Feeling Their Way: women and children using music to navigate transitions from domestic violence

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Evaluation of Plymouth Music Zone’s Music for a Change Project

September 2014
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EXECUTIVE SUMMARY

BACKGROUND

Plymouth Music Zone (PMZ) is an award winning community music charity using music to work with diverse disadvantaged communities in order to promote positive personal and social change. PMZ conducts a large range of projects including the Music for a Change project (MFC) which is funded by the National Foundation for Youth Music (YM). MFC aims to empower emotionally vulnerable children and young people and their families experiencing challenging and sometimes traumatic changes. This evaluation was conducted in a refuge for families fleeing domestic violence. MFC provides high quality musical respite involving opportunities for self-expression that improve resilience in families experiencing difficult domestic circumstances. The project also seeks to explore effective practice in using music to support difficult transitions.

AIMS

The evaluation was conducted by Professor Jocey Quinn and Claudia Blandon of the Plymouth Institute of Education, Plymouth University. The aim of the evaluation was to assess how effective MFC’s music interventions were in providing respite for families experiencing difficult transitions. MFC conceptualises that people, in this case families fleeing domestic violence, can be helped to have agency over their transitions via the medium of music. This report will analyse how far and in what ways this is able to happen.

The evaluation also aimed to provide recommendations for best practice and ideas on how the project could be expanded and improved. The research also explored the concept of agency in analysing the effects of music interventions on emotionally vulnerable children and young people.

METHODOLOGY

The study took a qualitative approach as the aim was to understand the process, quality and benefits of MFC rather than numbers of participants. It consisted of observations, field notes and interviews with participants, the music leader and refuge staff. The study took place in a refuge based in Plymouth that prioritises those who are at high risk of extreme violence, thus ethical procedures were strictly followed. Doing the research was complex ethically. It was vital not to disclose the location of the refuge or the identities of those involved. It was important not to harass participants and add to the stress of their situation. Consent for interviews had to be negotiated at two different levels: with families to interview children and with children themselves. For all these reasons, progress with the research was very slow and careful.

Observations of the music sessions were conducted weekly over a period of two months. In-depth interviews were completed with mothers and two children, a girl aged 9 and a boy aged 13. In interviews, the focus was on the music session and not on the history of trauma. Although the numbers interviewed were very small, some generated very rich data. As shall be discussed, a
focus on numbers and immediately ‘measurable outcomes’ is not appropriate in this study, other indicators are far more relevant.

**KEY FINDINGS**

MFC was highly successful in providing musical respite to children, young people and families experiencing difficult transitions as a result of domestic violence situations. Although the explicit focus of MFC is on children and young people, in practice, they can only be seen and addressed as part of a family unit. Whether that unit is working well or not, the child cannot be disentangled from it. MFC helped mothers to build trust and confidence by providing a neutral space in the refuge. In a refuge context, it takes considerable courage to engage with others who are strangers even though they live in the same refuge. Music sessions also allowed mothers to re-build relationships with their children.

The observations suggest that the sessions also helped participants to connect with a childlike state of happiness within a safe environment, which possibly they had not been allowed before. Whereas abusive relationships and environments are characterised by control, the MFC sessions gave permission for silliness and play, both to mothers and children.

MFC sessions help to break an existing cycle of negative expectations and facilitate resilience. MFC can be seen as a means of promoting people’s emotional health and immunity to harm by allowing a space to promote resilience. An integral element of MFC sessions is the element of choice, which is a key aspect of resilience by allowing people to feel confident enough to make their own choices.

Interviews revealed the importance of instruments developed in sessions. These delicate but powerful creative objects helped both adults and children to recapture how they felt during sessions and carry this through to both their current and future lives.

MFC also provided a bridge for participants to re-integrate into the community. Some participants reported continued engagement with PMZ after they had left the refuge. It was reported that this engagement had helped a young man to integrate faster into his new community by making new friends through an activity he enjoyed.

An unexpected benefit of MFC was that it built confidence for women and children who are speakers of English as a second language and helped them to develop language skills. It also offered a resource that was not language-dependent.

A major problem MFC faces in the refuge is encouraging mothers to take part. Reasons for non-participation include: women’s social and economic background, general lack of trust, and lack of interest in mixing with other refuge residents.

**CONCLUSIONS**

This evaluation emphasis is on the quality of MFC and how far it meets its aims for those who take part. Our observations and interviews show that in terms of providing respite, resilience, coping with transition and building family trust MFC is highly successful.
Families experiencing difficult transitions, in this case families fleeing domestic violence, need to be able to imagine that they are worthy and capable of a better life in order to change their current conditions. The capacity to hope is beyond measure and this is what MFC provides.

The transitory nature of families in refuges makes it very difficult to evaluate and deliver interventions such as MFC, especially when the target participants have so many barriers to engagement. It was found that one of MFC's strengths is its willingness to respond to the needs of the women and families rather than impose its own rhythms upon them. In this way, it can gently encourage even the most reluctant participant to benefit from its provision. The organisation of PMZ with a strong central hub supporting a web of myriad activities, which have some leeway to ebb and flow and learn from and connect with each other, also makes this approach possible and sustainable.

In both, offering the provision and conducting the study, sensitivity is very important and hounding women to either attend or talk about it is counter-productive and disrespectful. However, those experienced in this field of work know that progress is slow and incremental, which suggests that MFC needs time and patience to embed and for women to feel safe accessing it. Some other agencies have refused to continue working with the refuge because numbers of children available to work with can never be guaranteed.

The skills and creativity demonstrated by the ML are inspiring. It also seems very important to continue working with this particular group of people. Domestic violence silences women and children, makes them feel hopeless and worthless and unable to break free of such norms of behaviour. MFC counters this, helping to break a potential cycle of abuse for the next generation. In doing so it builds capacity for the future, and reduces potential resources that might be needed to support future generations.

RECOMMENDATIONS

The report makes the following recommendations:

- Continue to run MFC in the women's refuge
- Improve the targeting and advertising of the sessions to non-participants, respecting their right to refuse. Think about ways to spread the word informally beyond written advertisements: for example via peer networks (asking participants to encourage others to come), via informal introductions by the ML, by explanations by refuge workers, by encouraging residents to view the video of Tyler, a 13 year old boy who received the music sessions both while he was in the refuge and afterwards at PMZ
- Run sessions for women by themselves (whether they have families or not)
- Improve timing of sessions: for example run one session for small children in the daytime and one after school for older children
- Increase resources for CDs and recordings of songs
- Develop more direct pathways to PMZ post refuge, for example via the PMZ website or a PMZ pack of info to give to all participants or via scheduled visits or bespoke follow up sessions to ease the transition
- The success of the project was dependent on the approach and skills of the ML. PMZ needs to ensure that other MLs working in refuges have similar patience, flexibility and creativity to work effectively with families in transition
Plymouth Music Zone (PMZ) is an award winning community music charity using music to work with diverse disadvantaged communities in order to promote positive personal and social change. PMZ conducts a large range of projects including the Music for a Change project (MFC) which is funded by the charity National Foundation for Youth Music (YM). MFC aims to empower emotionally vulnerable children and young people and their families experiencing challenging and sometimes traumatic changes by providing high quality musical respite involving opportunities for self-expression that improve resilience to their circumstances. The project also seeks to explore effective practice in using music to support difficult transitions.

MFC works with a number of different organisations in Plymouth whose role is to support people through difficult times, for example a charity called Jeremiah’s Journey working with families with a terminally ill member and Devon and Cornwall Refugee Support (DCRS) working with refugees and asylum seekers. The funding from YM included a small amount for evaluation. PMZ commissioned Professor Jocey Quinn and Claudia Blandon of the Plymouth Institute of Education to conduct this evaluation because of their interest in learning outside formal education and their expertise in high quality qualitative research. It was decided that rather than attempt a less than thorough overview of MFC, the limited evaluation funds would best be spent on an in-depth study of one strand of the project. It was decided to focus on MFC with children and young people fleeing domestic violence and housed in a refuge with their mothers because of danger of extreme violence.

This focus is timely because of the growing outrage about domestic violence both in the UK and internationally. In the UK, seven women per month are murdered by their current or former partners. Evidence suggests that children and young people are far from immune in this violent family situation: they will either witness or be subjected to violence themselves or live with the constant threat of death. Recent high-profile cases demonstrate that they may be murdered alongside their mothers or murdered as revenge against the mother. If they survive domestic violence and are moved to a situation of safety, how can they be helped to move forward and rebuild their lives? MFC addresses this important question and the role of this report is to evaluate how far it succeeds and what issues it faces in doing so.

The report draws upon some key theoretical ideas about transition (see Ecclestone, Biesta and Hughes, 2009). Transitions can be a moment of linear change, moving from primary to secondary school for example, a moment of identity change, such as becoming a mother or they can be seen as our permanent state of being - we are never the same from day to day. Debates focus on agency; how far do transitions happen to us and how far do we make transitions happen? For the young people and families in the study multiple transitions are taking place: from one city to another, from the home to a refuge, from being part of an abusive environment to being a survivor of it. MFC conceptualises that they can be helped to have agency over their transitions via the medium of music. The report will analyse how far and in what ways this is able to happen.

