

**BAMT** BRITISH ASSOCIATION  
FOR MUSIC THERAPY

# DIVERSITY REPORT

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# Executive Summary

In August 2020, the British Association for Music Therapy (BAMT) issued a survey inviting Music Therapists in the UK to complete 22 questions regarding issues of diversity within the profession. This survey was created in response to the membership raising concerns in the wake of the death of George Floyd and the subsequent increase in awareness of the Black Lives Matter campaign.

The survey was split into two sections. The first section asked participants for demographic data on:

- Music Therapy training
- BAMT membership
- Places of work
- Background information
- Diagnosis of disability
- Diagnosis of mental health conditions
- Educational background
- Musical background prior to Music Therapy training

The second section asked participants to identify three key areas of priority to address diversity issues within the Music Therapy profession and to share concerns or experiences in relation to these priorities.

The survey was completed by 509 participants. The data was collated and organised into 7 themes:

1. Training
2. Diversity in Professional Practice
3. Support
4. CPD
5. Awareness
6. Representation
7. Equality

Responses indicate that there are historic and current issues within the Music Therapy profession. Participants reported that they regularly experience discrimination and inequality based on race, age, gender and disability.

This report does not contain specific recommendations from the BAMT – instead it presents a clearer image of the issues within the profession, acknowledges an urgent need for change and invites the wider Music Therapy community to engage, collaborate and contribute to the continuing conversation to identify and implement the next stages of this process to better the profession for all.



# Introduction

This report documents the responses to the British Association for Music Therapy's Diversity Survey. Our growing commitment to equality and diversity spans across the BAMT and we are actively working towards being an inclusive organisation that puts diversity at the heart of everything we do.

We thank those who participated in the Diversity Survey. This report outlines the findings of the survey including the identification of key priorities for the BAMT to address, sharing of experiences as well as up-to-date demographic information on the profession.

We would like to take this opportunity to acknowledge that this action is long overdue. Although discussion had taken place about the lack of diversity within BAMT, and the music therapy community in general, we were moved to action by the issues raised by Black Lives Matter. The BAMT decided to build upon this and act on the breadth of equality, diversity and inclusion (EDI) issues that exist within music therapy. This survey is our first step and will inform how the BAMT starts to address and improve upon all of the EDI issues that have been raised by survey respondents and highlighted within the seven themes of areas of concern within this report.

There have been a number of issues historically with regards to encouraging and supporting greater diversity within our sector/profession, and we are aware that many of these issues still exist today. This is wholly unacceptable, and we are determined to lead the way to start the process to learn from our past and to implement real change.

We will challenge any discrimination we or any of our members become aware of. We will seek to educate ourselves and our members to ensure we learn from past mistakes and better the profession for others in the future. We want to make the profession accessible and inclusive for all and call on the Music Therapy community in the UK to work together to achieve this.

All quotes throughout this report are taken directly from respondents' comments and we have ensured that they are anonymous and unidentifiable.

It is only in unity that we can address and improve ourselves and our profession. The BAMT will do its utmost to challenge and aim to support the profession to improve upon the issues raised through this survey but hopes it can receive the support of all to ensure all of Music Therapy advances as a result of all the vital improvements that will result from this work.

# Overview

***“My experiences taught me that racism, homophobia and lack of understanding do exist within the music therapy profession.”***

The Diversity Survey consisted of 22 questions. 20 of these gathered key demographic information such as age, training and places of work. The final two questions were open questions, asking respondents to specify three key areas they felt the BAMT should prioritise in order to address the lack of diversity within the sector, and to also share concerns or experiences related to their stated priorities.

There were 509 responses in total, which represents just under 50% of the BAMT membership. Of the responses: 90.57% of respondents were qualified Music Therapists, 7.66% were Trainee Music Therapists and 1.77% were not Music Therapists.

Responses to the open questions were categorised into themes and reviewed alongside content analysis. The final themes identified and the percentage of references made by respondents to these themes were:

- Training - 65%
- Diversity in Professional Practice- 30%
- Support - 28%
- CPD - 17%
- Awareness - 12%
- Representation - 6%
- Equality - 3%

The BAMT recognise and value the voices of all who contributed to the survey. This report presents the content of responses and does not seek to present specific recommendations for the profession at this time. This is the first stage for the BAMT to understand the current issues facing the profession and the survey responses will inform the next steps in addressing these difficulties.

The first section of this report looks at the above themes in greater detail, highlighting the range of content that comes under each. It also uses quotes from the experience question to further illustrate points made, or to highlight the impact of past experiences on the Music Therapy community. All information is presented anonymously and held securely in accordance with the Data Protection Act and GDPR..

The Appendix of this report documents the demographic data gathered, to present an updated overview of the profession.

# Presentation of Themes

Prior to the presentation of each theme, it is important to note that throughout the survey responses there were recurring mentions of discrimination.

This was further highlighted in the final question of the survey (which asked for respondents to share concerns or experiences), as a high volume of responses indicate discrimination is taking place both within and outside of the profession. This discrimination has been based on race, disability, sexuality, age, gender, financial, training and musical backgrounds. These incidents have taken place on training courses, in the workplace and at BAMT events.

It is clear that discrimination is continuing to take place within the sector on a regular basis and is not exclusively a historical problem - a number of deeply concerning experiences were shared that have taken place within the last 5 years. A lack of support networks was illustrated by Music Therapists sharing their strong feelings of being unable to speak up due to experiences of being dismissed by colleagues, peers, supervisors and lecturers:

***"I felt silenced and my personal response was to feel a deep sense of shame - as if I had brought something up that was futile, irrelevant, and wasting everyone's time"***

***"I often feel my gender and sexual orientation is dismissed as unimportant in my practice and process as a therapist. I have discussed this with other therapists who feel the same"***

***"I have spoke with therapists who have commented on my accent and when I have contributed to conversation on 2 occasions and have been laughed at"***

These are a few brief examples, from the many, of the impact these occurrences of discrimination have had on each individuals within our profession. It is important to therefore be mindful throughout the reading of this report of the effect that recent practices have had on those within the Music Therapy community.

