial research methodology developed by the researchers for the application of music therapy for the quality of life of people with intellectual disabilities in the context of social assistance and in overcoming systems barriers? To what extent are the research participants able to express their feelings and evaluate the process of music therapy, to influence the social worker's activities related to music therapy? To what extent and how does such activity expand the boundaries of the social worker's profession and in what direction does it change professional standards? Data analysis proves that music therapy helps people with intellectual disabilities and society to overcome stigma. Referring to the research findings it can be stated that the authorial methodology for the application of music therapy created by the researchers in order to achieve the quality of life of people with intellectual disabilities in the context of social assistance is effective and can be implemented in practice to overcome the systems barriers.

Keywords: *Stigma Research & Intervention Strategies; Music Therapy; People with Intellectual Disabilities; Systems Barriers; Professional Standards*

Muzikos terapija asmenims, turintiems intelekto negalią: stigos įveikos strategijos

Reikšminiai žodžiai: *stigos tyrimai ir intervencijos strategijos; muzikos terapija; asmenys, turintys intelekto negalią; sisteminiai barjerai; profesiniai standartai*

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Introduction

In Lithuania, increasingly talking about the aspiration to become a welfare state, the country is not yet able to meet the need for all social services, to ensure their quality and overcome systems barriers. There is still a lack of a clear concept of the state of how to use the newest occupational methods to help people with intellectual disabilities, who attend social services daycare centres, where not only the development of occupational skills but also psychological, social integration development and emotional assistance is important. Recipients of services, affected by the environment and progressive diseases, experience various negative psychological states and are extremely sensitive to even the slightest problems they face. Taking into account the good practices of foreign and Lithuanian researchers in the application of music therapy in social activity, an environment is formed in which no research has been conducted yet in Lithuania on how it would be possible to combine the application of music therapy for people with intellectual disabilities with the development of the social worker's competencies in the context of professionalization, changing the professional standards of a social worker. The research aims to justify the application of the method of music therapy in the long-term perspective of the social worker's professionalization for people with intellectual disabilities. **The object of the research** is the impact of music therapy on persons with intellectual disabilities as a stigma research & intervention strategy in the context of the professionalization of social work. The aim of the article is to reveal the impact of music therapy on persons with intellectual disabilities in the context of the professionalization of social work. From the ontological aspect, the chosen ecological systems theory focuses researchers on a long-term impact, when a long-term result that changes society is expected rather than a short-term one focused on the individual (cf. Bronfenbrenner & Morris, 2006; Kamenopoulou, 2016; Liobikienė, 2016). From the epistemological aspect, the work is inseparable from the interactive ethnographic approach, which substantiates the choice of ecological systems theory and the impact of music therapy conducted by the social worker not only on the individual but also on other environments surrounding him/her as well as the client's behaviour changing in these environments (cf. Bridges et al., 2016; Bridges, 2015; Jin et al., 2015; Latakienė & Baranauskienė, 2019; Pink et al., 2017; Bairašauskienė, 2019). The chosen approaches allowed not only to look at the research object from different angles but also to gain a deeper understanding of the phenomenon under investigation by answering the **research questions** posed: How useful is music therapy for people with intellectual disabilities in the context of social work striving to overcome stigma and choosing music therapy as a strategy? How useful is the authorial research methodology developed by the researchers for the application of music therapy for the quality of life of people with intellectual disabilities in the context of social assistance and in overcoming systems barriers? To what extent are the research participants able to express their feelings and evaluate the process of music therapy, to influence the social worker's activities related to music therapy? To what extent and how does such activity expand the boundaries of the social worker's profession and in what direction does it change professional standards?

