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RESEARCH | PEER REVIEWED

Community Music Therapy and Participatory Performance: Case Study of a Coffee House

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Abstract

This case study research explores the impact of a musical performance event—the Coffee House—held bi-annually at an adolescent mental health treatment facility in Southwestern Ontario, Canada. Any client or staff member is welcomed to perform at this event, which is organized by the facility’s music therapist and framed here as an example of community music therapy. Drawing upon Turino’s (2008) ethnomusicological perspective on performance, I will argue that the Coffee House’s success within this context is due to its participatory ethos, wherein success is primarily defined by the act of participation. Here, performance takes place within an inclusive and supportive atmosphere in which participants can overcome anxiety, engage in the risk-taking of performance, and experience increased self-efficacy and confidence. This ethos also naturally affords a “levelling” of institutional relationship dynamics. Resonant with Aigen’s (2004) vision that “performances as community music therapy can forge a new type of art, one that creates meaning and invites participation” (p. 211), the Coffee House exemplifies the ways in which the values within participatory settings are indeed different and new in comparison to presentational settings that are the norm in Western society.

Keywords: *community music therapy, mental health, adolescents, performance, participatory, ethnomusicology*

Introduction

“Perhaps performance as Community Music Therapy can forge a new type of art, one that creates meaning and invites participation rather than creating a commodity that invites judgement”. (Aigen, 2004, p. 211)

On a snowy day in January 2016, I found myself with a hot chocolate in my hands and seated at a table among former co-workers. Although I was intimately familiar with my surroundings—the adolescent mental health treatment centre where I had previously been employed—I was less familiar with the role of researcher I was to hold on this day. I watched as over 50 people—youths and staff members—entered the space

until there was only standing room remaining. I noted a buzz of excitement and sense of camaraderie in the air, feelings one did not experience every day in this place, but that I along with colleagues and clients, had often reported experiencing at this bi-annual Coffee House. The event's line up, detailed in a program that featured one youth's artwork on its cover, included performances by clients and staff members: a bucket drumming group, rock band, air band, and many solo or duo acoustic songs. The audience's support for the performers was evidenced by hearty applause, cheering, and at times, standing ovations.

One of the most memorable moments that day was the performance of a staff member. As cheers erupted from the audience before her song began, the psychologist sitting beside me leaned over to tell me that this was her first time performing solo. I witnessed her whole body shaking from nervousness and her deliberate slow breaths. When at the chorus her singing increased in volume the audience spontaneously applauded. At one point, she forgot a word and briefly stopped singing. With the help of the music therapist supporting her from the piano she decided from where to begin again and cheers once more erupted as she resumed. As the song ended, a message appeared on the screen at the front: "Thank you everyone for supporting me as I step out of my comfort zone." While a standing ovation ensued both a youth and a colleague ran to hug her.

Introduction to the Research

Research Setting

The scene described above took place at a treatment facility in Southwestern Ontario, Canada, for youths aged 12–18 with mental health concerns. This site, operated through a local not-for-profit social service organization, provides day and residential treatment programs as well as an open custody unit for adolescents sentenced through the criminal justice system, all within a multidisciplinary team environment. Clients, a term used interchangeably with youths throughout this paper, attend school here within a modified classroom environment, and access resources such as individual and family counselling, nursing, psychiatry, psychological assessment, recreation, and music therapy. The music therapist's caseload consists primarily of individual sessions following a psychotherapeutic framework, wherein youths work towards goals that align with their broader treatment plans. I was employed as the music therapist here from 2007 to 2012. In 2008 I decided to expand my clinical role to include the organization of bi-annual performance events, Coffee Houses. The current music therapist has continued this tradition and notably has also initiated weekly rock band and bucket drumming rehearsals.

Background to the Research

Receiving a mental health diagnosis, attending school and maybe living within a treatment milieu, often means missing out on certain normative experiences. Participation in music therapy is one of the only opportunities for active artistic engagement at the facility described here, and my decision to begin organizing Coffee Houses was primarily fueled by the wishes of my clients. Many youths on my caseload regularly requested to perform; their desire to share their music beyond the walls of the music therapy room had developed naturally through our work. I also quickly learned after starting this position that my caseload could not accommodate all clients at the facility who were interested in sessions. As such, I recognized the potential value in creating an artistic outlet for all interested youths. From the outset, I created the event as one in which staff members and youths could perform alongside one another. Acknowledging that issues such as burnout and vicarious trauma (Pearlman, 2012) were significant for staff members, it was my vision that participation could offer a source of enjoyment and expression for all members of the community as well as an opportunity through

music for interaction with one another distinct from the hierarchical nature of institutional relationships (Aigen, 2004; Maratos, 2004).

As a novice music therapist at the time, there was tension between my decision to organize performance opportunities for my clients and my recent training. The underlying principles of my music therapy education had held sacred the boundaries of the clinical space. Aigen (2012) traces the music therapy profession's conflicted relationship to performance with our struggle to be recognized as a valid medium for in-depth treatment within healthcare settings. Music therapists, perhaps rightfully so, fear that facilitation of community-oriented events and performances could undermine our place on the treatment team. However, while music therapists worked tirelessly through the latter part of the 20th century to advocate for confidential spaces in which to conduct treatment for individuals and small groups, "the natural modes of relating to music favored by clients have led in the opposite direction, eventually bringing the profession full circle through the introduction of [community music therapy]" ("Origins and Foundations", para. 2). Early on in my own clinical work, I began to see that one component of my role was "making music possible" (Stige, 2010, p. 16), bringing "natural modes of relating to music" (Aigen, 2012, "Origins and Foundations", para. 2) to clients who would not have access otherwise.