# Theme 1: Training

Training received the highest percentage of responses across the survey (65%). A wide array of issues were highlighted, with contributions from both qualified Music Therapists and current Trainees. The core areas of note were categorised as:

- Inaccessibility of courses
- Lack of diversity within training institutions

## **Inaccessibility of Training Courses**

Respondents reported training courses present accessibility difficulties due to:

- High cost of training makes courses accessible only to applicants from a privileged, middle class background
- Discrimination and greater challenges to access for BAME and applicants from ethnic minorities
- Call for equal access, regardless of race, socio-economic and non-classical background
- Age restrictions cause Music Therapy to be considered as a second career, job insecurity is then a challenge when considering justifying whether to pursue the MA
- Geographical locations and amount of placement travel again limit the courses to applicants who are financially supported by families/partners
- Lack of training courses in Northern Ireland
- MA is only available to those with an undergraduate, lack of other entry routes is problematic
- Discrimination and lack of support for potential applicants and trainees from non-classical backgrounds
- Discrimination and greater challenges to access for BAME and applicants from ethnic minorities
- Call for equal access, regardless of race, socio-economic and non-classical background
- Entry requirements raise issues as there is currently a heavy emphasis on Western Classical training (such as Grade X in piano/ability to read music notation) which limits diversity of applicants

There was a feeling from respondents that each of these points are central in establishing barriers to encourage applicants from a wider range of cultural, musical and ethnic backgrounds. Respondents called for greater access to courses to be provided through funding and addressing challenges of entry requirements for disadvantaged applicants and non-classical applicants those without a background in classical music:

***"It feels like a privilege to be a music therapist and it is. I do believe there are barriers to accessing professional qualification that make it an impractical career for many."***

***"There are many people who would bring light and new ways of thinking to the music therapy world, yet will never get the opportunity to take to masters level training because of their low income, cultural or academic backgrounds. This needs to be considered and invested in for the future of diversity within music therapy."***

Respondents also called for the examining of unconscious and conscious bias when selecting successful applicants, as a number of Music Therapists with experience of the selection process highlighted concerns:

***"I have been on selection committees for trainee music therapists even recently, where committee members have been biased in ways other than only checking that a potential student's English language skills are adequate...I have seen scapegoating of black students who do not 'fit' the majority of profile in student cohorts, by students themselves, even recently, and this is not overt usually and may be unconscious, but is of great concern"***

### **Diversity Within Training Institutions**

Respondents reported their perception of training staff and cohorts to be of white, privileged, middle class classical musicians. The content of courses were perceived as being predominantly Euro-centric.

Respondents criticised the lack of diversity amongst teaching staff and within the content as leading to alienation of those from different musical, racial, socio-economic backgrounds. A number of respondents also highlighted concerns about 'tokenism' in the form of single or one-off lectures around cultural practice and of 'world' music.

Overall, respondents advocated for:

- Greater diversity of placements (working with those from a different cultural background to the Therapist)
- Improved diversity of teaching staff, visiting lecturers, placement supervisors and peer groups
- Diversifying the content of courses, to include:
  - Culture centred practice
  - How to use English with non-English speakers
- Acknowledgement that course material is taught through the lens of Western classical music
- (including use of language)
- Recognition of neo-colonialism in Music Therapy

Non-white Qualified and Trainee Music Therapists shared experiences of being rejected, mocked or made to feel that their contributions on topics such as cultural practice and racial representation were inadequate by lecturers, placement supervisors and their fellow trainees. These respondents also indicated a lack of support when trying to address these incidents:

***"I felt that they were not addressed when I raised the issues, they were not dealt with sufficiently and the occurrences still leave me with a feeling of anger and upset"***

***"I have been met with defence, with denial and a sense that simply because you are a therapist that you mean well and that is enough."***



## Theme 2: Diversity in Professional Practice

30% of the survey responses highlighted issues in relation to the lack of diversity within the Music Therapy profession as a whole. These were then categorised as: institutional, resources & supervision, lack of diversity and BAMT.

### Institutional

- Exploration and training in systemic racism
- Call for the background of Therapists to be scrutinised as much as clients
- Examination of unconscious bias

### Resources & Supervision

- Encouragement for more supervisors from ethnic minorities
- More research in diversity of the profession
- Further resources in diversity needed

### Lack Of Diversity

- In leadership roles
- Presenters at conferences
- Researchers and research areas (such as BAME communities)
- Area and Network group presenters and members

### BAMT

- Call to reflect and discuss past
- To establish Diversity Charter and EDI strategy
- Acknowledge and explore lack of diversity on board of trustees
- To lead on tackling lack of diversity
- Call to establish a Diversity Officer
- Request to collaborate and form partnerships with other non-Music Therapy organisations

The majority of respondents acknowledged the lack of diversity within multiple areas of the profession, and offered a variety of ideas to help start to address these issues. These ranged from specific training to the call for open discussions as well as other specific strategies or roles within the BAMT. A number of these ideas are detailed above, with others organised under the Support and CPD themes.

There was a strong sense of willingness from respondents to engage, educate, learn, reflect and openly discuss these issues, whilst also being mindful that the profession has been historically represented by white classical musicians:

***“we have blind spots and are embedded within a system that privileges whiteness and 'normal'. Building partnerships with our colleagues with different experiences and backgrounds, being prepared to have courageous conversations about racism and inequality for example, are essential to increasing the diversity of the profession.”***

## Theme 3: Support

Respondents suggested a variety of resources and ideas to help provide greater support to those practising, training and hoping to train in the profession. 30% of responses were organised under this theme, and then categorised as: BAMT, platforms, resources and financial.

Support for music education, establishment of a support system for victims of discrimination, platforms for therapists from marginalised groups to be heard and access to funding, in particular, received a high volume of mentions by respondents.

### **BAMT**

- Advocate for music education in schools
- Make clear stance of zero tolerance for any form of discrimination within the profession
- Support building a more reliable and stable career framework for the profession
- Create a support system for when discrimination occurs in the workplace that is accessible to all Therapists (PAYE and Self Employed)
- Advocate for human rights and acknowledge that the Government's Immigration Policy is detrimental to encouraging non-UK Therapists to work in the UK

### **Platforms**

- For disabled Therapists to be listened to, to share their experiences and be supported better within the profession
- More opportunities for BAME Therapists to raise concerns and be supported in challenging discriminatory issues
- Networks for marginalised groups to be able to have a greater voice and presence
- Opportunities for international students to be supported post-qualifying to encourage them to continue to stay and work within the UK

### **Resources**

- Greater support and resources for both Newly Qualified and Self Employed Therapists
- Access to more resources in Welsh
- Increase online provision
- Increase free access to research journals/other academia

