Anti-oppressive pedagogy as an opportunity for consciousness raising in the music therapy profession: A critical disability studies perspective

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Abstract
In pedagogic literature informed by critical disability studies, academia is widely cited as an ableist institution: the training ground for the professions of normalcy. Music therapy could readily be complicit in this normalising discourse with its potential to pathologise participants and to maintain a strict ‘normative divide’, between professionals it trains and participants who engage with its provision. Activists, advocates and disabled therapists have posed a welcome challenge to this positioning in recent publications, but the pedagogical dimensions of music therapy training in this area have received less attention. The emerging signature pedagogy of music therapy and its omissions will be considered, which may explain the need for an increased social justice focus in music therapy curricula. This article considers the potential of applying Kumashiro’s typologies of anti-oppressive education in music therapy training: problematising existing pedagogies and critically reflecting upon the potential of a social justice informed curriculum. These approaches have the potential to reframe Otherness by acknowledging expertise in lived experience. Through introducing these frameworks for socially just, anti-oppressive pedagogies, this article invites consciousness raising in music therapy pedagogy through engagement with critical disability studies theory and philosophy.

Keywords
anti-oppressive pedagogy; critical disability studies; disability studies; education; music therapy; social justice

Introduction
The psychoanalyst Erik Erikson once observed that if you wish to understand a culture, study its nurseries. There is a similar principle for the understanding of professions: if you wish to understand why professions develop as they do, study their nurseries, in this case, their forms of professional preparation. (Shulman, 2005: 52)

Music therapy is evolving significantly beyond its initial recognition and acceptance as an evidence-based discipline in the 20th century, into a phase of further development and maturation in the 21st century (Bonde et al., 2019; Odell-Miller, 2016). This evolution includes the sorely needed exploration of the potentially oppressive and socially unjust practices that are as present in the profession as they are in wider society (Fansler et al., 2019; Pickard et al., 2020). This article concentrates specifically on how these issues manifest in and are perpetuated through music therapy pedagogy. A useful definition of pedagogy is offered by Ellsworth (2005; cited in Beckett, 2015: 77): ‘that which informs teaching and from which curriculum emerges’.

The evidence-base for the effectiveness and efficacy of music therapy has been evolving for decades: considering the value of music therapy to different populations and different cultures. However, less attention has been paid to the way in which music therapists learn and to the specific content that they are taught. Fansler et al.’s (2019) important article contributes to the development of a vital conversation about queering the music therapy curriculum, building on the work undertaken at the ‘Critical Pedagogies in Arts Therapies’ conference series to ‘disrupt picturesque forms of arts therapies education’ (Lepere, 2019: 294). Fansler et al. (2019) usefully define the notion of critical pedagogy that will be discussed in this article.

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I passionately believe that the intersections of the disciplines of music therapy and critical disability studies offer opportunities for vital learning and insight, for educators and students alike. As recognised by Marisol Norris (2020) and Sue Baines (2021), I am aware that much of my own music therapy education and practice have been framed by an ableist, white, Eurocentric lens. I am committed to challenging this tradition for future generations, and to learning more about the intersections of the disciplines of music therapy and critical disability studies offer opportunities for vital learning and insight, for educators and students alike. As recognised by Marisol Norris (2020) and Sue Baines (2021), I am aware that much of my own music therapy education and practice have been framed by an ableist, white, Eurocentric lens. I am committed to challenging this tradition for future generations, and to learning more about how I can develop my understanding and actions as an ally. 

Disability studies, critical disability studies and music therapy

Before embarking on a discussion about anti-oppressive practice and pedagogy, the theoretical and philosophical context of critical disability studies (Goodley, 2017; Watson and Vehmas, 2020) will be briefly introduced and consideration given to how this relates to music therapy.2 Disability studies was initially established as a discipline in the latter half of the 20th century, growing from the disability rights movement. Arguably, the central tenet of disability studies was the social model of disability (Oliver, 1983; Oliver and Barnes, 2012) which recognises that society disables people more so than their bodies. This paradigm shift of positioning the ‘problem’ of disability with society, rather than with disabled people, was a significant change in the disability discourse (Barnes, 2020; Goodley, 2017; Oliver, 2013). While the social model of disability has become relatively well-known and accepted in wider society, its acceptance is arguably less forthcoming within the music therapy community, where a medical model perspective is still prevalent and pervasive (Gross, 2018; Pickard et al., 2020; Straus, 2011). Challenges to this position have been made in the seminal resource-oriented music therapy approach of Randi Rolvsjord (2010, 2014) as well as the strides made in the community music therapy movement (Stige et al., 2010; Stige and Aarø, 2012).

