“To Know My Insecurities Is To Know Me”:
An Arts-based Reflexive Study on a First-year Music Therapist’s Experiences of Vulnerability

by

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TO KNOW MY INSECURITIES IS TO KNOW ME

TO KNOW MY INSECURITIES IS TO KNOW ME: AN ARTS-BASED REFLEXIVE
STUDY ON A FIRST-YEAR MUSIC THERAPIST’S EXPERIENCES OF VULNERABILITY

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Abstract

This paper details an arts-based self-study utilizing reflexive songwriting to explore my experiences with vulnerability in my first year as a professional music therapist. In a self-designed arts-based research framework, I reflected on the feelings of vulnerability I experienced in my work as they pertain to uncertainty, emotional exposure, risk, perceived inadequacy, and loss of control. I generated personal responses through stream-of-consciousness writing, which informed the composition of two original songs, “Impostor Syndrome” and “Breathe”. I then analyzed these songs for personal meaning and insight. The relationship between feelings of vulnerability, reflexivity, and self-growth was an emergent theme of this process. The results of this study hold implications for further music therapy research involving arts-based, reflexive practices, particularly for new professionals intending to enhance self-awareness.

Keywords: arts-based research, reflexivity, songwriting, music therapy, vulnerability
“To Know My Insecurities Is To Know Me”

This project is an arts-based reflexive exploration of my experiences with vulnerability as a first-year music therapist. Informed by Brown’s (2012) definition, vulnerability is understood here as personal feelings of “uncertainty, risk, and emotional exposure” (p. 34), as well as perceived inadequacy and loss of control. As vulnerable feelings are pervasive, yet subjective and often vague, I sought to clarify my experiences with vulnerability through an arts-based research lens in order to increase insight. Music was the primary artistic medium for exploration, and I borrowed from tenets of therapeutic songwriting to engage in reflexive song creation. In this project, feelings of vulnerability were explored through stream-of-consciousness reflections, creation of pieces of music in response to the reflections, and analysis of the pieces and overall process of musical creation. Along with my personal gains made through the process of this research project, it is my hope that this project exemplifies the important potential of reflexive, arts-based projects for music therapists to analyze and better understand their own personal and professional identities.

Rationale for Study

The conceptualization of vulnerability may be somewhat vague or subjective. Brown (2012) states that many see vulnerability as negative, even as a weakness. Rather, she finds that vulnerability is the root of all feelings, that “to feel is to be vulnerable” (p. 34). My aim was to examine vulnerability as a tool for learning about myself and as an important aspect of reflexivity, one that plays a vital role in my work as a music therapist. Additionally, I sought to encourage other therapeutic professionals to analyze the function of vulnerability in their work.
According to Bruscia (2015), “reflexivity is a value that is essential to all music therapy endeavors” (p. 12). Reflexivity may in fact be a necessary component in best practice. In the Code of Ethics for music therapists (American Music Therapy Association, 2019), a core principle for ethical practice is to strive for excellence. A component of this principle is to “strive to be self-aware and to continually improve skills and knowledge by integrating the best available evidence and findings from research to maintain best practices” (n.p.). Bruscia (2015) maintains that self-awareness is stored within the greater scope of reflexivity. First-person research requires the researcher to be reflexive as they use processes such as self-observation, self-reflection, introspection, and retrospection, among others. The engagement in reflexive first-person research contributes to my goal of excellence through an augmentation of my understanding of my work during a critical time in my development as a professional.

I chose to utilize arts-based research in this project because I believe in its efficacy and appreciate the creative avenues it affords to research. The presence of arts-based research within music therapy literature, while burgeoning, is certainly smaller in comparison to other disciplines (McCaffrey & Edwards, 2015). In my opinion, this could be due to many underlying factors: the seemingly ongoing drive to legitimize music therapy through more traditional research models; the comfort that comes from working in these predetermined, highly structured models; or perhaps there is a sense of redundancy or myopia that comes from examining an arts-based discipline through an arts-based research lens. My instinct is that many phenomena arising in music therapy work, especially subjective first-person experiences, may be best explored through arts-based projects as the creative and flexible approaches leave space for authentic processing to
occur. his project demonstrates the efficacy of arts-based research in undertaking these unique music therapy inquiries.

**Research Foci**

In examining my personal experiences throughout this project, I addressed these questions:

How does vulnerability manifest in me? What other feelings arise when embracing vulnerability? How can I empower myself through reflexive songwriting personally and professionally?

**Project Sources**

**Personal Context**

I view my identity as a musician to be one of the most significant components of my self-concept. I have been singing since before I can consciously remember, performing in some capacity since elementary school, and crafting my own music since high school. I am a songwriter, a performer, and a voracious music consumer. I feel most myself when playing music, and specifically when playing music I have written. I have summarized and even processed various key moments of my life—first loves and first heartbreaks, college graduation, transitioning into adulthood—through songwriting. Creating my own music allows me to access and express the most personal parts of myself that I might otherwise neglect. Singing my words gives me a deeper sense of connection with my mind and body. Over the past few years I have realized that this is an important tool to embrace, as people close to me have told me that at times I can be emotionally guarded. I consider myself adept with handling other people’s emotions but recognize that I have some work to do with my own.
Professional Context

I am a first-year professional music therapist, and somewhat new to the field of music therapy itself. Having completed my undergraduate program in music education, my first taste of music therapy was at the graduate level. To be working full-time almost immediately after completing my music therapy classes sometimes causes me to forget that I have only been acquainted with this field for about four years. I acknowledge that practicing reflexivity will be a life-long process, and am motivated to instill those skills now at the beginning of my professional career.

Components of various theoretical approaches to music therapy inform my work, including humanistic, resource-oriented, and music-centered approaches. I embrace many aspects of humanistic philosophy, namely that clients are to be regarded first and foremost as human beings, that clients maintain dignity and agency, and that music is a way of being and working rather than purely an object (Abrams, 2015). Similarly, per Rolvsjord (2004), resource-oriented music therapy shifts the perspective from the traditional medical model of treating deficiencies to utilizing strengths. The therapist works with the client rather than applying treatment to them, valuing collaboration over intervention. The client becomes empowered through their central role in creating the therapeutic relationship and the music experience. The therapeutic goals are often related to connecting to the self: self-esteem, self-identity, and self-expression. Quality of life and empowerment are also important considerations (Schwabe, 2005). At times it is a matter of simple changes in language; for example, at the facility at which I provide music therapy services, the residents are not labeled as
“patients” but as “neighbors.” There may be no right or wrong designation, but this was a conscious choice in order to promote community and belonging.

I also very much agree with Aigen’s (2005) thoughts on music-centered music therapy. Here, musical expression and experience are at the forefront of therapy, as “the mechanisms of music therapy process are located in the forces, processes, and structures of music” (p. 51). Some of the residents with whom I work have treatment plan goals relating to musical participation, whether it be songwriting, improvising, learning a new instrument, or returning to an instrument played in their youth. Most of the time these carry secondary neurobehavioral or socioemotional goals, but the therapy is contextualized by the music experience itself.

