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PUPPETS IN MUSIC THERAPY: A QUALITATIVE STUDY

A Thesis

Submitted in partial fulfillment of the requirements for the degree of
Master of Science in Music Therapy

By

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Molloy College

Rockville Centre, New York

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Master of Science

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Thesis Committee:



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May 7, 2021

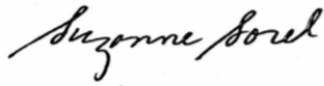
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Abstract

This study explored the experience of music therapists when implementing puppets in their clinical work. The research questions guiding this inquiry were as follows: 1) What is the experience of the music therapist when using puppets in music therapy? 2) How does the use of puppetry in music therapy influence the clinical work of the music therapist? and 3) How does the use of puppetry in music therapy influence the therapeutic process of the client (as perceived by the music therapist?)

Four music therapists participated in semi-structured interviews regarding their experience and insight in using puppets with their clients. After reviewing the data from their interviews, an inductive thematic analysis was used to determine themes from the information they gave. Five themes emerged and were supported with participant quotes. The themes were: (1) puppets to increase attention, (2) puppets as a motivation for engagement, (3) puppets as an object for expression, (4) puppets as facilitators of connection, and (5) the limitations and contraindications of using puppets. These themes were discussed as they related to the research question. The results showed that the addition of puppets to music therapy have been seen to increase attention, engagement, expression, and connections among clients. Findings from this study may enhance music therapists' understanding of the use of puppetry in music therapy.

Keywords: music therapy, puppetry, puppets

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Introduction

Puppets have been used as a medium in therapy for decades. My interest in the use of puppets in music therapy stems from my passion in working with children. I implemented a play-based style in my practice during my music therapy internship at an early childhood intervention center for children aged two to five. Implementing puppets clinically increased my curiosity about what puppets may add to the overall music therapy process. Using puppets in music therapy sessions was often a novel experience for the young clients at the early intervention center. Many children interacted with the puppet more than with me alone in previous sessions. I believe that part of their fascination with puppets stemmed from experiencing an inanimate object suddenly come to life. I observed that the children would often no longer look at me (the manipulator of the puppet), instead turning their attention to the puppet. The puppets became a fantasy brought to life, with unique personalities, voices, and behaviors.

My clinical philosophy is a combination of humanistic and psychodynamic with an emphasis on the importance of interpersonal relationships and empathy towards others. Humanistic psychology is characterized by a therapeutic relationship that upholds the tenets of empathy, unconditional positive regard, and congruence with each client (Corey, 2009). Every person has the potential to create relationships with others and these relationships may enrich their lives. As a humanistic music therapist, I use a variety of creative tools when working with clients to highlight their unique personalities and interests. This includes keeping an open mind about what the client may need from moment to moment. Many of my music therapy professors referred to our education as building our clinical “toolbox,” a collection of creative therapeutic techniques and activities to call upon at any point. I believe that puppets are a valuable addition to the “toolbox.”

My clinical work is also informed by psychodynamic concepts, such as defense mechanisms and levels of consciousness. Psychodynamic theory states that one's personality is greatly shaped by their childhood, and that events which may remain unconscious can have a significant effect on one's adult life. When a therapist presents a client with a puppet, they are offering a symbolic object onto which the client can express thoughts and emotions that might be too difficult to express otherwise. Living in this symbolic world may make it easier for clients to express complex emotions and create a space where one feels less judgement and may feel safer to express themselves. Clients may see the puppet as an alternative therapist, or a co-therapist, to interact with if they choose. Or they might see the puppet as a figure that they can relate to, and perhaps show their emotions through. This study addresses puppetry rather than inanimate toys or objects in general due to the lack of research of using puppets in music therapy and the unique movement/animation that brings puppets to life more than other toys.

My experience using puppets with young children who have Autism Spectrum Disorder (ASD), and other developmental disabilities has revealed their potential benefits in the therapeutic process. I believe that people with ASD can benefit from social interaction, but I do not think this social interaction has to be with a human. I observed children intentionally engage with a puppet (e.g., hugging, touching, facial presence, and communication) when they showed little motivation to interact with adults or peers. I noticed children display increased vocalization and organization of their speech when using a puppet. I have also observed that children with trauma appeared to open up more easily regarding their emotions during puppet engagement. These experiences have led me to believe that some children with ASD may feel more comfortable having social interactions with the puppet, rather than with me. My clinical use of puppets has also led me to believe that they are useful in eliciting vocalizations and language

from children who have limited verbal skills. I am interested in the variety of possible uses for puppets in various clinical contexts (e.g., trauma, developmental disabilities, and older adults).

Literature Review

There is limited systematic inquiry into the use of puppets in music therapy. This review will address the appeal of puppets, the various ways in which puppets are implemented in different settings, and the use of puppets in music therapy. Given the lack of systematic research on puppet use in music therapy, this literature review demonstrates the need for future research.

The Appeal of Puppets

Commonly, a puppet is defined as a movable model of a person or creature. Puppets may be manipulated by strings from above (marionette) or by a hand inside it (hand puppets). Other types of puppets include glove puppets, finger puppets, rod puppets, and shadow puppets. Some consider the most popular and beloved puppets to be the Muppets, created by Jim Henson (Jones, 2016). Henson coined the term “Muppets” by combining the “m” from marionette to the word puppet (Jones, 2016). This represents that they are a combination of a hand puppet and a marionette, since they have both a moving mouth and moving extremities (Jones, 2016). Henson worked with his Muppet builders to make these creations so full of life by ensuring the perfect proportion of distance from the eyes to the mouth, calling it the “magic triangle” (Jones, 2016). This lifelike quality creates that captivating appeal for children.

Educational Use of Puppets

Puppets can be helpful in the classroom for a variety of learning experiences and activities but appear to be underused (Kröger, 2019). Puppets in the classroom promote involvement in learning, function as an educational role model, promote feelings of self-worth,

allow for increased emotional expression, and act as a visual scaffold for children who have challenges in learning (Remer & Tzuriel, 2015; Renfro, 1984). Puppets are also helpful in teaching music, reading, and writing, and facilitating the development of social skills in the school setting (Brown, 2005). Many educational goals align with music therapy goals and could be complementary to the practice of music therapy with puppets in schools.

Puppets in Clinical Settings

Puppetry has been an asset in the treatment of people with socio-emotional and mental health challenges for decades (Bernier, 2005; Irwin & Shapiro, 1975). Puppetry has been incorporated in psychotherapy (Bender & Woltmann, 1936; Edington, 1985), play therapy (Bromfield, 1994; Knell, 2015), art therapy (Gerrity, 1999; Malhotra, 2019), occupational therapy (Howells & Townsend, 1954), and drama therapy (Anderson-Warren, 2013; Wu, 2020). Within these fields, the following clinical groups have benefitted: individuals with ASD, trauma, Alzheimer's, dementia, depression, eating disorders, and developmental disabilities.

Play therapy is a method of responding to the mental and emotional needs of children and adults in a developmentally appropriate manner through play. Play therapy focuses on the interpersonal relationship between the child and the therapist (Axline, 1948; Crenshaw 2014). Puppets have been used in play therapy for decades for assessment and treatment (Knell & Beck, 2000). Knell (2015) describes puppets as a non-threatening way for children to express themselves as if they were actually the puppet and not themselves anymore. At times, clients may need to use something or someone as a stand-in for themselves. Puppets may be an asset in assisting a client to express and act out difficult emotions that may be too difficult to process.