Materials and Methods

Methods of data collection: observation with video recording. The choice of the method of observation with video recording was determined by the physical and psychological characteristics of the research subjects with intellectual disabilities – lack of ability to write and read, insufficient ability to recognize and name their emotions. The application of the method is based on the approaches described by Bridges et al. (2016); Maratos et al. (2009). To realize the aim of the research, 2 video recorders were selected, with which 8 music therapy sessions were filmed. The duration of one session was 1 academic hour. Data processing: the methods of video data analysis (cf. Jin et al.,

2015; Bridges et al., 2016; Bridges, 2015; Davidson, 2009). Five research participants were selected by convenience sampling. All of them had an intellectual disability. All the participants participated in music therapy sessions for the first time. The structured characteristics of the research participants are presented below:

- The research participants had an intellectual disability, which was accompanied by other disorders such as atypical autism, epilepsy, severe behavioural disorders;
- The age of the research participants was from 24 to 41 years. The average age of the participants was 32 years;
- The research involved 4 men and 1 woman living in the territory of city X;
- The main selection criterion for the participants was that they were visitors who came to the institution on a daily basis and were able to speak, as the research focused on the uninterrupted application of 2 weeks of music therapy sessions and the receipt of feedback.

In preparing for the research, much attention was paid to **research ethics**. The permission of the Ethics Commission of Klaipėda University was obtained. The essence and conditions of the participation in the research (aim of the research, benefits, data collection methods) were explained to the participants in the group and individually through additional means of communication. Consent or refusal to participate in the research was voluntary and the participants were not persuaded or otherwise encouraged to participate. Questions from the research participants were answered and their written consent was obtained. The identities of the research participants are known, however, they are not disclosed when presenting the results of the research.

Results

For the analysis of video data, individual changes in behaviour, moods, reactions to music therapy of the persons with intellectual disabilities and the therapy leader were selected, which allow to delve deeper into and understand how the process of music therapy affects its participants. For each research participant individual behavioural changes emerged at different times during the music therapy sessions, and all of them cannot be analysed in this article due to the abundance of information, therefore, the episodes that are the most relevant and, according to Bridges & Maximo Chian (2019), that answer the research questions are selected and named as rich points. As it was mentioned, a total of eight music therapy sessions were held. We found five rich points related to the research questions, which emerged in the third, fourth and seventh sessions. In relative terms, it can be stated that four rich points reveal individual or collective changes in the reactions and behaviour of the therapy participants, and one rich point is more related to the impact on the music therapy leader (although the impact on the therapy participants is also recorded).

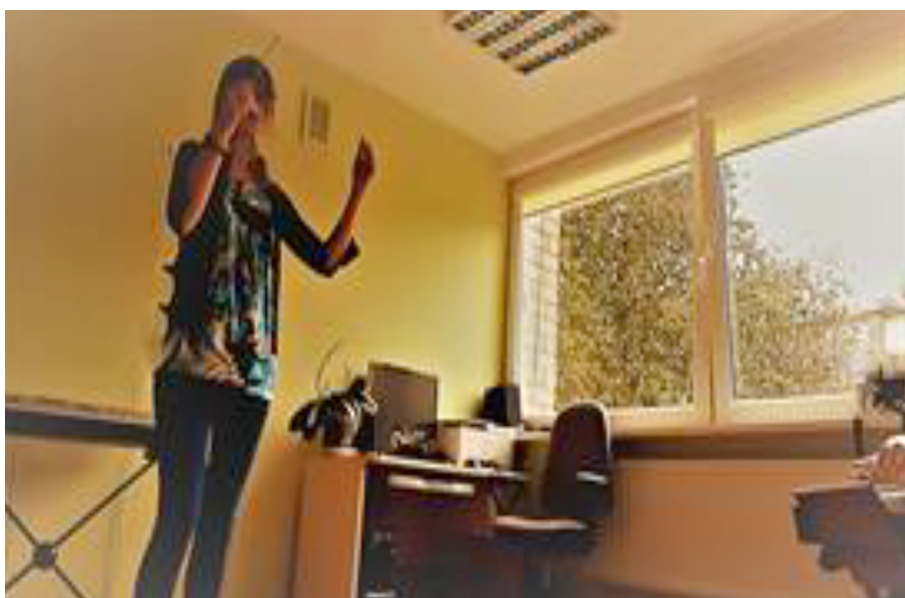
To answer the question of how much music therapy is beneficial for people with intellectual disabilities in the context of social work to overcome stigma and choosing music therapy as a strategy, an episode from the third music therapy session (17.37 min) that reflects the participant's first personal breakthrough – the decision to conduct the group – was selected. Free, wide movements and a smile on the face convey joy and self-confidence (cf. Figure 1). Until this point, the participant performed tasks only when requested and rather sluggishly.