It is interesting now to look back on my professional development throughout my time as a music therapy student. In a paper I wrote three semesters into the program, I did mention my interest in humanistic, resource-oriented, and music-centered approaches, but I also specifically mentioned Neurologic Music Therapy (NMT) as being what I thought was cold and separative. It was not until I participated in the NMT training that I changed my opinion. NMT does emphasize that it is a standardized research-based methodology, and can also likely be classified as outcome-oriented. However, it also embraces the undeniable connection between music and the brain, that the neuroscience behind music perception and production is indicative of its use in neurorehabilitation (Thaut, 2018). Because music is seen as driving the change, it could be argued that NMT is a “music as therapy” rather than “music in therapy” treatment methodology.

**Clinical Context**

I am a music therapist working full-time in an adult neurorehabilitation setting, primarily serving individuals with brain injuries. My facility provides acute and long-term inpatient care,
and as such my caseload consists of residents who have varying lengths of stay, diagnoses, and clinical needs. Residents completing the neurorehabilitation program attend classes and groups along with their therapies specifically designed to target their cognitive, behavioral, and physical needs, with the ultimate goal being community re-entry in the least restrictive environment. In an average five-day work week, I have five individual sessions per day and three group sessions per week.

In my facility, music therapy is located within the rehabilitation department. Music therapy treatment occurs both as a singular discipline alongside physical therapy, occupational therapy, and speech therapy, and at times occurs in co-treatment sessions with these other therapies.

Prior to starting this position, I had no clinical music therapy experience within neurorehabilitation. I also had very little experience working with adults. I spent the first few weeks of my employment shadowing my supervisor before taking some of her caseload, and soon after, taking on new referrals. I completed the Neurologic Music Therapy training to supplement my approaches and utilize NMT techniques when appropriate.

**Literature Review**

**Arts-based Research**

Arts-based research emerged in the 1980s and 1990s within social work, education, anthropology, and creative arts therapies research (Leavy, 2017; Viega & Forinash, 2016) and has since accumulated various definitions and approaches. McNiff (2008) defines ABR as “the systematic use of the artistic process, the actual making of artistic expressions in all of the different forms of the arts, as a primary way of understanding and examining experience” (p. 29).
Viega and Forinash (2016) see ABR as “an umbrella term that includes the use of the arts as a research method—where the art forms are primary in the process—and as an overall methodology—where a creative worldview forms the philosophical foundation for an inquiry” (p. 981). Art forms including but not limited to literary, visual, multimedia, multimethod, and performative forms, wherein music may fall, may all be utilized (Leavy, 2017). ABR continues to expand and shift within the literature, as it “allows for a continuum of experience and engagement” (Kellier, 2019, p. 21).

Leavy (2015) notes that arts-based research can be “particularly useful for research projects that aim to describe, explore, or discover” (p. 21). Utilizing the arts—in this case, music—in research related to music may help to contextualize, analyze, and present phenomena in a natural yet creative manner. Leavy goes on to say that music grants researchers a unique way to “get at and express a multiplicity of meanings, or layered meanings, not communicable in other forms” (p. 133). As researchers undertaking ABR are encouraged to shape their studies around their investigative and aesthetic interests, the following studies highlight the diverse presentation of ABR within music therapy research; arts-based self-studies are also examined.

**Arts-based research in music therapy.** Considered the first example of ABR in music therapy, Austin’s (2016) study “Grace Street” began in 1991 as an investigation of the experiences of people attending Alcoholics Anonymous (A.A.). Austin incorporated the arts throughout her research, using journaling, poetry, and songs while observing meetings to develop her research question and collect data, analyzing the data with themes that were then turned into songs and representative characters, and finally synthesizing it all in her musical play “Grace Street.” The research question shifted throughout the early stages of her study, beginning
with Austin’s self-noted bias in favor of A.A.: “What’s healing about the A.A. recovery process?” (p. 14); after receiving feedback from the group members, she moves to a more neutral exploration: “What’s going on here?” (p. 15); finally, after ongoing observation and establishing what was of interest to her, her question becomes “What keeps people coming back to A.A.?“ (p. 15). Austin remained flexible and allowed the research to shape her questioning, rather than the other way around. Austin also allowed herself to become part of the research as her observations continued, noting that her own intrinsic responses to the meetings in the form of songs, monologues, or poems were additional components of her data collection. Her data collection and analysis happened concurrently and naturally as her meeting and interview notes generated “art forms that contained insights and meaning that led to a more in-depth understanding of the material” (p. 15). As Austin pored over her data, themes arose that then created characters and songs in what became “Grace Street”. Austin noted that the resulting medium of musical theater was chosen because of its alignment with her personal aesthetic sensibilities, its expressive and engaging presentation for the research audience, and its capability for synthesis of the written notes, music, and monologues collected as data. “Grace Street” stands as a benchmark for ABR in music therapy, and the research itself continues to evolve with each iteration of the performance.

As an example of ABR in current music therapy research, Kelliher (2019) explored the therapeutic relationship between client and music therapist through verbal and musical journals gathered over two sessions. Kelliher himself is the therapist, and chose a client with whom he experienced strong countertransference. Similarly to Austin (2015), Kelliher included elements of his personal and professional interests to inform the research, notably his emphasis on music
and relationships and his use of music-centered music therapy that both contributed to an 
arts-based research design. The main research question focused on how songs created from the 
reflexive therapist and client journals reflected lived experiences within the therapeutic process. 
After each session, Kelliher recorded his impressions as an improvisational musical journal, and 
asked the client to record his impressions verbally through speaking, singing, and/or rapping. 
The journals were then listened to, examined, and transcribed by Kelliher; themes were 
explicated from his own musical journals, while words and phrases from the client’s journal that 
elicited strong reactions from Kelliher were noted. This data was structurally corroborated by 
editing the verbal and musical recordings into one song for each session. Kelliher then analyzed 
the songs in the context of the relationship between the music, or the therapist, and the lyrics, or 
the client. The song creation and analysis allowed Kelliher to gain greater insight into his work 
as a music therapist and his relationship with his client, and playing the finished songs for the 
client heightened their musical and verbal processing in the following sessions.

Ledger and McCaffrey (2015) published a reflection on ABR development in music 
therapy, explaining its diverse presence and sharing recommendations for future ABR in music 
therapy. In their own review of music therapy studies employing ABR, the authors found a range 
of research topics, purposes, theoretical and epistemological views, and artistic media. They 
noted, however, that music was the most favored medium in these studies. Based on their 
findings, the authors offer these questions for music therapy researchers considering ABR:

“1) When should the arts be introduced?
2) Which artistic medium is appropriate?
3) How should the arts be understood? and
4) What is the role of the audience?” (pp. 445-446).