It is accepted that there are times when a medicalised approach is highly appropriate or necessary (see, for example, Dileo and Bradt, 2009; Wheeler, 2015), however in relation to disability, pathologising participants in music therapy and seeking to remediate their disabled identity through a normalising discourse is highly problematic, as well as outdated, in relation to how disabled and neurodivergent people tell us they want to be understood (Kapp, 2019; Wood, 2014).

The discipline of disability studies has continued to evolve and grow, with several sub-disciplines and permutations becoming established. This has led to increased plurality in disability studies and the advent of critical disability studies as a postconventional approach to disability (Goodley, 2013, 2017; Goodley et al., 2019; Mallett and Runswick-Cole, 2014; Shildrick, 2020).

This critical and intersectional lens enable consideration of multiple and concurrent forms of oppression. As Goodley (2013) notes, ‘while we may well start with disability, we often never end with it as we engage with other transformative arenas including feminist, critical race and queer theories’ (p. 631).

Before continuing, it is pertinent to define the concept of Othering or Otherness, which is cited in this article and in critical disability studies literature more widely (Goodley, 2017). Hughes (2009) defines Othering as the process whereby ‘normal’ and ‘pathological’ are separated, creating a normative divide (Mitchell, 2016), leading to a subsequent framing of disability and diversity as ‘abnormal’ (Milton, 2012). These discourses of Othering and Otherness are addressed in different ways through Kumashiro’s (2000) typologies, challenging both the prevalence of oppressive practice and pedagogy, and the potential for internalised ableism and oppression for marginalised groups (Tarvainen, 2019).

The intersection between music therapy and disability studies has been historically fraught (see Pickard, 2020b; Tsiris, 2013) with resistance from scholars of music and disability studies to accepting the potential of music therapy as an emancipatory practice (Straus, 2011). A special issue of *Voices* in 2014 provided a welcome introduction to the potential of merging these fields (Cameron, 2014; Hadley, 2014; LaCom and Reed, 2014; Metell, 2014; Rolvsjord, 2014). Robert Gross (2018) advocates for the adoption of the social model of disability in music therapy, while Susan Hadley (2013)
touches upon the potential disability studies has to inform anti-oppressive music therapy practice. Maren Metell (2019) makes the case for the continued need to queer the discourse around music therapy and disability, to ‘counter music therapy approaches that aim at cure or normalization of difference’ (p. 2). Kendra Bodry and Melody Schwantes (2021) recently advocated that music therapists need to more deeply consider how disability studies inform their work. There seems to be momentum gathering for the potential of disability studies and critical disability studies to further inform and enrich music therapy practices. This article proposes that there is much to inform music therapy pedagogy from these important dialogues.

**Music therapy pedagogy**

There are a small number of seminal texts about music therapy pedagogy, which discuss the accepted approaches to educating trainees in the discipline (Bonde et al., 2019; Bruscia and Maranto, 1987; Bunt and Hoskyns, 2013; Edwards, 2014, 2016; Goodman, 2011, 2015; Hanser, 2016; Holden et al., 2020; Wheeler and Grocke, 2001; Wheeler et al., 2005; Wigram, 2009), with international variations and distinctions between undergraduate and postgraduate training noted (Bonde et al., 2019; Edwards, 2016). Karen Goodman’s (2011, 2015) texts are the most thorough and expansive on music therapy pedagogy, focusing on an American model (2011) and on international perspectives (2015), respectively.

These sources could be seen to represent an emerging signature pedagogy (Shulman, 2005) for the subject of music therapy, incorporating musical, therapeutic and academic competencies (Bonde et al., 2019), taught through a range of pedagogical approaches (Goodman, 2011). Shulman (2005) proposed the term signature pedagogy to explain the ways in which students are prepared for their future profession through their educational experiences:

Signature pedagogies are important precisely because they are pervasive. They implicitly define what counts as knowledge in a field and how things become known. They define how knowledge is analyzed, criticized, accepted, or discarded. They define the functions of expertise in a field, the locus of authority, and the privileges of rank and standing. (p. 54)

Signature pedagogies involve the following three pedagogical dimensions: surface structure, deep structure and implicit structure. The surface structure of learning clinical improvisation skills, functional instrumental skills, repertoire and therapeutic techniques, as well as the deep structure of preparing to meet participants’ needs in a therapeutic context are largely undisputed components of music therapy’s signature pedagogy. These endeavours are achieved through a range of pedagogical devices, from didactic lectures to experiential groups and problem-based learning scenarios (Bonde et al., 2019; Goodman, 2011, 2015; Holden et al., 2020).