I clearly recall the moment from 2008 in which the facility's nurse told me that the day of the first Coffee House had been one of her most enjoyable days in 17 years of employment at this facility. I also vividly remember a unit supervisor who, after the 2009 event, explained that watching one youth's performance had provided her a new lens through which to see someone within whom she had struggled to recognize positive qualities. I organized six Coffee Houses between 2008 and 2012 and heard similar feedback after each. Perhaps even more memorable was the support given among the youths at each event. I was certainly aware of the risks of performance in a setting in which many clients struggle with behavioural issues, and yet I saw youths not only tolerating one another but cheering for one another, whether a given performer was stellar and poised, or out-of-tune and terrified. My colleagues and I regularly wondered how it was possible that these events were going this well, given the context. It was interactions and observations such as these that sparked my interest in conducting this research.

Pavlicevic and Ansdell (2004) suggested that just as music "ripples" due to its sound, "music therapy can work 'outwards' for an isolated person towards community, and it can also bring the community in, and can create community within a building" (p. 16). Curious about the Coffee House's personal and social impact, its ripples, I returned to the facility to investigate. In the following section, I expand upon the significance of community music therapy as a music-centered approach to practice, and Turino's (2008) concepts of participatory and presentational performance. From there, I detail this study's rationale, research questions, and methodology, prior to presenting its results.

Community Music Therapy: A Music-Centered Approach

Community music therapy, an approach that acknowledges the sociocultural factors embedded within all musicking, was formally recognized by the profession around the turn of the 21st century. This was viewed as a "paradigm shift" (Ansdell, 2002, "Conclusion", para. 4), wherein many music therapists began to challenge the biomedical model of illness and recognize "that ill-health and handicaps have to be seen within a totality" (Ruud, 2004, p. 11). Concurrently, music therapy discourse began to integrate perspectives from "new musicology" in which music is recognized as contextual, cultural, and historical, rather than abstract and universal (Ansdell, 2004). It was from this place that community music therapy emerged, an ecological and music-centered approach that involves work *with* communities (Pavlicevic & Ansdell, 2004) and affirms music's primarily social role across cultures (Cross, 2014).

Though the simplest way to define music therapy is often “the use of music to achieve nonmusical goals” (Aigen, 2005, p. 56), Aigen argued that this definition portrays musical experience as dispensable if a more efficient means comes along. In addition, a rigid conception of music therapy focusing solely upon the achievement of nonmusical goals is ethically troubling in its inference that individuals with disabilities “must have their access to music based upon non-musical criteria that are different from other members of society” (Aigen, 2014, p. 71). Music-centered therapists recognize that “music enriches human life in unique ways” and consider such enrichment “to be a legitimate focus of the work of music therapists” (p. 65). The work of DeNora (2000) surrounding musical affordances and appropriation provides helpful balance here. Music-centered perspectives need not infer that music has inherent power that is automatically experienced by everyone. Rather, “music’s meanings are constituted in and through use” (p. 44).

From this perspective, music therapists can affirm that many clients are motivated to attend music therapy for musical reasons (Garred, 2006) and work towards musical goals within clinical contexts. Community music therapists’ frequent use of performance within clinical settings is an example of such work. Whereas music therapists rooted in medical and psychotherapeutic models were traditionally wary of performance, community music therapists view performance as offering unique benefits and resources (Ansdell, 2005). Community music therapy addresses issues of access, participation, and democracy (Stige & Aarø, 2012). I propose that the participation enacted within community music therapy embodies Turino’s (2008) concept of participatory performance, which I explore below.

Turino and the Participatory Field

Aigen’s (2004) vision that “performances as Community Music Therapy can forge a new type of art” (p. 211) speaks to the values upon which music-making within participatory traditions have always been based (Turino, 2008). Participatory performance is not new but certainly it is different from the presentational settings most familiar in Western society in which performers and audience members remain distinct. “There are no artist-audience distinctions” within participatory performances and “the primary goal is to involve the maximum number of people in some performance role” (p. 26). In these settings, music is “more about *the doing* and social interaction than about creating an artistic product” (p. 25, italics original). These are apt descriptions of the Coffee House. The Oxford English Dictionary provides a number of definitions of the term *ethos*, including, “The characteristic spirit of a people, community, culture, or era as manifested in its attitudes and aspirations; the prevailing character of an institution or system” (Ethos, 2014). In this paper I utilize the term *ethos* in an attempt to capture the spirit of Turino’s concept, the notion that all elements within this setting, its “types of activity, artistic roles, values, goals, and people involved” (p. 27), hold a prevailing participatory character.

Though Turino (2008) primarily discussed participatory contexts that are formatted *simultaneously* (i.e. with all performers playing/singing/dancing at the same time), he noted that participatory performance can be formatted *sequentially*. Karaoke is an example of the latter, so long as there is an underlying ethos that everyone should sing (Turino, 2008). The Coffee House is largely an instance of sequential performance, not dissimilar to karaoke in that there is fluidity between the roles of audience and performer. The sequential format is significant at the Coffee House, as many of the event’s benefits for youth performers are made possible through the experience of being in the spotlight for a short time. Within its sequentially-organized program, there are also instances of simultaneous participatory performance, for example the rock band and bucket drumming group.