### **Financial**

- Funding for research within BAME communities
- Support for access to training as well as funding to assist during training
- More discounts for trainees to access further training and resources
- Support for the purchase of equipment for work (such as instruments)
- Address difficulty faced by trainees who are having to work multiple jobs whilst training to support themselves and their studies
- Support for BAMT and HCPC membership costs
- Explore possibility of offering paid work based placements on training courses

The references made to platforms resonated with responses from the experience question which advocated for opportunities for open discussion. It is clear that Music Therapists who do not fit the perceived image of being white, heterosexual, female, middle class and classical musician feel that their contributions are not as valued as others, that they are not adequately represented in the profession and that further support is needed:

***"I struggle to relate to others in the profession and actively avoid meet ups because I feel out of place...the profession can come across as clique at times. This concerns me because I wonder if I'm alone in this and if it will eventually drive me out of the profession"***

***"When looking for literature about disabled therapists or written by disabled therapists, I could find none"***

***"BAMT needs to facilitate the support of its members' experiences of racism during training and in the workplace, however benign these experiences might seem to others. In order for this to occur, racial sensitivity training should be mandatory, conducted by external facilitators. This can only be beneficial for all parties if White members are prepared to feel uncomfortable in confronting their own inherent racial bias and move away from the notion of whether they are good or bad people, but approach it from the perspective of acknowledging who historically controls the collective narrative."***



## Theme 4: CPD

Further suggestions from respondents in how to address diversity and accessibility issues within the profession were organised under this CPD theme (17% of responses). Respondents highlighted that many of said issues contribute to amplifying difficulties in accessing and sustaining a career in Music Therapy. These responses were categorised as: online; cost; content and presentation.

### Online

- Increase provision for online CPD
- Suggestion for online certification for international practitioners/applicants
- Improve access for Self Employed Therapists as often have to book time off which is not paid
- Unable to access training due to geographical location

### Cost

- High cost makes CPD inaccessible to Self Employed, Trainees and Newly Qualified Therapists

### Content

- More resources for self-care and mental health support for Therapists
- Access for disabled Therapists
- Trainings in:
  - Exploring bias and racism in the workplace
  - How to identify and challenge racism in the workplace
  - Diversity, equality and inclusivity
  - Practical cross-cultural musical tips and resources for practising Music Therapists
  - Use of technology (to be more accessible to different client groups)
  - Ethical practice
  - Different cultures, their music and festivities

### Presentation

- Increase diversity and inclusivity of presenters
- Offer a greater range of trainings throughout the UK, not just in London
- Support for different learning strategies (such as visual impairment and Dyslexia)

Practising Music Therapists commented positively on how organisations have adapted during the Covid-19 pandemic to offer CPD online. There was a high volume of requests for this practice to continue post-Covid, but for training organisations to consider offering flexible timetables for trainings as those provided only at weekends/during the working week become inaccessible to Self Employed Music Therapists or those who attend religious services:

***"The fact that so many CPD events were transferred to an online platform during C-19 meant that I was actually able to avail of these opportunities and I was grateful to be able to do so."***

As indicated above, responses in relation to the content of CPD events mostly mentioned ethical, cultural and racial trainings. While some respondents linked this to addressing problems within working relationships, many expressed a strong desire to be able to access further training in order to better support clients:

***"I also think there isn't enough conversation and CPD around working with people from diverse backgrounds. Especially how to support this musically, as that is such an integral part of our role that isn't part of the wider conversation around race and background."***

***"although I was predominantly trained classically, most of my music is pop/rock influenced and I have always felt that this was looked down upon at uni, yet song-writing, music tech and guitar improvisation seem to be the 3 most requested training suggestions given at area meetings where people need those skills, things that are often well-known to pop/rock musicians"***



# Theme 5: Awareness

12% responses highlighted areas in which Music Therapists have regularly encountered misunderstanding or lack of awareness of the profession by fellow colleagues, managers and the wider public. The content of responses were categorised as: professional practice, language and outreach.

A high volume of these respondents advocated for greater support for music education, particularly in schools, indicating that the profession is at risk of suffering from increased lack of diversity in the future if access to music lessons continues to be restricted due to lack of funding and Government support.

An equally high number also called for more awareness campaigns to inform the public and those working in the top tiers of education and healthcare systems of the benefit and practice of Music Therapy.

## Professional Practice

- Promote the presence of Music Therapists in leadership roles
- Better understanding and education of profession needed for other AHPs and within NHS management
- Raise awareness of the variety of musical styles used within Therapy including non-classical practices
- Greater recruitment for training and jobs

## Language

- Domination of Western classical terms/thinking within training and supervision is problematic and causes division
- Awareness of how different cultures respond/react to notion and word 'therapy'
- Language used to describe Music Therapy is 'off-putting, inaccessible and less desirable' to certain groups/communities

## Outreach

- Increase promotion of Music Therapy as a career within educational institutions (including schools, colleges and universities)
- Mentor schemes for potential applicants interested in entering the profession
- Increase awareness of profession within hard to reach disadvantaged communities
- More promotion of training courses

Respondents identified that despite Music Therapists being Allied Health Professionals, they are often not treated on an equal basis to other AHP professions: this ranges from lack of AHP funding for training to differences in pay and access to permanent contract work. A number of possible reasons were presented, with many indicating that they felt that the BAMT was not doing enough to promote the profession to help greater more stable career frameworks:

***"I feel that BAMT does not do enough to help. There should be meetings with all NHS trusts to question why MT's are excluded and not part of mental health teams in all counties. The Agenda for Change pay scales mean nothing because many like me are not employed. I constantly feel alone and like giving up. I pretty much have. One can only be an entrepreneur for so long."***

# Theme 6: Representation

There was a strong feeling from respondents within both the diversity and experience questions of the profession being predominantly represented by white, middle class, heterosexual, female and classically trained Music Therapists. The core elements of this theme are categorised below as: professional practice and outward image.