The report will begin with a literature review setting the scene for what we already know about this issue. It will then discuss the way the study was conducted, analysing the methodological and
ethical issues involved. The key findings of the study will then be discussed followed by conclusions and recommendations.

## 2 MUSIC INTERVENTIONS IN CONTEXT

The literature review for this evaluation explores the effects of using music interventions with people experiencing difficult transitions in the United Kingdom and in different parts of the world. Specifically, it seeks to find evidence on whether singing or music sessions have positive effects on children and families fleeing domestic violence. Additionally, this review intends to become familiar with expert authors, current debates and gaps in research investigating music interventions. This review focused mostly on qualitative research.

### 2.1 DOMESTIC VIOLENCE IN THE UK

A recent ONS report disclosed that, on average, about seven women are killed by their current or former partner every month in England and Wales (ONS 2012-2013 Report). This constitutes around one-third of all female homicide victims. The same report also found that there was an increased risk of victimisation for females with disabilities.

In total, recent figures published by the ONS estimated that around 1.2 million women in the UK suffered domestic abuse in 2012 and 2013\(^1\). Women were more likely than men to have experienced intimate violence ‘across all headline types of abuse asked about’ (ONS 2012/13). Another Home Office report (2013) found that ‘around 1 in 20 females (aged 16-59) reported being a victim of a most serious sexual offense since the age of 16.’

These statistics indicate that women are disproportionally affected by domestic violence in the UK. In 2013, the British Crime Survey (BCS) reported lifetime partner abuse prevalence at 27 percent for women and 14 per cent for men. The majority of violent incidents against women are carried out by people women know, whereas for men, violent incidents are most likely perpetrated by strangers. However these figures are not accurate and numbers might be much higher. Data obtained by the BCS might be limited since the survey excludes people living in refuges, hospitals and hostels; in general, people with higher exposure to domestic violence (Crime in England and Wales Report 2012/13).

Of course, the UK is not alone in dealing with domestic violence. A recent European Report found that about a third of all women in the EU have experienced either physical or sexual violence since the age of 15 (FRA 2014). It noted that young women, as a group, are particularly vulnerable to victimisation. In this report, the UK and France ranked fifth with the highest number of incidents of physical and sexual violence against women (44%); after Denmark (52%), Finland (47%), Sweden (46%) and the Netherlands (45%) (FRA report 2014).

\(^1\) Also, 700,000 men reported having experienced domestic abuse in the same period of time.
2.2 EFFECTS ON WOMEN AND CHILDREN

Literature on domestic violence addresses several aspects in which exposure to domestic violence or abuse may affect individuals. Of particular interest for this evaluation are the effects on women and children.

Firstly, there is the effect on women’s mental health. Women who experience domestic violence and abuse live with a consciousness of being ‘at risk’ of violence. ‘It is this consciousness of ever present risk which underpins the strategies women adopt to deal with the threat of violence in their daily lives, whether at home, at work or on the street’ (Greenan 2004). This mind frame may have negative implications on the way women relate to others and may affect their capacity to trust. Reports have also found high incidents of PTS on women who experienced domestic violence (Greenan 2004).

There are also the physical consequences of domestic violence. It is common among women who have endured domestic abuse to have health issues. Some effects include injuries, pregnancy and reproductive health problems, chronic physical pain, gastro-intestinal problems, respiratory difficulties, migraine, sleeping disorders, impaired hearing or sight, joint pain and disability (Greenan 2004). Another dimension is added when women endure violence during pregnancy. This violence has been associated with miscarriage, premature birth, low birth and foetal injury.

Domestic abuse and violence also have socioeconomic consequences. Women living with ongoing abuse lose work days and earnings as a result of being injured, thus making them financially vulnerable. As a result, a fear of homelessness may preclude some women from leaving a dangerous domestic situation. This financial vulnerability is the reason why safe housing should be considered a priority (Greenan 2004).

In regards to the effects on children, one UK longitudinal study found that children from violent homes incorrectly identified expressions of sadness, anger and fear; instead, they identified those emotions as happiness. Children from violent homes were also less likely than children from non-violent homes to identify anger as fear (Bowen and Nowicki, 2007 as cited by Greenan 2004). In addition, a study conducted in surgeries in north London found that childhood experiences of physical abuse were associated with several mental health indicators, including depression, anxiety and self-harm (Greenan 2004). The effects on children living with domestic abuse include difficulties with sleeping and eating, disruptive or very withdrawn behaviour, delayed development (Hague, Kelly et al 1995, as cited by Greenan 2004) and links to substance abuse (Greenan 2004).

Domestic violence also has detrimental effects on the relationship between women and their children. A study in the US found that children were less likely to intervene if the abuser was their biological father (Edleson et al 2003). The authors suggest that ‘these findings demonstrate a need for more careful assessments by all of the agencies involved in responding to domestic abuse, to improve the safety of women and children.’ Relationships between mothers and children arriving at a refuge may be strained as a result of the domestic abuse. Women and children who have been exposed to domestic abuse and violence may need time to rebuilt trust among themselves.

When women and children arrive at a refuge their physical and mental well-being has been disrupted. Living in a confined space with people who have endured similar challenges does not guarantee immediate bonding, as women interviewed for this evaluation reported. Music sessions seemed to offer a routine, an anchor women and children lacked during the time at the refuge.
Music sessions offered a space for women and children to connect, to feel equal and to feel equally safe.

2.3 METHODOLOGY AND KEY FINDINGS FROM THE LITERATURE

This literature review includes studies conducted in different parts of the world (US, UK, Australia, Bangladesh, Israel) that researched the effects of music interventions (individual or family singing, performances, choirs, writing lyrics, watching and listening to music) on people who are experiencing difficult transitions (women and families living in domestic violence refuges, prisoners, people with a terminal illness). Databases used included SAGE journals, Oxford Journals, SocIndex, ScienceDirect, Web of Science, British Education Index and ERIC. In addition, Google Scholar was used to find specific articles and journals.

The following search terms were used:

- music and traumatic transitions
- music interventions in traumatic transitions
- music therapy and traumatic transitions
- music therapy and domestic violence
- music therapy and transition

A literature review conducted by Daykin et al (2012) that looked at the evidence surrounding the impact of music-making on the well-being of young offenders, would be helpful to introduce key findings relevant to music interventions among people in transition. Daykin et al's (2012) review included interventions with young people aged between 11 and 25 in Australia, USA, UK, Canada and South Africa. The quantitative studies explored different kinds of music interventions, including performance, playing instruments and exploring rap lyrics. Researchers found some interesting patterns; for instance, in the US, interventions and research seemed ‘more strongly framed around clinical and therapeutic discourse’, therefore research tended to be more quantitative. According to this review, three studies found that self-esteem improved significantly following the musical intervention, though interestingly, ‘results did not differ significantly when compared with alternative intervention types (cognitive behaviour interventions)’.

In general, Daykin et al’s (2012) review reported that the quantitative studies pointed to positive outcomes from music making and the qualitative studies shed light on the processes and interactions that shape project experiences and particular contexts. They found that although samples from the studies reviewed were small and had limited focus, their findings warrant further research.

A. Difficult Transitions

Data for this evaluation were collected at a refuge for women and children fleeing domestic violence. However, Music for a Change also works in other settings where people are also facing difficult transitions; for instance people diagnosed with a terminal illness and asylum seekers. Thus, this review will cover a larger scope of transition.

In the United States, Allen and Wozniak (2014) explored how performances and rituals can help mediate the effects of violence on twenty four women who had completed treatment for domestic violence. Their study used qualitative and quantitative approaches and participatory techniques.
They measured psychological distress using the civilian version of Post-Traumatic Stress Disorder (PTSD) checklist; pre and post test results showed a significant reduction of PTSD symptoms. Their study yielded qualitative results that identified stages of recovery that allowed researchers to design an intervention especially tailored to women who had experienced domestic violence (Allen and Wozniak 2014). The intervention guided women through stages of recovery. Women were helped to transition from the idea of victimhood to where they could incorporate the history of abuse into their lives but it would not be the central theme.

Allen and Wozniak (2014) hypothesize that repetitive disclosure about violence might be preventing some women from moving on, thus, they recommend that it is essential to have a space where women are not expected to discuss their history of abuse. This study was particularly useful in describing the stages women who have experienced domestic violence go through, and what needs to be taken into account to design a successful music interventions. Specifically, this study discovered that rituals within interventions are particularly powerful. Women in this study composed their own song which they sang at the beginning and the end of the session.