This paused frame conveys the benefits of music therapy to this and other participants of the research, when we can assess the determination to actively participate in music therapy as an expression not only of good mood, cognitive joy but also motivation to actively participate in the process of music therapy. This rich point is reinforced by the conclusion based on the researchers' observation that long, rhythmically different and non-boring improvisational melodies sounded

during musical improvisations during therapy. The research participants were able to hear and feel not only themselves but also other participants in music therapy. This is evidenced by the pulsation of melodies, highlighting the climaxes and feeling the collective change in the intensity of melodies at the end of playing improvisations. The impact of music therapy on people with intellectual disabilities was manifested by attentiveness and a sense of collective mood, increasing socialization, which is emphasized by other researchers in their research (cf. Petrauskaitė-Dusevičienė & Jasiukevičiūtė, 2014) when writing about the benefits of music therapy. When the research participants are not instructed how to make music, when to reach the climax, the music process takes place by itself, as if they were experienced musicians. Analysing the video data, the playing of people with intellectual disabilities could be accepted as chaotic at first glance, but delving deeper it is noticeable that for the participants playing in the process, this music is like pulsations of consciousness or subconsciousness occurring in a state of trance (cf. Wong et al., 2015).

Figure 1

Personal breakthrough of the participant's initiative.



Analysing the processes related to music therapy for people with disabilities, the researchers found that musical activities provide therapy participants with both physical and emotional positive energy (cf. Montánchez Torres et al., 2016). We found the same expression in our research, which we associate with our question: To what extent are the research participants able to express their feelings and evaluate the process of music therapy, to influence the social worker's activities related to music therapy? How does music therapy change the expression of energy and emotions of people with intellectual disabilities? Our findings suggest that making music activates people with intellectual disabilities, smiles on their faces last longer, their eyes become more sincere, lively and burn with a desire to make music. The researcher's encouragement for music therapy participants to decide for themselves what instruments and rhythms to choose, to become the initiators of tasks, designers of musical activities further enables them to become responsible for the energetic pulsation of music therapy sessions, well-being and the quality of sessions. The significance of the empowerment process in therapy is confirmed by Matonytė et al. (Matonytė et al., 2017). To substantiate the expressed arguments and findings, a paused frame of the seventh music therapy session (38:45 min) is presented (cf. Figure 2), which we also present as a rich point.

Figure 2

Positive physical and emotional expression of the participants' energy.



In the paused video episode, we see the expression of the individuals, the active positions of the body. The head rotation positions and gaze directions of the participants allow us to state that the participants do not just make music for themselves but look for contact with each other. The expression of the bodies of at least four participants demonstrates getting into the rhythm, and we can also see the active hand movements of at least four participants. As it was mentioned at the beginning of the episode analysis, this allows researchers to presume about the participants' positive physical and emotional expression of energy. The research participants participate in the process consciously and shape their own well-being themselves.

