Introduction

The adolescent’s need for a strong sense of belonging, especially from peers, is crucial in the development of self. Connectedness with others is necessary for emotional wellbeing and mental health (Saeri et al., 2017) and, as Andrew Malekoff writes, ‘teens who feel connected are less likely to engage in high-risk or internalizing behaviours such as self-harming, violence, early sexual activity, disordered eating, or suicidal behaviour, for example’ (2014, p. 142).

This third section of the Handbook allows us to consider how young people use music to connect. Possibilities for connectedness are ever-changing and the following chapters by music psychologists and music therapists focus on young peoples’ experiences of connectedness in both face-to-face and online interactions.

With more resources and platforms through which to share and interact than ever before, young people can now choose to experience many different kinds of connectedness, yet adolescence still happens in its own time (and on its own terms) involving physical, emotional, and social growth (Geldard and Geldard, 2004). For a young person who is going through this huge developmental transitional period, many opportunities for online connectedness can be attractive but may also magnify a feeling of isolation that can come with adolescence. The Internet also speeds up communication. It creates a landscape that is fast-paced, immediate, and available on demand. There is a sense that nothing stays the same for long and the speed at which interactions happen and connections are made, and then change, is limitless.

The creative arts offer relational experiences and opportunities for communication and connectedness using multimodal media (Rose, 2017; Ruud, 1998). As the Internet has developed, ways of being involved in and accessing music have changed as well. As Keith Johnstone, a drama teacher writing in 1979, cautioned:
Creating a story, or painting a picture, or making up a poem lay an adolescent wide open to criticism. He therefore has to fake everything so that he appears ‘sensitive’ or ‘witty’ or ‘tough’ or ‘intelligent’ according to the image that he’s trying to establish in the eyes of other people. (Johnstone, 1979, p. 78).

This creative-expressive dilemma for young people is still alive in the twenty-first century; the framework of the Internet enables the freedom to play, yet the expanded playing field creates a myriad of new complexities.

The diverse voices in this section of the Handbook present a broad view of some of the ways that music offers opportunity for connectedness between young people and others and why that is important. Susan O’Neill (Chapter 16) observes the affordances of spaces in young people’s music engagement while Lisa Nikulinsky and Andy Bennett (Chapter 17) outline music scenes for young people, and Helen Oosthuizen (Chapter 18) describes their engagement in group music therapy. Connectedness via online platforms are further explored by Roseann Pluretti and Piotr Bokowski (Chapter 19) through the interplay of music and social media in relation to adolescent developmental tasks. Michael Viega (Chapter 20) considers the role of digital music, technology, and media in music therapy. Carmen Cheong-Clinch (Chapter 21) describes an e-platform used in a hospital setting to enable young people to share their preferred music.

In this chapter I present an educational context for music therapy with adolescents who have social, emotional, and mental health needs. Even though the Internet can appear all-consuming, relating offline still has something to offer young people. A research study in this setting showed that young people were, above all, committed to music therapy sessions (Derrington, 2012a) despite the fact that there was not a strong WiFi connection in the room where we worked. I further explore how young people can be empowered to balance their needs for connectedness internally, with others, and to the virtual world. The title of the chapter is inspired by frequent comments about the WiFi connection, or lack of, from the young people I worked with as both researcher and music therapist.

**Music therapy in a secondary school**

Young people face transition on many levels when they move from primary to secondary school, usually around the age of 11 years in the United Kingdom where I live and work. As well as settling into new schools and establishing new peer groups, they have to adapt to a new school system and get used to different classrooms with a different teacher for each lesson, relying much less on a familiar connection to one particular member of staff (Symonds et al., 2017). These transitions at a vulnerable age can highlight particular needs for some young people.

Having worked as a music therapist at primary and secondary schools for many years, I am aware that integrating therapy within any educational setting can be a complex negotiation between apparently contrasting stances. Back in the 1990s, psychoanalyst
Anton Obholzer (1994) examined how defensive splitting between staff and outside professionals often took precedence over integration and team work. Educationalists Kathryn Ecclestone and Dennis Hayes (2009) have since questioned the therapeutic turn in education and the extent to which teachers are expected to prioritize ‘curriculum of the self’ and therapeutic approaches to learning, but this could be considered the other extreme.

When working to develop any therapy provision it is important to fully understand the ecology of the school and to find ways to meaningfully share what is happening inside the room outside the room. Generating lines of communication that are open and reciprocal makes a positive impact on the work. For music therapy to be functional in a school, work has to be joined up with teaching staff and fit in with the educational system (Twyford, 2008).