Edington (1985) stated, “hand puppets and dolls can be used in psychotherapy with children to establish rapport, to help children address specific issues, and to serve as fantasy

substitutes for stress-provoking figures in the environment” (p. 692). Some of the primary challenges when addressing children’s intrapersonal and interpersonal psychosocial issues may be due to an inability to relate to others and challenges in self-awareness (Dillon, 2009). One way to address interpersonal and intrapersonal skills is by incorporating puppets in play therapy (Dillon, 2009), which offer children the opportunity to address challenges (e.g., catharsis) by identifying with various representational characters (Bender & Woltmann, 1936). Using puppets in play therapy can help build trust, develop authentic therapeutic relationships, and enhance communication.

When implementing puppets into play therapy, clients have the opportunity to increase interpersonal bonding, communication of difficult feelings, and self-awareness (Bromfield, 1994). Play activities with puppets can help children with trauma by easing their fear about therapy and helping to build trust with the therapist (Dawkins, 1998). These benefits align well with the field of music therapy in the treatment of clients with trauma.

Drama therapists incorporate puppets along with other imaginative play. Drama therapists use theatre techniques and dramatic play to foster client insight, explore emotions, and facilitate personal growth (Meldrum, 1994). The use of puppets in drama therapy provides clients with opportunities to play and relate to different characters. This opportunity for role-play provides creative experiences as well as the opportunity to project feelings onto inanimate objects if needed (Chesner, 1994). Projection is the displacement of one’s feelings onto a different person, animal, or object (Bruscia, 2011).

Drama therapy interventions that incorporate puppets may be beneficial for children with developmental disabilities (Anderson-Warren, 2013; Wu, 2020) and with teens who have experienced trauma (Senroy & Senroy, 2007). Puppets can be a facilitator in creating stories and

games that help clients clarify and process past events (Anderson-Warren, 2013), and may facilitate increased communication, cooperation, self-exploration, and interaction with peers during group drama therapy (Wu, 2020). Puppets have also been utilized in the treatment of adolescents with trauma. Children and adolescents who have experienced trauma may exhibit emotional and behavioral challenges, showing symptoms of post-traumatic stress disorder, suicidal tendencies, and depression (Senroy & Senroy, 2007). The addition of puppets into the treatment of teens with trauma encouraged engagement in story making and dramatic play while exploring complicated family dynamics (Senroy & Senroy, 2007). These studies indicate that puppets can be a motivational tool fostering a sense of safety among children and adolescents so that they can process deep emotions and explore trauma.

Drama therapists have also incorporated puppetry into their work with older adults (Golden, 2015; Jaaniste, 2011). In a program inspired by theatre arts, puppetry was introduced to senior citizens' facilities to bring about a sense of community, invoke a sense of creative play, and strengthen cognition and motor skills (Golden, 2015). This program fostered an increase in engagement, spontaneous communication, laughter, presence, and participation in performances. Puppetry was also found to be useful with clients who have dementia, by facilitating the expression of difficult and painful emotions (Jaaniste, 2011). Puppetry facilitates the therapeutic process with older adults, providing a significant connection to their childhood by inspiring happy memories. They may also present older adults with a safe way to represent their persona, making it easier to express painful feelings.

Puppets are also useful in art therapy (Malchiodi, 2007). When clients create their own puppets during art therapy, they make a distinct personal connection to the puppet (Gerity, 1999). Puppet making in art therapy may be beneficial for individuals with ASD in fostering

empathy, developing coping skills, and for socio-emotional development (Malhotra, 2019). Puppets in art therapy may also be beneficial for adults with mental health challenges (Gerity, 1999; Malhotra, 2019). People struggling with body image and distorted sense of self have benefitted from puppet making and effectively used them in projective role-play exercises to represent themselves and their feelings (Gerity, 1999). Puppets in clinical group-work have helped patients build support systems and increased their ability to process and work through trauma (Gerity, 1999).

Puppets in Music Therapy

Puppets have been used in music therapy with children (Birnbaum, 2013; Burke, 1991; Dvorkin & Erlund, 2002; Loveszy, 1991; Robarts, 2002), adolescents (Henderson, 1991; Schönfeld, 2002), and adults (Austin, 2009). Puppets, toys, and other objects can be used in music therapy to help clients understand, express, and cope with feelings about themselves and their relationships with others (Bruscia, 2013).

A benefit of using puppets in music therapy is that they can be used as a projective object (Austin, 2009; Bruscia, 2013; Schönfeld, 2002). A thorough description of music psychotherapeutic concepts is outside the scope of this study, but given the relevance to this topic, a brief introduction and description seems necessary. Music psychotherapy is an intrapersonal process that uses music making to promote psychological changes within the client by bringing unconscious thoughts and feelings into the consciousness, thus increasing self-awareness and the ability to resolve inner conflicts (Bruscia, 2011). Music psychotherapy is also an interpersonal process between the client and therapist wherein transference and countertransference are explored and interpreted (Bruscia, 2011). Projection is a defense mechanism, either healthy or pathological, that arises to soothe the psyche by externalizing

something that is felt internally, as in putting unwanted feelings onto something or someone else (Bruscia, 2011). Instruments, toys, and puppets can all serve as objects onto which children and adults can project confusing or intense feelings. The client can then be supported in working through the displaced feelings on a symbolic basis (Bruscia, 2011).

Music therapists have used puppets to address client trauma (Birnbaum, 2013; Henderson, 1991; Loveszy, 1991). Puppets in music therapy can help clients process trauma by representing actual people and events, displacing significant feelings, and representing psychological problems (Dvorkin & Erlund, 2002; Henderson, 1991; Mahns, 2002; Schönfeld, 2002). Birnbaum (2013) found that communication skills and quality of social interactions can improve with the use of toys as characters in improvised story-songs.

Puppets are also implemented in vocal psychotherapy where the unconscious is actively explored. In those sessions, objects such as toys, stuffed animals, and puppets symbolize “actors who stand in for significant people in their lives or as aspects of client’s personalities” (Austin, 2009, p. 114) that can help them feel safe and supported. Puppets may be a useful way for music therapists to support clients as they access and process intense feelings about past relationships or past experiences.

Conclusions from the Literature

There is a sound body of literature addressing the use of puppets in other mental health fields, such as art therapy, play therapy, and drama therapy. There are gaps in the literature, however, pertaining to puppets and toys in music therapy including addressing how puppets may affect the therapeutic relationship; possible contraindications of using puppets; and addressing music therapists’ and the clients’ perspectives on puppets. These topics serve as a starting point in exploring the experience of using puppets in music therapy.

Purpose and Research Questions

The purpose of this research is to explore the experience of music therapists when implementing puppets in their clinical work. The research questions guiding this study are as follows:

- What is the experience of the music therapist when using puppets in music therapy?
- How does the use of puppetry in music therapy influence the clinical work of the music therapist?
- How does the use of puppetry in music therapy influence the therapeutic process of the client (as perceived by the music therapist)?

Method

This study incorporated the qualitative research method of thematic analysis with the intention of describing the experience of music therapists who use puppets in their clinical work. Thematic analysis is a foundational method of phenomenological research, which is concerned with exploring the subjective experience of a person, and aims to analyze, interpret, and code patterns of emergent themes (Braun & Clarke 2006; Nowell et al., 2017). This study incorporated inductive analysis wherein ideas surfaced from the data (Hoskyns, 2016). As a method, thematic analysis allows the researcher to adapt the framework to suit the needs of the particular study and does not become limited or constrained because it is not attached to any pre-existing theoretical framework (Braun & Clarke, 2006). Therefore, it is a freer approach than other analytic strategies such as content analysis. Additionally, the results of thematic analysis tend to be written in an easily understandable manner and therefore it is a good method for a

novice research reader (Braun & Clarke, 2017). Manning and Kunkel (2014) consider thematic analysis suitable for topics with broad research questions that are relatively new.