However, the implicit structure, ‘a moral dimension that comprises a set of beliefs about professional attitudes, values, and dispositions’ (Shulman, 2005: 54–55) is of particular relevance here and is potentially lesser discussed. Shulman (2005) proposes that signature pedagogies are also characterised by what they are not: ‘by the way [pedagogy] is shaped by what it does not impart or exemplify’ (p. 55). It is proposed that by looking at the implicit structure of music therapy’s signature pedagogy and the content which is rarely explicitly taught or explored, we might understand how oppressive practices may be perpetuated in the profession.

**Anti-oppressive practice in music therapy**

It is important to acknowledge the critical and influential work that has already been achieved at the intersection between anti-oppressive practice and music therapy. Most notably, this includes the work of Sue Baines (2013, 2021), Jane Edwards (Baines and Edwards, 2015, 2018) and Susan Hadley (2006, 2013, 2014, 2021). While beyond the scope of this article to fully discuss, these resources will be important parallel reading, as the intended purpose of this article is to further this important work by extending the focus from anti-oppressive practice specifically to anti-oppressive pedagogy.

**Anti-oppressive pedagogy**

Taking a critical disability studies lens to researching pedagogical approaches brings to light the ableist and normative potential of academia (Bolt and Penketh, 2016; Dolmage, 2017; Liasidou, 2014; Saltes, 2020). There is a wealth of research which demonstrates the elitist and ableist traditions of the academy (Dolmage, 2017) which seeks to perpetuate the normative divide (Mitchell, 2016) between those it educates and the populations they serve (Baines, 2021; Fansler et al., 2019; Gottschewski, 2020; Hadley, 2013; Pickard, 2020a; Rolvsjord, 2014). One potential response to this problematic narrative and tradition is to nurture consciousness raising through anti-oppressive pedagogy.

While there are multiple frameworks for understanding anti-oppressive pedagogy, the work of Kumashiro (2000) will be proposed here as a valuable synthesis for the discipline of music therapy. There is a need to embed anti-oppressive practices at multiple levels of music therapy education and across wider faculties and institutions. It is of note that in Kumashiro’s (2000) original work, there is much more discussion of racism, classism, sexism and heterosexism than there is of ableism or disablism (Goodley, 2014), which potentially operate below our cultural radar and therefore remain
socially acceptable and are thus perpetuated (Baglieri and Lalvani, 2019; Derby, 2016). This furthers the rationale for taking a particular focus on ableism and disablism in this article. Kumashiro (2000) proposes the following four typologies of anti-oppressive education, which will be discussed in turn, in relation to music therapy education:

- Education for the Other,
- Education About the Other,
- Education That is Critical of Privileging and Othering,
- Education that Changes Students and Society.

**Education for the Other**

This first typology, entitled Education for the Other, proposes that while on one hand, the entire programme and institution should be a safe space for students who might experience Othering, there is also value in creating dedicated and separate spaces where students can seek solidarity, advocacy and shared experiences. Kumashiro (2000) suggests that these separate spaces may be therapeutic, supportive and empowering.

In the context of disability and disablment, this is potentially an under-developed arena of music therapy pedagogy, since there is a significant underrepresentation of disabled music therapy students, tutors and practising music therapists. This signals that there is a need for further systemic transformation in the application and recruitment process, even before pedagogical practices are established (Baines, 2021; Fansler et al., 2019). There is fortunately a growing movement of disabled music therapists sharing their experiences and positioning internationally (Abbott, 2018; Ayson et al., 2020; Cole and Warner, 2020; Curtain et al., 2020; Kalenderidis, 2020; LaCom and Reed, 2014; Shaw, 2019; Thompson, 2020). There is also currently a virtual safe space, akin to that described by Kumashiro (2000), in a dedicated, closed social media group, as well as other communities within local music therapy organisations. At the time of writing, a network for disabled music therapists is in development by the British Association of Music Therapists (BAMT), which may further this agenda. However, many of the sources noted, as well as anecdotal evidence, portray challenges experienced by disabled students and disabled therapists navigating a highly ableist system in music therapy education (Davis et al., 2020; Fansler et al., 2019; Leza, 2020). It is also acknowledged that there may be many more music therapists who choose not to share their disabled, neurodivergent or Autistic identity, as Jessica Leza (2020) asserts,