Ansdell (2014) acknowledged the relevance of Turino’s (2008) scholarship for community music therapists. The concept of participatory performance has also been drawn upon recently by scholars in music education (Randles, Griffis, & Ruiz, 2015;

Waldron, 2012, 2016), particularly those looking to contrast it “with the specialist-oriented presentational field found in most music programs in U.S. schools” (Thibeault, 2015, p. 54). Regelski (2014) noted that participatory “musics are the most frequent means by which ordinary citizens derive the musical and social benefit of performing” (p. 79). I will explore the relevance of the Coffee House’s participatory nature following an examination of aspects of the research process.

Research Process

Research Questions and Purpose

The current paper investigates factors that have contributed to the Coffee House’s success and represents one portion of a larger research project that also explores the event’s impact on performers’ identities and relationships at the facility. When conceiving of this study, I used the term “success” to refer to the consistent, active engagement and apparent enjoyment of most staff members and clients, and the resounding, overt offerings of support for performers from audience members. At a facility in which many clients are in need of intensive support in areas such as behaviour management, emotion regulation, and social skills, these observations seemed to provide remarkable evidence regarding the event’s success in this context. Through in-depth examination and analysis of the narratives of staff members and youth, this paper addresses the question: What elements of the Coffee House have afforded its success within its context, an adolescent mental health facility?

This study integrates two underrepresented areas in the music therapy literature: that of music therapy with adolescents (McFerran, 2010), and that which examines the experiences of mental health service users (Solli & Rolvsjord, 2015). The research also contributes to community music therapy and music-centered music therapy literature through its exploration of the role of performance in music therapy and its use of an ethnomusicological theoretical framework (Aigen, 2014; Ansdell, 2014). I argue here that the Coffee House is an example of participatory performance (Turino, 2008) and that its success can be attributed to this. Participatory performance settings define success primarily by the act of participation and thus they are characterized by inclusivity. This allows Coffee House performers to engage in risk-taking and overcome anxiety while experiencing increased self-efficacy and confidence along with a levelling of institutional relationship dynamics.

Methodology

This study received approval from the Research Ethics Board at Western University, Canada. This qualitative case study aimed to provide a holistic understanding of a “bounded” and “integrated” case (Stake, 1995, p. 2), a Coffee House at a mental health facility. Recognizing that narrative plays a fundamental role in structuring and understanding lived-experience (Bruner, 1986; Clandinin & Connelly, 2000; Pinnegar & Daynes, 2007), a holistic understanding of the case was gained through hearing the stories of as many participants as possible.

Data was collected through in-depth and semi-structured interviews (see Appendix) that were coded using first and second cycle techniques (Saldaña, 2013). In this process, the researcher identifies all themes and topics presented by participants and then collapses these into a smaller number of categories as it becomes apparent that “larger segments of text are better suited to just one key code rather than several smaller ones” (p. 24). In addition to presenting key categories that emerged from this process, I present many longer quotations from participants, recognizing that meaning may be lost when narratives are fragmented (Riessman, 2008).

Seven youths between the ages of 12–17 were interviewed; four were in day-treatment and three in residential programs. Though this study did not involve systematic collection of diagnostic information, many youths disclosed their diagnoses at our interviews, including anxiety, depression, post-traumatic stress disorder, and autism

spectrum disorder. All youths had performed at and attended at least one Coffee House. Eleven staff members participated, including two psychologists, three child-and-youth-counsellors (CYCs)¹, four teachers, one nurse, and the music therapist. Staff participants, who had worked at the facility between 3 and 30 years, had performed during at least one Coffee House, whether in solo acts, small groups, or ensembles, and had attended multiple events as audience members. Except for the music therapist, staff members are identified by a number in order to protect their identities.

Trustworthiness & Ethical Considerations

Undoubtedly, my pre-existing relationships to some participants, and lack thereof to others, impacted the research process. I knew ten of the eleven staff participants prior to undertaking this study, whether as former colleagues or through the local community. In contrast, I met each youth for the first time at their interview. Having had no opportunity to build rapport with the youths prior to their interviews, I recognize that some of them may have felt uncomfortable, affecting their ability or desire to speak openly. On the other hand, the fact that the youths did not have to negotiate a dual relationship and had minimal knowledge of my previous involvement with the Coffee House may have helped them to speak more freely. The opposite was true for my former colleagues. I already had a strong rapport with many of these individuals, however, they also knew of my investment in the event. Such knowledge may have consciously or subconsciously affected the information they chose to share.

Similarly, my prior relationship to this event inevitably created both benefits and constraints to the research. My “prolonged engagement” (Lincoln & Guba, 1985) with this context positively impacts the project’s credibility; I have “spent enough time in becoming oriented to the situation...to be certain that the context is thoroughly appreciated and understood” (p. 302). Of course, my interpretations play a significant role in driving the story through the lens of a theoretical structure. Alvesson and Skoldberg (2009) described reflexive and “data-driven” studies as ones in which “‘data’ are regarded not as ‘raw’ but as a construction of the empirical conditions” and in which “reflection in relationship to the interpreted nature of all empirical material” (p. 283) is vital. My prior experiences with the Coffee House, along with my broader interest in community music therapy, inevitably meant that I embarked upon this research biased towards the event’s positive impact. This could have influenced the process of data collection and analysis, making me less likely to seek out or engage with criticism. Recognizing these biases, I undertook “persistent observation” (Lincoln & Guba, 1985, p. 304) through in-depth and recursive analysis, reviewing and adjusting the coding process multiple times, as a part of my commitment to reflexivity and to ensuring that my participants’ perspectives drove the study. I also kept a reflexive journal throughout the research process, in order to document methodological and analytical decisions as well as personal reflections (p. 327). All participants had the opportunity to review their interview transcripts and vet direct quotations. I met with youths individually several weeks after their interviews in order to provide them the opportunity to change, add, or remove anything they wished from their transcripts.

