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**THE NEED FOR KENYAN UNIVERSITIES TO INCLUDE MUSIC THERAPHY COURSE IN MUSIC EDUCATION CURRICULLA**

**ABSTRACT**

According to Kathleen (2017), Music therapy is the use of music to accomplish non-musical goals for example music listening or song writing can be used to fulfil goals in movement, cognition, speech and language and mental health. Music Therapy is slowly gaining popularity in Kenya. The Matter hospital in South B has a music therapy programme which began in 2006 where by musicians volunteer to play music to relax and entertain the staff and patients. The Magoso School in Kibera uses poetry, acrobatic dance, drumming and gospel music to fight anxiety and other mental stress of children who have been exposed to extreme violence and poverty. A guitarist known as Mutinda Mutei uses music as a therapy for patients admitted in hospitals. From those instances it is quite clear that music therapy is slowly gaining acceptance in the Kenya. Therefore, there is a need for the discipline to be introduced as a course so that students who desire to pursue a career in the discipline can get an opportunity to do so and acquire the necessary skills required in effectively using music for therapeutic purposes.

**Introduction**

The aim of this study was to find out the importance of introducing Music Therapy as a course in the Music Curricula in Kenya Universities. Music Therapy is being practice in Kenya ‘informally’ and it has remarkable results. The research is still going on and the data presented here is the preliminary findings.

**Background information**

Music Therapy is the use of music to accomplish non-musical goals. Music listening and song writing for instance can be used to fulfil goals in movement, cognition, speech, language and mental health. It is used in the treatment of dementia, strokes and Parkinson diseases. The use of Music Therapy is believed to have ancient roots. According to David (2017), King David was the first Music therapist because as he played the Harp for King Saul the evil spirit that tormented him would departed from him and he would be at peace. In Kenya Community Centre for Learning, a school for children with special needs, they teach music with the aim of attaining non-musical goals. For instance they use music to get collective attention of the students and repetitive rhythms patterns are used to improve memory since the children are required to repeat the rhythm played by the teacher. The Matter hospital in South B has a music therapy programme which began in 2006 where by musicians volunteer to play music to relax and entertain the staff and patients. The Magoso School in Kibera uses poetry, acrobatic dance, drumming and gospel music to fight anxiety and other mental stress of children who have been exposed to extreme violence and poverty. A guitarist known as Mutinda Mutei uses music as a therapy for patients admitted in hospitals in Nairobi, Kenya.

**Objectives**

1. To find out which institutions are using Music Therapy and who in the institution is practicing Music Therapy.

2. To find out the conditions in Kenya for which Music Therapy is used.

3. To determine the gaps in music therapy practice that need attention in Kenya

4. To establish the importance of formally training Music Therapist in Kenya

**Literature Review**

1. Howland. M. Kathleen (2016, July). Music Therapy. Britannica Encyclopaedia.

The article is divided into three categories namely; the historical development, the clinical practice and approaches in music therapy.

The articles begins by describing music therapy as the clinical disciple in which music is used to address non-musical goals. It then further goes on to explain how music can be used to address non-musical goal such as music listening is used to accomplish goals in movement. The writer then states places where music therapy is used for example in nursing homes and hospices.

In the Historical development of Music Therapy, the writer states that music therapy is believed to have ancient roots since music has been part of human culture for about 42,000 years. The writer considers the ideas revolving around Music Therapy being biased since they have been done through the lens of Western ideas. Despite the fact that ideas are biased, it is evident in the article that some Music Therapy practices in the first-world have been influenced by indigenous forms of musical healing from other parts of the world such as Africa. The article that states Music Therapy gained popularity during World Wars one and two. Music Therapy was used in Hospitals in the United States of America to treat Veterans who suffer from post-traumatic stress disorder. The article also talks about the history of the formation of the American Music Therapy Association and other Music Therapy boards in the world.

In the Clinical practice the article talks about how different elements of music are used to treat different conditions. In movement disorders such as Parkinson Disease or stokes, rhythmically driven music is used to facilitate fine motor movement. Sedative music is used to relax patients being prepared for surgery, childbirth and chemotherapy.

In the approaches to Music Therapy, the article explains how Music Therapist can use different approaches to achieve non-musical goals. For instance a Music Therapist can use Nordoff-Robbins music therapy to achieve non-musical goals with children who have development abilities.