Making therapy available within school is vital (Derrington, 2012a; Alexander, 2012). Having a music therapy space on site can avoid disruption to young people, as well as reduce costs and possible stigma of needing to leave school for an appointment. At such a time of uncertainty, having music therapy as part of the fabric of the school can further engender the young person’s sense of security and trust. Equally, being on site means that the therapist can find the most mutually beneficial way to work within an educational assessment system. At one secondary school, I designed accredited learning units for a national award scheme that also helped validate the young person’s social and emotional learning through music therapy (Derrington, 2012b).

Although apparently at odds with psychodynamic therapeutic working, the school system and organized structure can actually make an ideal setting for such work: the rules and timetables offer a clear framework and boundaries within which the whole school functions. A school environment offers young people consistency and belonging while they concurrently navigate their changing world.

There has been an increase in understanding of how music therapy can help young people with emotional and social difficulties since the 2000s (Karkou and Sanderson, 2006), with greater emphasis given to schools to intervene early and identify ways to help young people who experience mental health difficulties, as it is recognized that they will have greater difficulty in learning (Department for Education, 2016). Music therapists can respond to this by creating musical school communities and developing music programmes that offer young people opportunities for connectedness, wellbeing, and development (Rickson and McFerran, 2014), as well as providing individual or group music therapy.

**The music therapy space**

I set up work and conducted research in an old garage within the grounds of the school: a separate brick building that had previously been used as a bike workshop. The space was functional and self-contained; an ideal place for music therapy sessions which was easily accessible yet far enough away from other classrooms. The layout of the garage was important and it housed almost two of every instrument including drum kits. Comfortable
chairs were set out next to each other with a range of acoustic and electric instruments within easy reach. A workbench was covered in percussion instruments, a PA system, various microphones, and a video camera on a tripod which the young people were free to use. Even though the garage was tidied up for each new session, it was deliberately left disorderly with the instruments easily available to offer a point of access for young people who might be reticent to play as well as an opportunity to make the space their own.

Together with its uniqueness as a physical space and the resources described, young people—supported in a therapeutic relationship—had room to move physically and metaphorically between childlike and more adult ways of being (Karkou and Joseph, 2017). Analogous to Donald Winnicott’s ‘holding environment’ (Winnicott, 1984) the garage offered a ‘potential space’ (Winnicott, 1971) and opportunity to play. The space, held within a psychodynamic frame, could also be said to provide ‘asylum’ which Tia DeNora suggests - recalling its original sense - as ‘shelter, safe space, place for living and flourishing, room in which to create, play and rest’ (2015, p. 33). As part of the research study (Derrington, 2012a) James, aged 16, spoke about his experience:

Music therapy to me is a sanctuary. It’s where I can go at the end of the week to let everything show…. It’s my time where I play music as I want to.

In order to work with complex emotional responses and sometimes unpredictable behaviour, the space needs to feel safe for both the therapist and the student. Therapists frequently consider how to provide ‘a secure base’ (Bowlby, 1988) for their clients; however, the therapist also needs to feel secure in order to work effectively. This extends beyond the space and resources available to include the communication systems established with staff.

The music therapy approach

Musical dialogues can happen in many ways. If improvising felt risky and exposing for some of the young people, experimenting with pre-composed musical frameworks could facilitate a sense of security when creatively exploring thoughts and feelings. Young people often chose to listen to music that they liked, sometimes singing along; they wrote their own songs, talked, or initiated playful interactive games without involving music directly (McFerran, 2010; Derrington, 2005). In these dialogues, the balance of initiating, responding, and recognizing when not to play required therapeutic sensitivity. Just as young people can oscillate between needing encouragement while at the same time disregarding adult input, a spontaneous and empathetic response to their musical ideas was often key to their engagement and ability to share their expression in a playful and meaningful way. My approach comes from humanistic roots (Rogers, 1951) and is underpinned by psychodynamic thinking, but has also developed in response to learning from young people. ‘Getting alongside’ young people, working at their pace and supporting them, with a focus
The video camera in music therapy

Recording music therapy sessions has become an accepted part of professional practice for a variety of reasons. Carl Rogers introduced recording as a way of reflecting more closely on dialogues within psychotherapy (Hammond, 2015). Mary Priestley (1994) furthered this in music therapy by often listening back to improvisations with clients to further understand and make sense of the work, a process that Gro Trondalen describes as ‘self-listening’ (2016, p. 43). New technologies offer everyone opportunities in music therapy that did not exist before. As young people tend to store their preferred music on their phones and are likely to bring these to sessions, they can also easily use them to record what happens in sessions, possibly without the therapist's knowledge.