In regards to families experiencing difficult transitions, Pasiali’s (2013) case study gives some insight into the specific effects of music interventions on families who have experienced domestic violence. In the United States, Pasiali observed a single family who had experienced domestic violence and was using music therapy to support parent-child interactions. Using two psychometric scales (the Devereux Early Childhood Assessment Scale and the Parenting Sense of Competence scale), the researcher designed the music intervention for the family with the goal of improving attachment and trust. The researcher recorded her observations and videotaped the clinical sessions.

Another important aspect revealed by this review is the importance of the refuge environment for those who live transitorily after fleeing a situation of violence. Research has shown that the quality of the environment in refuges will influence a woman’s decision to leave a violent home permanently (Hernandez-Ruiz 2005). In her study Hernandez-Ruiz (2005) analysed sleep disturbances and symptoms of PTSD among women living in refuges in the United States. PTS has been specifically researched and consistently reported in women involved in domestic violence. Furthermore, the presence of anxiety, more than depression, indicated a higher risk of developing PTSD (Hernandez-Ruiz 2005).

Hernandez-Ruiz (2005) study in the United States explored the effect of music therapy procedures on anxiety levels and sleep patterns of battered women in refuges. The study used a pre-test-post-test design with control and experimental groups and measuring tools (Pittsburgh Sleep Quality Index (PSQI), State Trait Anxiety Inventory (STAI), and the Fatigue Scale). The control groups received a 20-minute session of music stimulus (playing a CD). Participants in the control group were instructed to lie down quietly for 20 minutes but did not listen to music.

This study found results consistent with previous research: a statistically significant reduction of anxiety was found in the experimental group. Music might have contributed to reduce anxiety not only by providing a pleasurable stimulus but also by creating a different focus of attention from stressful thoughts. As noted before, the amount of resources and perceived social support at a time of shelter are determining factors in the woman’s decision to leave a violent relationship. In addition, in this case study, the music therapy procedure developed a product that the women could take with them, something that they could use later in time of need (Hernandez-Ruiz, 2005, Allen and Wozniak 2014).
Pasiali (2013) reported improvement in the parent-children relationship at different levels. After several music interventions, one child was able to accept and include her mother in the activity being proposed by the music leader, inter-siblings relationships also improved and children were being more affectionate towards their mother. However, it was also noticed a gender difference in the way the mother related to her children.

Pasiali’s clinical case study was selected from larger qualitative research project where purposeful sampling was used among families with history of maternal depression. The main methodological weakness of this study is the fact that the researcher played a dual role as researcher and participant/music therapist. In addition, the researcher admitted to having the ‘assumption that music therapy becomes an external support for families to foster resilience’ (Pasiali 2013).

Thus, research has found that music therapy interventions with families who have experienced domestic violence has helped reduce ‘verbal arguments, taught parents how to convey feelings, and helped parents in setting limits, boundaries and routines’ (Pasiali 2013). This is particularly salient in transitional life in a refuge, where children –and mothers- are living in an unfamiliar environment.

In a different context of transition, Docherty et al (2013) interviewed parents of Adolescents and Young adults (AYA) aged 11-24 with a cancer diagnoses and who were undergoing stem cell transplantation in the United States. In particular, the study evaluated parents’ perspectives on the helpfulness of a behavioural music therapy intervention targeted to their AYA and how it might affect resilience and quality of life. This research was a sub-study of a larger project that wanted to test whether therapeutic music videos reduced illness-related distress. Two theoretical models informed the larger study and intervention design. The resilience in Illness Model guided conceptualisation of the problem. The contextual Support Model of Music Therapy (CSM-MT) informed design of the TMV intervention.

Parents reported that music interventions provided respite from daily suffering in many ways and strengthened resilience. In particular, parents indicated the intervention was effective in alleviating symptoms, providing respite, promoting positive coping and renewing interest in social connections (Docherty et al 2013). Of interest for this Music for a Change evaluation, parents interviewed by Docherty et al (2013) indicated that the process of writing lyrics gave AYA a platform to engage in meaningful conversations with parents and friends, which in turn benefited parents by witnessing improvement in their AYA’s symptoms of distress and emotional well-being. Their results indicate that parents perceived structure, autonomy, support and relationship support as important elements of the intervention.

Tett et al (2012) reported on a large Scottish study using the arts (music, theatre) in prisons. The study investigated the role of the arts in enabling prisoners to engage with learning, improve their literacy and demonstrate the potential of the arts to support the process of rehabilitation and deterrence of crime. Over 200 male prisoners participated, but the study focused in depth on the experiences of participants in only 3 prisons: a young offenders’ establishment, a long-term prison, and a large general-purpose prison. The interventions were organised by the Scottish Ensemble, Scottish Opera and the Scottish Chamber Orchestra and the Citizens Theatre. Findings include improvement of self-esteem (Daykin et al 2012, Tett et al 2012) and self-confidence and development of social skills (Tett et al, 2012, Docherty et 2013) and communication (Tett et al 2012, Docherty et al 2013).
B. Music in isolated and structured environments

Participants consulted for the Music for a Change evaluation reported that living in a refuge could be isolating despite conditions of proximity. Some studies reported that prisoners felt often isolated and spoke rarely with each other (Silber 2007, Tett et al 2012). Research has shown that one positive effect of music interventions in structured environments is that it can effectively provide participants with opportunities to make choices and independent decisions (Docherty et al 2013).

In The Scottish Ensemble’s Music for Change project, Tett et al (2012) found evidence that arts allowed prisoners to: work collaboratively and responsibly, change negative ideas about learning, enable better communication by creating opportunities for interaction and increased confidence and self-esteem (Docherty et al 2013, Tett et al 2012, Daykin et al 2012). In addition, music sessions provided a brief period of liberation from a highly structured, disciplinarian environment by giving participants opportunities for emotional release as well as resources for coping with difficult feelings (Daykin et al 2012). Some studies emphasized the way in which music-making helped ‘participants to shape individual and collective identities, for example, by providing practical opportunities for development and diverting attention away from negative influences’ (Daykin et al 2012).

Another qualitative study conducted in a prison for women in Israel found that music interventions had a positive effect on the in-mates’ self-esteem and well-being (Silber 2005). For instance, this study reported that women who had been in solitary confinement only came out to participate in the choir activity and after several months of choir participation, their social and communication skills improved (Silber 2005, Docherty et al 2013, Tett et al 2012). In addition, it was reported that inmates were able to use breathing exercises, used during singing sessions, to control episodes of anger (Silber 2005).

C. Structure of music sessions/interventions

Research has found that a key element of a successful music intervention is to facilitate interaction and communication between family members. For instance, Pasiali (2013) suggests that active music therapy techniques should involve structured or improvisational music making and song writing. It is important to establish a ritual (Allen and Wozniak 2014) in the intervention, such as starting interventions with the same greeting song (Silber 2005, Pasiali 2013, Nicholson et al 2008, Allen and Wozniak 2014).

Other elements addressing one or more developmental skills were also identified. For example, acknowledging each child individually by name to encourage social responsiveness; action and movement songs to provide practice of fine and gross motor skills; instrumental play to provide further motor skills practice, turn-taking and sharing, and quiet music to encourage physical touch, closeness and bonding between parent and child (Nicholson et al 2008).

Another interesting aspect reported by research was the extent of ‘ownership’ felt by the people taking part. ‘Successful interventions may allow young people to safely express their hopes, dreams and frustrations and thereby offer means of coping and asserting control over life’ (Daykin et al 2012). Pasiali (2013) found that establishing routines, participating in joint-attention tasks and incorporating child-initiated ideas into therapeutic play helped to build trust.

Some researchers suggest that music interventions that are based on the reproduction of real-life situations may be more effective in developing attachment. Ideally, the music session will create a
‘supportive environment while also modelling and facilitating musical interaction so the parent’ can be aware of the changes in their children while interacting with the music (Creighton 2011).

### D. Families at risk

Several studies addressed the effect of music interventions on families considered ‘at risk’ because of their social or financial situation. Some studies found that ‘families, who are marginalised and disadvantaged, typically do not engage in mainstream parenting interventions (Nicholson et al 2008). Osgood et al (2012) conducted research to find out challenges encountered by practitioners in engaging particular groups of parents categorised as ‘hard to reach’. This study offered an insight as to why some women who are in refuges do not attend music sessions. The authors challenged the assumption that families are ‘hard to reach’ since it implied a preconception on what families need and want. This is particularly important in a refuge setting where women may still be feeling vulnerable and judged.

In their Australian study, Nicholson et al (2008) worked with at-risk families (single mothers, children with disabilities, victims of domestic violence) referred by community and government agencies. The main objective of the project was to target parenting strategies. They used different scales to assess parent-child interactions (Child rearing questionnaire, Parental Perceptions and Behaviours Scale) and child behaviour (Mood and Behaviour subscale of the NEILS Scales of Developmental Competency). Sessions were delivered weekly and followed established plans with set learning objectives for parents.