While there are no right or wrong answers, these questions may be helpful to those looking to embark on ABR projects for the first time, especially considering the subjectivities within ABR. The authors do argue that, while beginners may benefit from a more streamlined definition of what ABR should be, those very definitions would in fact hinder the creative possibilities of the research. Additionally, the authors propose the designation of ABR as a “flexible research strategy” (p. 453) to promote inclusivity of various theoretical perspectives. In order to maintain transparency and best allow for reader evaluation, the authors lastly suggest that music therapy researchers implementing ABR fully explain their design choices, epistemological and theoretical orientations, rationale for study and chosen media, and views on their created art. In this way, researchers involved in ABR utilize its inherent flexibility and creativity in their work while having general considerations to follow along the way.

**Arts-based self-studies.** In a reflection upon her 2009 arts-based self-study, Schenstead (2012) examined the intersections of her arts-based and heuristic research approaches to create a method of data analysis that she called “arts-based reflexivity” (p. 2). This analysis consists of engagement with the raw artistic data, responding to the data through new art creation, and synthesizing all components together. Schenstead’s original study began as an inquiry into the clinical potential of the flute in music therapy, specifically through her experiences with flute improvisation. Her journal entries about her experiences, recorded after each of the 25 improvisations, served as the main source of data. The data was then analyzed and synthesized into a performance piece using music, poetry, artwork, and personal reflections to display the stages of her improvisatory process. While Schenstead maintained her speculations into the
clinical applications of flute in music therapy, she also fully embraced the deeply personal responses being fostered through her improvisation experiences. In this way, the research focus expanded to allow for the self-referential questions that were emerging. Schenstead’s data analysis through arts-based reflexivity facilitated this self-exploration because it allowed her to select pieces of data and ask questions such as, “Why are they meaningful? What does this mean to me now?” (p. 5). Interactions with the data through poetry, creative writing, drawing, and dancing contributed to a more complete representation of her personal experience, and at times resulted in very poignant encounters; Schenstead noted a drawing of herself holding her musical self that elicited a strong emotional reaction and later served as a key part of her results. After completion of the original study, Schenstead continues to engage with the material and recognizes its unremitting source of knowledge as well as the “timeless nature of arts-based research” (p. 9) as a whole.


1) ABR fosters reflexivity through the artistic perspective being utilized;

2) Art “can help capture the ineffable, the hard-to-put-into-words” (p. 11);

3) Additional context provided through art may allow the audience to more deeply resonate with the researcher’s work;

4) ABR studies “involve embodiment and provoke embodied responses” (p. 11); and
5) Art engages with the public and leads to a participatory process in research, allowing feedback from the audience to further influence the study.

Finally, Weber offers that arts-based self-studies are iterative in nature, that they produce a ripple effect both for the researcher and the reader often leading to subsequent self-studies. This may demonstrate the potential importance for arts-based self-studies in the literature in order to inspire additional research.

**Reflexivity**

Reflexivity is defined by Bruscia (2015) as “the ongoing and continual focus of one’s consciousness on all aspects of one’s work with clients, along with modifications of the work as necessary” (p. 10). This can be understood as an umbrella term that includes forms of self-awareness involving countertransference and authenticity. Reflexivity can be practiced through self-observation or meta-perspective in the moment, self-inquiry or reflection, collaboration with the client to shape the therapeutic process whenever possible, consultation with others involved with the client, and supervision from a qualified music therapist.

There are some examples in the literature of music therapists conducting reflexive research in order to better understand various phenomena in their work. After a particularly intriguing experience with a spontaneous music therapy group, Delaney (2015) chose to seek clarification through reflexivity. With narrative reflection of the experience and examination of her personal and professional context, Delaney was able to develop insight as to why this impromptu experience of shared musicing was meaningful and what it implies for further music therapy work. Sokira (2007) studied her work with children with Rett Syndrome and her interpretations of their communicative behavior. After recording sessions and transcribing
instances of communication, Sokira analyzed her interpretations and gained an increased awareness of her therapeutic process and clinical interactions. Devlin (2018) and Freeman (2018) both classified their reflexive studies as autoethnographic research, utilizing elements of narrative storytelling to both explore and express their challenging experiences as new professionals. Freeman specifically notes that those who engage in inquiry through describing and analyzing personal experiences are “vulnerable researchers” (p. 39).

McCaffrey and Edwards (2015) highlight the potential of arts-based approaches to strengthen researcher reflexivity. In leading a focus group aimed at better understanding the personal experiences of music therapy service users, McCaffrey responded to a piece of art created by a group member through an original song creation. Focus group transcripts and reflexive researcher journal notes recorded after each group were consulted and explicated for data. The resulting original song was a combination of the artist’s own words and McCaffrey’s responses forming the song lyrics, and music composed to purposefully reflect her interpretation of the artist “in a manner that would increase the understanding of the song’s narrative, the lyric’s semiotic meaning, and the emotional content of the lyrics” (pp. 525-526). McCaffrey noted that her understanding and appreciation of the artist’s experiences in music therapy, as well as her view of those who seek out music therapy in general, was enhanced by the compositional process.

**Therapeutic Songwriting**

Baker and Wigram (2005) define therapeutic songwriting as “the process of creating, notating and/or recording lyrics and music by the client or clients and therapist” (p. 16) to address the client’s therapeutic goals. According to Baker (2015), the use of therapeutic
songwriting within music therapy has grown since the 1990s, becoming especially prominent within the literature in the last decade. Songwriting is noted for its strength in therapeutic settings due to its versatility, connection to culture, collaborative nature, combination of language and music, and capacity for emotional expression, among other things. The overall intervention of therapeutic songwriting can be categorized by methods emphasizing lyric creation: fill-in-the-blank, song parody, strategic songwriting, and rapping over pre-composed music; methods emphasizing lyric and music creation: rapping or singing over original music, song collage, and improvised song creation; and methods emphasizing music creation: mash-up, pastiche and hodge podge, and original songwriting within known structures such as a familiar musical form. There are both indications and contraindications for each method, but the variety of options allows the therapist to decide which method would be appropriate for their work.

A review of the use of therapeutic songwriting within the music therapy profession was conducted in two parts by Baker, Wigram, Stott, and McFerran (2008; 2009). A review of the literature was completed and compared with responses from surveyed music therapists. The range of responses from both the literature and survey results represented therapists from North America, Australia and New Zealand, Europe, and Asia working in oncology and palliative care, developmental disability support, mental health, older adult care, and neurorehabilitation settings. Depending on the clinical context, songwriting interventions were used at least once a week and primarily addressed goals relating to self-confidence and self-esteem, identity, emotional expression, and choice making. Interventions were most frequently used in individual therapy sessions and the completed songs often retained therapeutic function after completion, with copies of the song being shared with the client or sometimes performed by them. As there
were some discrepancies between literature results and survey results, the authors state that more research delineating the use of therapeutic songwriting in music therapy would offer clarity into the context in which songwriting interventions are used.