Even with consent, the therapist’s privilege of recording sessions and often holding influence over what happens to those recordings can sometimes be overlooked. Ofer Zur (2017) helpfully questions the myth of the ‘therapist's omnipotence and the patient's fragility’. In my experience, encouraging young people to be in control of the video camera helped to speak to, and served to minimize, any potential power imbalance in the relationship; it also encouraged an open dialogue about recording.

Making connections in music therapy through the video camera

Young people, who were accustomed to using video recordings as part of their life, enjoyed the camera in music therapy. I noticed that it provided a channel of communication which appeared to be a more indirect way of interacting, so for some young people it proved an easier way to share their thoughts and feelings with me. For videos to be viewed together and witnessed in a different way to how video selfies might be viewed online, for example, gave rich opportunity for exploring emotional expression together.

Jade, 13, used the camera to experiment with different roles. Like many young people, she enjoyed imitating her favourite singers and recreating their music videos. Sessions were spent recording and re-recording different takes of particular songs. She would choreograph these in detail and sometimes ask me to join her in front of the camera, quickly showing me how to do the dance she was planning before we began to film.

She sang along to the songs with great enthusiasm, even when she didn't know the words. Immediately after recording each song she would pore over the footage on the small camera screen hastily reviewing what she saw, and commenting on it, before directing me quickly to begin filming again. Her response was unpredictable and the recordings were met with dismay or delight, largely depending on how she felt.

Jade's use of the camera and her direction over me were important parts of this experience. It felt as if she used sessions to play freely, as she might have done with friends, but the camera allowed her to witness herself repeatedly from outside and to use the process
to experiment with different ways of being. Jade's continuous cycle of filming and re-viewing throughout a music therapy session became a way for her to organize her emotional responses.

**Why recording is important**

Creating a recording can allow for something tangible to be taken away from the session, shared, revisited, uploaded, and observed from a distance, in the same way that adolescents instantly record, share, and respond to experiences on social media. It is interesting that all the music therapists' contributions to this section of the Handbook emphasize the importance of producing a recording, which can serve as a reminder of a shared experience and felt connection that can sometimes be difficult to describe. More often than not I was behind the camera, off-screen yet present, but I was clear in my role as facilitator as were the young people. The process of using the camera and creating an artefact is far more effective as a shared experience than in isolation (Pereira et al., 2017).

Young people's ownership of the camera allowed them to decide how to share their stories and, within the robust therapeutic framework of the garage, enabled young people to express and work through strong feelings safely. Acting out fantasies of being performers and playing to huge audiences was held within my sensitive awareness of the risk that the camera could overfeed fantasy, endorse delusions of grandeur and inflate a young person's already fragile self-concept.

On one occasion when Zac, 16, came in to the garage, he seemed unsettled and muttered something to me about another boy. He took off his jacket and chucked it on the floor. He kept his baseball cap on but turned it to face backwards, hunched his shoulders as if preparing for something. Using his phone, he set up a beat through the PA system, and turned up the volume so that the four speakers filled the garage with sound. He asked me to turn the camera on 'cos this needs to be filmed’. He took the microphone off a stand, ‘one two, one two’, acknowledged me behind the camera, swung the cable free from the desk, and created his space as he looked around him, listened, nodded to the beat, then began:

'What you gonna say to me the next time
I come knocking at your door
You gonna say hi?
Fuck the world this is me against yours

What am I? I’m my own crew
I’m a free style who wants
to say to you fuck you,
Fuck what you think. It’s like me against you

What are you gonna do the next time
I come knocking at your door.
You gonna run?
Get out my way […]’

From the start, it was clear that he was challenging someone else. He went on to freestyle about having a fight with another boy and became fully absorbed in the music. It was noticeable from his movement how the aggression built up and moved through him in a piece that lasted more than 10 minutes. Then, as he
continued to listen to the accompanying beat for a while, he nodded over to me, to indicate the end and to turn off the camera. As I moved to sit down next to him, he shrugged with some sense of resolution and relief, then quietly asked me ‘What did you think?’

Zac was able to address the unknown ‘other’ through the camera and leave his feelings of anger and confrontation there. He seemed to use the camera as a messenger, but at the same time it was important to him that I listened and witnessed what he was saying. Although he was aware of how he was using the camera for more than just recording, filming for Zac did not seem to be about a desire to share this video with others. For another young person, Josh, the process of creating an object was also the main focus but served a different purpose overall:

Josh, who was 14 at the time, liked songwriting in music therapy. He had been placed into foster care and as a result had to move school and been separated from his siblings. He used the sessions fully, by singing, acting, or talking. In one session he decided that he wanted to record a song for his father with whom he no longer had contact. He directed me to accompany his improvised lyrics on the piano and positioned the camera to the side to capture what he felt was the best possible angle.