Previous music therapy researchers have incorporated thematic analysis. Some have used thematic analysis as a form of data analysis (Baker and Ballantyne, 2013; Pool and Odell-Miller, 2011; Potvin et al., 2015). Some have used it as the research method (Gadberry, 2014). Thematic analysis was especially appropriate for Gadberry's (2014) study in creating a starting point to begin to examine a topic with little pre-existing research because of the large scope of themes that it can address. Potvin et al. (2015) used inductive TA to analyze the data from interviews of patients with cancer supported by music therapy and music listening sessions. Potvin et al. (2015) noted that TA was helpful in capturing the complexity and relevance of individual answers to be organized into significant categories.

Some authors believe that thematic analysis is not its own research method but instead is a form of data analysis (Boyatzis, 1998). Riessman (2008) also points out limitations in thematic analysis when it comes to capturing the subtleties and nuances of the participants, thus losing some important qualities and information. Further, though this method has been recommended for students and new researchers (Braun & Clarke, 2017), there is a general lack of literature detailing the specifics of this method, as compared to other methods, and this may cause inexperienced researchers to feel unsure about conducting the process (Nowell et al., 2017). In order to address these challenges, I will use Braun & Clark's (2006) step-by-step data analysis as a guide, and Lincoln & Guba's four steps in addressing credibility, transferability, dependability, and confirmability (1985), both of which will be discussed below.

Boyatzis (1998) was the first person to place this process into the qualitative realm, explaining how the process of developing codes, recognizing patterns, and interpreting themes

can be organized into a form that is easily communicated to others. Since then, Braun & Clarke (2006) have brought more transparency and exactness to TA through their six phases of thematic analysis. These phases will be shared in the data analysis section.

Participants

This study included four participants. Participants were recruited by posting invitations to participate in music therapy groups on Facebook and by emailing former advisors and teachers (See Appendix A). Purposive sampling was used to ensure that the participants are knowledgeable about the research topic in order to guide the range of germane data (Amir et al., 2016).

In order to be included in the study, participants were required to meet the following criteria: (a) board-certified music therapists with at least two years of music therapy experience, (b) the recent repeated use of puppets in sessions. Once potential participants were identified and recruited, they reviewed and signed informed consent documents (See Appendix B). The informed consent document included detailed information about the study, such as goals, inclusion criteria, risks, benefits, time commitment, privacy concerns, and data usage.

Findings may provide insight into the influence puppets can have on the therapeutic relationship, the therapeutic process, and the experience of using puppets from the perspective of the client (as perceived by the music therapist). The specific information emerging from the data could augment how the field of music therapy views the use of puppets in clinical work with specific clients who may readily benefit from this addition to therapeutic interventions.

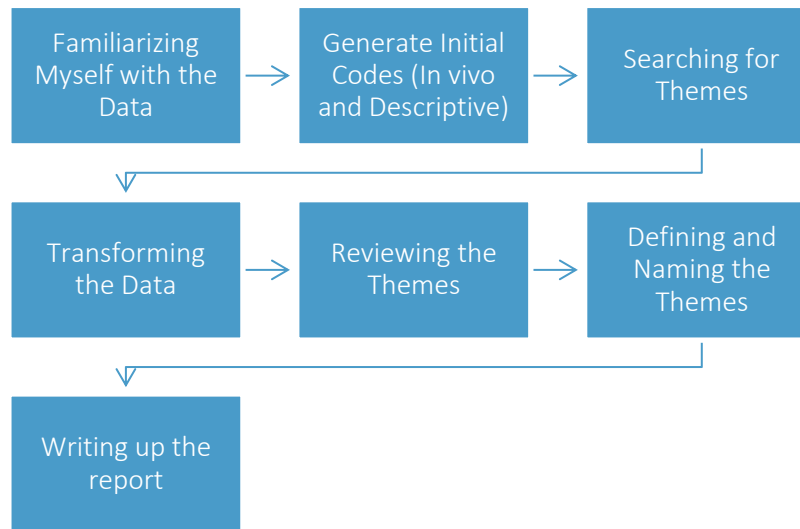
Data Collection

This study incorporated semi-structured interviews. Interviews were guided by a set of open-ended questions (See Appendix C). In order to broaden the potential participant pool and

due to the current pandemic, interviews were conducted over Zoom, a web-based conferencing platform. These interviews were recorded by Zoom, and to ensure that data was captured, an additional audio recording device was used to record the interviews. It was necessary to record both audio and video as there were instances where the participants gesticulated or used their bodies/expressions to clarify their responses, which may have been important information to analyze (Finlay, 2006). Data was transferred to an encrypted thumb drive on a password-protected computer. The interviews were transcribed verbatim, and transcriptions were sent to the participants. Participants were asked to review the transcripts for accuracy and clarify information if necessary as part of the data collection. Once approval was obtained from the participants, the data analysis began. To ensure confidentiality, participants are referred to by alphabetical characters (i.e., A, B, C, D). Data was kept in a secure, password-protected location, and will be kept for no longer than two years.

Data Analysis

To ensure methodological validity using an inductive approach to data analysis, I used Braun and Clarke's (2006) 6-phase guide to thematic analysis as a framework: 1. Familiarizing yourself with the data, 2. Generating initial codes, 3. Searching for themes, 4. Reviewing themes, 5. Defining and naming themes, 6. Producing the scholarly report (pg. 87). However, after reaching Phase 3, I added a step used in qualitative analysis known as transforming the data (King & Horrocks, 2010). This step will be discussed below. Therefore, as Figure 1 shows, my data analysis process was as follows:

Figure 1***Data Analysis Process******Familiarizing Yourself with the Data***

This phase included creating a verbatim transcript of each interview, sending the transcripts back to the participants to review for accuracy, amending the transcripts based on the participants' clarifications, and rereading the amended transcripts for familiarization. I noted the first stage of ideas by highlighting all of the data which directly related to the research topic. Then I extracted all quotes that were directly related to the research topic, known as salient quotes. In this case, salient quotes were any quotes that directly related to the participants' experience of using puppets in their clinical work.

Generating Initial Codes

This phase consisted of identifying features of individual data extracts by identifying commonalities through *in vivo codes* (using exact phrases from the participant's language) and *descriptive codes* (short phrases that depict the key meaning) (Hoskyns, 2016). I generated initial

codes from the salient quotes by identifying significant words and descriptive phrases of the individual data extracts.

Searching for Themes

This phase consisted of organizing the coded data extracts into potential themes, as ascertained through collation of the codes. I collated these codes into potential themes by placing groupings of codes together for each separate interview. However, at this point I felt the need to further explore the meanings of the salient quotes before further developing final themes.

Transforming the Data

After discussions with my thesis advisor about how statements had been coded, I realized that some of the statements did not fit in to their determined category. As such, I felt it necessary to add this extra step to provide clarity and fully justify the placement of the quotes in their selected themes. Transforming the data consisted of reanalyzing each salient quote by putting the participants' quotes into my own words. See Table 1 for an example.

Table 1

Transformation Example

Participant Quote	Initial Theme Placement	Transformation	Final Theme Placement
I use them for every single online group for sure. That's often when kids come right back and are staring at the screen again, is when the puppets come out.	At first, it appeared to me that this referred to puppets increasing engagement during online groups, so I placed it under the theme of Engagement.	In online groups, puppets are a visual that capture the attention of the client.	I realized this quote doesn't mention the clients' participation or involvement, it only refers to their attention, so it went in the theme of Attention.

Reviewing Themes

This phase ensured that the themes reflected the meanings of the data on two levels: (1) each individual extract from the data, and (2) of the data set as a whole. Final themes were developed by integrating the four participants' sets of initial themes together as one, known as cross-case analysis. Each case was the data of a participant. I reviewed the transcripts and salient quotes again, and it became apparent that the final themes covered the relevant information that came out of the participants' data.