Clear boundaries between a case and its context often do not exist, thus recognition of context within case study research is imperative (Starke & Strohschneider, 2010; Yin, 2014). The music-making and setting interact and influence one another to create a participatory ethos. Conversely, this ethos impacts the context, its relationships, and the music (Rolvsjord & Stige, 2015). I will thread the relevance of this event’s context through the presentation of the research results. It is important to note that the decision to use Turino’s (2008) work as a theoretical frame, and even my introduction to his writing, came after data collection and analysis. This study’s results are truly data-driven. The subsequent section is organized based around themes that emerged from participants’ narratives and represent components of Turino’s framework.

Results: A Participatory Ethos

The Coffee House presents a striking contrast to the presentational performance settings common in Western society, resonant with Aigen's (2004) vision that performances as community music therapy may "forge a new type of art, one that creates meaning and invites participation" (p. 211). The event's participatory value-system is crucial to and affording of the event's success. This ethos is evidenced by the way in which participants define and experience success, along with the fact that all members of the community are welcomed to perform. This ethos is instrumental in allowing performers to overcome anxiety and engage in the risk-taking of performance, while also contributing to a levelling of institutional relationship dynamics.

Inherently Inclusive: Participation is Success

Staff4 described the Coffee House's underlying value-system:

I have friends that work in community schools...and they're all jealous of what we're doing...The closest thing they would have is their big full-scale talent shows but...(laughs) I don't know how this will sound, for those talent shows you have to have talent. Whereas ours you don't...I think that's what makes it more special, right? It's just the whole community coming together. There's not that overt judgement, and it's not about being awesome and amazing; it's just about going up and trying.

Comparably, Staff6 explained: "We put the value on *them*: on the effort they put in...challenging their struggles and overcoming them. *That's* the success." Most staff participants similarly observed that at the Coffee House, performers succeed through participating. Youths evidently internalized this sense of success; six youth participants, spanning a wide range with regards to musical experience and skill, described having felt "accomplished" after performing. For example, Youth3 stated, "I used to think that I'm not very good at drumming. Now that I've heard myself play with the other bandmates I thought I did really well." Performing taught Youth1 "that I can do something that I didn't think I could." In this treatment context, in which day-to-day focus is often upon areas of struggle, such experiences are highly relevant.

With striking similarities to Staff4's description above, Turino (2008) explained that within participatory settings, "the success of a performance is more importantly judged by the degree and intensity of participation than by some abstracted assessment of the musical sound quality" (p. 33). Though a participatory ethos does not preclude appreciation of so-called "good" performances, the "quality of *sociality* is granted priority over the quality of the sound" (p. 35, *italics original*). Several staff participants noted that while the Coffee House provides an opportunity to be impressed by certain performers' musical abilities, they agreed that this is not the priority.

Where participation, rather than aesthetic standard, defines success, anyone can participate and the atmosphere is undeniably supportive. This inclusive framework holds significance in this context given that factors such as academic, behavioural, and mental health issues as well as socio-economic status have often impacted youths' abilities to access active musical involvement, whether due to systemic- or self-exclusion (Rolvsvjord, 2014). Several staff members acknowledged such barriers. "Some of our youth are so limited in their life experiences. Even... being in an audience, is a very new experience for them" (Staff1).

Youths' feelings of accomplishment then are particularly significant in light of the fact that performing, particularly in a solo capacity, was a new experience for most of them.

I've been really struck by the number of youth who have had little or no exposure to music...This is something that *anybody* can do, right? ... That really speaks to my heart when I hear those examples...where there'll be a youth that never sang for anybody...and then find out that they can. (Staff10)

Staff4 noted that “high school is pretty cruel...There’s some performances that are classics here...but if it was in a community school I don’t think it would go over as positively.” Staff8 agreed that the Coffee House “offer[s] something most of them would never do in a regular school.” Youth2’s only prior performance experience had been with his elementary school recorder class, a far cry from playing bass in a rock band. Youth1 had sung in school choir and Youth6 had played in school band, however, neither had performed solo before. Youth4 had sung before only with her immediate family. The participatory ethos of this event eliminates many of the barriers present in other settings.

One example of inclusivity in-action at the Coffee House was in the performance of the rock band, during which trained players used their skills to sustain the participation of less experienced members. Staff3, an accomplished musician and rock band member, described his responsibility “to make that experience for that youth as meaningful as possible” by “put[ting] aside those personal needs for a great performance.” His comment is strikingly evocative of the role of the music therapist whenever playing with a client, and parallels Turino’s (2008) statement that within participatory performance, players “have the responsibility of performing their parts in a way that will not exclude others” (p. 33). Those with more skills ensure that those with less are included in a meaningful and musical fashion.

Turino’s (2008) description of participatory performance settings highlight the importance that “the full range of the learning curve is audibly and visually present” (p. 31). This enhances success, as the presence of amateurs and experts performing alongside one another inspires participation from more people, promoting inclusivity and providing a variety of role-models. The presence of “the full range of the learning curve” is foundational in the Coffee House’s design, and this feature is integral in creating a safe environment for risk-taking, helping youths to overcome anxiety and build self-efficacy.