The competence of a social worker and the expanding professional boundaries are revealed during the fourth session of music therapy at the same time answering the question: To what extent and how does such activity expand the boundaries of the social worker's profession and in what direction does it change professional standards? to what extent and how does such activity expand the boundaries of the social worker's profession? The researcher, observing the participants in a good mood, emotional state and relatively well focused on musical tasks, assigns a task during the fourth session: "It is already ten o'clock in the morning, we are all awake and maybe somehow we will manage to play a little faster?" With this request, the researcher-social worker shifts the process of music therapy in order to increase the impact of music therapy on people with disabilities even more (cf. Hohmann et al., 2017) in the hope that music intensity will provoke emotional intensity and stimulate positive emotions. To accomplish the task, each study participant gets the explanations from the researcher and therapy leader on how to touch the instruments to make the hands move more freely and the sounds of music to be more agile and intense. The result was achieved. The participants started playing faster and such playing obviously stimulated positive emotions.

Another request from the researcher was addressed to the research participant who was playing too loudly and overshadowing the others. She said she understands that his instrument sounds very nice and everyone likes it, but she would ask to make the instrument to sound a little quieter so that the person playing would not only hear his instrument but also try to hear the friends playing. The participant listened to the request of the therapy leader, played quieter, did not protest, did not show negative emotions, on the contrary – his emotions flowed happily and freely only quieter. Thus, the process of music therapy is not only controlled but also improved by the researcher and the supervisor (cf. the paused frame of the fourth session (17:50 min) – Figure 3). The researcher's instructions and explanations on how to touch musical instruments to have better overall harmony and as many positive and more energetically active emotions as possible highlighted another "critical point" in this session (cf. Bridges & Maximo Chian, 2019).

Figure 3*Active role of the music therapy leader.*

The bodies and faces of all the research participants are directed to the therapy leader. The position of the hands of all the participants indicates an active question. One research participant prepares to ask a question and waits for the leader to finish giving instructions. The video shows that all the participants are involved in the process with interest, and such achievements prove that the therapy leader can manage the process to improve the emotional state of people with disabilities, as well as the quality of the music session in general.

The fourth rich point is related to the researcher's and the leader's proposal to change the musical activity – to replace free improvisation of the participants with the chosen instruments with another activity, playing with musical sticks or body percussion. To the surprise of the leader, the research participants did not want to change anything, they actively expressed a desire to continue to improvise with their chosen instruments. This rich point reveals that the musical activity of improvisation, without major rules or instructions was not only so pleasant to the study participants that they wanted to continue it and none of the five music therapy participants wanted to stop the improvisational activity but also that they themselves are free and consciously make decisions, express their position without hesitation. This rich point answers the questions raised: How useful is the authorial research methodology developed by the researchers for the application of music therapy for the quality of life of people with intellectual disabilities in the context of social assistance and in overcoming systems barriers? To what extent are the research participants able to express their feelings and evaluate the process of music therapy, to influence the social worker's activities related to music therapy? Cf., Figure 4, where the 33:17 minute was paused, when the research participants expressed their determination not to change the improvisational activity, thus influencing the social worker's plan of music therapy tasks.

The bodies of the music therapy participants no longer show united support for the therapy leader. Even two participants do not look at the leader, the crossed legs of two participants confirm verbal disagreements to change the activity. In their faces, smiles were replaced by anxiety, and in some faces by tightly compressed lips. The social worker, the leader of music therapy, must adapt to the needs of the research participants and be flexible in musical activities. This episode also allows us to state that people with intellectual disabilities are able to express their wishes, understand the effects of music therapy, are able to choose the most suitable activities for them. The rich point reveals that the participants in the process of music therapy activities must be given the opportunity to evaluate the process of music therapy themselves and choose activities, or, in this case, it can be said that to

stay in the activity that seems the most acceptable to them and stimulates positive emotions. These statements of the researchers are confirmed by the smiles on the faces of the research participants after the leader's decision to refuse to change the activity and the participant who suddenly started playing the piano, who even without waiting for the colleagues started to improvise by playing with both hands.

Figure 4

The participants do not agree to change the activities.



During the analysed fourth music therapy session, another rich point is recorded. The reason for the formation of the finding was the situation (43.15 min), when the researcher looked at the clock and noticed that there were five minutes left until the end of the session and asked if the participants would like to summarize the session as it ends, but heard a unanimous answer that they did not want to stop and wanted to keep on playing.