Nicholson et al (2008) found that parents’ satisfaction is important in its own right, because it may relate to other family outcomes such as increased empowerment, enhanced parenting, self-efficacy, and reduced parental stress or parental depression. One limitation of this study was the lack of a non-intervention comparison group. ‘Another limitation is the observational measurement approach. These data were based on reports from clinicians conducting the programs and may be biased by clinicians’ expectations of change. They also found that group size and length of the programme may impact on effectiveness and efficiency; on average participants attended 56% of the planned programme.’ Drop-out rates commonly exceeded 20 per cent and in some cases were as high as 47 per cent, especially among teenage mothers.

Abad and Williams’ (2007) study is frequently cited in articles consulted for this evaluation. Their study is the precursor to Nicholson et al’s (2008). Abad and Williams (2007) evaluated the initial implementation of the programme that worked with families at risk of marginalisation. They reported that these ‘families may experience circumstances that impact their ability to bond and interact with their children, and this may have a direct impact on a child’s mental health and well-being. Lack of parental warmth and affection, and angry, irritable interactions have been identified as contributing to the onset of early emotional and behavioural problems.’ Therefore, these families are most at risk of developing mental health problems.

Abad and William’s project developed resources for the project including many colourful and high-quality musical instruments, props and also produced a CD. The sessions used modelling, peer and facilitated learning as key methods to work with families. In pilot sessions, researchers noted that parents would go outside and did not interact with children prompting instructors to explain that it was a parent-child interaction programme. This study recommended continuing the use of qualified music therapists for project management and programme service delivery. Researchers said that while community musicians and music teachers are able to conduct group music
sessions, they are often not trained to assess and identify needs, make clinical observations and measure outcomes or counsel families in crisis. However, as we shall discuss, community music leaders with the right attributes can help to develop agency amongst participants without medicalising them as in need of therapy. Indeed one of the strengths of MFC was that it was positioned outside of the formal agencies by which participants are normally monitored and assessed.

E. Music interventions in diverse cultural contexts

Studies on music interventions conducted in different parts of the world and consulted for this review, reported difficulty in generalising the effects of music interventions because of the different social, political and cultural contexts (Daykin et al 2012). Of interest for this evaluation is the potential presence of women from different cultural backgrounds living in refuges in the UK, and how they perceive and are affected by music interventions.

Bolger’s (2012) conducted a study in a destitute camp for women and children in rural Bangladesh. The study observed the effects of singing on the women living in a rural shelter. The shelter or ‘village’ as it is referred by the author, provided accommodation and food for abandoned and abused women and children. In this case study the singing group was formed for women only; children were not allowed in the sessions. Because a vital objective of the group was to develop and practice leadership skills, it was essential to focus on the women. In a country where men are traditionally in charge, learning and practising leadership skills was fundamental, as they would have to return to their communities and lead independent lives (Bolger 2010). The author found that after one year of weekly singing sessions, she noted that the group was sustainable and women were developing leadership skills and confidence. Bolger concluded that the group continued to function because it provided a space for peer support and emotional expression; it was not depending on a single individual delivering therapy (Bolger 2010, Docherty et al 2013). In this sense, music is used as a tool of psychosocial support.

It is essential to understand that ‘people from different cultural backgrounds relate to music in different ways and this impacts on the way in which they engage with music therapy’. It is also vital to take time to build trusting and open relationships with participants (Bolger 2010, Pasiali 2013, Allen and Wozniak 2014).

At a more philosophical level, Rolvsjord and Halstead (2013) explored the ‘relationship between the processes of music therapy and the significant socio-cultural and political dimensions that influence how an individual manages their sense of self, health and well-being. The article highlights how people’s musical worlds consist of musical interactions that afford gender identity in a variety of significant ways.’ Based on the articles selected for this literature review, gender did not seem to be a significant variable, except on one study where it was reported that a mother seemed to favour her son during music sessions (Pasiali 2013).

F. Music and emotional communication

According to Creighton (2011) ‘early experiences of emotional communication contribute to mother-infant attachment and impact upon an infant’s neurological, social and emotional development. The emotional availability, appropriateness, sensitivity and consistency of a parents’ response to a child determine the quality of attachment that is developed. Furthermore, the same
interactions that regulate emotions and develop attachment are also constantly shaping neural pathways and thus impact upon the child’s future development.’

Baker and Mackinlay (2005, 2006) examined the subjective experience of a lullaby education program by analysing diary entries of participating mothers. Initially lullabies were considered a tool to communicate with an infant but the data also demonstrated that singing lullabies was beneficial to the mothers’ wellbeing as well. Singing lullabies provided a ‘lift’ in moments of despair as well as increasing their empowerment and control. They suggest that ‘such positive experiences are vital for mothers who may be struggling to cope with daily demands of mothering’ (Creighton 2011).

G. Further Research

Research studies consulted for this review often cited methodological weaknesses as a common limitation. Examples of methodological shortcomings are the use of non-randomised control groups and the lack of measurement tools to establish reliability and validity (Nicholson et al, 2008). Additionally, some researchers recommended that ‘qualitative methodologies should be underpinned with clear epistemological rationale for the approaches adopted. Weaker studies continued to report outcomes better suited for quantitative assessments’ (Daykin et al, 2012).

Pasiali (2013) stated that qualitative and quantitative research of family-based music therapy is scant. Creighton (2011) also laments the lack of longitudinal empirical evidence to support that participating in group sessions may provide the supportive and motivating environment to promote positive and emotional musical companionship.

In Hernandez-Ruiz’s (2005) research, participants suggested starting a program that allowed children to relax using music, following the same pattern designed for adults. One participant reported that she had been sharing the music she was given with her children and that she could see how they were less stressed out and sleeping better.

Particularly relevant to this evaluation is Creighton’s (2011) suggestion to conduct additional studies that examine live musical interactions.

3 METHODOLOGY

The study took a qualitative approach as the aim was to understand the process, quality and benefits of MFC rather than numbers of participants. It consisted of observations, field notes and interviews with participants, the music leader and refuge staff by the RA Claudia Blandon. The research team met weekly to discuss the study and the interviews were taped and transcribed. The data was then analysed and the report written by Professor Jocey Quinn (JQ).
3.1 THE SETTINGS
The study took place in a refuge based in Plymouth. The refuge can house eleven women and twenty eight children but the numbers and ages of children vary very much from week to week and the population is very transitory. It prioritises those who are at high risk of extreme violence and its occupants have been referred by other agencies. Women may come from other cities and parts of the country in order to be safe. The refuge itself is seen as a space for transition; it is where families stay whilst they are waiting for other issues such as housing to be sorted out. Families may move from there to a safe house but the refuge is still the hub where services are provided, MFC has been running there for a year. There is now one session a week at 4.30 on Thursdays but it can never be predicted who will come and what age range of children may take part.

3.2 OBSERVATIONS
The RA visited the refuge weekly over a period of two months to observe the music sessions and to build trust and familiarity before asking families for interviews. On four occasions the music sessions were cancelled as there were no participants. In all, RA observed six complete music sessions involving a total of six mothers and ten children ages from under one to nine. She engaged in the sessions and did not take notes. After the sessions she made field notes and discussed the findings with JQ. The observations were very important as they captured the skill and sensitivity of the music leader, the complexity of engaging in the session and the moments of imaginative power that might subsequently be harnessed for transition that the sessions facilitated. The observation notes give a flavour of what it was like to be there and a sense of the difficulty and the tensions involved in the refuge:

Women who attended the sessions were never rude to me but would never start a conversation either. Afterwards, in the interviews, it was said that some mothers may lack confidence, are depressed or don’t trust anyone, and having an unknown face in the room might make them feel uncomfortable. I conducted participant observations: I sang with the children and was involved in the instrument-making activities in most sessions. Sometimes I helped children during an activity, if they asked me for help. However, all my notes were taken after the session, so participants will not see me taking notes, unless it was the name of an unknown instrument or the title of a song.

I would sit on the floor and would join the music circle; all with the hope that they would feel comfortable with me being in the room. It turned out that my foreignness helped me connect with one of the mothers, and she told me how she felt as a foreigner in the refuge and in Plymouth. She explained that she felt judged or criticized by some residents in the shelter. She told me people treated her and spoke to her differently (some would speak loudly and more slowly to her) and that made her feel uncomfortable and angry.

(Observation)
3.3 INTERVIEWS
The RA completed four in-depth interviews with mothers (one of whom had now left the refuge) plus interviews with two children, a girl aged 9 and a boy aged 13. The RA asked MFC participants if they would agree to an interview for themselves and for their children. This was difficult to arrange and involved sensitive approaches. For obvious reasons the families in the refuge are often reluctant to trust and engage with others and they often have many other things they need to deal with. If participants showed willingness she would try to arrange a meeting at their convenience and would follow this up with reminders. However, she would not pursue this to the point where they would feel harassed. Refuge staff were key in accessing people who had left the refuge. A conscious decision was also made to include a resident who had not taken part in the sessions, because we wanted to understand reasons for non-participation and the impact of the project on the refuge generally. This was achieved.