Overcoming Anxiety, Building Self-Efficacy: Safety in Risk-Taking

That participants feel safe in taking the risk to perform is a significant factor contributing to the event’s success. Demonstrating the way in which “context is constitutive of the activity and vice versa” (Stige & Rolvsjord, 2015, p. 57), there is a reciprocal relationship between the event’s participatory ethos and its context, a mental health treatment centre. Just as the Coffee House positively contributes to the atmosphere and the relationships within the treatment milieu, the context itself provides a supportive setting in which risk-taking is clinically relevant.

Though all youth participants acknowledged facing anxiety before, during, and after performing, they also offered perspectives on the value of these experiences. Youth1 stated proudly, “I get very nervous really easily, so when I accomplish something like that I feel good about myself.” Youth4 explained that the event “gives people a chance to face their fears...in front of a crowd of people that they know won’t judge them,” and Youth5 thought “the whole point” of the event “is that you’re coming out of your comfort zone.” Through the process of overcoming anxiety, and subsequently experiencing success and accomplishment, youths experienced increased self-efficacy, the “belief in one’s effectiveness in performing specific tasks” (Zimmerman & Cleary, 2006, p. 45), surrounding musical performance. Each youth identified that they wished to perform again in the future, and many of them explained that they would feel more capable and confident doing so after having participated in the Coffee House. As Youth4 noted, “it makes me not be as afraid of singing in front of people.” Zimmerman and Cleary noted that “personal mastery experiences, which involve one’s accomplishments, are the strongest source of enhancing perceptions of personal efficacy” (p. 63) and certainly these youths experienced personal mastery through performing at this event.

Each staff participant reflected upon the relevance, clinically speaking, of the opportunity for positive risk-taking provided by the Coffee House.

Performance is an exhilarating thing, and it's a terrifying thing, and that's part of what youths come here to do, to acknowledge that emotions are real... and sometimes very difficult. We have lots of opportunities...to learn how to deal with those things, and here's another opportunity. (Music Therapist)

Though performance is different in many ways than music-making that is contained within the therapeutic space, this music therapist sees the event as clinically relevant, and thus his role as fluid from one setting to the other. He plays an integral role in actively creating a setting in which it is possible for youths to take the risk to perform, and he also rehearses ahead of time with each youth performer, as well as many staff performers, allowing them to prepare musically while discussing topics such as anxiety, personal connection to the repertoire, and their goals for themselves. Many youth performers are also simultaneously participating in individual music therapy, giving them the opportunity to delve deeper into the musical and clinical process of performance-preparation. The setting of therapy room and performance stage, and the role of music therapist and performance coach, are indelibly connected despite their surface differences.

Other members of the clinical team are also invested in assisting youths emotionally in preparing for and debriefing their performances, recognizing that “the product [is not] the end of the process” (Maratos, 2004, p. 142). Pre-existing and ongoing therapeutic relationships make this possible and are vital in creating the event's supportive atmosphere. “They're not only making music, they are people that are...on a healing journey together” (Staff9). Demonstrating the reciprocal relationship between context and performers, several staff participants suggested that performers' risk-taking and vulnerability was crucial in creating the event's supportive atmosphere, the very atmosphere that in turn made these performances possible.

Community musician Jon Hawkes, in an interview with O'Grady (2008), asserted that “the ultimate function of music is to *connect* the people who are playing it rather than to *communicate* to an audience of passive observers” (“Introduction”, para. 3, italics original). Hawkes described the anxiety associated with this latter sort of performance as “not natural, not healthy” (“Theme Four”, para. 1). Similar to Hawkes, Turino (2008) pointed out that whereas participatory performance “diminishes self-consciousness” as it “leads to a special kind of concentration on the other people one is interacting with...and on the activity” (p. 29), presentational performance “generates anxiety...and thus alters the performing experience and limits the number of people who choose to perform” (Turino, 2009, p. 108). As the Coffee House includes elements more akin to presentational settings, namely the presence of an audience, many performers experience anxiety no matter how supportive the atmosphere. For a small number of would-be performers, anxiety remains an insurmountable barrier and performance therapeutically contraindicated. On the other hand, the Coffee House's participatory ethos helps to minimize anxiety, making performance possible for many individuals who would not otherwise participate. As I continue to explore themes emerging from participants' narratives, the way in which performance embodies new relational possibilities is explored next.

“A Level Playing Field”: New Ways of Relating

Small (1998) proposed that a performance should be judged on its “success in bringing into existence for as long as it lasts a set of relationships that those taking part feel to be ideal and in enabling those taking part to explore, affirm, and celebrate those relationships” (p. 49). At the Coffee House, the fact that youths and staff members perform alongside one another puts them on “a level playing field” (Staff10), “putting [staff members] on the same level as the youth and also elevating the youth up to performers, to famous people” (Staff5). Whether through performing together or witnessing the performances of one another, there is a sense of equality embodied at this event, distinct from the typical hierarchical relationships within healthcare settings and contributing to the event's participatory ethos.

Within a facility in which the focus is often upon their struggles, youths' experiences of being seen as successful take on particular significance. Youth6 described the event as an opportunity to show others "what you can do" and Youth4 reflected, "I think the staff enjoy it – they get to see what we can do." Youth3 stated that the event is important because it allows youths to "show their talents...Some people judge like, 'Oh this kid's like a loser,' but they don't know what they can actually do." As Staff3 noted, "Everybody's gonna leave here feeling like Lady Gaga."