## Professional Practice

- Increase representation of practice from Music Therapists around the world
- Raise awareness of the diverse range of practice in the UK, particularly from those who originate from/trained outside of the UK
- Acknowledge and raise awareness of client population being more diverse than represented within the profession
- Raise profile of Therapists from different socio-economic backgrounds
- Greater representation of BAME therapists within profession (such as in training, outreach, CPD events and conferences) to encourage others to join the profession

## Outward Image

- Challenge and diversify the outward image of the profession to include:
  - Non-white Therapists
  - Disabled Therapists
  - LGTBQ+ Therapists
  - Voices of service users
  - Therapists from non-classical musical backgrounds
- Increase presence on social media to ensure that publicity material reflects diversity of profession and of service users

6% of responses specified areas of concern regarding the impact of this lack of diversity on the wider public, potential training applicants, service users and Therapists from different backgrounds:

***"As a minority not seeing my face widely represented within the profession has felt quite isolating. However, one of my motivations comes from wanting to effect change so that this will not be a reoccurring issue for someone in a similar position"***

***"I would like there to be more involvement from service users through guest talks, case studies, investigation of compositions etc. so that the voices of those we work with are more prominent, particularly when discussing inclusion."***

Music Therapists raised particular concerns with regards to the lack of diversity within the profession to the diversity of the client population they work with, and how the voices of service users and Therapists from marginalised groups are not currently represented within the publicity, online resources or the outward image of Music Therapists themselves. Respondents highlighted that the profession may benefit from challenging and changing its outward image to be seen to be more accessible and inclusive for all communities.

# Theme 7: Equality

3% of responses indicated a wide range of issues with regards to equality. It is clear that respondents have historically, and recently, experienced inequality based on a number of factors such as gender, sexuality, age and misunderstanding of profession by colleagues and managers. The content for this theme is categorised below as: jobs, access, gender and BAMT.

## Jobs

- Equal pay for male and female Therapists, as well as equal pay for Therapists throughout the UK
- Equal opportunities when applying for jobs (not chosen because of training, personal connections or ageism)
- Support for smaller/rural areas with less diversity and less work
- Lack of security of job posts makes training unappealing
- Call for end of honorary contracts and unpaid work

## Access

- Champion for musical-cultural inclusivity
- Training (investigate if accessing MA is inaccessible to certain groups/communities)
- Lack of provision for work experience for prospective applicants
- Increase access to online and free access resources including psychotherapy bodies
- Address and support communities who may not access Therapy due to social or cultural stigma
- Challenge bias based on ageism (this has affected both younger and older Therapists)

## Gender

- Imbalance within the profession which is dominated by female Therapists
- Increase representation of:
  - Female Therapists in leadership roles
  - Male Therapists within the profession as a whole
  - The transgender community both within the profession and the client population

## BAMT

- Call to be inclusive for all UK therapists - events are often only accessible to Therapists in particular regions/countries
- Support from BAMT for more salaried posts

There were a high volume of responses that repeatedly indicated that the career framework for Music Therapy within the UK is unstable and unreliable, mostly due to the small number of salaried posts available. This has resulted in Therapists having to work on a freelance basis.

Music Therapists particularly noted that the provision of jobs within the UK varies greatly from region to region, and that there are a number of barriers to being able to access guaranteed work. This included unequal pay and discrimination based on age, race, gender, sexuality and lack of recognition compared to other AHP/Psychological colleagues:

***“I was once told that 'mature therapists' could seem a threat to younger head teachers in school settings and so they preferred younger colleagues! I do know younger colleagues who struggle financially and I would like to see a more level playing field for structured pay and conditions”***

***“We therefore need music therapy to be viewed on a par with psychology, and to reverse the current discrimination where we are paid inferior wages and the many skills we have which psychologists and others do not are not properly recognised”***

Another recurring issue highlighted by respondents with regards to gender equality within the profession is that while the profession is mostly represented by female Therapists, there is a disproportionate lack of female Therapists in management roles. Respondents offered possible reasons in relation to maternity, childcare and socio-economic reasons (where the woman is not perceived as the main breadwinner’).

Furthermore, there was support for greater presence of male Therapists within outreach work in educating about the profession, as well as acknowledgement that Therapists who identify as non-binary or who are part of the transgender community are severely underrepresented in the profession.

A high number of respondents called for the BAMT to provide increased support to Music Therapists in the UK to be able to access and create salaried posts in order to improve the stability of the career framework.

# Conclusion

The British Association for Music Therapy would like to thank those who contributed to this survey. BAMT acknowledges that those within the profession have suffered racism, discrimination, inequality, ageism and ableism, and that these issues are not exclusively historical: they are continuing today.

This is unacceptable, and the BAMT does not condone any such behaviour. It is clear that vital change is needed to ensure the safety and well-being of all who access and practice Music Therapy.

This report is the first stage that the BAMT are taking in order to better understand and plan how to address the change required within the profession. As a result, this report does not seek to state recommendations or next stages – instead, it provides a clearer picture of the areas of concern.

The BAMT will now seek to collaborate with the wider Music Therapy community, to continue to listen and to create a process for change in which members are key contributors. It is only in working together that we can eradicate the issues that exist.

As part of this, there will be further platforms for continued conversation and action from the community, with specific working groups and roundtables addressing the issues raised with the seven themes. It is vital that the BAMT now “practices what it preaches” and strives to become an anti-discrimination organisation that has as much inclusivity as possible, with a board of trustees and a staff team that reflects the diversity of both the profession and the people that can benefit from Music Therapy; within the next year the BAMT will have clear key performance indicators published within its strategy that will monitor this. BAMT will also look to provide the most appropriate training and information to members to ensure members are supported appropriately and empowered to support best possible EDI practice in all that they do.

The Appendix to this report details a breakdown of all the demographic data gathered from the survey. To conclude, we would like to share a poem by Nate Holder which one respondent of the survey shared.

# "If I were a racist..." by Nate Holder



If I were a racist,  
I'd teach children that talking about music means,  
Texture, timbre and tempo.  
If you can't use these words, you're not a musician.

If I were a racist,  
I'd teach reggae music and Bob Marley,  
'Stir It Up', but never 'War'.  
I might even mention marijuana.

If I were a racist,  
I'd insist that all music was taught from notation,  
Removing all the nuances  
That paper could ever express.

If I were a racist,  
I'd teach 'African' drumming.  
Because of course,  
Africa is a country.

If I were a racist,  
I'd teach that the Great Composers were  
Mozart, Beethoven, Haydn and Bach,  
Not Miles Davis, Florence Price, Alice Coltrane and J  
Dilla.

If I were a racist,  
I'd make sure that Gospel, Blues and Jazz,  
Were always taught,  
As music created by slaves.

If I were a racist,  
I'd call all non-white music  
'World Music'  
After all, it's them and us.

If I were a racist,  
I'd ignore that Mozart, Beethoven, Haydn, Bach  
And the Trans-Atlantic Slave Trade  
Happened at the same time.

If I were a racist,  
I'd make sure that violins and pianos  
Were seen as more important,  
Than Steel pans, tablas and digeridoos.