Figure 5

Summarizing the session.



The paused episode reflects the surprise expressed on the face of the leader and the researcher because the answer was completely unexpected, however, perfectly answering the music therapy

research question raised, are people with intellectual disabilities able to perceive their positive emotions “here and now”? Four out of five participants smile, but by no means agree to stop making music. It is the refusal to stop when it is fun that answers the question raised. It also shows an emotionally secure connection with the therapy leader, in this case the social worker, as not only this but also other rich points have illustrated the expression of pleasant emotions, confidence in the environment and oneself. It can be stated that the tactic chosen by the researcher to allow play as much as it is emotionally desired by the research participants is the right choice. A relationship based on collaboration and listening is important not only for the social worker but also for the therapy participants. This relationship increases self-confidence and positive emotions, encourages active involvement in music therapy activities. For people with intellectual disabilities, when summarizing a music therapy session (conveying their emotions at the moment), in the video data, the more expressive and more emotionally felt playing is noticed. The playing of each study participant had its own pulsations and silently but reassuringly told about the positive emotions inside.

To systematize the analysis of the video data, referring to the research material by Jin et al., a map of events or findings was created (cf. Jin et al., 2015).

The formation of the map of events is based on the findings of the third, fourth and seventh music therapy sessions, which are presented in Table 1.

Table 1

Rich point map of music therapy sessions.

Time bar (sequence of music therapy sessions)							
1	2	3	4	5	6	7	8
Music therapy sessions 3, 4 and 7 to find out the impact of music therapy on people with disabilities and the professionalization of a social worker							
Persons with intellectual disabilities, participants in music therapy		Event point	Social worker, leader of music therapy sessions			Event point	
Voluntary group leadership by conducting.		17.37 min, session 3	Freedom of choice given (client empowerment).			17.50 min, session 4	
Increased sense of community and belonging to the group.			Methodological instructions for performing tasks and targeted explanations.				
Ability to independently evaluate the process and choose activities.		33.17 min, session 4	Adapting to a new plan of activities following the client.				
Self-confidence and confidence in the researcher to stay in musical activities.		43.15 min, session 4	Relationship based on cooperation, listening and trust.				
Felt and melodically complex musical generalizations.		43.17-47.55 min, session 4	Positive emotional connection with the therapy participants.				
The process of making music activates the participants, positive energy manifests itself.		38:45 min – session 7	Freedom of choice given (empowerment).				
Smiles on the faces and verbal confirmations about a change in mood.		In many episodes	The positive attitude of the participants makes the activity of the music therapy leader meaningful.				

Discussion

In the context of quality of life and social assistance, the inability to recognize and express emotions in words successfully turned into the ability to reveal them in music. The desire to improvise, convey feelings, reflect real experiences and design the most immediate desires and the aspiration to implement them has been revealed. The research participants are able to perceive their emotions “here and now”, intuitively feel the vibrations of music, can independently assess and decide in which musical activities they want to participate. The benefits of music therapy are reflected in the increase in energy and willingness to participate in other activities of the day, the individuals also become calmer, more focused and attentive, there is no desire to participate in conflicts or to provoke them themselves, as a consequence, it can be stated that the impact of music therapy manifests itself not only in the participants in the therapy but also in the environment around them. The relationship with the social worker based on cooperation and listening increases the research participants’ confidence in themselves and music therapy that promotes positive emotions. The participants overcome stigma and systems barriers. The social worker must adapt to the needs of the research participants, therefore, he/she has to be flexible in musical activities, in case of need, to improvise and adjust tasks in order to promote the musical expression and positive emotions of the research participants – in this way the professional standards of the social worker are affected. The application of this method in social work positively influences the emotional environment of people with intellectual disabilities, the overcoming of stigma and the systems barriers it influences. A social worker does not have to become a music therapist, as these studies require financial investment and are not available to everyone, but in his/her work having the necessary musical knowledge and applying the established experience of social work, he/she could also use the elements of the methods of music therapy thus seeking the professionalization of his/her personal and social activity. The results of the research prove that it is necessary to supplement the professional description of a social worker in Lithuania by changing the understanding of the professional standards. The findings of the video data allow the authors of the article to state that:

- The relationship based on collaboration between music therapy participants and the social worker changes the interrelationship. This means that the relationship between the research participants and the social worker must become not teaching but advising, not commanding but listening;
- The social worker must have the necessary professional competencies and the basics of understanding music, which would be adapted to help people with intellectual disabilities to perform musical tasks more easily and professionally;
- People with intellectual disabilities intuitively feel the vibrations of music and are able to independently assess and decide in which musical activities they want to participate;
- The freedom of self-determination provided by the social worker forms a field that stimulates positive emotions of the research participants;
- The expression and intensity of making music have a direct relationship to the change in mood of the research participants;
- It is relevant to learn to communicate and express one’s opinion clearly.

Conclusion

Data analysis proves that music therapy helps people with intellectual disabilities and society to overcome stigma. For this reason alone, incorporating music therapy strategies into social work contexts is meaningful. The application of this strategy affects the participants’ mood. The

individuals become calmer, more focused and attentive. The benefits of music therapy are reflected in the increase in energy and willingness to participate in other activities of the day. People with intellectual disabilities have no desire to participate in conflicts or to provoke them themselves, there are changes in their social behaviour, therefore, the impact of music therapy manifests itself not only in the therapy participants but also in the environment around them (an obvious expression of ecological systems theory in practice).

The authorial methodology for the application of music therapy created by the researchers in order to achieve the quality of life of people with intellectual disabilities in the context of social assistance revealed that the continuity of music therapy activities increases the level of communication and self-expression of the participants. For people with intellectual disabilities, the opportunity to express emotions during the creative process was revealed by the dominant warm emotions and musical improvisation that conveys joy. A wide range of emotions, the subconscious desire to improvise, convey feelings, reflect real experiences and project the immediate desires and the aspiration to implement them became evident. The arguments put forward prove that the authorial methodology for the application of music therapy created by the researchers in order to achieve the quality of life of people with intellectual disabilities in the context of social assistance is effective and can be implemented in practice to overcome the systems barriers.

The research results prove that the research participants are able to perceive their emotions “here and now”, intuitively feel the vibrations of music, they can independently assess and decide in which musical activities they want to participate. The relationship based on cooperation and listening increases the research participants’ confidence in themselves and music therapy that promotes positive emotions. The social worker must adapt to the needs of the research participants and be flexible in musical activities, in case of need, improvise and adjust tasks in order to promote the musical expression and positive emotions of the research participants. The arguments discussed prove that music therapy as an activity expands the boundaries of the social worker’s profession and can influence changes in professional standards. In order to successfully provide modern services to people with intellectual disabilities that respond to their needs, the social worker must have the professional competencies traditionally attributed to the social worker and having the formal education of understanding music (be a graduate of at least a basic music school) he/she may begin to delve into the method of applying music therapy in social work. In order to achieve professionalization, a social worker must be able to look at the process from the point of view of interdisciplinarity, to apply complex thinking, to flexibly make decisions in work situations, instead of relying on the established and existing professional regulations, stereotypes formed and methods consolidated in practice.

Recommendations

A social worker providing services to a person with a disability could apply the elements of the methods of music therapy, because the analysis of the research data reveals the positive impact of music therapy.

A social worker does not have to become a music therapist, as these studies require financial investment and are not available to everyone, but in his/her work having the necessary musical knowledge and applying the established experience of social work, he/she could also use the elements of the methods of music therapy thus seeking the professionalization of his/her personal and social activity.

The application of music therapy in social work activity provides an opportunity to choose non-standard methods and apply them for the clients’ and workers’ well-being, meanwhile, the

observation of video data can be chosen as an alternative to analysing one's own musical performance and learning from experience striving for professionalization.