In interviews the focus was on the music session and not on the history of trauma. Research shows that such families are exhausted by their experiences and by recounting them to agencies. The music sessions are supposed to bring respite and we did not want to prejudice this. Nevertheless, if traumatic incidents were alluded to, this was included. Although the numbers interviewed were very small, some generated very rich data. As shall be discussed, a focus on numbers and immediately ‘measurable outcomes’ is not appropriate in this study, other indicators are far more relevant.

The RA also interviewed the Music Leader (ML) and four refuge staff members. In all cases cooperation was very willing and the interviews very informative. An interview was also conducted with a professional filmmaker who had been hired by PMZ to produce a film about MFC for sharing and fundraising purposes.

3.4 ETHICAL ISSUES
Full ethical approval for the research was secured from Plymouth University Education Ethics Committee. The information sheets/consent forms used with participants are included as Appendix A. Doing the research was complex ethically. It was vital not to disclose to anybody the location of the refuge or the identities of those involved. Secondly, as discussed above, it was important not to harass participants and add to the stress of their situation and a refuge worker was always available in case an interviewee needed special help after the interview. Nevertheless, we faced the responsibility of reporting any disclosure of further abuse or danger. Finally, consent had to be negotiated with families to interview children and care had to be taken to talk the children through what was involved and gain their consent. For all these reasons progress with the research was very slow and careful. The interview with the filmmaker highlighted the extent of the ethical and practical problems we faced. She had found it impossible to make a film within the refuge only securing her participants once they had moved out.
4.1 UNDERSTANDING THE ‘PYJAMA MUMS’ AND THEIR FAMILIES

In order to evaluate MFC, it is vital to understand the families it is working with. The ML confirmed that refuge workers had helped her to prepare for the “challenges” she would face and the need to be “reactive” to situations that “can change from minute to minute” and to be “patient and understanding” with participants who may not attend at all or who may have to go in and out of sessions. Being female and being consistent and trustworthy were all significant attributes needed for her success in this context.

The women living in the refuge are often called ‘pyjama mums’ by the staff. Many spend their days dressed in sleepwear apparently doing very little and without the energy or will to engage. The reasons why they have difficulty participating in any activity and are apparently stuck in this moment of stasis are not difficult to understand. They only come to the refuge when they are in fear for their lives. Research suggests that they will be experiencing the after-effects of a long process of attrition, where they have been worn down by constant criticism, control, violence and the threat of death. Dynamics between the mother and children can be very dysfunctional with the child blaming the mother for their past experiences. Fear of judgement bedevils all their actions. Even within the refuge they are still subject to observation by multiple authorities such as social work and the police, which is why an activity such as MFC can provide release from regulation. As one refuge worker said:

“I think it helps because it can give the women and the children a break from us (laughs)”.  

Through activities such as a welcoming song the ML works hard to make all the participants feel comfortable and “at ease” as quickly as possible:

"When you’ve gone through a life where you’re always in the wrong and always being told what you are doing is wrong to be able to do something (MFC) and not have anybody dictating or putting you down and what you’ve done, that’s nice, that’s a nice feeling.”

(Mother of nine and fourteen year-old girls, currently living in a safe house)

All of the women share the experience of violence, but our research found there is also significant difference of class and culture amongst them. Indeed some of the mothers pass judgement on the others for being ‘pyjama mums’ and refuse this label for themselves. In this context it takes considerable courage to break this mode, engage with others who are strangers and enter the unknown of the music session.

Although the explicit focus of MFC is on children and young people, in practice, they can only be seen and addressed as part of a family unit. Whether that unit is working well or not, the child cannot be disentangled from it. Refuge workers advertise the sessions to families as they don’t want the mothers to see it as just a form of child-minding. In observations, we saw that the
children constantly looked to the mother for confirmation and validation. Similarly the mothers monitored their children’s behaviour closely:

There were two families in this session, a mother with her 2 year-old daughter, who had attended sessions before, and a new mother with a younger boy (maybe 1 year-old). At the beginning of the session, the boy interacted well with the other child (a girl) but threw tantrums when he was not allowed to have an instrument that the girl had. The ML tried to engage him with other instruments, but the child would not stop crying. The mother became frustrated by her son’s behaviour and shook her head in desperation. She tried to talk to him and calm him down, but it didn’t work. The only thing that would calm him down was to allow him to play with the instrument that he wanted. The mother decided to leave in the middle of the session. This mother did not make eye contact with any of the adults present in the room; she only looked at her child and his actions, trying to control him by bringing him back to her. It seemed to me that the mother left the session because she felt embarrassed of her child’s behaviour and her failure to control him.

(Observation)

There are different ways to read this scene. One is that children from abusive environments learn behaviour that is anti-social and that is one reason why mothers prefer not to be involved in family activities with outsiders. Interviews with the ML and the refuge workers suggest that children in the refuge are sometimes known to be disruptive and aggressive with their mothers, siblings and others. The other interpretation of the observation scenario is that it is quite common for one-year-old children to act up when their desires are frustrated; there is nothing pathological about it. Nevertheless, because of her situation, the mother fears and avoids any possibility of judgement. The outcome in either case is the same: parenting is experienced as a problem.

MFC sessions also function to help parenting skills and build capacity within families. Our interviews suggest that although this is not an easy process, MFC can build trust and communication, offering a new way to break down barriers:

“I really thought it was good for some parents that had had a bit of separation from their children and they weren’t having great relationships together. I felt like it was something they could both enjoy, and you’d see them acting like mums and the children acting like children which didn’t happen very often because children have seen too much maybe and become a bit old before their time.”

(Mother)

In our observations we saw a range of parenting behaviour, some mothers were very actively playing with their children, for other mothers the process seemed to come less easily but to become more comfortable over time thanks to the patience of the ML and the pleasure of the activities she designed:

“I see that light going on for some parents in that I can actually do this with my child and that there is value in this… because some parents have
never, don’t even know how to play with their children because they may have haven’t had themselves…I can actually have fun and behave like an idiot in front of my child and that’s OK. So I’ve seen bonding and attachment being facilitated. I’ve also seen in terms of the children boundaries being put in place and consistency which is good for them.”

(Refuge worker)

Another important thing to bear in mind about these families is how much they may have left behind, particularly when they have had to run away without planning:

*Generally speaking they’ve had to leave a lot behind and children in particular if you get a chance to talk to them will tell you about things they’ve had to leave behind that they’re sad about?*

(Refuge worker)

For these reasons, MFC not only organises music sessions but produces tangible objects such as small musical instruments and a CD of the children’s own songs. Our interviews suggest that these objects are valued and seen as precious. In this respect, and many others, MFC is highly sensitive to the needs of the families it seeks to help.

### 4.2 PROVIDING A MEANINGFUL MOMENT OF RESPITE

One of the key aims of MFC is to provide a moment of respite from the traumas young people and families are experiencing.

”Thinking about something other than the situation they are in.”

(Music Leader)

The literature review clearly indicates that those experiencing difficult transitions need a time where they are not asked to dwell on their own history, a space where they can be in the moment, neither looking back nor forwards.

“You are able to express yourself through music and it does give you that, even for just a couple of hours it gives you that feeling of you haven’t got to think about anything else. It’s just what you are creating.”

(Mother)

This need to escape is signified by the pyjamas: a reluctance to ever get out of bed. However, MFC provides a respite that is meaningful and energising rather than merely soporific.

“I really like them because you are making instruments like it’s really fun, because some people really like music, because I do so I really enjoy it.”

“And how does it make you feel being at these sessions?”

“Safe and enjoyable.”

(Girl aged 9, has attended sessions 5 times)
As the RA testified, the music sessions left participants feeling calm. Crucially there is a difference between being calm and sleepy: music calms you down but also gives you energy. Once you are calm you can see things from different perspectives and also handle the demands of your daily life. Our interview with a woman who had not joined the sessions because she did not have children suggests that this calm can benefit the atmosphere of the refuge more generally:

“Do you notice any difference with the children around you after the music sessions at all?

“I think they come out more relaxed and have enjoyed it obviously because before they went in it was boom ,boom boom and now they come out and it’s like calmer, relaxed happiness innit.”

(Resident)

The observations suggest that the sessions also helped participants to connect with a childlike state of happiness within a safe environment, which possibly they had not been allowed before. Whereas abusive relationships and environments are characterised by control, the MFC sessions gave permission for silliness and play.