Defining and Naming Themes

The purpose of this phase was to capture the essence of what the participants were communicating. This consisted of refining the specifics and definitions of each theme and fitting these themes into the overall story that was coming out of the data. This researcher determined that the themes did not necessarily need subthemes to give structure to the overall story they told. The final themes were reviewed and were ultimately listed in the results because they represent both the individual codes as well as the meaning of the data as a whole. There were many connections between the data of all the participants, and these similarities will be shown in the thematic results.

Producing the Scholarly Report

This phase consisted of the final analysis of the data, writing up the report with specific evidence of the themes, and giving examples from the data extracts that support each theme. The write-up provided specific evidence of the themes, by giving examples from the data extracts that support each theme.

Trustworthiness

Interpreting the data in the method of thematic analysis is subjective and individualistic, and readers may disagree on the results (Boyatzis, 1998). However, if one ensures the transparency of the steps followed, and is clear about decision-making and limitations, thematic analysis can prove to be an effective and trustworthy method (Boyatzis, 1998). In order to remain honest and grounded in the data, I engaged in several steps to ensure trustworthiness.

In addition to following Braun and Clark's (2006) step-by-step data analysis guide, I addressed credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985). Credibility refers to the ability of the researcher to adequately represent the data given by the participants (Nowell et al., 2017). The credibility in this study was ensured through my immersion in the data, use of peer debriefing, and use of member checking. Transferability means the ability of an inquiry to be generalizable to other studies. The process of this study shows transferability in its ability to be generalized and transferred to other inquiries through presenting comprehensive descriptions. Dependability in a study refers to ensuring that results are reliable. Dependability was achieved through showing that the research process was logical, clearly documented in my data analysis notes, and available for auditing if need be. Confirmability refers to how the findings were derived from the data (Nowell et al., 2017). Confirmability was established in this study by demonstrating how and why interpretations and conclusions were made.

An audit trail was established by providing clear rationales for my process, having kept records of notes, reflexive journals, and transcripts (Nowell et al., 2017). Moreover, the research process was overseen by my thesis advisor, thesis committee members, as well as peer debriefing with my thesis group.

Ethical Considerations

A research proposal was approved by the Molloy Institutional Review Board (See Appendix D). The research proposal included specific details about the research design, including details about the recruitment, interview, and data analysis process.

Results

This study explored the experience of four music therapists when using puppets in their clinical work. Four individuals participated in 30–45-minute interviews. Thematic analysis was used to analyze the data from the interviews, and five themes emerged. In order to support and clarify the themes, in vivo codes and descriptive codes are provided in Table 2 along with illustrative quotes from participants (See Appendix E). These themes are presented in no hierarchical order.

Participants' Descriptions

All participants were white, female, board-certified music therapists with clinical experience ranging from five years to over 40 years. Each participant used puppets with children on a regular basis.

Participant A

Participant A has over thirty years of clinical experience, is a certified teacher, has a graduate degree in music therapy, and has advanced training in Nordoff Robbins Music Therapy. She has experience at a music therapy center where she worked with a variety of ages and diagnoses and has an eclectic theoretical philosophy that centers around humanism and the importance of play.

Participant B

Participant B has eighteen years of clinical experience, has an undergraduate and

graduate degree in music therapy, and has certifications in neurological music therapy (NMT) and neo-natal intensive care. She has experience in a family support center and a pediatric hospital, has worked with a variety of ages and diagnoses, and has a therapeutic philosophy of behavioral and neurologic music therapy.

Participant C

Participant C has five years of clinical experience, has a graduate degree in music therapy, and has experience working in an early childhood center with children aged one to five years old. She is a humanistic music therapist who works in a school setting and finds herself using behavioral techniques to meet needs at times.

Participant D

Participant D has over forty years of clinical experience, has an undergraduate degree in music therapy, has experience in private practice, agencies, and schools. She has worked with a wide variety of ages and diagnoses and has a philosophy that is undefined but aligns with humanism in that she spends time with an individual as the unique individual they are.

Table 2***Themes and Subthemes with codes used to assign data extracts into themes/subthemes***

Theme 1: Puppets to Increase Attention	<p><i>In Vivo Codes:</i> focus, attention, visual cue, visual</p> <p><i>Descriptive codes:</i> clinical vignettes of gaining a client's attention through the visual aid of puppets, or using puppets as a concrete visual tool</p>
Theme 2: Puppets as a Motivation for Engagement	<p><i>In Vivo Codes:</i> Engage</p> <p><i>Descriptive codes:</i> Clinical vignettes of puppets gaining the client's engagement, involvement, or participation</p>
Theme 3: Puppets as an Object for Expression	<p><i>In Vivo Codes:</i> express, feelings, emotions, spokesperson</p> <p><i>Descriptive Codes:</i> descriptions of the use of puppets bringing out expressive qualities in clients, when the puppets speak for the client</p>
Theme 4: Puppets as Facilitators of Connection	<p><i>In Vivo Codes:</i> connection, social interaction, social skills, therapeutic relationship, relationship</p> <p><i>Descriptive Codes:</i> descriptions of reciprocal communication and interaction facilitated by puppets, the use of puppets facilitating connections between the therapist and client, or within clients in a group</p>
Theme 5: Limitations and Contra-Indications of Using Puppets	<p><i>In Vivo Codes:</i> Limitations, contraindications</p> <p><i>Descriptive codes:</i> Descriptions of challenges that the use of puppets present, and of times when puppets may not be the right tool to use with certain individuals</p>

Themes

Theme #1: Puppets to Increase Attention

When a client is attending to an intervention, they are watching the action. Each time participants said words related to attention, or referred to puppets as increasing their client's attention, it was coded under the theme of attention. Attention can be considered the first step in inviting engagement, expression, and connection from a client. Attending differs from engaging, in that a client could be attending to an intervention, but not necessarily engaging or actively participating in the intervention. Music therapists often use visual cues to garner attention or to model an action to achieve goals. Each participant talked about the puppet serving as a significant visual aid in their work. Participants spoke about using puppets as visual aids to assist in addressing goals including gross motor skills, socio-emotional goals, and speech and language skills. The participants also discussed clinical examples of their client's increased attention when puppets were present in sessions, both in person and in teletherapy.

Example 1: Participant B.

"It just makes us so much more concrete to have that [a puppet] as a visual cue."

Example 1: Participant C.

"I use them for every single online group for sure. That's often when kids come right back and are staring at the screen again, is when the puppets come out."

Theme #2: Puppets as a Motivation for Engagement

To engage means to involve or attract someone's interest or attention. Each time participants said words related to engagement, or explicitly said clients were involved and participating in interventions, it was coded under engagement. The involvement of the client is a key factor in the therapeutic process. The involvement of the client does not necessarily have to

be observably active, as some clients can be involved in a more passive way. When a client engages, they are involved in an intervention. The use of puppets in music therapy seems to motivate client engagement. In all four interviews, participants described the increased engagement of their clients when puppets were used within the music therapy sessions.

Example 1: Participant A.

“The whole point of using these animals and puppets is to engage.”

Example 1: Participant C.

“It just helped to engage them in a different way than maybe anyone else had that day”

Theme #3: Puppets as an Object for Expression

After the therapist has garnered the attention of the client and the client has engaged in the interventions, the client may feel more comfortable expressing themselves. Each time a participant said words related to expression or spoke outrightly of the use of puppets influencing the clients' ability to express themselves, it was coded under expression. Participants spoke about the ability that puppets have in bringing out expression among their clients. This increase in expression occurred both when the client was manipulating the puppet and when the therapist was manipulating the puppet.

All four participants spoke about the potential that puppets have in acting as a spokesperson for the client to represent what the client was thinking and feeling. Often clients, especially children, have challenges in expressing confusing and complex emotions. The use of puppets seemed to motivate clients to express things that were too difficult to express otherwise. Participants gave examples of clients reenacting stories with puppets and showing their emotions in a new way when puppets were present. Participants also spoke about the use of puppets as a projective object onto which they believed their clients could displace their feelings or emotions.