If I were a racist,  
I'd teach 'African' songs,  
Without knowing what they mean,  
Or where they were really from.

If I were a racist,  
I'd standardise everything –  
You're either in tune,  
Or you're out. Literally.

If I were a racist,  
I'd have posters of me on the walls and in the books.  
No black or brown faces,  
Just my own.

If I were a racist,  
I'd make you think including one brown face,  
Would be enough.  
Diversity. Inclusion.

If I were a racist,  
I'd be fine with all white exam boards,  
And all white teaching staff,  
And study all white musicians.

If I were a racist,  
I would insist that children learn western music  
notation,  
Forgetting that many civilisations,  
Flourished without it for centuries.

If I were a racist,  
I'd put up black squares,  
And messages about standing together.  
Then never invest in anti-racism training for my staff.

If I were a racist,  
I wouldn't address outdated policies  
Or really let black and brown people  
feel safe enough to speak on their experiences.

If I were a racist,  
I'd know that,  
Even though the notes may be black,  
The spaces would remain white.

# Appendix 1: Demographic Data

This Appendix details the findings from the 20 demographic questions included in the survey. Questions asked respondents their:

- Age
- Places of work
- Year qualified
- Place of training
- BAMT membership
- Gender identity
- Sexual orientation
- Ethnic background
- English as a first language
- Qualifications
- First generation university graduates
- Free school meals
- Mental health conditions
- Disability
- Religion
- Musical background prior to training
- Did they receive free music lessons
- Were these lessons subsidised, group lessons etc.

As stated previously, of the 509 respondents: 90.57% were qualified Music Therapists; 7.66% were Trainee Music Therapists and 1.77% were not Music Therapists.

## Training

Respondents highlighted a missed training institution from Question 3, which asked participants to specify where they trained. The Royal Welsh College of Music and Drama, which no longer provides a Music Therapy training course, was accidentally missed off the list. BAMT apologises for this error, and the distribution of respondents from the other courses are shown in Figure 1.

## BAMT Membership, Age & Year of Qualification

90.57% of respondents stated they were members of the BAMT. The age ranges of respondents and the years of qualification were:

- 2.16% were 18-24
- 30.06% were 25-34
- 24.56% were 35-44
- 24.75% were 45-54
- 14.15% were 55-64
- 4.32% were 65+

Figure 2 illustrates the responses to question 4 which asked respondents to identify the year that they qualified as a Music Therapist.

Figure 1: Responses to Question 3, What year did you train?

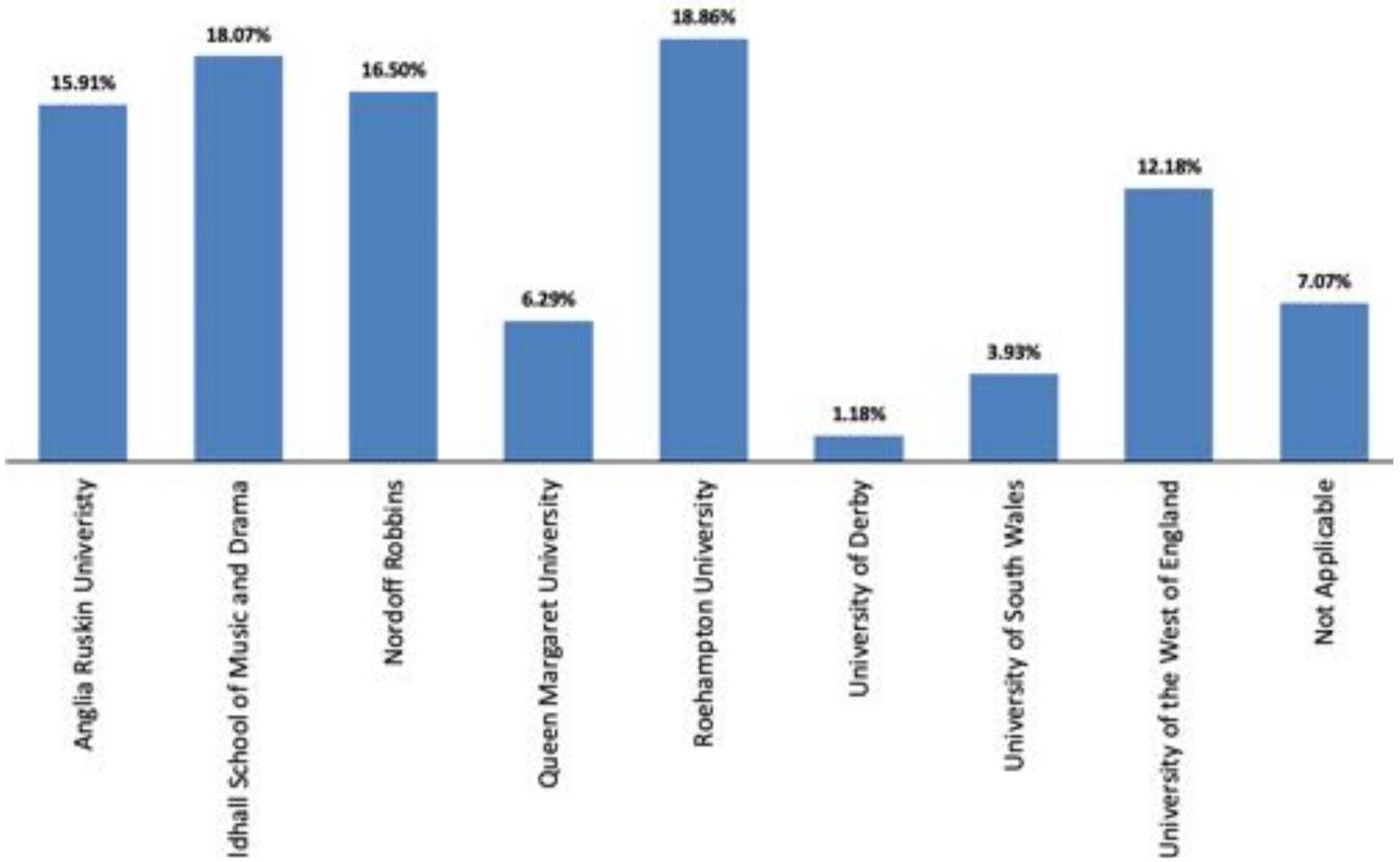
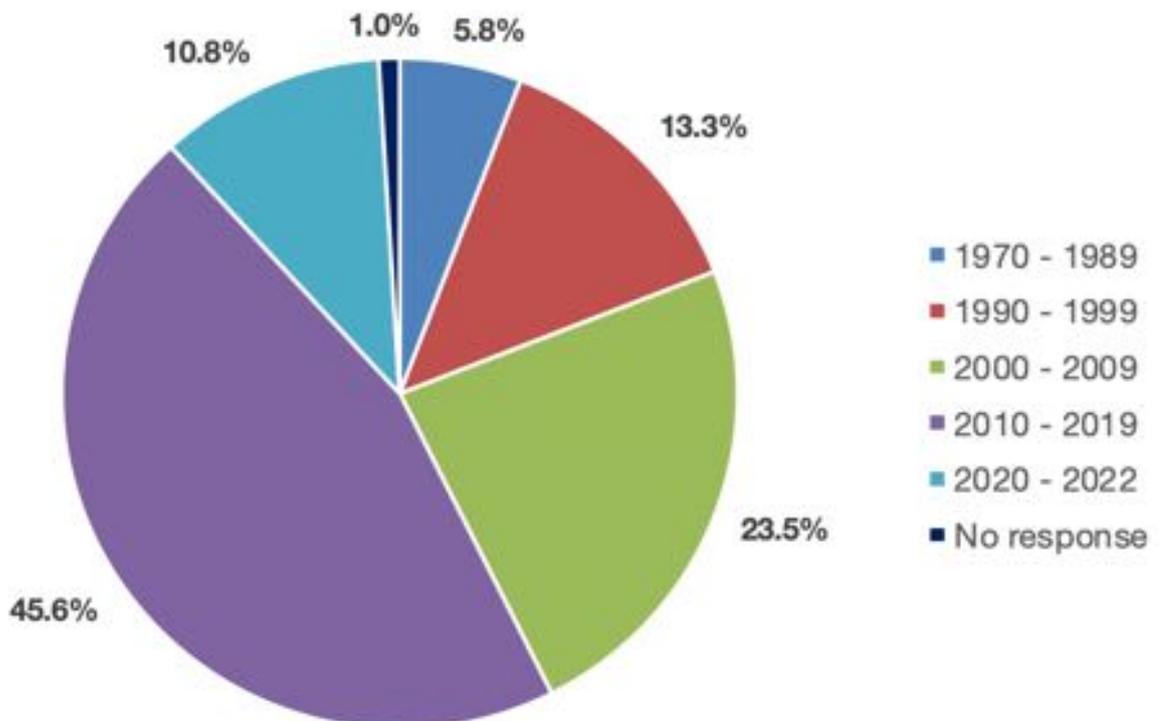