Baker (2013) surveyed music therapists to evaluate the role of music creation in therapeutic songwriting, as research tends to focus on the process of lyric creation and analysis. Three themes emerged: music has the power to convey messages and emotions and increase understanding of the lyrics or provide meaning where lyrics may not; creating music supports the therapeutic process and offers an additional mode of expression; and creating music in a preferred style fosters self-connection and communicates the client’s own sound.

Therapeutic songwriting can be beneficial in exploring and expressing the self. Baker (2017) has developed a group therapeutic songwriting protocol for use with caregivers of people living with dementia, aimed at exploring self-identity as well as coping strategies and overall well-being. This protocol draws on insight-oriented, narrative, and psychoeducational songwriting approaches to reframe caregiver experiences, to reconcile changes in identity, and to establish healthy coping practices. Tamplin, Baker, Macdonald, Roddy, and Rickard (2016) developed a clinical protocol for using therapeutic songwriting to promote self-integration in people with acquired brain injury and spinal cord injury. The researchers consider self-concept to consist of the physical, personal, social, family, academic or vocational, and moral or spiritual self. These domains are explored through the therapeutic songwriting process to develop one song each representing the songwriter’s past, present, and future. The researchers posit that the process of creating these songs—sharing life stories, exploring feelings, expressing creatively through music—allows the songwriter to begin to integrate their pre-injured self into their
present self and overall lead to a more positive self-concept. Research involving therapeutic
songwriting and self-identity, specifically with this population, may be of particular interest in
current literature (Baker et al., 2014; Baker et al., 2017; Viega & Baker, 2017).

Songwriting interventions have been included in arts-based research as a tool for
researchers to engage with clients’ creations in music therapy and to deepen their understanding
of client experiences through analysis and researcher response (McCaffrey & Edwards, 2015;
Viega, 2016; Viega & Baker, 2017). Fairchild and McFerran (2019) also denote their use of
group songwriting in an arts-based study working with children experiencing homelessness and
family violence. In this case, songwriting was used both for the researchers to examine the
children’s experiences and resources through an arts-based approach, as well as a medium of
expression for the children themselves. The researchers highlight the collaborative aspect of this
study.

Vulnerability

The literal definition of the word vulnerable is “capable of being physically or
emotionally wounded” (Vulnerability, n.d.). Brown (2012) provides an alternative definition of
vulnerability as “uncertainty, risk, and emotional exposure” (p. 34) in an effort to dispel the
connotation of weakness. Brown has researched concepts of vulnerability and shame in order to
understand and articulate complex human emotions. The author developed a grounded theory
explaining common experiences of shame among women (Brown, 2006). Interviews with 215
women discussing perceptions and management of shame were analyzed. The emergent
definition of shame relates to intense personal feelings of being flawed and unworthy of
acceptance, and the emergent theory was deemed shame resilience theory (SRT). SRT proposes
that “shame is a psycho-social-cultural construct” (p. 45) and that shame resilience is informed by “the ability to recognize and accept personal vulnerability” (p. 47). Further, this creates a vulnerability continuum; someone with a high level of awareness of personal vulnerabilities will likely demonstrate higher shame resilience and will actively seek out support for their feelings. Conversely, someone who does not acknowledge their personal vulnerabilities will likely experience intense emotional reactions when confronted with shame.

Perhaps the subjective nature of vulnerability dissuades researchers from fully engaging in its study. Research clearly examining emotional vulnerability is seemingly rare in the literature. This is further impetus for conducting studies exploring vulnerability and particularly for utilizing a reflexive arts-based method that embraces subjectivity and self-learning. With this in mind, this project studies personal experiences of vulnerability using the following guiding questions: How does vulnerability manifest in me? What other feelings arise when embracing vulnerability? How can I empower myself through reflexive songwriting personally and professionally?

**Method**

**Design**

This is an arts-based self-study project utilizing therapeutic songwriting approaches to explore my personal experiences of vulnerability as a first-year music therapist. In order to embrace “openness to the spontaneous and unknown” (Leavy, 2015, p. 20), I framed my project design in ways that encouraged natural exploration and emergence of meaning.

I considered the definition of vulnerability offered by Brown (2012)—uncertainty, risk, and emotional exposure—and found myself resonating with these words. Looking back on my
first year of work, these feelings of vulnerability have emerged in interactions with residents, staff, and even in my own inner thought process. I added feelings of perceived inadequacy and loss of control to supplement this definition and to better represent my experiences. I am mostly aware of my feelings in the moment but do not often process them after the fact. Adopting a stream-of-consciousness style of writing, I reflected on these experiences by allowing myself to write down whatever words came to mind, acknowledging that “the emerging words prompt new or changed thinking” (Cowan, 2010, p. 110).

I then listened to music that I believe engages with and showcases vulnerability, namely songs by artists Courtney Barnett and Margaret Glaspy. I listened to each song two to three times with headphones to fully immerse myself in the sonic space and took notes of musical and lyrical elements to which I found myself being drawn. I also attended to how my body was reacting in a manner similar to that of body listening. Bonny (2002) describes this as “feeling music within the body first, and then letting the body express that feeling through music” (p. 175). I allowed myself to move freely to the music, as well as observing bodily sensations as they were occurring. The compiled notes informed my songwriting process as examples of how I might express and emphasize vulnerability musically.

I utilized the notes from my listening to explore musical sensibilities on guitar and recorded ideas along the way. I then returned to the data generated from the stream-of-consciousness writing and chose responses that I deemed salient to formulate lyrics. In efforts to honor my authentic thoughts, responses from the writing were included verbatim or only slightly altered within the lyrics. Alterations were chosen in regards to aesthetic considerations of lyrical prosody, rhyme, or form. New lyrics were also formulated to weave
Artistic Materials

**Referential music.** The songs “Everybody Here Hates You” by Courtney Barnett (2019, track 1) and “Black is Blue” by Margaret Glaspy (2016, track 12) were chosen as examples of music exhibiting vulnerability. I have long admired both artists for their deeply personal songwriting approaches, and selected one song each that I felt best demonstrated their expression of vulnerable feelings.

In “Everybody Here Hates You” (Barnett, 2019, track 1), I noted the simple harmonic container, mostly pivoting between two chords, that seem to leave room for expression through the lyrics and overall musical style. There is a definitive drive to the song maintained through the distorted guitar and pulsing drums. I felt myself attuning to this drive, with my legs bouncing almost restlessly and soon my whole body swaying along. My arms raised and were alternating between drumming along and shaking my fists in triumphant agreement. I was free to move but felt a tightness in my neck and shoulders. The music was already quite loud in my headphones, but I had an urge to turn it up even louder, to drown in the sonic bath of the song. Barnett sings with a raw edge and natural expression, almost speak-singing at times. The lyrics feature personal honesty, with many of the lines beginning with an “I feel” statement. As the lyrics shift in perspective, the music follows suit; notably, the addition of vocal doubling on lines being sung to or with the first-person narrator (i.e., “You say” or “We’re gonna tell everyone”), and the change in rhythm when the narrator changes from “I” statements to “everybody” statements. I
felt most drawn to three lyrics: “I feel toothless,” “I’m getting used to it these days”, and “I feel strange”.