When applying the elements of the method of music therapy, it is necessary to arrange the environment adjusted to the activity and the necessary means and instruments of musical expression in advance. It is important to arrange a place where other sounds cannot be heard and the process cannot be disturbed by outsiders not involved in music therapy.

In the process of music therapy, the social worker should apply his/her competencies in such a way that he/she does not feel like an expert, manager or leader. He/she should consider himself/herself as the same participant in music therapy as the client and engage in joint activities, however, at the same time be an observer, recording everything that happens in the environment, feeling how music therapy affects the client and whether he/she is changing.

The prepared recommendations would create a precondition for the change of the social work profession standard being prepared in Lithuania.

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Summary

In Lithuania, increasingly talking about the aspiration to become a welfare state, the country is not yet able to meet the need for all social services, to ensure their quality and overcome systems barriers. There is still a lack of a clear concept of the state of how to use the newest occupational methods to help people with intellectual disabilities, who attend social services daycare centres, where not only the development of occupational skills but also psychological, social integration development and emotional assistance is important.

Taking into account the good practices of foreign and Lithuanian researchers in the application of music therapy in social activity, an environment is formed in which no research has been conducted yet in Lithuania on how it would be possible to combine the application of music therapy for people with intellectual disabilities with the development of the social worker's competencies in the context of professionalization, changing the professional standards of a social worker. The research aims to justify the application of the method of music therapy in the long-term perspective of the social worker's professionalization for people with intellectual disabilities. The object of the research is the impact of music therapy on persons with intellectual disabilities as a stigma research & intervention strategy in the context of the professionalization of social work.

Methods of data collection: observation with video recording. The choice of the method of observation with video recording was determined by the physical and psychological characteristics of the research subjects with intellectual disabilities – lack of ability to write and read, insufficient ability to recognize and name their emotions. The application of the method is based on the approaches described by Bridges et al. (2016); Maratos et al. (2009). To realize the aim of the research, 2 video recorders were selected, with which 8 music therapy sessions were filmed. The duration of one session was 1 academic hour. Data processing: the methods of video data analysis (cf. Jin et al., 2015; Bridges et al., 2016; Bridges, 2015; Davidson, 2009). Five research participants were selected by convenience sampling. All of them had an intellectual disability. All the participants participated in music therapy sessions for the first time

Data analysis proves that music therapy helps people with intellectual disabilities and society to overcome stigma. Referring to the research findings it can be stated that the authorial methodology for the application

of music therapy created by the researchers in order to achieve the quality of life of people with intellectual disabilities in the context of social assistance is effective and can be implemented in practice to overcome the systems barriers.

The research results prove that the research participants are able to perceive their emotions “here and now”, intuitively feel the vibrations of music, they can independently assess and decide in which musical activities they want to participate. The relationship based on cooperation and listening increases the research participants’ confidence in themselves and music therapy that promotes positive emotions.

In order to successfully provide modern services to people with intellectual disabilities that respond to their needs, the social worker must have the professional competencies traditionally attributed to the social worker and having the formal education of understanding music (be a graduate of at least a basic music school) he/she may begin to delve into the method of applying music therapy in social work. In order to achieve professionalization, a social worker must be able to look at the process from the point of view of interdisciplinarity, to apply complex thinking, to flexibly make decisions in work situations, instead of relying on the established and existing professional regulations, stereotypes formed and methods consolidated in practice.

Muzikos terapija asmenims, turintiems intelekto negalią: stigmos įveikos strategijos

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Santrauka

Lietuvoje vis dažniau kalbant apie siekį tapti gerovės valstybe, pastebima, kad šalis nėra pajėgi patenkinti visų socialinių paslaugų poreikio, užtikrinti šių paslaugų kokybės ir įveikti sisteminius barjerus. Vis dar trūksta aiškios sampratos, kaip, pasitelkus naujausius profesinius metodus, teikti pagalbą asmenims, turintiems intelekto negalią ir lankantiems socialinių paslaugų dienos centrus, kuriuose svarbu ne tik profesinių įgūdžių, bet ir psichologinės bei socialinės integracijos plėtotė, teikiama emocinė pagalba.