All participants reflected on the value of staff members' performances. Staff participants described performing as a way of relating to their clients differently and demonstrating commitment to their therapeutic relationships. For example, Staff7 and Staff2's debut performances were each sparked by a youth's request for somebody to sing with. Though neither woman had performed since singing in childhood choirs, both recognized the importance of supporting their clients. Staff7 recounted her realization that she could not encourage youths to perform unless she was willing to herself, and stated, "If I can do something way outside my comfort zone, they can do it." Along with sharing vulnerability, as alluded to by Staff7, staff participants noted that performing allows them to share a bigger picture of themselves, "letting our kids know that we are whole people" (Staff3). Their willingness to step outside of their positions as experts and exist as music-makers alongside and in support of their clients contributes to the sense of equality and levelling (Aigen, 2004) among performers.

Overwhelmingly, research participants noted that staff performances, including those of accomplished musicians, send a message that no one is above performing at this event. Staff10 felt that staff members' performances "put us...on a level playing field... because [youth] don't feel like...staff that can play an instrument or sing wouldn't do that in front of the kids." Each youth participant expressed enjoyment of staff members' performances. Youth7 specifically noted her appreciation of staff members who are musically accomplished: "If they're good, then bring it!" Youth5 insightfully reflected:

On the one side you could say that they're setting an example for us, but at the same time they're doing this for themselves. And they're strengthening themselves by doing this. And that's amazing...If they're getting something positive out of it then good for them. And we like listening to them!

Crucial to the Coffee House's participatory ethos is the fact that anyone is welcome to perform, regardless of ability level and also regardless of their role at the facility. For the duration of this event, relationships typically marked by hierarchy are impacted by music's levelling function. "Providing an opportunity for everyone to perform...serves to reinforce the common humanity shared by all members of the community" (Aigen, 2012, "Performing in an Institutional Setting", para. 3). Also vital to the event's success is the presence of audience members who experience music's levelling function and who are vital participants in the event, regardless of whether they chose to perform.

All are Participating

The fluidity between the roles of staff member/client and audience member/performer reinforces commonalities and connections among everyone present, leading participants to describe the event as "intimate" and "close-knit." While inclusive of staff members and clients of this facility, the Coffee House is *exclusive* in the sense that, for the most part, individuals from outside do not attend. Participants contrasted the Coffee House with larger events at the facility such as holiday celebrations. Though these events provide opportunity for a limited number of youths to perform, they are distinct from Coffee Houses in their content and in that their audiences include individuals from the greater community. Staff1 explained that the Christmas Pageant "does feel more—I don't want to say *polished*, 'cause things here don't often end up being super polished (laughs)—but it ends up being more about the parents." The presence of family, friends, community professionals, and donors, who attend the larger events as

observers, shifts the focus outward: from participatory to presentational. Concern with pleasing external audience members means that fewer youths are invited and/or willing to perform (Staff8).

In contrast, because the Coffee House exists to create meaningful experiences for its participants, there is no pressure to polish for an outside audience. “The focus is primarily inward” (Turino, 2008, p. 29). Rather than the community entertaining the public, “the community is entertaining itself” (Aigen, 2004, p. 194). Anyone is welcome to perform; there are no outsiders.

With recognition that all community members are welcome to perform, and that “the primary goal is to involve the maximum number of people in some performance role” (Turino, 2008, p. 26), it is imperative to acknowledge that many Coffee House attendees do not perform. Though Turino defined participation “in the restricted sense of actively contributing to the sound and motion of a musical event through dancing, singing, clapping, and playing musical instruments *when each of these activities is considered integral to the performance*” (p. 98, italics original), and though I recognize that participation through listening is distinct from performing, I propose that most audience members at the Coffee House are indeed active participants. Whether or not they perform, their role in contributing to the ethos of the event through bearing witness to the performers is integral. Everyone is musicking (Small, 1998).

Having their creativity, ability, and/or risk-taking witnessed and validated by audience members is vital to performers, and in this way, *all* audience members have a crucial role to play. Youth2 explained that the event is helpful “because a lot of these kids have problems with like self-image...I know I do. And it helps you when...you have like the courage to go up there and everyone encourages you.” Staff9 reflected upon the difference of sharing music with one other person versus “having a room full of people receiving that and feeding that back to you...It’s more powerful when they get to share it.” The witnessing and validation that youths receive from the audience contributes to the sense of accomplishment and the increased self-efficacy they experience. Due to the Coffee House’s participatory ethos, *all* performers have the opportunity to receive this witnessing and validation regardless of their ability level.

The Coffee House presents a deviation from Turino’s (2008) model of participatory performance settings with regards to the integral role of non-performing audience members. Stige and Aarø (2012) suggested that within community music therapy, “each musical situation is an opportunity for building participatory spaciousness where there is room for different styles of self-presentation, including peripheral and silent forms of participation as well as conventional and more adventurous forms” (p. 149). This notion of “participatory spaciousness” resonates here, where the clinical demands of the context interact with the affordances of participatory performance, creating a setting in which everyone has a role. The context in which this event takes place demands a nuanced version of Turino’s model, with flexibility accounting for the different roles and needs of youths versus staff members. I turn now to a brief discussion of several broader themes emerging from this study’s results, beginning with an exploration of the intersections between participatory performance and community music therapy.

Discussion

Participatory Performance and Community Music Therapy

Ansdell (2010) described a performance group for adults with mental health issues as a space “for negotiating the delicate balance between identity and difference” (p. 43) and in which “people work to reconcile their equal, but sometimes conflicting, needs for autonomy and togetherness” (p. 45). Similarly, Staff9 described the way in which the Coffee House allows each performer “to be an individual and be that in front of other people.” The human needs for autonomy and togetherness are addressed at the

Coffee House, arguably ideal within this mental health treatment and community music therapy context.