“Black Is Blue” (Glaspy, 2016, track 12) contains some similar elements, namely the distorted guitar and somewhat simple instrumental structure. The pulse is laid back and allows for a natural flow of vocals and guitar riffs throughout the song. Glaspy’s vocals are melodic but contain moments of rawness, almost growling on some words. The lyrics are observations the narrator has made about their life. Some of these are seemingly negative (i.e., “A baby’s crying and it’s my fault”; “I’m colorblind, yes I just found out black is blue”; “I worry about my health”) but there is no sense of urgency in the delivery, as if to say the narrator has accepted these realizations. I did not notice any real tension as I listened, and in fact I felt my body opening along with this acceptance. I felt most drawn to five lyrics: “My shoes are untied and I’m an adult”; “I talk to myself”; “I thought I was doing fine”; “There’s been no time, there’ll be no time to be broken-hearted”; and “They’re talking again, I got no friends”.

Stream-of-consciousness writing. I chose to write on pen and paper, rather than on a computer, as I felt more of a complete connection from my thoughts to my hand to the pen on paper. Thinking and writing became one fluid motion. Cowan (2010) also notes that those who choose to utilize pen and paper rather than computers often feel an “increased impact on reflective thinking when the writing operation progresses slowly in recording their current thoughts” (p. 111). I explored various ways of formatting in each subsequent round of writing. In the final rounds, the writing turned into something closer to concrete poetry, where space is deliberately used to draw attention to specific words or phrases. In this way, this method of data collection is considered another medium within an arts-based research approach.
Composition and recording. I chose guitar as my main compositional instrument because it is the one to which I feel most strongly connected. Most, if not all, of my songwriting occurs with guitar in hand. I specifically used acoustic guitar due to the sense of grounding and support I feel from its resonant body. Any other compositional instruments were chosen as the music developed, and were played through GarageBand software if I did not have access to physical instruments.

Recording and arranging of the music was completed with the GarageBand iOS app, using an external Samson Meteor USB microphone to record voice and guitar. A Honeytone N10 mini amp was used with the guitar when overdrive was desired. Tracks were further manipulated and mixed within GarageBand to achieve intended sounds and textures.

Data Generation

Initially, I organized my stream-of-consciousness writing by reflections on my experiences as a music therapist facilitating group sessions and one-to-one sessions respectively. I wrote a list of words, phrases, and questions for each setting, allowing whatever responses came into mind to be notated on paper. When one set of responses was deemed finished, the second set was written on the back of the same page to avoid comparison of words. This was completed three separate times, with at least one day between each round of writing to allow for authentic responses. In the third round, I thought more broadly about my experiences at work and the overall process of this writing endeavor. This resulted in three pages of responses. The pooled responses were only compared after the last round of writing was complete.

I explored the completed songs through affective engagement and questioning such as: How do the composed music and words contribute to a sense of vulnerability? What does the
finished product evoke for me? Does it enhance my understanding of vulnerability? How can I engage with these results moving forward?

**Emergent Art**

Personal responses from the stream-of-consciousness writing are presented and explicated in relation to the aspects of vulnerability understood in this study: uncertainty, risk, emotional exposure, perceived inadequacy, and loss of control. From the responses collected in this writing, two songs were created. The recordings of these songs are provided ([https://soundcloud.com/user-600106760](https://soundcloud.com/user-600106760)) and should be played while reading through the included lyrics.

**Personal Responses**

In the stream-of-consciousness writing, I focused on my feelings of vulnerability in interacting with residents and staff, and my inner thought process. It should be noted that these feelings do not occur in every session or interaction, but rather the intermittent and unpredictable occurrence of these feelings is what motivates this exploration. Group sessions are often held in unit common areas, and staff may talk over the session while they are passing through the area. Well-meaning staff may jump in and offer comments about the “fun music group” or encourage residents who they deem are not participating. I am even referred to as “the music lady” or “the music teacher” in some offhand comments. Meanwhile, I notice that when residents become distracted, I become worried that I am losing control of the group and doing or saying something wrong. In individual sessions, I feel strong countertransference with the residents who are musical and grappling with their change in abilities post-injury. When there is a communication
barrier interacting with residents with aphasia or disorders of consciousness, I notice my budding
doubt and worry that I am not reaching them or doing enough for them.

I reflected on all of these feelings and freely wrote my thoughts in the form of words,
phrases, and questions. Figures 1 and 2 display the responses recorded during the first writing
round.
Figure 1. First writing round, responses to group session experiences.

- talked over
- looked down on
- smile
- look past me
- try to fix me
- take control
- take attention
- just for fun
- something to do
- disconnected
- distractions
- am I choosing all the right things?
- what makes me better?
- should I be better?
- equals
- change
- difference
- Imposter syndrome.
Figure 2. First writing round, responses to individual session experiences.

The responses in Figure 1 are in regards to staff (“talked over,” “just for fun,” “something to do”), resident (“disconnected,” “distractions”) and self-doubt (“Should I be better?”, “imposter syndrome”). These responses most closely align with uncertainty, perceived inadequacy, and loss of control. The responses in Figure 2 are about or directed towards the resident (“want you to
grow,” “resistance,” “differences”) and my inner thought process in terms of self-doubt (“Am I pushing too hard?”, “Am I too informal?”, “Am I projecting?”) and reactions within a session (“intensity,” “sensitive,” “here and now,” “freeze”). These responses most closely align with emotional exposure, in that my emotional reactions are being drawn out and not covered up, and perceived inadequacy. Both sets of responses share the words “change” and “difference(s)”; the latter is used in terms of both making a difference and acknowledging differences between people.

After the first writing round, I waited a day to continue and allowed my thoughts to settle in order to preserve authenticity. Figures 3 and 4 display the responses recorded during the second writing round.
did I say the wrong thing?
am I too impatient?
I want to help foster growth
not just for fun
but real change
fulfillment
to activate and actualize

I'm young
but I have wisdom and strength.
I worked to be here and I'm here to work.

Figure 3. Second writing round, responses to individual session experiences.
Figure 4. Second writing round, responses to group session experiences.