Figure 2: Responses to Question 4, What year did you qualify?



## **Gender Identity & Sexual Orientation**

The large majority of respondents identified themselves as female (80.16%). Of the remaining respondents: 18.47% identified as male; 0.39% as transgender or another non-cisgender identity; 0.59% as non-binary; 0.2% preferred not to say and 0.2% specified other (did not disclose).

When asked to identify their sexual orientation:

- 81.93% identified as heterosexual or straight
- 5.3% identified as bisexual
- 2.95% identified as gay
- 1.57% identified as lesbian
- 0.98% identified as pansexual
- 0.79% identified as asexual
- 5.89% preferred not to say
- 0.59% stated other (did not disclose)

## **Ethnicity & English Language**

88.61% of respondents stated that English is their first spoken language. 11.2% selected No and 0.2% selected Prefer not to say.

When asked to identify which ethnic group best describes them, 73.08% of respondents selected British/English/Welsh/Northern Irish/Scottish. There were no selections for Bangladeshi, Any other Black background, White and Black African, Gypsy/Traveller and Arab.

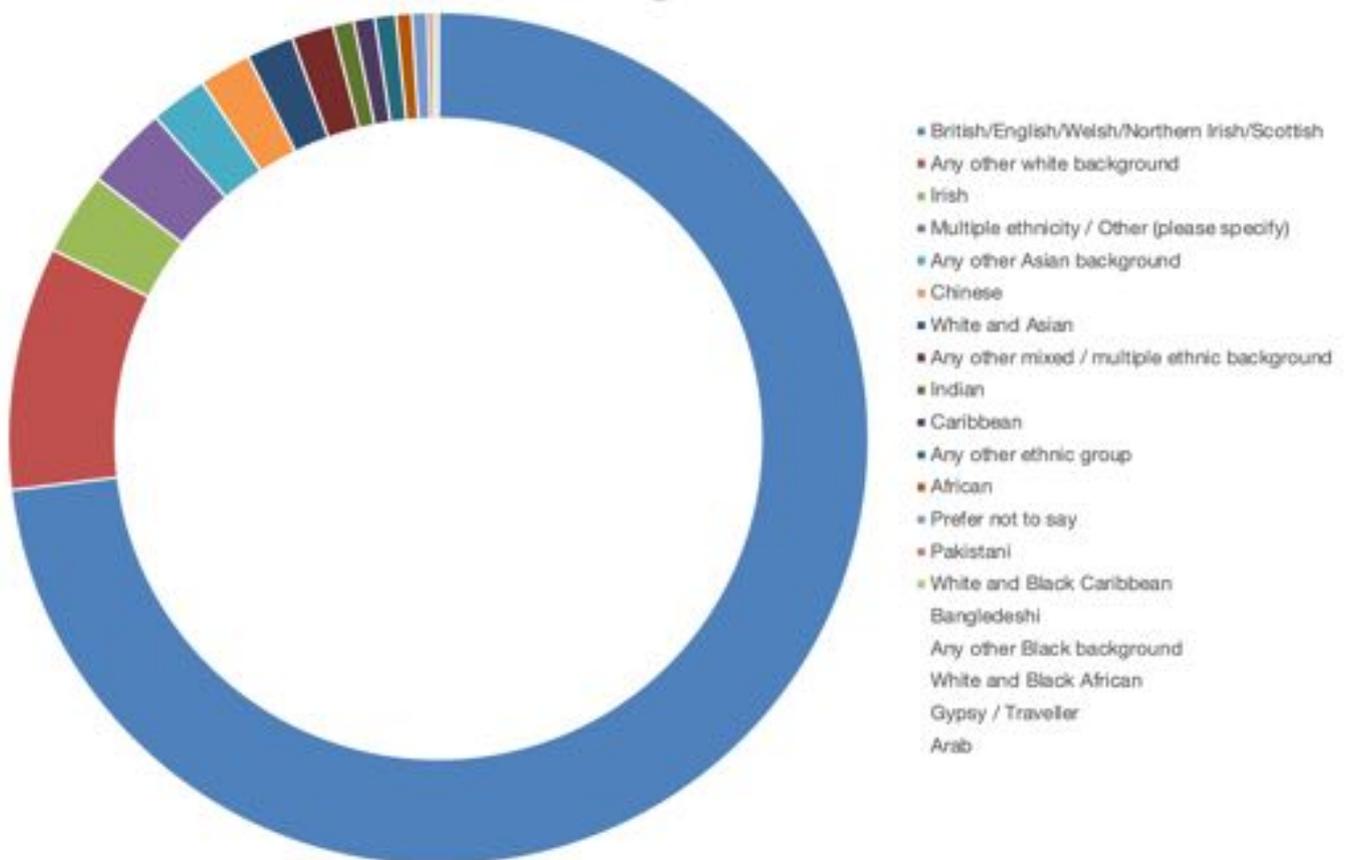
Of the remaining ethnic groups, the following percentages were recorded, as shown in Figure 3:

- British/English/Welsh/Northern Irish/Scottish – 73.08%
- Any other White background - 9.23%
- Irish - 3.14%
- Multiple ethnicity/Other - 3.14%
- Any other Asian background - 2.16%
- Chinese - 1.96%
- White and Asian - 1.77%
- Any other mixed/multiple ethnic background - 1.57%
- Indian - 0.79%
- Caribbean - 0.79%
- Any other ethnic group - 0.79%
- African - 0.59%
- Prefer not to say - 0.59%
- Pakistani - 0.2%
- White and Black Caribbean - 0.2%

The respondents who selected Multiple ethnicity/Other specified the following ethnic groups:

- South East Asian
- Taiwanese
- Indian/Welsh/Polish
- European
- White British
- White and Ashkenazi Jewish
- White and Black British
- White Swiss and Latin American Mexican
- Half Palestinian and half English
- Cornish
- British Asian
- Spanish
- Hong Kong Chinese

Figure 3: Responses to Question 9, What is the ethnic group that best describes you?



## **Disability & Mental Health**

When asked if they considered themselves to have a disability as defined by the Equality Act, 93.12% of respondents answered 'No', 6.29% answered 'Yes', and the remaining 0.59% selected 'Prefer not to say'.

Respondents were asked if they had ever been diagnosed with a mental health condition. 76.82% responded 'No', 21.41% responded 'Yes' and 1.77% responded 'Prefer not to say'.

## **Religion**

When asked to identify any religion they may follow, 48.62% selected No Religion. 32.28% selected Christianity, 8.66% selected Catholicism, 6.1% selected Buddhism, 5.51% selected Protestantism, 2.56% selected Judaism, 2.56% selected Inter/Non-denominational, 0.98% selected Islam, 0.39% selected Hinduism, and 0% selected Native American as shown in Figure 4.

Other religions were specified by 7.48% of respondents:

- Spiritualism
- African ancestors Spirits/Amandlozi
- Humanism
- Baha'i Faith
- Meditator
- Sufi
- Quaker
- Agnosticism
- Atheist
- Christian & in Protestant Non-Conformist Group
- Science Informed Spirituality
- Shamanism
- Taoism
- Own Beliefs
- Raised Catholic but no longer practising

## **Education: Qualifications, First Generation Graduates & Free School Meals**

Respondents were asked to select their highest level of qualification completed. 73.28% selected Masters Level, 13.75% selected Post-graduate Diploma, 7.27% selected PhD Level, 5.11% selected Degree Level, 0.39% selected Other and 0.2% selected O' Level. There were no selections for A Level.

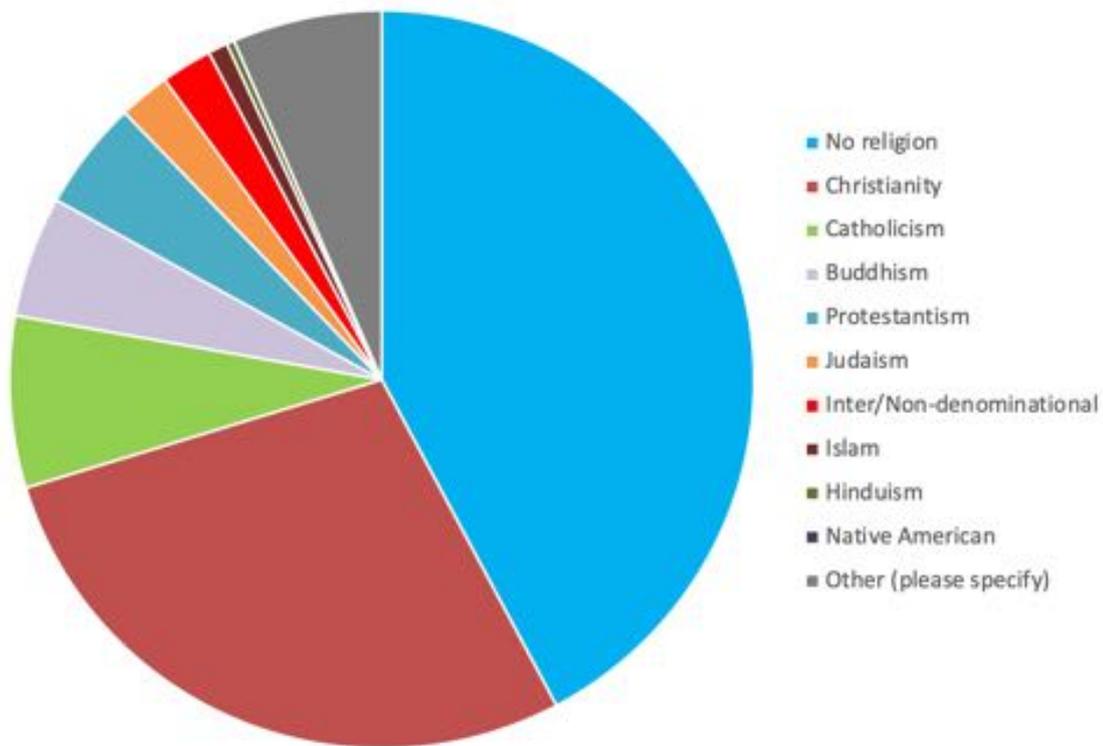
Of the respondents who selected Other, they specified:

- Honorary Doctorate
- MPhil

The following question asked if respondents were a first generation graduate. 59.53% selected No, 36.54% selected Yes, 2.36% selected Not applicable and 1.57% selected Prefer not to say.