Wholly participatory settings are marked by significant interactivity and inclusivity, while they place constraints upon the individual's artistic freedom (Turino, 2008). Alternatively, presentational performances offer individuals the opportunity to freely share their abilities; these settings often generate anxiety in performers and are limited to those who meet a pre-determined aesthetic standard. At the Coffee House, performers experience the affordances of the participatory field, including togetherness and inclusivity. Due to the event's sequential format, performers also experience witness and validation for their individual contributions. This opportunity for each individual to experience the spotlight is more akin to presentational performance settings, however, it is the participatory ethos that makes these moments in the spotlight possible. This balancing of the individual's experience within a supportive collective is highly relevant to adolescent mental health treatment. Important to note, staff members negotiated their moments in the spotlight differently than did youths. Whereas youths are free to perform with uninhibited creativity and expressivity, staff performers remain aware of their clinical boundaries and use-of-self while choosing repertoire and performing.

Another area in which this event differs from Turino's model is in the area of social responsibility. At a wholly participatory event, those who do not participate are shirking a social responsibility, akin to sitting alone at a party (Turino, 2008). The Coffee House's treatment context necessitates a continuum of experiences of social pressure, and in this way, demands a nuanced concept of participatory performance. Certainly, there is a sense of social responsibility surrounding participation as an audience member. Consistently, front-line staff, required to attend for supervisory purposes, are present alongside managerial, clinical, kitchen, administrative, and janitorial staff. Youths are expected to attend as audience members, and most youths attend and look forward to the event. Staff10 noted that youths are eager to confirm that staff members will attend and pointed out that the facility endorses the event: "We are encouraged to close our office doors and come."

Staff members may encourage certain youths to perform, within the context of a clinical relationship where there is knowledge of each youth's goals. Staff4 reflected upon negotiating when to give youths an encouraging "push" versus when to acknowledge, "You're anxious, so don't perform." Ultimately, each youth's decision to perform is voluntary. Respect for clients' autonomy is important within a client-centered framework (Rogers, 1951), and some youths' mental health issues render performance contraindicated. As noted before, staff members perform for a variety of reasons, and depending on their clinical position in the facility, may experience social pressure from their clients to perform. In the case of Staff7 who sang solo for the first time at a recent Coffee House, she contributed to the event's participatory ethos through role-modeling vulnerability and commitment to personal growth. In the following section I examine music therapy's relationship to mental health treatment.

Music Therapy and "Treatment"

Solli and Rolvsjord (2015), in their research surrounding mental health service users' experiences of music therapy, noted that their most "conspicuous" finding was the fact that several participants "did not consider music therapy to be a treatment, instead emphasizing its representation of freedom from illness, stigma, and treatment" (p. 84). The authors described that "for many of our participants it was exactly within this paradox 'opposite of treatment' that they found music therapy useful" (p. 84).

A similar paradox was presented here. The Coffee House's participatory ethos and overall success was at least partially constituted and afforded by its treatment context, particularly the existence of supportive clinical relationships and individualized treatment goals. Seemingly in contradiction to this, however, was that participants suggested that integral to the event's success is the fact that it is not overtly connected to treatment. "It exists for itself, and for the positive things that come from it" (Staff9). The

music therapist's description of the event embodied this paradox; he noted that youths' participation can be based on their "authentic desire to perform" without broader implications to their treatment while also articulating the event's clinical benefits.

The event's artistic, rather than treatment focus, and the fact that participation remains voluntary, allows music to represent an "illness-free zone" (Solli & Rolvsjord, 2015, p. 84). The event celebrates the ways in which performers enjoy, relate to, and express themselves through music, and represents the way in which musical engagement within music therapy can be "continuous with its engagement in nonclinical contexts" (Aigen, 2014, p. 156). Performance is recognized as holding clinical relevance, and it is celebrated as a natural part of music-making. The paradox that musical engagement can be clinically useful when engaged with for non-clinical reasons is an important consideration for all music therapists and certainly not only relevant to performance. Musical characteristics of participatory settings are explored in the section that follows.

Music's "Cloaking Function"

Participatory performance settings not only have distinct goals and values; they also have telltale musical characteristics, such as loud volume, dense textures, repetitive forms, and wide tunings. "This wall-of-sound approach provides a 'cloaking function' whereby people with different skills can enter in comfortably without standing out" (Turino, 2009, p. 100), facilitating "prolonged social synchrony" (p. 102). At the Coffee House, such musical characteristics are at times audible. Particularly during the performances of the bucket drumming group and the rock band, participants can "blend in" to some extent and experience music's cloaking.

It was noted earlier that an important feature of the Coffee House is its focus upon the individual within the community. Though the "wall-of-sound" within participatory settings provides safety, it also may result in a musical experience in which an individual's sound is indiscernible. Though there may be safety in anonymity, there is less opportunity to address participants' unique goals or celebrate their accomplishments. Feeling that one's contributions are redundant or unnoticeable would not likely align with the goals of many clients within this treatment setting.