For the second round of writing, I explored the use of space, writing throughout the entire page rather than in list form along one side. The staggered writing inherently provided emphasis to certain words (“foster growth,” “fulfillment”, “strength” from Figure 3; “togetherness”, “experience”, “without worry” from Figure 4). I chose to write in a more narrative train of
thought to authentically include my inner monologue. I continue to question myself (“Did I say the wrong thing?” in Figure 3; “Are you interested?” in Figure 4) and repeat the words “change” and “help” from the first round of writing. The responses in Figure 3 function almost as self-talk, and I worked through self-doubt (“Am I too impatient?”) to reassurance (“I’m young / but I have wisdom / strength”). These responses most closely align with uncertainty and emotional exposure. The responses in Figure 4 are in regards to group experiences, but rather than solely framing them in separative “I” and “you” perspectives, the narrative involves a gathered “we” perspective. At this point in the process, I had begun to acknowledge my focus on myself, and I became uncomfortable with the weight I give to what I may or may not be doing versus what all participants may be doing together. I consider these responses to most closely align with emotional exposure and risk, in that each time I open up a session to try new interventions or even just to allow for a spontaneous flow of experiences (“we can create something / an experience; “a moment where / we can just be”), I risk failure, disinterest, or perhaps even embarrassment felt by myself or any other participant.

I waited two days before continuing to write and tasked myself to stay fully present with my thoughts and reactions in this time. Figures 5, 6, and 7 display the responses recorded during the last writing round.
doubt.

being seen

are you watching me?

being heard

are you listening to me?

me

me

me

you

am I truly with you?

am I reaching you?

stop

and just be

Figure 5. Third writing round, first page of responses.
In the third and final writing round, I felt myself coming to terms with the pervasive self-doubt expressed throughout these writings. I moved away from evaluating experiences by group or individual sessions, and instead examined my experiences at work as a whole. The responses in Figure 5 continued to address the balance of focus between myself and the people

Figure 6. Third writing round, second page of responses.
TO KNOW MY INSECURITIES IS TO KNOW ME

with whom I work. And even beyond that, I shifted from asking them to give me attention (“Are you watching me?”) to asking myself to give attention to them (“Am I truly with you?”). Above all, I sought to quiet my doubtful thought pattern (“stop / and just be”); this is reinforced by this response’s smaller word count. The responses in Figure 6 served as advice for myself as I decided how to integrate these feelings of vulnerability (“breathe,” “contain,” “sing”), most notably to allow myself to feel them deeply in the first place rather than shying away from them. When I wrote the word “feel,” I immediately drew a thick box around it. I wanted to highlight its importance while also reminding myself to continue moving forward in my inquiry. This begged the question in a subsequent line, “Is it enough to acknowledge?” There was no clear answer to that question at that point, which is illustrated by the dotted line pointing me towards whatever comes next, but my goal was to work towards an answer through introspection (“strive to know me”). The responses in this round most closely align with uncertainty, emotional exposure, and risk, as continuing into a deeper self-inquiry would likely stir uncomfortable emotions along the way.
TO KNOW MY INSECURITIES IS TO KNOW ME

Figure 7. Third writing round, third page of responses.

The response in Figure 7 became a sort of addendum to the entire writing experience, and should be read as one fluid thought despite lack of punctuation. It is not so much a summation of what I learned about myself, but rather a mantra of sorts to employ when I notice myself...
experiencing feelings of vulnerability. Formatting was chosen purposefully to support the words used (“take up space”, “LOUD”).

After reviewing each page of responses, I began to organize them by those that relate to doubt or frustration and those that relate to reassurance and introspection. I chose not to highlight or reorder the responses as they were written, but instead to allow myself to pick out pieces as I was drawn to them and match them with complementary lines. The first song, “Impostor Syndrome”, came together quite quickly.

**Impostor Syndrome**

- Did I say the wrong thing?
- Why can’t I just let it be?
- I don’t want to answer my own questions
- Cuz I’m afraid that the problem is me

- Am I too impatient?
- What is it I can’t see?
- I get lost in my own head
- Someone bring me back to reality

- Let’s not take this for granted...

- Are you interested?
- Is it good?
- Are you listening?
- Understood?

- Am I pushing too hard?
- What am I trying to do?
- They keep talking over me
- I’m just trying to grow with you

- Am I choosing the right things?
- Well, what is right to you?
- Disconnected and feeling the distractions
I’m fumbling for the glue

I worked hard to be here, and I’m here to work...

Are you interested?
Is it good?
Are you listening?
Understood?

Our differences
Make it good
Togetherness
It’s understood...

**Songwriting process.** I was intrigued by my constant use of questioning throughout each round of writing. In isolating the questions, I noted how many of them had similar syntax and seemed to naturally fit together; some even rhymed without any manipulation. From there, I chose words from the responses that I wanted to utilize (i.e., “reality,” “disconnected,” “distractions,” “talked over”). I noticed the organic flow of ideas and the theme beginning to emerge as I arranged lyrics together. Formulating new lyrics to bridge the gaps came very easily. It felt as though I was venting to a confidant as I crafted a song that showcased my inner monologue while leading a difficult session.

In the first round of writing, I included the response “impostor syndrome”. I was almost surprised that I wrote this on the paper; it is something that I may have thought about fleetingly in the past but never really considered in depth. Impostor syndrome, or imposter phenomenon, is the experience of feeling incompetent and believing that one’s success is due to external circumstances such as luck or charm rather than skill or talent (Langford & Clance, 1993). Interestingly, impostor syndrome was first regarded in “highly successful female college students...
and professionals who, despite their accomplishments, were unable to internalize a sense of
themselves as competent and talented” (p. 495). Looking back on my first full year as a
professional music therapist, I have had many moments of feeling incompetent that I believe go
beyond the initial learning curve of the job. At times I have felt worried that the post-hire glow
would wear off and others would realize I was actually unqualified. All of this is in spite of my
awareness that I have completed a graduate music therapy program, earned board-certification,
attended trainings, and worked hard for almost four years to be at this point. This song seems to
summarize the ongoing battle between self-doubt (“Am I choosing the right things?”) and
self-assurance (“I worked hard to be here, and I’m here to work”).

I was very inspired by the simplicity in musical structure demonstrated by Barnett (2019)
and Glaspy (2016) and landed on a repetitive four-chord progression of D major, C major, F
major, and G major that act as a container for the lyrical content. I used overdrive effects on both
guitar and vocals, distorting the natural sounds to give a raw edge to the song and add to the
frustrations being expressed. The pre-chorus lines, “Let’s not take this for granted” and “I
worked hard to be here, and I’m here to work,” are accentuated by a single A bass note that
breaks up the progression and leads into the driving chorus. These are perhaps my favorite lines
in the song, the two lines that incited the strongest reaction from me, and I wanted to give them
space to really be heard. I marked the change in perspective in the last chorus (“Our differences /
Make it good”) by doubling my vocals. When it came time to add other instrumentation, I
initially felt nervous; I am inexperienced with arranging for drums, bass, and piano, and I tend to
avoid doing so when I write my own songs. Instead I leaned into my nervousness and challenged
myself to arrange at least one track for each of these instruments. I kept the bass line simple,
mostly following the root notes of each chord, but experimented with various rhythms or passing notes throughout. I enjoyed experimenting with the drum sequencer on GarageBand, and I was able to compose basic patterns for the verse, chorus, and transition sections by easily switching various drums on and off each beat until I heard something I liked. I assumed I would complete the piano track by adding pedal notes underneath everything else, but I actually wrote two melody lines that were inspired by overtones I heard in the guitar recording. I used the first take for most, if not all, of the tracks; I wanted to champion the imperfections that I would normally expend extra effort to correct.