These anecdotes can be taken as indicators that the field is moving towards a more open acceptance of diverse neurologies and disability, but I would be remiss if I did not acknowledge that the vast majority of neurodivergent MTs and MT students seem to feel safer by engaging in forms of masking and privacy surrounding diagnosis, and instead engage in advocacy and education without personally disclosing to the field at large. (p. 215)

Reflecting on this movement of safe spaces and increased activism by disabled music therapists, there is a responsibility for educational establishments to recognise first the need for addressing systemic injustice which leads to the oppression and subsequent underrepresentation of disabled students, and second, the importance of safe spaces for students from oppressed groups once engaged in music therapy education.

A strength of this typology is that it makes explicit the concept of Otherness and oppression, and calls on educators to ensure that their pedagogy both acknowledges and affirms the diversity of students; to fail to acknowledge diversity is to be complicit in oppression (Hadley, 2013). However, a critique of this typology of anti-oppressive education is that while Education for the Other promotes safe spaces, positive role models and advocacy, it does not challenge the problematic nature of Othering (Beckett, 2015). As noted, it also does not challenge or disrupt the ableist recruitment practices which lead to disabled students being so underrepresented and minoritised in the first place (Baines, 2021). This typology could further be perceived to place the burden of change on individuals labelled as Other rather than the dominant group. From a disability studies perspective, this aligns with the medical or individual model of disability, where the ‘problem’ of disability is seen to reside with the individual and thus the focus of any intervention seeks to change the individual rather than society (Goodley, 2017). This is further evidence of the relevance of introducing paradigms of disability (Baglieri and Shapiro, 2017; Gross, 2018; Pickard, 2020b) in music therapy curricula, in order to provide the lexicon for understanding both pedagogical and activist positions.

In relation to the wider aspiration of consciousness raising and anti-oppressive pedagogy, Education for the Other does not sufficiently challenge the dominant group to recognise or question their oppressive potential and practices. Young (1990) summarises this systemic perspective:

[Oppression]’s causes are embedded in unquestioned norms, habits and symbols, in the assumptions of underlying institutional rules and the collective consequences of following these rules [...] Oppression refers to the vast and deep injustices some groups suffer as a consequence of often unconscious assumptions and reactions of well-meaning people in ordinary interactions, media and cultural stereotypes, and structural features of bureaucratic hierarchies and market mechanisms – in short, the normal processes of everyday life [...] We cannot eliminate this structural oppression by getting rid of the rulers or making some new laws, because oppressions are systematically reproduced in major economic, political and cultural institutions. (p. 41)
This typology of anti-oppressive education does not necessarily challenge embedded and unquestioned ableist practices which lead to oppression, and therefore is insufficient, in isolation, to lead to social justice. However, creating safe spaces for oppressed groups may enable opportunities for shared experiences and scope for building capacity, resilience and expertise to challenge an ableist system.

**Education about the Other**

Education *About the Other* focuses on ‘what all students – privileged and marginalised – know and should know about the Other’ (Kumashiro, 2000: 31). This typology is an opportunity to challenge problematic partial knowledge and to critically examine and disrupt the self-Other binary (Beckett, 2015). In addition, this typology presents an opportunity to challenge inaccurate ‘bestowed knowledge’ about diversity, difference and disability (Moore and Slee, 2020: 267) and to dispel unhelpful myths and stereotypes (Baglieri and Shapiro, 2017; Goodley, 2017).

Kumashiro (2000) offers two models of Education *About the Other*, either including specific content on the Other or integrating Otherness throughout the curriculum. In relation to disability, as well as other minority groups, it is imperative that Education *About the Other* is delivered with authenticity and congruence. As such, the latter model is proposed as a far more respectful mode of anti-oppressive pedagogy in music therapy curricula.