Participants discussed using puppets to meet goals of emotional expression, understanding emotions, processing emotions, exploring different emotions, and increasing empathy.

Participants noted how the use of puppets facilitated the way that these emotions are expressed, understood, and internalized into the psyche of their clients.

Example 1: Participant A.

“Often the puppet can be a spokesperson for what the child is thinking and feeling.

They may not be able to express it in words, but they can express it through a toy or puppet or stuffed animal.”

Example 2: Participant A.

“It’s a lot of projection of your own feelings into the animals. And it makes it a lot easier for the child to express themselves. They don’t realize that they’re doing that. It’s just their natural way of playing.”

Example 1: Participant C.

“...I’ve definitely seen the kids react to the puppets and show their emotions in a new way than maybe they hadn’t before. I guess that’s sort of like projecting their feelings onto the puppets, a little bit.”

Example 1: Participant D.

“It seems as if they’re using the puppet as another kind of a third party. To share things with me and maybe sharing things that they wouldn’t share typically. Because they’re doing it as if it’s not them, but it’s this puppet over here.”

Theme #4: Puppets as Facilitators of Connection

Once the therapist has captured the attention of the client, invited engagement, and facilitated expression, new connections may form. Each time participants said words related to

connection (such as interaction or relationship) or spoke about puppets being a facilitator in supporting reciprocal connections, it was coded under connection. Participants commented on facilitating interactions between client and therapist or between clients when using puppets in sessions. Participants spoke about puppets being very useful in interventions that facilitate social interactions and social skills. Each participant also spoke about the joy and fun surrounding the use of puppets and how this facilitated connections they made with their clients while using puppets in music therapy. Participants discussed how this affected the therapeutic relationship in a positive way. They also spoke about the use of puppets affecting their authenticity and their clients' authenticity within the therapeutic relationship.

Example 1: Participant C.

“When I can come in and bring a little extra joy and be silly with them, one-on-one, that helps me have a special therapeutic relationship with a kid. I think bringing in a puppet and using it in a silly way helps me build that relationship.”

Example 2: Participant C.

“I've seen them transfer the skills they've learned in music with the puppets. And they do it on their own, whether it's making the noises themselves. Or like playing with a friend together with the two puppets, which is really great to see.”

Theme #5: Navigating the Limitations and Contraindications of Using Puppets

Just like every clinical tool, there are limitations to using puppets. Each time participants said the words limitation or contraindication or spoke about navigating a challenge that puppets presented, it was coded under this theme. Each participant spoke about the limitations and contraindications to using puppets in music therapy. The limitations of puppets included cleanliness, fabric restrictions, and puppets being a hindrance to making music.

Contraindications of using puppets included instances when using puppets were inappropriate, overstimulating, or distracting for certain individuals or groups. Participants also gave many creative solutions on ways to navigate these challenges.

Example 1: Participant C.

“I think I learned with some kids that they need distance from the puppet. Some kids love it when I bring the puppet like right up to them and try to talk in their face and make it special. And other kids, that's way too much stimulus. It freaks them out a little bit.”

Example 1: Participant B.

“So here at the hospital, we have a lot of restrictions with cleaning and stuff. I can't bring fabric into the patient's rooms.”

As demonstrated through the themes, results indicate that the use of puppets is beneficial in capturing the attention of clients, motivating them to engage with the therapist and with peers, assisting in the expression of feelings and emotions, and creating connections between clients and others. However, using puppets may create barriers at times and creative solutions are needed to successfully implement them.

Discussion

The purpose of this study was to explore the experiences of music therapists when using puppets in sessions, how it may have affected their clinical work, and how the use of puppets may have affected the therapeutic process. Four music therapists participated in semi-structured interviews. Thematic analysis was used to analyze the data. The themes that emerged were: (1) puppets to increase attention, (2) puppets as a motivation for engagement, (3) puppets as an object for expression, (4) puppets as facilitators of connection, and (5) navigating the limitations

and contraindications of using puppets. Themes are discussed as they relate to the research questions.

The Experience of the Music Therapist

The first research question was: What is the experience of the music therapist when using puppets in music therapy? Results showed that the use of puppets influenced participants' authentic presence and presented challenges, but was fun and enjoyable.

Authenticity

Using puppets in music therapy sessions influenced the authentic therapeutic presence of the participants. All four participants spoke about how authentic they felt while using a puppet and how it affected the therapeutic relationship. The participants all agreed that their clients generally retained their authenticity when puppets were present. However, therapists varied on the view of their own authenticity.

Participants A and C expressed that they felt perfectly authentic while using puppets. However, the other two participants felt less authentic. Participants B and D alluded to the fact that they feel like their most authentic selves when using music as their main tool. Participant B said that she is not an actor or performer and noted that she didn't have amazing puppet skills. Therefore, she felt more authentic while using music as her main tool as opposed to puppets. Participant B also discussed how some clinicians may feel embarrassed to add puppets as a playful piece in her sessions, and that this study may help give clinicians inspiration to use puppets in sessions to give their clients an opportunity for more creative play.

Navigating Challenges and Limitations

Participants gave clinical vignettes and attitudes about navigating any challenges or limitations that puppets may present when used in music therapy. Limitations are considered

obstacles or challenges that puppets presented in music therapy sessions. When asked if puppets hindered them musically, some participants found that using puppets did not feel like a hindrance since they still had their voice. All participants noted that they could not play instruments in the same way while manipulating a puppet. However, they noted that since one always has their voice, they believed puppets presented little to no hindrance to making music.

Each music therapist spoke about how they overcame challenges in music making when using puppets and offered their own creative solutions to specific problems they encountered. Participant B would sometimes invite staff to assist her when needed and noted that staff members are usually willing to manipulate the puppet while the music therapist played the guitar or piano. Participant D sometimes used the puppet on her hand to strum the guitar during music making.

Joy and Fun

Although the therapists did experience challenges, it seems that puppets made it more enjoyable for the therapist most of the time. Each participant spoke about how the magic, fun, or joy of using puppets for play during sessions assisted in making connections with their clients. Fun elements are not always needed to connect with clients, but it can often help a child to engage (Remer & Tzuriel, 2015). Participants spoke from both their own experience and from their perceived experiences of the clients. They spoke of the ways in which using puppets can bring out a fun, silly, and engaging atmosphere for both the clients, and for them as clinicians. Participants spoke about having fun themselves and providing the children with fun experiences while using puppets. Participants described the general joy that comes from puppets and noted how wonderful it can seem to clients when toys “talk to you.” These feelings may help bring out the inner child in the music therapist themselves and assist in the connection they experience

with their clients. These findings regarding the experience of the music therapists are new findings that will add to the literature on this topic.

The Clinical Work

The second research question was: How does the use of puppetry in music therapy influence the clinical work of the music therapist? The clinical work of the music therapist includes the interventions they used with puppets and the ways they implemented them. Puppets seemed to broaden the therapists' clinical toolbox by creating more kinds of interventions for the therapist to draw upon, and new ways to present the interventions.

Working Towards Goals

The participants described being able to work on many different goals simultaneously, and on many different levels when they added puppets to their musical interventions. The implementation of puppets in music therapy seems to be useful in the development of fine and gross motor skills, and speech and language skills. Three participants pointed out the benefit that puppets have when they are working on gross motor and fine motor skills with clients. Three participants spoke about using puppets to elicit speech and vocalizations with their clients. Participant B noted the limitations that puppets can have in working on certain speech goals that using puppets cannot physically demonstrate. In certain circumstances puppets cannot be a stand in for the therapist in modeling certain sounds in speech.

