Book Review

Music Technology in Therapeutic and Health Settings, Wendy L. Magee (editor), Jessica Kingsley Publishers, London, UK and Philadelphia, USA, 2013, 400pp, paperback. ISBN: 978-1-84905-273-3, £27.99/ $45.00.

Several years ago, many practitioners in health care would not believe that combining music and technology would lead to new possibilities for patients in health care. The authors of the book show that this combination is very fruitful in improving care or strengthening therapies. Listening to music or playing music may facilitate coping with pain and anxiety, may lead to relaxation, may decrease behavioural problems, and may promote a sense of normality. The authors give descriptions and models to clarify why music technology could be beneficial. They make clear how to use music technology, what to use and also for whom it might be helpful and for whom it might not. This book integrates many perspectives. The content may therefore not only be interesting for music therapists, but also for a broad range of disciplines, such as occupational therapists, nurses, psychologists, assistive technologists, family members.

The book is mainly written to use in practice of health care. Many case studies are presented, in which authors discuss how they integrate music technology in their setting. Examples of software and applications appropriate for practice are introduced, such as MIDI, applications on iPad or iPhone, music recordings, listening devices, and game oriented systems (e.g. Guitar Hero at the Wii). Both the advantages and limitations are discussed of these specific devices and software program (e.g. aversive sounds). Unfortunately, the authors mainly focus on Apple software. A platform independent approach or overview would be more useful. However, a more general guideline to evaluate new resources was provided in the second chapter and would thus also be helpful for non-Apple software and devices.

Besides the focus on clinical practice, the book follows a life span perspective. Two of the four parts of the book discuss a wide range of clinical settings with people with disorders across the life span, from a neonatal intensive care unit to oncological care, adult psychiatry, and health care setting for frail elderly. All authors provide information on when music technology could be beneficial in therapy and when we should be cautious in using it. Moreover, in the fourth chapter, general guidelines were provided to aid decision making for using music technology, specified for main problem areas (e.g. motor problems, communication problems, social needs, and behavioural challenges).

Integrating technology in health care requires a step by step approach. Some authors describe the process they have gone through in their setting in order to link the music technology with the more traditional therapeutic perspectives, e.g. building a real music studio in a clinical setting for psychiatric patients. Others mention the step by step approach in introducing music technology within the therapy of one patient. For example, matching switches to the abilities of people with profound physical disabilities that seriously limit their movements. These authors presented a five step model that helps to guide professionals to explore the opportunities for these patients to make music. This model stresses the multidisciplinary approach that is vital to end up with a high quality solution that fits the needs and wishes of the patient.

All authors agree that matching the needs and wishes of the patient is crucial. However, the authors seem not to agree on the amount of involvement of the client. Some think it is useful to explore the technology together with your client, while according to others you need to know how to use the technological devices before the therapy starts. This disagreement may be explained by the characteristics of the patients (e.g. cognitive impairment), the treatment goals and authors' perspective on the role of the professional using music technology. All authors thoroughly reflect on the role of the therapist. One of the authors (Ch 13) mentioned that after introducing music technology he was seen as a composer or a technician, instead of therapist. According to another author (Ch 11), the role of a therapist needs to be more flexible and a therapist needs to be able to integrate several roles (therapist, sound en-

gineer, DJ). Redefining the professional role, identity, and competencies seems necessary, which will impact educational training programs.

At the end of the book, implications for these training programs and a research agenda are addressed. More scientific research is crucial, because it is a very new field of research and most of what we know comes from case studies and experiences in specific settings. According to the editor it is necessary to consolidate its emerging theory by identifying and articulating this practice as a first step. She stressed that this is best met through interdisciplinary collaboration and with research designs where user's perspectives are placed centrally. What questions exactly need to be addressed is not discussed, but the reader will get many ideas after reading the book.

After reading the book, I agree with Dr. Ramsey (foreword) that it is clear that music technology opens doors that traditionally are not opened in therapy. Com-prehensive examples of music technological tools are presented and linked with more general principles in order to make it applicable to newer forms of technologies. In my opinion, music technology makes playing and listening music more accessible, expands acoustic music making and increases the possibilities for patients to process feelings about their illness, and facilitates creative thinking and expressing themselves.

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