After feeling like the song was complete, I reflected with the following written response:

*It feels good, first of all, to have something done. I cannot remember the last time I wrote a song in one sitting, even a barebones sketch like this. It also feels really good to put these questions out there, things that have been floating around in my head whether I acknowledged them or not, and validate them. Just because they are insecurities does not mean I should ignore them. I have to accept them before I can work on them and move past them. How many times do I tell other people that, and how many times do I actually do that myself?*

*I felt a warmth while singing this, I think partly feeling the vibrotactile response from the guitar sitting against my chest, but also from hearing the words being sung. It felt really honest. At one point I felt like I might cry. I can tell there will be a lot of cathartic release while I continue developing these songs.*

[On writing and arranging additional instrumentation] I am tapping into a creative side I am not sure I have seen before. I am hearing things in the music that I
normally have a very difficult time hearing, finding arrangement and instrumentation like I was pulling it out of the air. I am dancing along before I even realize it... dancing along to a song about insecurity and self-doubt. It is accessible and even inviting.

Writing this song had a very energizing effect on me. I found myself excitedly arranging lines together and following a refreshingly coherent flow of ideas. It had been a while since I had fully written out a song and an easily finished product following a long period of writer’s block was a great self-esteem boost. At the same time, I was hesitant about completing the instrumental portions because I was not confident in my compositional skills, and perhaps was feeling even more pressure to create something worthy of accompanying the lyrics and melody that I had written. Feelings of vulnerability like uncertainty and perceived inadequacy were lingering close behind as I worked to compose the drum, bass, and piano parts; my inner thought process seemed preoccupied with the desire to create music that was aesthetically pleasing and could be deemed admirable by the listener.

Analysis. When affectively engaging with the song, I felt myself tapping my feet and nodding my head within the first few notes. I attuned to the raw vocals and felt a scowl form on my face. I also noticed my ear searching for parts that are more hidden in the mix, wondering if I had edited everything properly while simultaneously realizing I was perpetuating the self-questioning occuring in the lyrics. I relaxed and tried to appreciate the whole soundscape. The harshness of the vocals and instrumentation might juxtapose the insecure nature of the lyrics, but here I think it contributes to the complexity of vulnerability; that oftentimes one hides insecurities behind a tough persona.
Admittedly, I really like the song aesthetically. I find myself listening over and over again when normally I feel uncomfortable listening back to my own voice. The song evokes a sense of strength for me, as I am reclaiming my apprehensive thoughts as an agent for self-learning. I realized that feelings of vulnerability, like uncertainty and perceived inadequacy, can coexist alongside feelings of confidence. I can return to this song when I might be doubting myself as a reminder that these thoughts and questions are natural but not necessarily negative.

**Breathe**

As “Impostor Syndrome” incorporates responses relating to doubt and frustration, I wanted to explore the responses relating to reassurance and self-insight. These responses resulted in a song entitled “Breathe”.

*Breathe*
*It’s okay to slow down*
*Feel*
*It’s okay to let it out*

*Sing*
*It’s okay to take up space*
*To be kind, but loud*
*To show my worth, and be proud*
*To know my insecurities*
*Is to know me*

*Contain*
*But you don’t have to hold it in*
*Maintain*
*It isn’t always sink or swim*

*Listen*
*To the truth inside the din*
*I am more than just my thoughts*
*I am more than just my doubts*
*I have knowledge to impart*
I acknowledge my heart

What is next?
What is next?
Forge ahead
Stay vigilant

Strive for growth
Find clarity
Stop
And just be

Breathe
Breathe

**Songwriting process.** In the last round of writing, I compiled single words that felt like advice to myself; I featured some of these words throughout the stanzas to organize my thoughts, but as I continued writing I realized they were actually helping to calm the vulnerability I felt in writing so personally. I was especially drawn to the word “breathe” and began to play with melody and phrase length to create opportunities for deep breathing throughout the song. I recognize that breath is very powerful in creating a sense of groundedness, and aimed to mirror this throughout the music.

I knew I wanted to pair these lyrics with fingerstyle guitar to enhance the building sense of intimacy. I intuitively chose a chord progression by experimenting with various fingering combinations until I found something I liked. This is typically how I write fingerstyle guitar parts as I am less interested in what the chords are than what the individual notes are. In the A-section I alternate between D2 and B minor, and in the B-section I expand to include G6 and Dmaj7 as my thoughts begin to elaborate. The fluid tempo rubato further reinforces the idea of breath expressed throughout the song; initially I am picking on two beats and allowing the notes to ring
out on afterwards without keeping strict time, and as my thoughts begin to race I play a
continuous pattern. As I stop and remind myself to breathe, the accompaniment resumes its loose
pace. I explored various instrumentation ideas with piano and string settings on GarageBand, but
ultimately made the decision to keep the song bare. I wanted the song to feel vulnerable in the
sense of being exposed. Voice and guitar were recorded simultaneously in one take, no filters
were applied, and any mistakes or extraneous noises were left unedited.

I reflected on this song with the following written response:

_The song that I felt required me to be a bit more introspective was harder to_
_write. The first song came together in maybe ten minutes, as I was piecing together words_
to form very natural expressions of frustrations and questions. This song was spread out_
over a few days. I did want to take more time and encourage myself to look inward_
perhaps more deeply than I might typically feel inclined. I encouraged myself not to hide_
behind metaphors or over-edit myself, but to include my thoughts as authentically as_
possible. Even now as I am “done,” I believe the song will continue to change, shift, and_
develop with each performance. The words will require different inflections and attention_
each time._

I knew from the onset that I wanted to take ample time in writing this song and allow for
a more introspective approach, but as I dove into the writing process, I found myself feeling
self-conscious and inevitably getting stuck. While the vast majority of my songwriting pulls from
personal experiences, I tend to distance myself from the song’s narrative through metaphor or
vague references. I was not used to writing so clearly about myself and was taken aback at the
nervousness I felt. It is interesting now looking at the finished product that lines so self-affirming
as “It’s okay to take up space” and “I have knowledge to impart” felt almost embarrassing at first writing. Even though I was exploring my inner self from a positive perspective, I was feeling the emotional exposure and risk associated with vulnerability as I put myself at the forefront of the lyrics.

**Analysis.** As I listened to the song I was giving attention to my breath, feeling my body expanding, and noticing where I am holding tension. At times I was sympathetically drawing in breaths as I heard myself breathe in the recording. I appreciated the stripped back nature of the song, even the accidental noises from my chair moving or fret buzz that I would otherwise have taken great care in removing from the recording. In this song, I am exposing my most vulnerable musical self, mistakes and all. In this recording, I included an inadvertent lyric change; in the first B-section, I sing “to know my worth” instead of the written “to show my worth”. I attempted to re-record the song just to correct this one mistake, but that only resulted in more mistakes. Eventually I decided to leave it as is, wondering if this was more of a simple accident or instead an unconscious shift from valuing how others perceive me to valuing how I perceive myself.