In addition to physical goals, the participants used puppets to address socio-emotional and interpersonal goals in sessions. Participants described the use of puppets as assisting to guide the client in expressing themselves, learning social skills, and learning empathy. This may be because children had an easy time relating and identifying with the puppets. Participants also spoke about puppets being used to explore emotions and process feelings. This aligns with music

therapy literature discussing the use of puppets to facilitate client's emotional expression (Birnbaum, 2013; Dvorkin & Erlund, 2002; Henderson, 1991).

Participant A used puppets for both attention and engagement goals, as well as for emotional goals. Participant A spoke about the puppet acting as an object for clients' projection and as a spokesperson to express what the client was thinking and feeling. On the other hand, Participant B who used mostly behavioral techniques stated that she used puppets as visual aids mostly for physical developmental goals but said that she can see possibilities for emotional goals as well. Participant D used puppets as manipulable objects to promote focus, giving them out for clients to hold during sessions with turn taking and waiting. This participant used puppets with all age ranges and found them to be especially helpful in keeping older adults focused and engaged in conversations. This demonstrates the variety of ways that puppets can be viewed as a tool in music therapy and aligns with the literature on the various goals for which puppets can be used (Howells & Townsend, 1954; Irwin & Shapiro, 1975; Remer & Tzuriel, 2015; Renfro, 1984).

Results indicate that puppets helped some of the music therapists incorporate creative play and helped break up the sessions with fun and stimulating activities. Participant B spoke about using puppets to find new ways to do interventions, especially in acting as a solution to heightened sanitary measures preventing children from readily sharing objects. She believed that puppets were useful in providing engaging visual aids that the children didn't have to touch. It seems as if puppets served as a solution to problems around the spreading of germs and allowed for fresh ideas to support lessons in the school setting.

Each therapist talked about the general way that puppets felt like a tool in their sessions and gave clinical examples from their work. For example, Participant B spoke about puppets

acting as a stand in for the adult, and how it became a more child-focused way to communicate, model, and mirror. Existing music psychotherapy research has also suggested that puppets are effective in connecting with children through creativity and play (Dvorkin & Erlund, 2002; Robarts, 2002). Participant D spoke about puppets acting as a conversation starter, how puppets were beneficial in demonstrating social skills, and how puppets assisted in more organized transitions.

Similar to Gerity (1999) and Malhotra (2019), participants B and C have incorporated puppet making into their music therapy sessions. Client-made puppets were later used in sessions. They noted how children were actively engaged in the puppet making, and how this enhanced their engagement when the puppets were brought into music therapy sessions. Not only did the puppet making involve active participation, but it also provided a sense of ownership and accomplishment in music therapy sessions, which may ultimately provide the client with a sense of autonomy and confidence.

Participant A also found puppets to support her eclectic clinical philosophy that focuses on the importance of play, connecting the implementation of puppets to borrowing from other creative arts. This is complimentary to the literature on the benefits of puppets used in play therapy (Bromfield, 1994; Dillon, 2009; Knell & Beck, 2000), and how that could be quite relevant to many music therapy goals.

The Therapeutic Process

The third research question was: How does the use of puppetry in music therapy influence the therapeutic process of the client (as perceived by the music therapist)? The therapeutic process includes the therapeutic relationship, the attention, and the engagement of the

client. Each participant discussed how the use of puppets assisted in deepening the therapeutic relationship and how their clients' increased engagement assisted that relationship.

Attention

Puppets were seen as especially helpful in the process of garnering attention because of their unique ability to help the therapist model things, mirror things, and demonstrate goals that they may be working on. Participants all spoke about puppets serving as a concrete visual tool that helped capture the attention of their clients. They gave clinical vignettes of gaining cohesion and attention in their groups when puppets were introduced, both in person, and during teletherapy. Visual aids can help children get ready and focused, by providing them with a concrete object to focus on. This aligns with the literature on puppets used in school settings and how helpful they are as a visual aid (Remer & Tzurriel, 2015; Renfro, 1984).

Engagement

Overall, participants noted how puppets increased engagement from their clients. They noted how their clients would become more active and involved when puppets were used in their sessions. Participants stated that they used puppets for both attention and engagement. Participant B described how puppets served to increase active engagement, noting how her clients would actively sing for the puppet to come out, but they wouldn't do that for an adult to come out. Participant C noted how her clients' whole face would light up as soon as a puppet was presented and began to sing to them.

This increased engagement could be attributed to several topics that the participants spoke about. One reason may be related to puppets supporting children's natural desire for play. Participants gave clinical vignettes of puppets adding joy, fun, and magic to the environment. They described how it is so different than an adult talking to them, and how the puppets become

a whole new being in the room. This supports children's natural desire to use their imagination and use dramatic play (Axline, 1948; Edington, 1985; Knell, 2015).

Expression

Promoting a client's expression is a common goal in music therapy and could be understood in terms of clinical work. However, given the importance of clients expressing themselves as an agent in the therapeutic process, expression is discussed in the context of the therapeutic process. Results of this study are congruent with pre-existing literature in addressing puppets used for emotional issues, and puppets used to represent past events or client feelings (Austin, 2009; Bruscia, 2013; Schönfeld, 2002). When children feel like they can identify with the visual representation and personality of a puppet it may be that they find it easier to communicate to the puppet (than with an adult or peer) or to communicate through the puppet. Each participant spoke about the unique ability that puppets can have in acting like a spokesperson for what the child is thinking and feeling. Participants described how they believed puppets acted as a one-step removed figure for the child to express themselves.

Participant A spoke extensively about the puppet acting as a "spokestoy" for what the client was thinking and feeling. She also stated that clients used puppets to represent past and current events, explaining that children may not be able to express what they are thinking or feeling in words, but they can express themselves through the puppet. This relates to the literature in that puppets have been known to assist clients in representing people and events, and in displacing difficult feelings (Dvorkin & Erlund, 2002; Henderson, 1991; Mahns, 2002; Schönfeld, 2002).

The participants found the use of puppets to be complementary to other therapeutic disciplines. For examples, participants used puppets in music therapy in conjunction with art

therapy techniques (as seen in Participant B and C), drama therapy techniques (as seen in Participant A and C), and with play therapy (as seen in Participant A) techniques. This connects with the literature in that puppets have readily been used and documented in art therapy (Gerrity, 1999; Malhotra, 2019), drama therapy (Anderson-Warren, 2013; Wu, 2020), and play therapy (Bromfield, 1994; Knell, 2015).

Therapeutic Relationship

It appears that the use of puppets helped make a connection between the therapist and client and created an atmosphere of trust through adding extra elements of fun, dramatic play, and novelty to the environment. Results suggested that the use of puppets increased clients' expression and created a stronger therapeutic relationship. Participant C stated how clients felt freer to be their own individual creative selves and seemed more motivated to use their imaginations. By using a puppet to communicate with the client, it seems as if the connection is made on a new level since it is not a "grown-up" talking to them anymore. Participants also spoke about puppets acting as a stand-in for a grownup talking to them, and how puppets can support acting silly to connect with children and enhance the therapeutic relationship. It appears that puppets have the potential to capture children's engagement in a developmentally appropriate way by meeting their needs in a playful way.

Considerations on the Specifications of A Puppet

A puppet can be seen as a toy coming to life. Participants each discussed how they believed a puppet to be related to other stuffed animals or toys, and what sets them aside. Participant C viewed puppets as something much different than a toy or stuffed animal, as something with movement and the ability to come to life. She explained how children may not fully understand exactly how the puppet is moving. However, there was a difference of opinion

when discussing the difference between puppets and other toys, dolls, and stuffed animals. Participant A felt that puppets were similar to stuffed animals and basically served the same function. Participant D viewed puppets as being any object that has eyes. This difference of opinion was surprising in that the perspectives varied slightly in what distinguishes a puppet from other toys.