Means of ‘integrating Otherness throughout the curriculum’ (Kumashiro, 2000: 33) can include centering the voices of disabled authors, musicians, participants and therapists to educate students in the lived experience of ableism and disability, challenging existing gatekeeping practices:

> There is a correlation between those who are ‘in’ (as cited above, primarily white, nondisabled cis women and men who have had access to higher education and are musicians trained in European classical music) as having acceptable knowledges and those who are ‘out’ as not. ‘Gatekeeping’ practices become established based on which knowledges are deemed (un)acceptable. (Fansler et al., 2019: 7)

Kapp (2019) terms this privileging of expertise in lived experience ‘standpoint epistemology’, and this is a central tenet of the disability rights movement, whose ethos ‘nothing about us, without us’ is highly applicable here. This also relates to Adenike Webb’s (2019) work on race and culture, which suggests,

> At heart is considering a shift in the distribution of power within academia by giving voice to students with cultural and lived experience that differs from that of the dominant culture. (p. 143)

Centering Otherness in the curriculum in this way further normalises Otherness and promotes celebration of diversity rather than stigmatisation of difference. However, Angharad Beckett (2015) rightly identifies that this typology could serve to foster a dominant narrative of the Other’s experience or perpetuate a homogeneous stereotype of disabled people.

Beckett (2015) proposes introducing the construct of multiple oppressions to avoid essentialism or stereotyping in this typology, for example, acknowledging that one student, participant or therapist may identify with multiple privileged and oppressed identities.

A further critique of the first iteration of this typology (‘including specific content on the Other’, Kumashiro, 2000: 32) can also be related to Webb’s (2019) research which suggests that we need to move beyond learning about traits of people from other cultures and rather consider the ‘complex interactions and influences of the structures of race, power, oppression and privilege located within all cultures’ (p. 142). This call for a systemic perspective is critical in deeply understanding and interrogating oppression in our music therapy pedagogy and practice (Baines, 2021).

However, as Young (1990) asserts, ‘a strategy of consciousness raising presumes that those participating already understand something about how interactive dynamic and cultural imagery perpetuate oppression and are committed to social justice enough to want to change them’ (p. 155). A separate study which explored the potential of Kumashiro’s (2000) latter typologies of anti-oppressive pedagogy in creative arts practice (Pickard, 2021) demonstrated that commencing from too advanced a position and assuming this basic knowledge about normalcy and diversity could in fact diminish the effectiveness of anti-oppressive pedagogy on consciousness raising. There is potentially value in sensitively traversing through these initial typologies in order to nurture a deeply informed and reflexive appreciation of socially just approaches to practice.

A final consideration in relation to this typology is the positioning of disabled people contributing to this pedagogy. There is a wealth of literature by disabled authors which could significantly enrich curricula and replace outdated expert models, as per Kapp’s (2019) standpoint epistemology (see Bascom, 2012; Kapp, 2019; Milton, 2020; Wood, 2014, for example, and Abbott, 2018; Kalenderidis, 2020; from a music therapy perspective). However, in bringing the expertise of disabled people into the curriculum and particularly into the classroom, Beckett (2015) rightly identifies that such expertise should be valued and sensitively navigated. Disabled students may make critical contributions, disrupting ‘the assumed rigidity of the teacher/student binary structure, moving from a banking system of education to one which is dialogical, where all involved are teachers and also learners, the relationship reciprocal and fluid’
(Fansler et al., 2019: 12). But disabled students may also feel exposed (Ware, 2002). It is not the burden of the disabled student to educate the dominant group (Osborne, 2019), in the same way that it is not the burden of black students to educate white students (hooks, 1994; Webb, 2019). Centering Otherness in the curriculum must be achieved thoughtfully and professionally, with recognition of the additional burdens disabled people already face in navigating academia (Brown and Leigh, 2020; Saltes, 2020), with expert contributions suitably acknowledged and valued.

**Education That is Critical of Privileging and Othering**

Education *That is Critical of Privileging and Othering* considers, ‘not only how some groups and identities are Othered . . . but also how some groups are favoured, normalised, privileged as well as how this dual process is legitimised and maintained by social structures and competing ideologies’ (Kumashiro, 2000: 35–36). This relates closely to David Bolt’s (2019) construct of normative positivism, defined as ‘the ongoing affirmation of social norms without a second thought for disability’ (p. 5). This focus on challenging the process of Othering nurtures a pedagogy of positionality (Acevedo et al., 2015), in which student and educator critically examine their privilege and oppression, optimally resulting in transformative action. David Mitchell (2016) further advocates for a pedagogy of discomfort, which is necessary to truly challenge and disrupt existing oppressive practices. The turning of the gaze back on to the oppressor is a hugely important shift (Goodley, 2016), requiring students to ‘acknowledge, critique and transform processes by which the Other is differentiated from and subordinated to the norm, separate the normal from the self and acknowledge and work against their own privileges’ (Beckett, 2015: 80–81).