Atsižvelgiant į užsienio ir Lietuvos mokslininkų išskiriamas gerąsias muzikos terapijos taikymo socialinėje veikloje praktikas, siekiama sukurti sąlygas, leidžiančias derinti muzikos terapiją asmenims, turintiems intelekto negalią, ir specialistų kompetencijų ugdymą socialinio darbo profesiniame kontekste, taip keičiant socialinio darbuotojo profesinius standartus. Tyrimu siekiama socialinio darbo profesiniame kontekste pagerinti muzikos terapijos metodo taikymą asmenims, turintiems intelekto negalią. Tyrimo objektas – muzikos terapijos poveikis asmenims, turintiems intelekto negalią, kaip stigmos tyrimo ir intervencijos strategija socialinio darbo profesiniame kontekste.

Duomenims rinkti pasitelktas stebėjimas, darant vaizdo įrašą. Stebėjimo metodo pasirinkimą lėmė tiriamųjų, turinčių intelekto sutrikimą, fizinės ir psichologinės savybės: nemokėjimas rašyti ir skaityti, nepakankamas gebėjimas atpažinti ir įvardyti savo emocijas. Metodo taikymas grindžiamas Bridges ir kt. (2016), Maratos ir kt. (2009) metodika. Tyrimo tikslui įgyvendinti pasirinkti du vaizdo registratoriai, kuriais nufilmuoti aštuoni muzikos terapijos užsiėmimai. Vienos sesijos trukmė – 1 akademinė valanda. Duomenims apdoroti taikyti vaizdo duomenų analizės metodai (Davidson, 2009; Bridges, 2015; Jin et al., 2015; Bridges et al., 2016). Penki tyrimo dalyviai atrinkti patogiosios atrankos būdu. Visi jie turėjo intelekto negalią, muzikos terapijos užsiėmimuose dalyvavo pirmą kartą.

Duomenų analizė įrodo, kad muzikos terapija padeda sutrikusio intelekto žmonėms ir visuomenei įveikti stigmą. Remiantis tyrimo išvadomis, galima teigti, kad mokslininkų sukurta autorinė muzikos terapijos taikymo metodika, skirta asmenų, turinčių intelekto negalią, gyvenimo kokybei pagerinti socialinės pagalbos kontekste, yra efektyvi ir gali būti įgyvendinama praktikoje, įveikiant sistemines kliūtis.

Tyrimo rezultatai pagrindžia, kad tyrimo dalyviai geba suvokti savo emocijas „čia ir dabar“, intuityviai jaučia muzikos virpesius, gali savarankiškai įvertinti ir nuspręsti, kokioje muzikinėje veikloje nori dalyvauti. Bendradarbiavimu ir klausymu paremti santykiai didina tyrimo dalyvių pasitikėjimą savimi ir muzikos terapija, skatinančia pozityvias emocijas.

Socialinis darbuotojas, siekdamas sėkmingai teikti asmenims, turintiems intelektualinę negalią, modernias paslaugas, leidžiančias tenkinti šių asmenų poreikius, turi disponuoti tradiciškai jam priskiriamomis profesinėmis kompetencijomis ir turėti formalųjį muzikinį išsilavinimą (būti baigęs bent muzikos mokyklą), kad galėtų pradėti gilintis į muzikos terapijos metodo taikymą socialiniame darbe. Siekdamas profesiskai augti, socialinis darbuotojas turi gebėti į procesą pažvelgti tarpdiscipliniškai, mąstyti kompleksiskai, lanksčiai priimti profesinės veiklos sprendimus, nepasikliauti tik nusistovėjusiais ir esamais profesiniais standartais, stereotipais ir įprastais darbo metodais.