No matter what the consensus is on what a puppet is defined as, to a child, the magic of a toy coming to life could be extremely exciting and engaging. The increase in engagement that the participants spoke about could also, at least in part, be because a puppet is a very eye-catching visual aid with movement, color, and interesting features.

Implications for Clinical Practice

This study provides insight into how puppets can be used in music therapy clinical practice and shares the benefits that some music therapists have observed. This information could broaden music therapists' clinical toolboxes and help expand the field to incorporate tools that may seem "outside of the box" of music therapy. This study highlights the relevance of puppets in addressing physical developmental goals. The data has shown that puppets can optimize the client's experience by being a visual aid that inspires imagination and engagement. By adding music, activities, visuals, and puppets together in a session, many goals can be addressed in fun and exciting ways.

Participants spoke about how the use of puppets may help clinicians who are feeling stagnant in their work or find themselves using the same types of interventions. This especially refers to those who work in school settings where structure and lessons can be repetitive. The data has shown that puppets can act as a new playful piece to stimulate children and clinicians.

Limitations

This study had some limitations. Firstly, this study only explored the experience of four music therapists, so it cannot fully represent opinions about puppets in music therapy.

Additionally, three out of four participants had only used puppets with children, and this provided limited insight into the use of puppets with adults. This study may have been more comprehensive if the experiences of a broader range clinical groups could have been represented.

Recommendations for Future Research

Future research should include further exploration of puppets used in music therapy with a larger and more diverse sample size. Future research should also consider exploring diverse forms of puppets, such as animal puppets, and puppets that represent diverse races of people. It would be important to explore how puppets are viewed in different cultures in order to increase sensitivity and cultural awareness. It may be beneficial if future studies included therapists of different cultures and specialties in a variety of clinical groups to broaden our understanding of the ways in which puppets are used in music therapy.

The clinical vignettes in this study showed that the implementation of puppets may be a motivator for engagement and social interactions in children who would not otherwise have engaged in therapeutic interventions. Since many goals for individuals with ASD include increased engagement and increased social interactions, it would be interesting to see if future music therapy studies with puppets could be implemented for this clinical group.

Conflicts of Interest

No potential conflicts of interest were reported by the researcher.

Conclusion

The purpose of this study was to explore the experience of the music therapist and client when using puppets, and the effect that puppets had on the therapeutic process. As such, this study explored the experiences of four music therapists who implement puppets into their clinical work on a regular basis. The results showed varied benefits and some contraindications of using puppets in music therapy. It is apparent that the use of puppets can increase attention and engagement among clients, and this may result in an enhanced therapeutic process. The use of puppets also seems to be a valuable asset in promoting expressive communication for clients with emotional challenges. Finally, the use of puppets appears to facilitate interactions which may strengthen the therapeutic relationship. This study provided groundwork in understanding how puppets are used in music therapy, but future research is needed.

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Appendix A: Invitation Letter

The Experience of the Music Therapist when Implementing Puppets as a Clinical Tool

Molloy College, Graduate Music Therapy Program,

Kaitlyn Lewis, MT-BC klewis1@lions.molloy.edu

Are you a Music Therapist who uses Puppets in your clinical work?

Do you have at least two years of clinical experience as a credentialed music therapist?

If you meet the above criteria, please consider taking part in this important study!

Participants who agree to participate will be asked to do the following:

- Take part in a brief private Zoom interview (no longer than 45 minutes)
- Review the interview transcript afterwards and provide any necessary clarifications
- Provide valuable information (protected by a pseudonym) to contribute to a thematic analysis research study for M.T. Graduate degree requirement

Research Goals

1. Broaden the clinical tools that music therapists can implement in their practice.
2. Gain insight into the potential influence that using puppets in

If you are interested and meet the requirements, please contact the Primary Investigator- Kaitlyn

Lewis, MT-BC: klewis1@lions.molloy.edu. You are free to choose to discontinue participation

at any time.

Appendix B: Informed Consent



Music Therapy Graduate Program

1000 Hempstead Ave.

Rockville Centre, NY 11570

(516) 323-4000

**Title of Study: The Experience of the Music Therapist when Implementing Puppets as a
Clinical Tool**

**This study is being conducted by: Primary Investigator- Kaitlyn Lewis, Graduate Student;
and Advisor- Amanda MacRae**

Key Information about this study:

**This consent form is designed to inform you about the study you are being asked to
participate in. Here you will find a brief summary about the study; however you can find
more detailed information later on in the form.**

- This study aims to explore how the use of puppets in music therapy can influence the music therapy process with a wide range of clinical groups. It is hoped that this information will broaden music therapists' perspectives about the use of puppets in music therapy.
- Inclusion criteria: credentialed music therapists who have at least 2 years of clinical experience and regularly use puppets in their sessions with children and/or adults.

- **Risks/Benefits:** There are no anticipated risks associated with this study, since all necessary measures will be taken to provide privacy and confidentiality. Benefits may include generating a better understanding of the use of puppets in music therapy. This may provide insight for music therapists in broadening their clinical tools.
- **Time commitment:** Each participant will spend about 45 minutes giving an interview with the primary investigator. Participants will be asked to review their transcript for accuracy. Participants may be asked to provide clarification if necessary.
- **Compensation:** There will be no compensation for this study.
- **Privacy concerns:** Interview data will be kept confidential. The audio/video Zoom recordings will be transferred to an encrypted thumb drive on a password protected computer. The data will be destroyed upon study completion; ideally no longer than 2 years. No names or other identifying information will be used when discussing or reporting the information you provide. A pseudonym will be used and all identifying information will be omitted.
- **Data usage:** Thematic analysis methodology will be used to analyze data. Findings will be presented in the form of this researcher's master's thesis.

Why am I being asked to take part in this study?

You are a music therapist who meets the inclusion criteria of this study. It is hoped that by exploring your experience of using puppets in music therapy, we can expand clinician's perspectives of the uses, benefits, and challenges of using puppets in music therapy.

Two or three participants will be recruited for this study. Participants will meet the criteria of being a credentialed music therapist with at least 2 years of experience working in the field of music therapy. They will have experience in using puppets in their sessions regularly.

What will I be asked to do?

You will be asked to participate in an interview with the primary investigator that will last no longer than 45 minutes. You will be asked to give consent for the video and audio to be recorded over Zoom. This meeting will be kept private. Interview questions will be open-ended and will center around your experience with using puppets in sessions.

Once the primary investigator has transcribed the interview, you will be asked to review the transcript for clarity and accuracy. Follow-up questions to clarify certain information may take place as needed and will take place over email.

Where is the study going to take place, and how long will it take?

The interview will take place over Zoom and will be private. It will last no longer than 45 minutes.

What are the risks and discomforts?

There are no known discomforts associated with this study. The only risk would be the possible risk to privacy and the confidentiality to your information, however, all necessary measures will be taken to ensure privacy and confidentiality, such as the use of a pseudonym and the use of a password protected computer.

It is not possible to identify all potential risks in research; however, reasonable safeguards have been taken to minimize known risks. If new findings develop during the course of the research which may change your willingness to participate, we will tell you about these findings.

What are the expected benefits of this research?

Individual Benefits: There are no known individual benefits of this study. However, the information that you provide may be useful to other music therapists as they consider implementing puppetry into the clinical practice.

Do I have to take part in this study?

Your participation in this research is your choice. If you decide to participate in the study, you may change your mind and stop participating at any time without penalty, and it will not affect any relationships you may have with the researcher and/or the institution affiliated with this study.

What are the alternatives to being in this study?

Instead of being in this research, you may choose not to participate.

Who will have access to my information?

All identifiable information will be documented by using pseudonyms. The recording of the interviews will be stored on a password protected computer and transferred to an encrypted thumb drive. Only the primary researcher will have access to this direct information. The advisor of the primary researcher, Amanda MacRae, will never know the identities of the subjects and will only know them by their pseudonyms.