2. David. M. Greenberg (2017, August) The World’s First Music Therapist.

In this blog the writer describes how he discovered that the Greek philosopher Pythagoras was not the first Music therapy but it was David of Israel. The writer sates that a teacher known as Yitzhak Buxbaum told him to look up 1st Samuel 16:23. It was from this verse that he come to learn of how David used to play the harp for King Saul and the evil Spirits sent by God would depart from him and he would be at peace. It is from this instance that the writer concludes that David was the first Music therapist. I agree with David. M. Greenberg this is because music existed during that time therefore it maybe it possible for Music Therapy to practice even though it might have been informal.

3. Dauber, M. (2011). “What is Essential Is Invisible to the Eye” - A Music Therapy Tale of a Young Woman with Visual Impairment. Approaches: Music Therapy Special Music Education, 20-29, 63.

The article is about a woman named Maria who is visual impaired and has mild learning difficulties. Her involvement in Music Therapy helped her understand the importance of music therapy in her personal life. The Music Therapy sessions benefited Maria in a positive way whereby she stop perceiving herself as disabled and engaged in her search for a new musical identity. The case study explains how Maria was helped to ‘step out ‘of the boundaries of therapy in order to communicate her musical skills to a wider community at annual summer concerts where she would try out her ‘new identity’. The case of Maria will be used to further reflect on how disabled people in Greece can find support at local creative day centers, which are essential infrastructural support facilities that contribute to their care and wellbeing locally. I think Maria’s case is proof of how Music Therapy can benefit disabled people not only in Greece but also in Kenya and the world as it impacted Marias life positively.

4. Groom, J. (2010). Review of Arts therapies in schools: Research and practice. Canadian Art Therapy Association Journal, 23(2), 60–61.

This book examines the use of expressive therapies in mainstream and special schools. The authors agenda for writing the book was to show the historical link between art therapies and arts education, the belief that work environments can have a major impact upon the practice of arts therapies, such that there is need to identify useful ways of working in the context of school and the fact that there is limited research completed and reported from this context, and the need to integrate research and practice in appropriate, useful, and therapeutically sound ways. I agree with Groom that more research should be done on art therapies especially in Kenya as they are useful in mainstream and special schools. This I believe will create awareness about the art therapies ,their usefulness and the need to introduce it to the school circular.

 **METHODOLOGY**

**Research Design**

I applied both Qualitative and Quantitative research designs. Qualitative research design was used to give a better understanding of the topic being discussed while Quantitative was used to analyses the statistical data required for the study.

**Sampling Techniques**

I used purposive sampling this is because very few institutions are practicing Music Therapy.

**Data Collection**

1. Audio visual documentation available on the web

2. Research reports and abstracts

3. Attending Music Therapy sessions in the institutions practicing music therapy

**Methods of Analysis**

I will use descriptive statistics this is because it will summarize the information collected and explain why Music therapy should introduced as course in Kenyan universities.

**Presentations of Findings**

* There are very few institutions that practice music therapy in Kenya.
* The institutions that practice Music Therapy are Matter Hospital, Magoso School and Kenya Community Centre for Learning.
* The personnel that work in those institutions are volunteers such as Sauti Sol and Lele Ngoma in Matter Hospital, Lilian Wanjala in Magoso School and Frank and Teacher Jane in Kenya Community Centre for Learning.
* The non-governmental organizations in Kenya that advocated and proved educative material on Music therapy is the Ubuntu Therapy Initiative and Music Therapy International Kenya.
* Music therapy is used in the treatment of various ailments.
* In Kenya Music Therapy is used the treatment of cancer, speech therapy for children with autism and Down syndrome just to mention a few.
* It is also used in the overcome anxiety and traumatic experiences such war and violence.

**Discussion of findings**

Music therapy is practice that is gaining popularity in Kenya despite that fact that it not being formally trained. It is a form of treatment that is very effective and has as astonishing results despite the fact that it is being practiced informally in Kenya. If Music Therapy is formally trained it Kenya, it would become even more effective because Music Therapist will gain the knowledge on how to use different elements of music to get maximum results during therapy session. Formal education in Music Education will also create job opportunities for the Music Therapist unlike the current situation where by most of can only volunteer to work in institutions since it is a practice that is being slowly embraced in Kenya.

**Conclusions and recommendations**

There is a need to create awareness on the practice of Music therapy and the benefits of the practice. To introduce Music Therapy as a course in the university curriculum so Music therapists in Kenya get formal train of the practice and are able to use to get maximum results during therapy sessions.

**References**

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