Respondents were also asked to confirm if they had ever received free school meals. 90.37% selected No and the remaining 9.63% selected Yes.

Figure 4: Responses to Question 17, Do you identify with any of the following religions?



### Music Lessons

Questions 19 and 20 asked respondents for information regarding the provision of music lessons they received as a child. 91.16% confirmed that they received private, paid for music lessons. The remaining 8.84% selected that they did not.

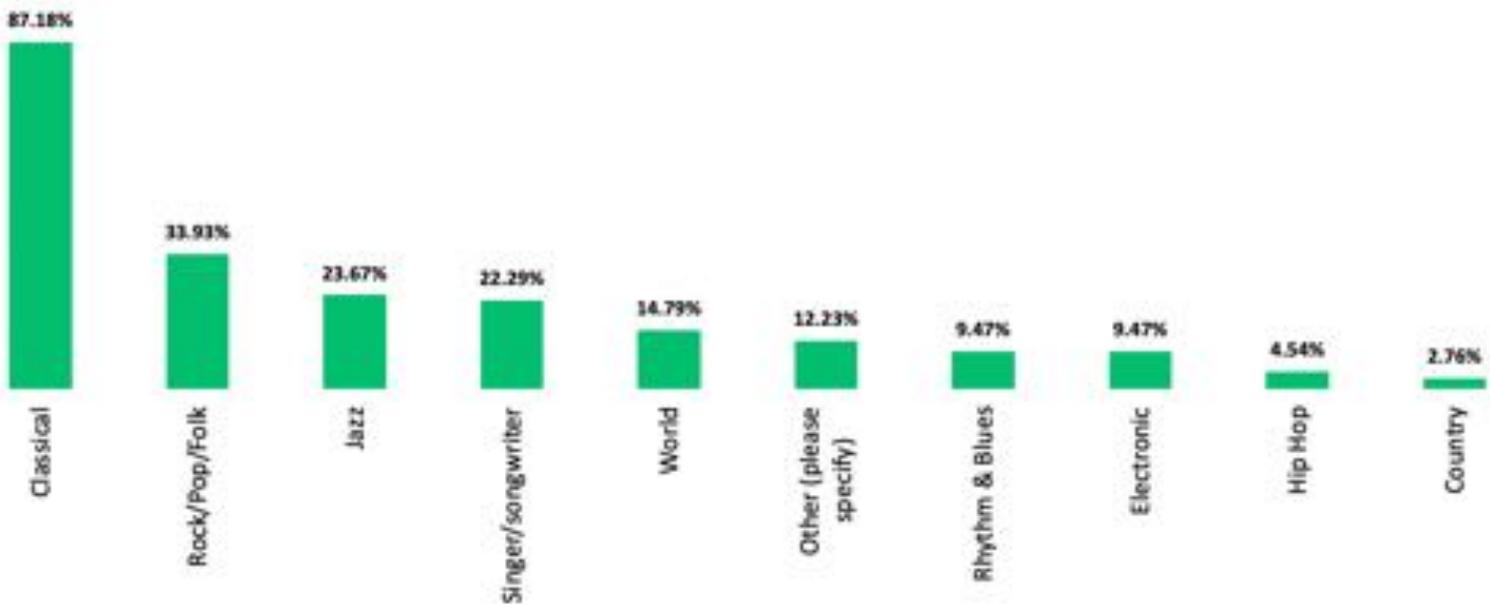
In the following question, 17.92% stated their music lessons as a child were subsidised, 4.28% stated they had received group lessons and 45.42% selected Not Applicable. The final 32.38% selected Other, and detailed the following musical provisions:

- Mixture of group and individual tuition
- Ensemble playing (such as orchestras and bands)
- Provision paid for by county music service or local authority
- Private tuition (group and individual)
- Attendance of Junior Conservatoires and Music Schools
- Lessons paid for by individuals themselves
- Lessons paid for by family members

### Musical Background

Respondents provided information on the genre of music they were trained in prior to training as a Music Therapist. A number of responses indicated issues with the term 'World Music' which was used as part of the survey - participants explained the issues of colonialism associated with this term. The BAMT apologises if the use of this term caused offence and will ensure it is not used in future. The distribution of genres is shown in Figure 5.

Figure 5 Responses to Question 18, Please provide details of your musical background prior to training as a Music Therapist



The 12.23% of respondents who selected Other stated the following additional musical backgrounds:

- Free improvisation
- Music Hall/Vaudeville
- Calypso & Soca
- Electroacoustic & Acousmatic
- Composition & Music Production
- Soundscape
- African music
- Spanish music
- Musical theatre
- Eclectic
- Brass bands
- Gospel
- Choral
- Carnatic classical
- Traditional Irish/Scottish
- Folk
- Military wind band
- Punk
- Christian & contemporary Christian music
- Accompanist
- Gypsy jazz
- Reggae
- Church music
- Contemporary 20th and 21st century music
- Bands
- Gregorian chant
- Community Music
- Academic musical background
- Samba

## Places Of Work

Respondents were asked to identify the settings they currently work in, and the distribution of percentage responses for each setting are shown in Figure 6.

The respondents who selected Other specified the following work settings:

- Charities and not-for-profit organisations
- Residential care communities such as those for adults with learning disabilities/autism, children, adolescents and young people with PMLD
- Community Dementia settings
- Residential educational settings
- Freelance work in SEN settings
- Research journals
- Child social care
- Supervisor
- Woman's domestic violence refuge
- Local authority run community settings
- Day centres
- Lecturer
- Specialist Music Therapy centres
- Neurorehabilitation (adult and paediatric) and neuro-disability settings
- Involvement with national and international assessments for music education
- Refugee drop-in centres
- Theatres and performing spaces
- Arts centres
- Forensic mental health settings
- Other NHS sites
- Homeless hostels
- Public Health Agency
- Researchers
- Community Music
- HEI
- Adoption/fostering work
- Voluntary sector including rape & sexual abuse, palliative care and complex needs
- Studios
- SEN family work
- Mental health for adolescents; within the transgender and non-binary communities
- Community Third Sector organisations
- PRU/Training programmes
- Management of Music Therapy services

Figure 6: Responses to Question 6, Which settings do you work in?