This typology presents a valuable opportunity for explicit learning about ableism and its pervasive impact in music therapy (Pickard et al., 2020), as well as in wider society (Baglieri and Lalvani, 2019): a dimension potentially absent from the emerging signature pedagogy (Shulman, 2005) of music therapy discussed in publications to date. The reflective and reflexive focus of this typology in interrogating interpersonal and systemic processes as well as learning about those deemed Other is arguably highly apt for therapeutic training, where students are required to explore their own positioning and worldviews in depth (Bonde et al., 2019; Hadley, 2013; Hansen, 2016; HCPC, 2013). It is important to note that this typology can be a challenging experience for students, as identifying as an oppressor can cause significant anguish when fully confronted (Freire, 1970, 2016). Thus, this typology should be carefully positioned to ensure the transformative potential is optimally achieved and sustained into students’ future practices. The emergence of a wealth of contemporary resources on oppression and intersectionality will support this vital work (Bishop, 2015; Morgan, 2021; Turner, 2021).

Hadley (2013) further reminds us that subjugating narratives have the potential to keep rebuilding themselves, and as such the work of challenging oppression is not contained within training programmes – there is a need for continued vigilance throughout the profession:

> (W)orking against dominant narratives is a never ending process, much like cleaning a house. It is something that we need to work at daily because if we let things go for a while and do not pay attention to them, they become much larger and require much more work to clean up. There is no point of arrival per se. (p. 380)

One critique of this typology is that there is an assumption that awareness of oppression will lead to transformative action (Kumashiro, 2000). This is where the distinction between awareness raising and consciousness raising becomes relevant, with a call to *action* required to move beyond awareness alone. Freire (1970) notes that to ‘no longer be prey to its [oppression] force, one must emerge from it and turn upon it. This can be done only by means of the praxis: reflection and action upon the world in order to transform it’ (p. 51).

**Education that Changes Students and Society**

Finally, Education that Changes Students and Society involves the poststructuralist notion of changing citational practices: disrupting repetition of history through reworking and supplementing discourse. This typology acknowledges the fact that oppression originates in discourse, ‘and in particular, the citing of particular discourses, which frame how people think, feel, act, and interact’ (Kumashiro, 2000: 40). There are strong links here to other forms of oppression, with curricula and reading lists being decolonised (Pimblott, 2020; Schucan Bird and Pitman, 2020) and voices of marginalised communities being centred (Webb, 2019). In the field of disability studies, this decolonisation is perhaps slightly less advanced, with non-disabled ‘expert voices’ still often prioritised over authors with expertise from lived experience (Kapp, 2019; Murphy and McFerran, 2017; Pickard et al., 2020).

A challenge in this typology is that, in recognition that prohibiting repetition of harmful associations or histories alone does not change them, and that additional labour is required to supplement harmful associations in order to alter them, a burden is potentially imposed on disabled activists to affect change. This is where a shared responsibility for affecting change is imperative (Young, 2006).

Developed from a global justice perspective, Iris Marion Young (2006) built on previous studies in which she explored the politics of difference and the oppression and domination of various groups in society. Young (2006) proposed an
alternative to what she called the liability model of responsibility, where an individual or institution in power is held liable for wrong-doing. Young’s (2006) social connection model of responsibility offers an alternative lens for understanding structural injustice, which she defines as the ‘unintended consequences of the combination of the actions of many people’ (Young, 2011: 53). In this model, all stakeholders in a structurally unjust system share responsibility for addressing injustice. This is posed not through a culture of blame, but rather a call to action:

Blame is a backward-looking concept. Calling on agents to take responsibility for their actions, habits, feelings, attitudes, images and associations, on the other hand, is forward-looking; it asks the person ‘from here on out’ to submit such unconscious behaviour to reflection, to work to change habits and attitudes. (Young, 1990: 151)

While Young’s (1990) original work is now above 30 years old, many of her seminal ideas remain deeply respected (Aubert et al., 2019) and can be innovatively applied in the context of anti-oppressive pedagogy. Young (1990, 2006, 2011) focuses on the constructs of oppression and domination, resulting not from a distributive paradigm, as is common in other conceptions of social justice, but from evaluating social structures which enable or disable individuals in given contexts and situations. This is particularly relevant to anti-oppressive pedagogy and the aim to surface, analyse and challenge normative assumptions about diversity which are so embedded in systemic practices that they are not consciously ‘noticed as contestable’ (Young, 1990: 59).