“She’s made the little shakers so she’s got five or six of them at home and we do (makes shaker noise) because we have a little bit of a samba dance in the lounge…we play with the saucepans, just messing around, things we would never have been allowed to do and it does give you a real buzz like we laugh so much when we’re doing it…”

(Mother)

ML drew on multiple ways to create dream states or fun spaces including making music with technology, using puppets to encourage dancing to her instruments or asking participants to draw whilst she played the saxophone:

The child was allowed to handle the iPad by herself and explore. At one point, the child picked up little sparkling flakes that were lying on the table, and put them on top of the iPad’s screen. The ML allowed her to do that and encouraged her to explore this new way of interaction. All of a sudden, while the child was playing with a music app, the child started applauding and encouraging the audience (us) to applaud whenever she performed.

(Observation)

In observing this scene, the RA concluded that the child felt safe and confident enough to know she would have an appreciative audience.

The ML continued with another activity that involved paper and drawing. ML spread out paper from wall to wall; children sat along the paper and were given one coloured pencil each. ML used a
saxophone for this activity; ML explained that whilst she played the saxophone everyone was allowed to draw whatever they wanted to on the paper, doodled with the coloured pencil and within a space assigned to them on the paper.

(Observation)

These multi-media activities seem very important and to engage people well with powerful responses (an example of a drawing produced can be seen on the cover of this report). The ML made sure she had a lot of resources and would juggle them to include and accommodate people and respond to moods. When children were already familiar with instruments she would take them further with music making Apps. Her sessions were highly prepared but flexible.

4.3 FACILITATING RESILIENCE

To survive domestic violence, the families in the refuge have already demonstrated great resilience. MFC is building on that resilience as well as fostering more of it:

“I feel very privileged that I’ve been let into some people’s lives who are having a really hard time and they have been very trusting with me… it’s been quite rewarding seeing mothers and children just making the best of things really. Grabbing hold of an opportunity to make music.”

(Music Leader)

As previously suggested, the MFC sessions also help to break an existing cycle of negative expectations. One of the key objectives of MFC is to build resilience, acknowledging that if hard times are ahead, young people need to build confidence to deal with them. MFC can be seen as a means of promoting their emotional health and immunity to harm. One of the key aspects of resilience is feeling strong enough to make a choice for yourself. Thus, for the ML the element of choice is an integral part of the sessions:

“Taking control is quite important for some children who have had a lot of their world just tipped upside down. To have an hour when they are making choices for themselves rather than having choices made for them.”

(Music Leader)

This is something that is acknowledged and appreciated by participants:

How do the sessions make you feel?

“I like to see my daughter enjoying herself and giving everything a go, seeing that’s she’s having fun. I feel good about that... It has more freedom to do what you like... they want to play what they want to play they don’t want to be told... she lets the child make their own choice which his good. Music is necessary.”

(Mother of two-year old child)
The ML had had an opportunity to teach one girl piano as part of MFC; this had given the child strength and a sense of opportunity and direction, a tool to make the transition to a new school and possibly a transition to a career in the future:

“She said that she had gone into school saying that she was confident with what she had learnt and that she wanted to do more music at school and she also talked about wanting to do media studies as I’d also talked about how we made films at PMZ. It’s all part of the music business films. That little seed of an idea. I don’t know where she is now but that might be helping to shape her future, who knows. It’s opening windows and doors.”

(Music Leader)

4.4 TOOLS FOR TRANSITIONS

MFC posits music as a tool for navigating transitions, whether they be changes in place in time or in identity. The most important transition may be a change in the way you feel about yourself. This is the change that needs to happen before other practical changes do. So whilst some may argue that other kinds of material resources for transition are more ‘useful’ to young people than music, being able to make proper use of them relies upon a sense of self-worth and being able to express feelings. One of the most expressive moments the RA witnessed during observation was participants making their own beautiful musical instruments:

The ML started the session with making music instruments. ML had brought wooden spoons in different sizes that had two holes in their bowls. Afterwards, ML laid markers on the table for children to draw on the spoons as they pleased. With some supervision and help- when requested- children drew what they wanted and used as many colours as they wanted.

After the children were satisfied with the colouring of their spoons, ML offered them shiny stickers to put on the spoons if they wanted to, ML had brought in several sheets and instructed children to use as many stickers as they wanted as long as they did not cover the holes in the spoon’s bowl, because they need the holes accessible for the next step. Most children used stickers and with some help were able to follow the instructions. Suddenly, one of the children, a boy who had been very engaged in the activity, started singing ‘Twinkle Twinkle Little Star’ when he saw the sparkling stickers, the other children joined in...

After the children finished with the stickers, ML gave them a piece of string, again asking children if they like a specific colour. ML instructed children to thread the string through the holes in the spoon. Next, children were instructed to choose different beads and insert them into the string along with some small bells at the end of the string. Once children were content with the number and colour of beads and bells, adults helped them secure them by knotting the ends of the strings. The same child who started singing before stared singing ‘Jingle Bells’ when the ML mentioned jingle bells.

(Observation)
This instrument is featured on the cover of our report. These delicate but powerful creative objects helped them to recapture how they felt during sessions and carry this through to their future lives.

“She (nine year old) was able to make something, She’s still got them now so she still plays with them at home now…I think it’s a way for her to show her feelings like she’s feeling at the time…and it gets her to use a little bit more social interaction, because both my girls aren’t very confident at the moment.”

(Mother of nine-year-old girl and fourteen-year-old boy)

Transition can sometimes be circular. It was interesting to see that sometimes the transition was back to a former self that had been crushed by their abusive partner:

“When I was younger, a teenager actually, no I was in my twenties, I was a backing vocalist for a band

Oh wow

Yeah it didn’t last very long obviously because my partner wasn’t very supportive in that and didn’t like the fact that I was going out with a group of people and some of them involved other men so…”

The music sessions help to provide a bridge forward. Participants have told the music leader that they plan to buy a guitar or take their children to music groups once they are settled:

“I actually heard that yesterday – I think that music is really important and I would like this to continue, having musical involvement with my child.”

(Mother)

Thus MFC gives them both opportunity and permission to start or regain a lifetime relationship with music.

4.5 MOVING ON SUCCESSFULLY

The study provided an opportunity to interview a young person and family who have used the MFC sessions to help rebuild their life: moving on from the refuge to a home, work and school. It also helped provide a contrast between interview and visual data. This young man aged thirteen, happy to be named as Tyler, is a PMZ success story and a video has been made of his celebratory and thankful feelings about MFC. The interview uncovered some of the complex process beneath this celebration:

“It (MFC) made me feel like…I don’t really know, it made me feel like happy and that I could be somewhere else and like not have to be someone else at a different place, so like being the same person but like just not change because you might be scared and that.”

Tyler
Tyler evokes the fact that not all change is positive, in a violent environment he had to change because he was scared, in MFC he could leave that ‘wrong’ place and that person behind.

Tyler is still going to PMZ and making music and this is helping him to get to know people and make friends. Music is diffuse, opening up many possible pathways to build friendship and social capital:

“Some children have turned up with parents at PMZ in Devonport so it’s been another signpost, another stepping stone becoming a different part of the community.”

(Music Leader)

An unexpected benefit of MFC was that it built confidence for speakers of English as a second language and helped them to develop language skills. It also offered a resource that was not language-dependent. As we observed and the refuge workers confirmed women of all nationalities may come to the refuge including those with no English at all:

“I can recall one woman from Bangladesh [who] couldn’t speak any English and we had to have interpreters in and she had a small child, but with a session like MFC it didn’t really matter.”

Right

“And that was a session that that child could engage with that no other service could offer you…I think music is one of the few things that offer something that a lot of service can’t.”

(Refuge worker)

4.6 PROBLEMS AND PERSPECTIVES

The biggest problem MFC faces in the refuge is encouraging mothers to take part. As explained above, there are many reasons for non-participation. One resident who did take part commented that none of the other children there had ever been to playgroup and so for many taking part in such activities was outside their experience altogether.

Of potential concern is that it seems to be the women from more professional backgrounds who are willing to talk about their experiences of MFC, although observations indicated that this is not true of all who take part in MFC. As with all such initiatives, it is the non-participants who lock themselves in their room and refuse to come out who may need it most. Low numbers can also be attributed to the fact that there are not always many families with children living in the refuge and we found that women were reluctant to attend if they don’t have children, even though they know they would be “more than welcome”. This raises the question whether it is worth running sessions for women alone.

The refuge is an in-between space used not only by those living there but by those in safe houses and those accessing the floating domestic violence service. This in-betweenness in some ways makes it ideal for transition; but in others, despite the efforts of the workers, it is difficult for it to be a space where anyone would choose to be, if they were not in need. It is a protected but not necessarily a comforting space. The facilities for the music sessions are not ideal:
The room seemed small and it was awkward having some people on the floor and others sitting on chairs. ML and refuge worker mentioned that settings for the sessions had changed and that they have noticed that in the summer more people joined in the sessions because they were conducted in more open spaces.

(Observation)

We agree that using an open space where women can be half in and half out of sessions, gradually building up confidence to take part, is ideal, but in this refuge this can only really happen in good weather. Nevertheless there is virtue in taking the sessions to women and families where they are. Refuge workers noted that families may be afraid to leave the refuge, especially for those new to the city. MFC is an opportunity to build social interaction with others and move on with more confidence to other more permanent environments.