The song evokes strong feelings of validation, that I am not necessarily ignoring what makes me feel vulnerable but I am recognizing those feelings alongside my strengths. As I discovered while examining “Impostor Syndrome,” I am coming to know that engagement with vulnerability is more than just sensing so-called negative feelings like uncertainty and inadequacy. These feelings can and should encourage deeper self-insight, and in turn empower myself to seek opportunities for growth. There is no separating the part from the whole; or, as stated in the song, “to know my insecurities is to know me.”
Reflection

Throughout this research, I engaged in deeply creative explorations of my experiences with vulnerability in my work. I recognize that the idea of vulnerability is subjective and at times vague, so in my inquiry I honed in on feelings of vulnerability including uncertainty, emotional exposure, risk, perceived inadequacy, and loss of control. Prior to conducting this research, I acknowledged when I experienced feelings of vulnerability, but in attempts to quell them I would not fully allow myself to analyze exactly how vulnerability affects me.

The initial questions that I set out to explore through my research were: How does vulnerability manifest in me?; What other feelings arise when embracing vulnerability?; and How can I empower myself through reflexive songwriting personally and professionally? I have learned that these feelings manifest in almost relentless questioning and self-doubt of my actions. I often feel mentally drained after particularly troublesome sessions. I believe these questions come from a place of merit, of wanting to do what is best for the residents, but ultimately they are counterintuitive as they take my attention away from the moment at hand. As I further inspected these feelings of vulnerability, I noticed other feelings begin to arise: a sense of pride in recognizing my strengths (“To show my worth, and be proud”) and courage in addressing things that make me uncomfortable (“I don’t want to answer my own questions ‘cuz I’m afraid that the problem is me”). I also felt particularly inspired throughout the whole process of self-reflection, music creation, and analysis. I grew to feel empowered through my written songs by reclaiming what I previously considered to be weaknesses and upholding them as necessary components of myself. By acknowledging and accepting all of the various parts of myself, I can be a more self-assured person in my work and in my personal life.
While addressing the questions that initially guided my research, additional discoveries emerged. My experiences with vulnerability may be in part a result of deep-seated anxieties that I am not owning. My feelings of vulnerability are important to acknowledge, but if they are not processed appropriately, my focus is removed from the resident and therapeutic experience at hand. I do engage in peer supervision fairly regularly, but I need to explore more direct supervision sessions and even personal therapy, as much of my self-doubt likely comes from feelings of needing more validation than I receive. Perhaps this may be a shared experience of beginning music therapists, and so it could be argued that it is imperative for new professionals to remain aware of their own experiences of vulnerability through reflexive practice.

Understanding and exploring my experiences with vulnerability may help me facilitate similar explorations for those with whom I work. These individuals have sustained brain injuries and other major health events and are grappling with the accompanying life changes. Many have expressed a damaged self-concept post-injury, and there are others who are unable to verbally process due to communication deficits. It is highly possible they experience the feelings of vulnerability examined in this project, and so may benefit from participating in songwriting involving reflexive writing, lyric creation, and/or music creation in order to clarify and express their own experiences.

Possibilities for Deepening

I acknowledge the strengths of this project in expanding my knowledge and perception of myself, and in providing myself with creative opportunities to analyze my experiences as a new professional. Part of what drew me to choosing an arts-based research design was its malleability and allowance for continued engagement over time. Especially as this was my first time
embarking in arts-based research, I contemplated supplementary design elements with the potential to deepen the inquiry and the understanding of my results, as well as to note for any future involvement in arts-based projects.

The two songs created through this research produced thought-provoking exploration, and it is likely that the creation of additional songs would have generated other threads of inquiry. Many words and ideas from the stream-of-consciousness writing were not used in the final songs and could have contributed to further lyric creation. I also could have explored the use of more physical instruments rather than solely guitar; I did enjoy learning more about composing and arranging instrumentation on GarageBand but at times felt much less expressive with this technology in comparison to real instruments regardless of whether or not I know how to play them.

I chose to primarily work with music to facilitate my exploration as I felt most grounded in this medium. It is possible that engaging in additional media with which I am not comfortable, such as visual arts or dance, could have complemented my feelings of vulnerability and added another layer to the inquiry.

**Recommendations for Future Research**

I feel very strongly that ongoing creative, reflexive practices are beneficial for music therapists, particularly new professionals. The lack of similar studies in the literature demonstrates the need for arts-based self-studies in giving transparency to and furthering the understanding of music therapists’ perceptions of their work. I found that songwriting was a well-suited medium to carry out this inquiry and it may be of interest to future researchers to
complete song cycles or albums, perhaps compilations of songs written by multiple clinicians, to expound the process and provide thorough insight.

While conducting my review of the literature, I appreciated reading studies like those by Devlin (2018) and Freeman (2018), as the authors were candid in sharing their inner thought processes and vulnerable feelings. I found myself less embarrassed of my own insecurities through reading about theirs. Additional studies involving music therapists’ vulnerabilities may be of use in normalizing these feelings and inspiring others to engage similarly, as “owning these moments is integral to reflexive thinking” (Freeman, 2018, p. 40).

Given the context of this project as a self-study utilizing reflexive songwriting to explore vulnerabilities of a new professional, I feel as though similar work would be of use in music therapy supervision for both students and professionals. It is imperative to reinforce reflexivity as a vital component of our clinical work and begin practicing these skills as early as possible. Further, I believe it is necessary to encourage early explorations of vulnerability in order to make the topic more accessible. I myself am appreciative of opportunities I had during my coursework where I was encouraged to process my feelings and reactions to my clinical placements through songwriting. I still look back on the completed songs and glean new information about my perceptions of my work and of myself; in this way, these songs function as a musical journal of various stages of my professional development.

**Closing Thoughts**

“[Vulnerability] is the source of hope, empathy, accountability, and authenticity. If we want greater clarity in our purpose or deeper and more meaningful spiritual lives, vulnerability is the path” (Brown, 2012, p. 34).
I feel simultaneously exhausted and inspired upon completion of this research project. I am certainly not used to looking in on myself so extensively. At times I felt my vulnerabilities were exacerbated simply by examining them in the first place. However, I now realize the relationship between reflexivity, feelings of vulnerability, and self-growth, even empowerment. I am grateful for music’s role in facilitating a powerful connection to my inner self. Now that “Impostor Syndrome” and “Breathe” are composed, I can employ the “timeless nature of arts-based research” (Schenstead, 2012, p. 10) through continued performance of these songs. The quest for self-knowledge never ends, but I am glad that I took this opportunity to deeply engage with such a sensitive part of myself at this pivotal time in my professional development.
References