How will my information be used?

Your information will be used as data in this research study. Data will be analyzed through thematic analysis. Important themes that emerge from your interview responses will be coded and explored. Your data will be aggregated with data provided by other participants in order to generate a thorough understanding of use of puppets in music therapy.

To ensure that this research activity is being conducted properly, Molloy College's Institutional Review Board (IRB), whose members are responsible for the protection of human subjects' rights for all Molloy-approved research protocols, have the right to review study records, but confidentiality will be maintained as allowed by law.

Can my participation in the study end early?

You can withdraw from this study at any time without penalty.

What happens if I am injured because of the study?

If you are injured during the course of this study, you should seek immediate medical treatment from your primary provider or at an emergency care facility. Also, contact Kaitlyn Lewis at mobile number 631-678-1973. Payment for any medical treatment must be provided by you and your third-party payer (such as health insurance or Medicaid). This does not mean that you are releasing or waiving any legal right you might have against the researcher or Molloy College as a result of your participation in this research.

What if I have questions?

Before you decide whether you'd like to participate in this study, please ask any questions that come to mind now. Later, if you have questions about the study, you can contact Principle Investigator- Kaitlyn Lewis at 631-678-1973 or KLewis1@lions.molloy.edu, or Co-Investigator- Amanda MacRae at 609-346-3995 or amacrae@molloy.edu.

What are my rights as a research participant?

You have rights as a research participant. All research with human participants is reviewed by a committee called the *Institutional Review Board (IRB)* which works to protect your rights and welfare.

If you have questions about your rights, an unresolved question, a concern or complaint about this research you may contact the IRB contact the Molloy IRB office at irb@molloy.edu or call 516 323 3000.

Documentation of Informed Consent*:

You are freely making a decision whether to be in this research study. Signing this form means that

1. **you have read and understood this consent form**
2. **you have had your questions answered, and**
3. **after sufficient time to make your choice, you have decided to be in the study.**

You will be given a copy of this consent form to keep.

Your signature

Date

Your printed name

Date

Your Signature for consent to be video and audio recorded

Date

Kaitlyn Lewis

11-4-2020

Signature of researcher explaining study

Date

Kaitlyn Lewis

Printed name of researcher explaining study

Appendix C: Interview Questions

Pre-Question- “Tell me a little bit about your clinical experience”

Through casual “getting to know you” conversation, I’m hoping the following information will emerge: Demographic info, clinical groups, years of experience, environments, therapeutic philosophy, advanced models or no, years of training (undergrad or not), where they practice

The following is a list of questions and potential follow-up questions that may be asked to gain more in-depth information about the participant’s use of puppet in music therapy.

1. What drew you to implement puppets in music therapy sessions?

Why were you drawn to using puppets?

What made you think they would be helpful?

2. How did you implement puppets in music therapy sessions?

- Clinical examples and elaborations
- How often the MT uses puppets? (is it as natural as picking up the guitar? Is it upon client request or if the client is not musically engaged?)
- Use puppets that represent/look like people or animals?
- Speak to overcoming challenges in music making if there were any?

3. What is your overall experience of using puppets in music therapy sessions?

- What are the potential benefits of using puppets in music therapy sessions?
- What are the potential contraindications of using puppets in music therapy sessions?

4. What do you think is the client’s experience of using puppets in clinical sessions?

- Has your client ever utilized puppets to meet their own needs?

- Do you believe your clients have used puppets as projections or to represent past events?

5.How did using puppets influence the therapeutic relationship?

- Did you feel more/less authentic, and how did that help/hurt?
- Did it affect the client's authenticity and ability to trust?

Appendix D: IRB Approval

1000 Hempstead Ave., PO Box 5002, Rockville Center, NY 11571-5002
www.molloy.edu

Kathleen Maurer Smith, Ph.D.
Dean, Graduate Academic Affairs
T: 516.323.3801
F: 516.323.3398
E: ksmith@molloy.edu

DATE: December 4, 2020

TO: Kaitlyn Lewis
FROM: Molloy College IRB

PROJECT TITLE: [1690042-1] The Experience of the Music Therapist when Implementing Puppets as a Clinical Tool

REFERENCE #:
SUBMISSION TYPE: New Project

ACTION: DETERMINATION OF EXEMPT STATUS
DECISION DATE: December 3, 2020

REVIEW CATEGORY: Exemption category # 2

Thank you for your submission of New Project materials for this project. The Molloy College IRB has determined this project is EXEMPT FROM IRB REVIEW according to federal regulations. However, exempt research activities are subject to the same human subject protections and ethical standards as outlined in the Belmont Report.

This acknowledgement expires within three years- unless there is a change to the protocol.

Though this protocol does not require annual IRB review, the IRB requires an annual report of your exempt protocol (Expedited and Exempt Research Protocol Annual Report Form) which is available on the IRB webpage.

If there is a proposed change to the protocol, it is the responsibility of the Principal Investigator to inform the Molloy College IRB of any requested changes before implementation. A change in the research may change the project from EXEMPT status and requires prior communication with the IRB.

We will retain a copy of this correspondence within our records.

If you have any questions, please contact Patricia Eckardt at 516-323-3711 or peckardt@molloy.edu. Please include your project title and reference number in all correspondence with this committee.

Sincerely,

Patricia Eckardt, Ph.D., RN, FAAN
Chair, Molloy College Institutional Review Board

Appendix E: Participants' Quotes

Theme 1: Puppets to Increase Attention

Example 1: Participant B. “It just makes us so much more concrete to have that [a puppet] as a visual cue.”

Example 1: Participant C. “I use them for every single online group for sure. That's often when kids come right back and are staring at the screen again, is when the puppets come out.”

Theme 2: Puppets as Motivation for Engagement

Example 1: Participant A. “The whole point of using these animals and puppets is to engage.”

Example 1: Participant C. “It just helped to engage them in a different way than maybe anyone else had that day”

Theme 3: Puppets as an Object for Expression

Example 1: Participant A. “Often the puppet can be a spokesperson for what the child is thinking and feeling. They may not be able to express it in words, but they can express it through a toy or puppet or stuffed animal.”

Example 2: Participant A. “It's a lot of projection of your own feelings into the animals. And it makes it a lot easier for the child to express themselves. They don't realize that they're doing that. It's just their natural way of playing.”

Example 1: Participant C. “But I've definitely seen the kids react to the puppets and show their emotions in a new way than maybe they hadn't before. I guess that's sort of like projecting their feelings onto the puppets, a little bit.”

Example 1: Participant D. “It seems as if they're using the puppet as another kind of a third party. To share things with me and maybe sharing things that they wouldn't share typically. Because they're doing it as if it's not them, but it's this puppet over here.”

Theme 4: Puppets as Facilitators of Connection

Example 1: Participant C. “When I can come in and bring a little extra joy and be silly with them, one-on-one, that helps me have a special therapeutic relationship with a kid. I think bringing in a puppet and using it in a silly way helps me build that relationship.”

Example 2: Participant C. “I've seen them transfer the skills they've learned in music with the puppets. And they do it on their own, whether it's making the noises themselves. Or like playing with a friend together with the two puppets, which is really great to see.”

Discussion Example: Participant C. “When I can come in and bring a little extra joy and be silly with them, one-on-one, that helps me have a special therapeutic relationship with a kid. I think bringing in a puppet and using it in a silly way helps me build that relationship.”

Theme 5: Navigating the Limitations and Contraindications of Using Puppets

Example 1: Participant C. “I think I learned with some kids that they need distance from the puppet. Some kids love it when I bring the puppet like right up to them and try to talk in their face and make it special. And other kids, that's way too much stimulus. It freaks them out a little bit.”

Example 1: Participant B. “So here at the hospital, we have a lot of restrictions with cleaning and stuff. I can't bring fabric into the patient's rooms.”