The Current State of Music Therapy in Niigata Prefecture and its Perspective Hereafter

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Summary

The Niigata Music Therapy Society celebrates its 10th anniversary in the midst of a period of increasing interest and expectation concerning music therapy in Niigata prefecture. The current membership is more than 70 with the majority having music connections, and occupational therapists comprising approximately 70 percent. It is working for the diffusion and study of music therapy through holding annual research meetings and study meetings together with the publication of semiannual reports. Up until now, research has concentrated on geriatrics and psychology, but has now been extended to the areas of children and terminal care activity.

Introduction

The effectiveness of music therapy as a curative technique is well known, but music therapy in Japan is behind that of Europe and America by

a few decades. The domestic organization for music therapy is the Japanese Music Therapy Association whose membership is more than 5,900, including 578 registered music therapists. Among them, only five are in Niigata prefecture. This report intends to discuss the current and future development of music therapy in Niigata based on the past and present status of the Niigata Music therapy study group and from the question and answers received in surveys from geriatric institutions.

1. History of the Niigata Music Therapy Society

The study group was started through the lectures and practice of Akira Hayakawa, occupational therapist and Dr. Norikazu Matsui at Tamiya Hospital 1) for the exchange of information and updating of our knowledge to improve the practical situation. Table 1 summarizes the ac-

Stage	Period	Meetings	Members	State	
1st	June 1992	Twice/year	Approximately 30	 Mostly occupational therapists and helpers. Participants, 15 — 20. Most presentations are either reports regarding practice or the introduction of activities 	
2nd	July 1995	Twice/year	Approximately 60	 Change the society name from Music Therapy Society (Niigata) to Niigata Music Therapy Society. Preparation of rules, annual dues and re-start of the Society. Gradual increase of members and lectures on music. 	
3rd	April 1999 to present	Twice/year (One of them is a training course)	Approximately 70	 Publication of annual report and start of full-scale activities with a training course. Half consists of health professionals and the other of music professionals. 	

Table 1 History of Niigata Music Therapy Society

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tivities of the group's ten-year history.

In the first period, the participants were mostly occupational therapists and nursing staff numbering 15 to 20. Dr. Yoko Kadoma 2) was invited to lecture and give workshops in November 1995.

In the second period, the group changed their name from the Music therapy Society (Niigata) to the Niigata Music Therapy Society and established an agreement and membership fee. The membership reached 60 with the increase of joining musicians. Every meeting is held with 20 to 25 participants. Lectures and observation of practice by Dr. Matsui were held again in June 1998.

In the third period, the membership increased to over 70 with the ratio of musicians to medical persons becoming fifty-fifty. A movement towards higher activity has started while the interest in music therapy has increased. The report has been published twice a year since 1999, with a study meeting and training session each being held once a year on a regular basis beginning in 2000. Nineteen study meetings and two training meetings have been held by Norikazu Matsui, President of the Clinical Psychology Institute of Japan, and Yoko Kadoma, President of the Research Institute of Music Therapy in Gifu prefecture.

2. Current Status of Music Therapy in Niigata Prefecture

1) Professions of the Members

As of June 2002, the 73 members consist of 27 with musical connections, 22 occupational therapists, five nursing staff, two nurses, two public workers, one physiotherapist, one speech therapist, one child care staff and 13 others. Members with musical connections and occupational therapists occupy the majority.

2) Titles of Presentations at the Meetings

We have compared the number of presentations in this study group with those of the Japanese Music Therapy Association (Table 2). In the association, more titles are related to geriatric care and such a tendency is also found at our meetings. The percentage of psychiatric titles was higher but presentations in the childcare field were lower at our meetings. This may be due to the higher percentage of occupational therapists and lower number of members involved in childcare. Topics regarding terminal care represented 8.6% of the associations activities but none at our meetings. It may be necessary for us to get involved in terminal care.

3) From the Results of the Question and Answer Surveys Carried Out in Geriatric Care Units in Niigata prefecture (Bibliography 1)

	Niigata Music Therapy Society		Japanese Music Therapy Association	
Field	Number of Presentations	Ratio (%)	Number of Presentation	Ratio (%)
Child	3	10.0	29	26.7
Adult / Psychiatry	8	27.6	14	13.3
Elderly	12	40.0	46	43.8
Internal Medicine Terminal Care	0	0	9	8.6
Others	7	23.3	7	6.7
Total	30	100	105	100

Table 2 Number of Presentations in Niigata Music Therapy Society.

^{*1.} The number of presentations at the Niigata Music Therapy Society is the total from the start of the society to the present.

^{*2.} The number of presentations at the Japanese Music Therapy Association is one at the first meeting.

According to the results of a survey carried out at special geriatric care homes and institutes by Matsuda in 1997, 76% of them adapted therapy with music. Not all of them may be considered as music therapy but the effect of music has been recognized in 78.9% of the units. Many of the staff in charge of music therapy wanted basic music skills and knowledge of music therapy. Thus all of these units need music therapists in order to develop more effective therapy.

3. Perspective

The Niigata Music Therapy Society has not only facilitated the exchange of information between members but has also been making steady efforts for the extension, research and study of music therapy. We intend to provide support for both learners and practitioners in order to improve their skills. The future direction of this association may be summarized as:

First, to carry out scientific evaluation and studies on the effectiveness of music therapy.

Second, to implement the expansion of re-

search areas in this group, towards not only geriatrics and psychology, but also child care and terminal care in both study and practice.

Third, working toward the promotion of music therapy as a group. Our group members consist of various professional people and this can be an advantage for our activity.

Summary and Conclusion

It has been only 10 years since the establishment of the Niigata Music Therapy Society but there is no doubt that the group has raised the level of music therapy and provides leadership in Niigata prefecture. This author, who has been a member since 1995, wishes to make a contribution for the development of music therapy in Niigata prefecture.

Further Reading

Matsuda, M. (1998) Current status and problems in music therapy carried out in geriatric units in Niigata prefecture. Bulletin of Niigata Prefecture Woman's College 35: 35-40.