Turning to look directly into the camera, he introduced his song with a clear message to his imagined audience. After recording the song, we burned it to disc and he created the sleeve for it. When I gave him the DVD, he took it and immediately snapped it in two. This seemed shocking at the time, as he had spent so long carefully arranging and directing the take. However, his decision to instantly destroy it led us back to talking about what the process had meant for him.

The manner in which Josh was able to vent his anger around his father’s absence was pivotal in the therapeutic process. Perhaps, as Johnstone sets out (1979), Josh did not want to lay himself open to criticism from his father, so he had to destroy the recording. As his dad was not around for him to know his feelings, Josh used the camera and the space to share how angry and hurt he was. The process of recording using the video camera and singing to his father appeared to help him to work through aspects of their relationship and the decision to destroy the disc meant that Josh remained in control; he also became aware of some of the anger he was carrying.

What can the video camera add to the therapeutic process?

The camera is shown to act as a container (Bion, 1970) within the contained space of the garage and the therapeutic relationship. As illustrated, the camera could also be said to offer a creative liminal space (Bunt, 2017; Ruud, 1998) to experiment with emerging identities and feelings as young people move between child and adult modes of being and, as Richard Frankel suggests of individual therapy, ‘a stillness, which can aid an adolescent in sorting through the differing claims on her being’ (1998, p. 47).

Young people use video recordings in music therapy as a way to take risks while not feeling out of control, which Adam Phillips explains is a necessary stage of development leading to an understanding of a new kind of internal environment. Protection from
adults ‘is both wished for and defied’ (Phillips, 1993, p. 26) and using the video camera in music therapy afforded a way for young people to constantly negotiate these boundaries with me. What can return in adolescence is an ‘enactment through risk’ (Phillips, 1993, p. 26) of the experience of the early holding environment. Risks, Phillips suggests, are indicators of noncompliance that need to be explored in order to re-experience solitude. For Zac, whose holding environment as an infant was not secure, the re-experiencing of this essential phase of infancy (Winnicott, 1984) enabled him to realize how his own body could be a reliable holding environment.

The video camera held different meaning for each young person and the value of recording was not limited to creating an artefact. It was not only about sharing or connecting in a material way but offered opportunities for creating a space within a space in the music therapy garage which could lead to dynamic changes in the therapeutic work. For the young people I worked with, it sometimes appeared that the virtual world was as important as the real world. Their own decisions about sharing any recordings we had made in sessions often led to conversations about trust and vulnerability, when thinking about sharing videos online. Considering the undefined open social arena of the Internet, we were able to explore their own sense of boundaries and those of others, and discuss the consequences of their footprint on social media.

**Conclusion**

The pace at which young people engage with the Internet is offset by experiencing interactions with others in real time. Regarding online psychotherapy groups, Haim Weinberg refers to the Internet as ‘a virtual space with no boundaries’ (2014, p. 108). He furthers that ‘from a psychological point of view, it can be seen as a giant, boundless potential space (Winnicott, 1987) for reality and fantasy, playing and imagination, closeness and alienation’ (Weinberg, 2014, p. 108). The Internet affords young people ideal ways to constantly communicate with their peers and be connected with others, but the therapeutic boundaries within the potential space of the garage offered young people the security to explore new ways of connecting.

In this chapter I have explored how young people used the video camera in music therapy and its integral role in making connections. As a resource in music therapy sessions, the young people used the video camera to embrace the adolescent paradox (Shipley and Odell-Miller, 2012) of seeking freedom while needing direction; experimenting with identity while being held. The camera could help young people to develop awareness of self and other, and lead to positively adaptive interconnectedness and emotional wellbeing.

The integration of music therapy in a secondary school and responsiveness to the structures of the school day, including the creative environment of the garage and the video camera, allowed therapeutic working, communication, and relationships to develop over time. Relational experiences through music in music therapy can enable change (Trondalen, 2016) and the many ways that music therapists respond to meet adolescents
in the moment through music can help empower young people to develop autonomy and self-knowledge both internally and in relationship to others. The space to play, experiment, and express themselves in a face-to-face music therapy session that is connected to the vibrant omnipresent virtual world can offer adolescents an extended means of relating and connectedness.

References