5 CONCLUSIONS

The writer Audre Lorde, uses the word ‘poetry’ to express the power and the necessity of art forms, including music:

“Poetry is not a luxury. It is a vital necessity of our existence. It forms the quality of the light within which we predicate our hopes and dreams toward survival and change, first made into language, then into idea, then into more tangible action. Poetry is the way we help give name to the nameless so it can be thought.”

(Lorde, 1984: 37, see also Knight, forthcoming)

Music may have been sadly lacking in the lives of women and children living in the refuge. In abusive homes, they have been deprived of their human right to hope and dream. In order to change the conditions of their life, they have to be able to imagine that they are worthy and capable of a better one. In making this change, material resources such as housing and employment are fundamentally important, but so too are less tangible resources for survival, such as music. The capacity to hope is beyond measure and this MFC provides.

That said, the transitory nature of families in refuges makes it very difficult to evaluate interventions such as MFC, especially when the target participants have so many barriers to engagement. Sometimes there are no participants for a session. Numbers of participants overall are small but this is proportional to the size of the refuge and number of resident children at any given week. This affects the provision of MFC and has also affected our study in that we were not able to interview many people.

In both, offering the provision and conducting the study, sensitivity is very important and hounding women to either attend or talk about it is counter-productive and disrespectful. However, those experienced in this field of work know that progress is slow and incremental, which suggests that
MFC needs time and patience to embed and for women to feel safe accessing it. Some other agencies have refused to continue working with the refuge because numbers of children available to work with can never be guaranteed:

“It’s the inconsistency of our service that sort of deters agencies I think a lot of the time from coming in to work with us…PMZ are really flexible and with a service like ours which goes up and down a lot in numbers that’s an important part of it.”

(Refuge worker)

This in fact is one of MFC’s strengths: it is willing to respond to the needs of the women and families rather than impose its own rhythms upon them. In this way, it can gently encourage even the most reluctant participant to benefit from its provision. The organisation of PMZ with a strong central hub supporting a web of myriad activities, which have some leeway to ebb and flow and learn from and connect with each other, also makes this approach possible and sustainable.

It does not seem appropriate to focus on the numerical aspect (even though we can make some recommendations as to addressing this). Our emphasis is on the quality of MFC and how far it meets its aims for those who take part. Our observations and interviews show that in terms of providing respite, resilience, coping with transition and building family trust MFC is highly successful.

The skills and creativity demonstrated by the ML are inspiring. It also seems very important to continue working with this particular group of people. As stated at the beginning of the report, domestic violence, already endemic, is on the rise. One of the goals of such violence is to silence women and children, make them feel hopeless and worthless and unable to break free of such norms of behaviour. MFC counters this, helping to break a potential cycle of abuse for the next generation. In doing so it builds capacity for the future, and reduces potential resources that might be needed to support future generations. It thus has a cumulative effect far beyond the numbers involved and provides an important social role:

“Has anything changed for you because of these sessions?”

“Oh yeah definitely, definitely because you do get more confidence and you do feel more relaxed and do feel more positive when you leave”

(Mother of nine and fourteen year-old)

“I think it’s a very good class. I think after we leave from here we would probably like to keep going. I would recommend to people and I would like my daughter to continue.”

(Mother of 2-year-old old)

You know I noted today that there was one resident who was engaging with the music session and with other children and other people and she’s very much she isolates herself she doesn’t like to engage with other people and that’s the first time I’ve ever seen her engage with a group so I think that’s credit to the individual and to the ML for building a rapport on a one on one
basis with her...so that's had a positive effect on her and as a result her child because now the child is able to integrate with other children.

(Refuge worker)

6 RECOMMENDATIONS

We realise many of these suggestions may have already been tried, but we present them for consideration.

- Continue to run MFC in the women’s refuge
- Improve the targeting and advertising of the sessions to non-participants, respecting their right to refuse. Think about ways to spread the word informally beyond written advertisements: for example via peer networks (asking participants to encourage others to come), via informal introductions by the ML, by explanations by refuge workers, by encouraging residents to view the video of Tyler, the 13 year old boy who received the music sessions both while he was in the refuge and afterwards at PMZ
- Run sessions for women by themselves (whether they have families or not)
- Improve timing of sessions: for example run one session for small children in the daytime and one after school for older children
- Increase resources for CDs and recordings of songs
- Develop more direct pathways to PMZ post refuge, for example via PMZ website PMZ pack of info to give to all participants or scheduled visits or bespoke follow-up sessions to ease the transition
- The success of the project was dependent on the approach and skills of the ML. PMZ needs to ensure that other MLs working in refuges have similar patience, flexibility and creativity to work effectively with families in transition
- For effective and successful transfer of this type of music intervention, it is essential for music leaders to develop and exercise patience, flexibility and creativity in addition to their musical skills
- PMZ to develop further links with other organisations working with those with English as a second language, including schools


ACKNOWLEDGEMENTS

With thanks to the women and children who agreed to be interviewed, to the refuge staff and to the music leader and Plymouth Music Zone.
A. Consent Form for Adult Participants

Evaluation of Music For A Change Project (MFC) - Plymouth Music Zone

Dear Participant

We are from Plymouth University and are doing some research for Plymouth Music Zone, the people who run music sessions here. We would like to speak to you about what it has been like taking part in the music sessions. We want to know if you have enjoyed them and if they help you.

We would like to talk to you in private and if you agree we will tape the conversation.

We will write a report to tell Plymouth Music Zone what everyone thinks about the music sessions. In the report we won't say which places we visited or the names of any of the people we interviewed. We may use your words but your name will not be used.

The report will be seen first by Plymouth Music Zone and the people who funded this research. Plymouth Music Zone may put it on their website and we may put it on our website. We may write papers about the research but no-one will be able to know that you were involved in it.

At any point during or after the interview up to the point we write the report you can withdraw and say you don’t want to be involved.

The university’s research ethics policy states that data should be securely held for a minimum of ten years after the completion of the research project. Electronic data will be stored on university-owned password protected computers or laptops and individual files and/or discs will be encrypted. Hard copies of data will be stored in locked filing cabinets and disposed of securely when no longer required.

PMZ will let you know the main things we say in our report and if you wish you can see a copy of the report.

Thank you very much.

Professor Jocey Quinn and Claudia Blandon

Contact information:

Professor Jocey Quinn: joceyquinn@plymouth.ac.uk or 01752 585454.

Claudia Blandon: claudia.blandon@plymouth.ac.uk or 01752 585451.

I confirm that I have read and understood the above information and give my consent to being interviewed

Signature ___________________________

Date ______________________________
B. Parent’s consent for her child(ren) to be interviewed

Evaluation of Music For A Change Project (MFC) - Plymouth Music Zone

Research Information sheet for adults about research with children

Purpose of the research

We are from Plymouth University and are doing some research for Plymouth Music Zone, the people who run music sessions here. We would like to speak to your child about what it has been like taking part in the music sessions. We want to know if they have enjoyed them and if they help them.

Description of the research process

If you give your consent for your child to participate in the research, we will also ask your child if they would like to participate. We will give them a project information sheet in a format that is appropriate for their age and we will show this to you beforehand. If your child would like to participate and you give your consent, we will ask them some questions about the music sessions and how they make them feel. The interview will take place right after the music session. We will ask you to be nearby while we talk with your child. We will ask them questions about their impressions of the music sessions, what they like and dislike and how they feel like after the sessions. If you or your child would like to stop the research at any time, just say so and we will stop. The interview with children will take approximately 15 minutes, depending on the age of the child. The interview with your child will be recorded using a digital recorder but no one will be identified by name on the recording. The information recorded is confidential unless you or your child might be in danger. Only two persons will listen to the recording. It will be stored in a secure, password-protected environment.

We will write a report to tell Plymouth Music Zone what everyone thinks about the music sessions. In the report we won’t say where we were or the names of any of the people we talked to. We may use your words but your name will not be used. In any oral or written publications, each participant will be given a pseudonym and any identifying characteristics in the research material will be removed.

The report will be seen first by Plymouth Music Zone and the people who funded this research. Plymouth Music Zone may put it on their website and we may put it on our website. We may write papers about the research but no-one will be able to know that you were part of it.

Voluntary participation and right to withdraw

Participation in the research is voluntary. Before you decide, you both can ask questions and talk to anyone you feel comfortable with. Your child may decide to withdraw from the research at any time before the data is analysed and this will not affect their rights in anyway. You may withdraw your child from the research at any time and this will not affect your rights in any way.

If your child feels upset or wants to stop the conversation at any time you or they can let me know. We will not begin again unless they want to carry on talking. There will be no immediate direct benefits to your child if you and your child agree to participate in the research apart from it being an opportunity to talk about their opinions of the music sessions.

Thank you very much.