In applying this model in music therapy curricula, all stakeholders would share responsibility for anti-oppressive practice: from admissions tutors to marketing teams, lecturers, supervisors, support tutors and students alike. This is in contrast with the liability model of the Equality Act (2010), where the institution is deemed responsible for the accessibility and inclusivity of provision. Rather, stakeholders at all levels are encouraged to take ownership for the inclusivity and equity of provision through philosophical and pedagogical dimensions as well as tangible actions.

The need for anti-oppressive music therapy pedagogy

While most music therapists and music therapy educators purport a commitment to inclusivity and empowerment through the very nature and definition of the practice, there remain both perceptions and realities of oppressive practices within the profession (Fansler et al., 2019; Pickard, 2020b; Pickard et al., 2020; Straus, 2011; Webb, 2019). In relation to disability and disablement, this is potentially a result of an over-emphasis on the medical model of disability within the profession (Gross, 2018; Murphy and McFerran, 2017), resulting in practices which may seek to normalise rather than maximise (Pickard et al., 2020; Winter, 2012). In addition, ableist recruitment practices mean that disabled people are less likely to become therapists and researchers within the profession (Baines, 2021; Gottschewski, 2020) and thus disability remains on one side of the client/therapist binary (Rolvsjord, 2014). As such, this article proposes that a holistic approach to anti-oppressive pedagogy is required, in order to challenge the inaccessibility of music therapy education (Davis et al., 2020), outdated positions presented through curricula and the marginalisation of disabled voices (Fansler et al., 2019), resulting in perpetuation of oppressive practices in the field (Hadley, 2013):

Rather than aim for understanding of some critical perspective, anti-oppressive pedagogy should aim for effect by having students engage with relevant aspects of critical theory and extend its terms of analysis to their own lives, but then critique it for what it overlooks or for what it forecloses, what it says and makes possible as well as what it leaves unsaid and unthinkable. (Kumashiro, 2000: 39)

It is important to echo back to the complexity of the social, cultural and political contexts in which music therapy is taught and practised internationally. There are numerous variables that dictate preferred or required pedagogical approaches, orientations of practice and emphasis of research. Engaging with anti-oppressive pedagogies offers opportunity for consciousness raising (Young, 2011), challenging ignorance or bias and unlearning ableism (Baglieri and Lalvani, 2019). However, there are further constraints and limitations which will dictate the extent to which educators and practitioners are receptive to these ideas and in a position to apply them in their practices.

As Kumashiro (2000) rightly asserts, anti-oppressive pedagogy should be a stimulus for consciousness raising and the beginning of an ongoing commitment to challenging unjust perspectives and practices. Through careful integration of the typologies of anti-oppressive pedagogy presented in this article, and particularly the integration of a critical disability studies philosophy, it is proposed that future generations of music therapists can be better prepared to challenge systemic injustice in the field through their embedded and sustained commitment to dismantling the normative divide (Mitchell, 2016). There is also a need for further considerations about how this learning is disseminated, sustained and embedded throughout the profession, and what other tools are required to enable practitioners and educators to engage with these important ideas.

Conclusion

This article has introduced Kumashiro’s (2000) four typologies of anti-oppressive education. These include Education for the Other, whereby students identifying as Other have a safe space within the institution for shared experience and
identity; Education About the Other, whereby privileged and marginalised students learn about their own and others’ positions and perspectives; Education That is Critical of Privileging and Othering, which more deeply interrogates ableism, disabling and how privilege manifests; and Education that Changes Students and Society, which disrupts and challenges the existing privilege and hierarchy of the knowledge construction process. It is proposed that through engagement with these diverse typologies of anti-oppressive pedagogy (Beckett, 2015; Kumashiro, 2000) and consciousness raising (Young, 1990, 2011) in music therapy curricula, all stakeholders must take shared responsibility (Young, 2006) for disrupting problematic dominant narratives which perpetuate oppression within music therapy education and music therapy practice. As Baines (2021) proposes, ‘To address the perpetuation of systemic oppression in music therapy education, Eurocentric theories dominated by white heteronormativity need to be interrogated, contextualized, and balanced with the introduction of critical music therapy theories’ (p. 2). In addition, the emerging signature pedagogy (Shulman, 2005) of music therapy warrants further research to understand the consistency of this notion as well as other areas for reflection and development within it.