Professor Jocey Quinn and Claudia Blandon

Our Contact information:
Professor Jocey Quinn: joceyquinn@plymouth.ac.uk or 01752 585454.
Claudia Blandon: claudia.blandon@plymouth.ac.uk or 01752 585451.
Evaluation of Music for A Change - Plymouth Music Zone

Researchers: Professor Jocey Quinn & Claudia Blandon (RA)

Research Consent Form for Adults with Children

I have been asked to give my consent for my child to participate in the evaluation of the Music for a Change Project. The objectives of this research have been explained to me and I have read the Information Sheets for Parents and the Information Sheet for Children. I understand that I am free to withdraw my child from the research at any stage before the data is analysed and that my child is free to withdraw at any stage. I understand that I can ask for my child’s data to be destroyed if I, or they, wish. I understand that my child’s anonymity is guaranteed and all of my child’s personal information is confidential unless it is reported that someone is in imminent danger.

I am aware that there may be no benefits to my child from the research and that my child will not be compensated for participation. I understand that, and agree to, the interviews will be carried out after the music sessions. I will be nearby whenever the researcher is talking to my child and I, or my child, can ask the researcher to stop the research process at any time.

I have been provided with the name of both the Principal Investigator and research assistant conducting the interviews, who can be easily contacted using the contact details I was given. I have read the foregoing information, or it has been read to me. I have had the opportunity to ask questions about it and so has my child. Any questions that I, or my child, have asked have been answered to my/their satisfaction. I consent voluntarily for my child to participate in this project and understand that I have the right to withdraw them from the study at any time.

Under these circumstances, I agree for my child to participate in the research.

Name______________________________________

Signature___________________________________         Date:________________

I am the *parent /legal guardian of ______________________________________
C. Children’s consent form and information sheet

Evaluation of Music for A Change - Plymouth Music Zone

Research Information sheet for children

What is this all about?

We are from Plymouth University and are doing some research for Plymouth Music Zone, the people who run music sessions here. We would like to speak to you about what it has been like taking part in the music sessions. We want to know if you have enjoyed them and if they help you.

What does this project mean for you?

If you are happy to be part of this project, Claudia will ask you a few questions about your opinions of the music sessions. We will talk after the session, and your mum can be nearby while we talk. We will probably be talking for about 15 minutes. Our talking will be recorded using a special machine that records people’s voices. If you want to hear what you sound like on the machine, just ask me and I will play it for you. The information recorded is only going to be listened to by me and another person at the university. I will keep it in a safe place.

We will write a report to tell Plymouth Music Zone what everyone thinks about the music sessions. In the report we won’t say where we were or the names of any of the people we talked to. We may use your words but your name will not be used. If you wish you can choose a pretend name instead.

The report will be seen first by Plymouth Music Zone and the people who funded this research. Plymouth Music Zone may put it on their website and we may put it on our website. We may write papers about the research but no-one will be able to know that you were part of it.

Saying yes or no

You do not have to talk to me. It is up to you. Before you decide, you and your mum can ask questions and talk to anyone you feel comfortable with. If you do decide to talk to me, you can change your mind at any time. I will not tell anyone what you tell me, unless you or anyone you know might be in danger. If you want to stop the talking or playing at any time, just say so and we will stop.

Good things or bad things about talking to me

Sometimes talking about experiences can be a good thing. Sometimes, talking about experiences can be upsetting. If you feel upset or want to stop talking to me just tell me. We will not begin again unless you want to carry on talking.

Thank you very much.

Professor Jocey Quinn and Claudia Blandon

Our Contact information:

Professor Jocey Quinn: joceyquinn@plymouth.ac.uk or 01752 585454.

Claudia Blandon: claudia.blandon@plymouth.ac.uk or 01752 585451.
Evaluation of Music for A Change - Plymouth Music Zone

Researchers: Professor Jocey Quinn & Claudia Blandon (RA)

Research Consent Form for Children

Claudia has asked me if I would like to talk a little bit about what I think about the music sessions here and how they make me feel. This is because I have attended the session today. I know that I don’t have to do this if I don’t want to and that my mum could be nearby when I talk to her. If I want to stop talking, I can just say so and I can stop. I know that Claudia will not use my name if she has to tell anyone about what I say to her, unless I am in danger or someone I know. I can also choose a pretend name that she will use if I want to. I know that I can ask questions at any time and I have been allowed to ask some already.

Name of Child_______________________________________

Signature of Child____________________________________

Date_______________________________________________
Dear Resident

We are from Plymouth University and are doing some research for Plymouth Music Zone, the people who run music sessions here. We would like to speak to you about what you know or don’t know about the sessions. We would like to know your thoughts about why you have decided not to attend the sessions.

We would like to talk to you in private and if you agree we will tape the conversation.

We will write a report to tell Plymouth Music Zone what everyone thinks about the music sessions. In the report we won’t say which homes we visited or the names of any of the people we interviewed. We may use your words but your name will not be used.

The report will be seen first by Plymouth Music Zone and the people who funded this research. Plymouth Music Zone may put it on their website and we may put it on our website. We may write papers about the research but no-one will be able to know that you were involved in it.

At any point during or after the interview up to the point we write the report you can withdraw and say you don’t want to be involved.

The university’s research ethics policy states that data should be securely held for a minimum of ten years after the completion of the research project. Electronic data will be stored on university-owned password protected computers or laptops and individual files and/or discs will be encrypted. Hard copies of data will be stored in locked filing cabinets and disposed of securely when no longer required.

PMZ will let you know the main things we say in our report and if you wish you can see a copy of the report.

Thank you very much.

Professor Jocey Quinn and Claudia Blandon

Contact information:

Professor Jocey Quinn: joceyquinn@plymouth.ac.uk or 01752 585454.

Claudia Blandon: claudia.blandon@plymouth.ac.uk or 01752 585451.

I confirm that I have read and understood the above information and give my consent to being interviewed.

Signature ___________________________

Date _______________________________
E. Music Leader consent form and information sheet

Evaluation of Music for A Change Project

Dear Music Leader

We are from Plymouth University and are doing some research for Plymouth Music Zone on the Music for A Change Project. We would like to speak to you about your experiences of running the singing sessions.

We would like to talk to you in private and if you agree we will tape the conversation.

We will write a report to tell Plymouth Music Zone what everyone thinks about the singing sessions. In the report we won’t say which homes we visited or the names of any of the people we interviewed. We may use your words but your name will not be used.

The report will be seen first by Plymouth Music Zone and funders. Plymouth Music Zone may put it on their website and we may put it on our website. We may also write papers about the research and present it in national and international conferences.

At any point during or after the interview up to the point we write the report, you can withdraw and say you don’t want to be involved.

The university’s research ethics policy states that data should be securely held for a minimum of ten years after the completion of the research project. Electronic data will be stored on university-owned password protected computers or laptops and individual files and/or discs will be encrypted. Hard copies of data will be stored in locked filing cabinets and disposed of securely when no longer required.

PMZ will let you know the main things we say in our report and if you wish you can see a copy of the report.

Thank you very much

Professor Jocey Quinn and Claudia Blandon

Contact information:

Professor Jocey Quinn: jocey.quinn@plymouth.ac.uk or 01752 585454.
Claudia Blandon: Claudia.blandon@plymouth.ac.uk or 01752 585451.

I confirm that I have read and understood the above information and give my consent to being interviewed.

Signature __________________________
Date ______________________________
Evaluation of Music for A Change Project

Dear Member of Staff

We are from Plymouth University and are doing some research for Plymouth Music Zone on the music sessions they run where you work. We would like to speak to you about what you think of the music sessions and whether you think they benefit the residents.

We would like to talk to you in private and if you agree we will tape the conversation.

We will write a report to tell Plymouth Music Zone what everyone thinks about the music sessions. In the report we won't say which places we visited or the names of any of the people we interviewed. We may use your words but your name will not be used.

The report will be seen first by Plymouth Music Zone and funders. We may write papers about the research but no-one will be able to know that you were involved in it. Plymouth Music Zone may put it on their website and we may put it on our website. We may also write papers about the research and present it in national and international conferences.

At any point during or after the interview up to the point we write the report, you can withdraw and say you don’t want to be involved.

The university’s research ethics policy states that data should be securely held for a minimum of ten years after the completion of the research project. Electronic data will be stored on university-owned password protected computers or laptops and individual files and/or discs will be encrypted. Hard copies of data will be stored in locked filing cabinets and disposed of securely when no longer required.

PMZ will let you know the main things we say in our report and if you wish you can see a copy of the report.

Thank you very much

Professor Jocey Quinn and Claudia Blandon

Contact Information:

Professor Jocey Quinn: jocey.quinn@plymouth.ac.uk or 01752 585454.

Claudia Blandon: Claudia.blandon@plymouth.ac.uk or 01752 585451.

I confirm that I have read and understood the above information and give my consent to being interviewed.

Signature _________________________

Date _____________________________