As advocated by Young (1990: 151), the notion of ‘blame’ is replaced with ‘taking responsibility’ when making the privileged or dominant group conscious of their oppressive potential through these typologies of anti-oppressive education (Kumashiro, 2000). The recognition of Bonde et al.’s (2019: 450) ‘multiple-paradigm situation’ in current music therapy practice and pedagogy suggests that there is scope for this additional dimension of social justice in music therapy curricula to further enrich and enhance the profession. The vast breadth of music therapy pedagogy and practice internationally is acknowledged, as is the potentially challenging and complex socio-political contexts of embedding anti-oppressive pedagogies. The intention of this article is to present this call to action and to propose these typologies of anti-oppressive education as potential vehicles for achieving these ambitious and sorely necessary aims for social justice in music therapy curricula. It is proposed that these ambitions may be achieved in practice through the following recommendations.

Recommendations

1. Ensure that there are opportunities for disabled students to connect with other disabled students if they choose, in safe spaces and contexts in which they can take leadership and ownership. While it is important that these spaces and opportunities are authentic, it should also not be solely the burden of disabled students to source such opportunities. This is an issue beyond the subject area of music therapy and a dimension of university provision which needs development more widely.

2. There is a need to review recruitment practices in music therapy education to consider barriers posed by ableist recruitment policies. This could include insistence on reading notation, the need for an undergraduate degree or not offering application, interview or audition experiences in accessible formats. Furthermore, there is a need to address the inequity of the music education system far before candidates apply to a music therapy programme.

3. Approaches to educating students about participant groups with whom they may engage has enormous potential for Othering and pathologising participants. While understanding participants’ potential needs is essential (HCPC, 2013), ‘integrating Otherness throughout the curriculum’ (Kumashiro, 2000: 33) ensures that this learning is embedded, embodied and authentic. Examples of this typology could be to include the writings, music and lived experiences of disabled people throughout the curriculum. Disabled therapists and academics can offer insight through lived experience, as can music therapy participants and advocates who choose to share their experiences. Any labour contributed to the music therapy curriculum by disabled participants, musicians and experts by experience should be valued as such, and contributors reimbursed suitably for their time.

4. There should be deep consideration of intersectionality to ensure students appreciate the ‘complex interactions and influences of the structures of race, power, oppression and privilege’ (Webb, 2019: 142).

5. A vital component of self-development work in contemporary music therapy education should be to deeply interrogate one’s own privilege and identity. A range of contemporary resources should become seminal reading for students in the profession to support this reflective practice (Bishop, 2015; Hadley, 2021; Morgan, 2021; Turner, 2021).

6. Seminal resources, particularly ‘Eurocentric theories dominated by white heteronormativity’ (Baines, 2021: 2), need to be reflected upon through a critical lens.

7. The definition of expertise should be reconceptualised to value standpoint epistemology (Kapp, 2019) and suitable experts invited to contribute to students’ education through a wide range of experiences, as advocated by the Health and Care Professions Council (HCPC) Standards of Education and Training (HCPC, 2017). Furthermore, research practices in the profession could become increasingly participatory and co-production could ensure the voices of participants inform the development of the profession into the future.

8. As suggested in Young’s (2006) social connection model of responsibility, it is the responsibility of educators, practitioners, researchers, faculties, administrators, supervisors and students alike to contribute to this paradigm shift in the profession: “‘from here on out’ to submit such unconscious behaviour to reflection, to work to change habits and attitudes’ (Young, 1990: 151).
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Notes
1. The phrase ‘disabled people’ is used in alignment with the social model of disability, and signifies that the person is disabled by society, rather than ‘having a disability within themselves, as the medical model of disability would suggest (Goodley, 2017). This is the language advocated by the disability rights movement in the United Kingdom. It is also acknowledged that the language of disability is complex; there are many individual, cultural and international variations and preferences. Individual language choices are respected.
2. This introduction is necessarily brief due to the scope of this article, but the sources cited provide rich and in-depth debate about the intersections of these disciplines, which readers are encouraged to pursue. The special issue of Voices from 2014 provides an excellent introduction to this field (see Hadley, 2014).
3. Significant breadth across international and cultural distinctions within the discipline are acknowledged within this proposed signature pedagogy.
4. Italics are taken from Kumashiro’s (2000) original work throughout.

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