With the exception of those within ensembles, most performers at the Coffee House are highly exposed. Individuals' sounds are audible and there exists, for the performance's duration, an audience that is completely attuned to them. Musical characteristics are often quite the opposite to a "wall-of-sound" and much of the repertoire performed is from genres associated with presentational traditions, for example the "singer-songwriter" style, in which performers "strive to be authentic to the personal experiences and emotions from the lives of themselves and/or their contemporaries" (Hill, 2012, p. 90). I suggest however, that despite the vulnerability associated with this style of performance, the Coffee House's participatory ethos provides its own kind of cloaking for performers. This social/emotional cloaking renders the event genuinely inclusive and supportive of its performers whatever their music sounds like. The presence of this social cloaking for performers, despite the exposed nature of their musical sounds, makes participation possible and successful for many individuals who would be unlikely to perform in any other context.

The Medium of Music

Turino's (2008) proposal that the participatory and presentational performance fields are different art forms is undoubtedly, a helpful theoretical framework, highlighting the distinctions between these settings' values, goals, benefits, and constraints. He took this a step further even, asserting that "participatory music has more in common with a neighbourhood baseball game or a good conversation than it does with presentational music" (p. 89). While I appreciate Turino's point, I assert that his stark distinction between presentational and participatory settings fails to recognize qualities of musical

participation that may transcend context or field. Music-centered theory from music therapy offers an alternative perspective in this regard.

Acknowledging that music's affordances are context-dependent rather than universal (DeNora, 2000), I maintain that there exist elements of experiences across musical fields that are uniquely musical and cannot be attained through baseball or conversation. Wood (2016) explained that community music therapy "encompasses within its range of therapeutic activities anything that can be done in music...its theoretical formulation starts from what is done in music and what that affords those who are doing it" (p. 59). Though certain elements of the Coffee House, for example its inclusivity, could have been experienced at a baseball game, participants attributed unique benefits to this event because it involved *musical* participation. Staff8 noted the significance of *musical* self-expression in this adolescent mental health context, "I recognize the limitations of sitting here having a conversation...Sometimes [youths] need something else." The event's benefits regarding social connections were also noted to be uniquely musical in nature. Staff9 described the experience of staff members and youths performing together:

That's a relationship-joining sort of thing that goes beyond any technique...It's a different kind of connection...Here we are both...as humans more, making this music... connecting with each other, and with the audience...There's something not very tangible, and you feel it as an audience member too.

These perspectives resonate with a music-centered perspective on music therapy, which asserts that there are potential benefits to musical experience that "cannot be approached in any other way" (Aigen, 2005, p. 56). Without denying the distinctions between presentational and participatory settings (Turino, 2008), a music-centered perspective recognizes that within any musical engagement lies the potential for participants to experience music's affordances. At the Coffee House certainly, whether performers play in the bucket drumming group or sing original song with lyrics reflecting their own life stories, there are indelible points of connection.

Conclusion

Returning to Aigen's (2004) vision, that performances as community music therapy "forge a new type of art, one that creates meaning and invites participation" (p. 211), the Coffee House exemplifies the ways in which participatory settings are indeed new in comparison to the presentational settings that are the norm in Western society. Where participation and sociality are the standards, rather than aesthetic or technical achievement (Turino, 2008), these performers are truly musicians of the highest quality. The inclusivity characteristic within such a setting supports its performers in overcoming anxiety, engaging in the risk-taking of performance, and experiencing increased self-efficacy and confidence.

Music-making does not become participatory by simply learning specific instruments or songs; this type of performance requires a shift in "deeper value orientation" (Turino, 2008, p. 233). At the Coffee House, though the music performed was primarily from presentational traditions, the values of the participatory field were evident in that a musical culture in which success is defined by participation was embodied. That the event drew on certain elements of presentational performance allowed individual performers to share their abilities, take risks, and experience witnessing. The fact that any community member is welcomed as a performer here affords a levelling of institutional relationship dynamics, providing a reminder of all participants' "common humanity" (Aigen, 2012). Inspired by the values inherent at the Coffee House, this project has assisted in levelling traditional research dynamics through amplifying the voices of adolescent mental health service users, an important contribution to the music therapy literature. Here, the impact of performance is not a theoretical hypothesis but rather is grounded in the narratives of the performers themselves. These narratives can serve to

mobilize music therapists looking to implement performance events within their own unique settings.

The Coffee House's unique and nuanced version of Turino's (2008) concept of participatory performance is personally and communally resonant within this mental health treatment setting. Musical engagement within music therapy can indeed be "continuous with its engagement in nonclinical contexts" (Aigen, 2014, p. 154). May this event and this framework serve as a reminder to community music therapists that our work is situated within the music therapy profession's rich history while also being indelibly linked to the ways in which humans have always used music across contexts and cultures.

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Notes

1. The scope of practice of a child and youth counsellor "includes assessing client and program needs, designing and implementing programs and planned environments, integrating developmental, preventive, and therapeutic requirements into the life space...and participating in systems interventions through direct care, supervision, administration, teaching, research, consultation, and advocacy" (Ontario Association of Child and Youth Care, 2017).

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Appendix

Interview Questions

Youths:

1. What role does music play in your life?
2. Were you involved in active music-making prior to coming to [the facility]? If so, how?
3. Had you ever performed prior to coming to [the facility]? If so, in what capacity?
4. How do you feel when you are performing? How does performing make you feel about yourself?
5. What might people in the audience be feeling/thinking when they watch you perform?
6. Has the experience of performing changed how you see yourself from a musical or artistic perspective? If so, how?
7. Has it changed the role that music plays in your life? If so, how?
8. Has the experience of performing changed how you see yourself in any other ways? If so, how?
9. Do you think performance experiences like the Coffee House are important for youth at [the facility]? If so, what types of benefits might there be to participation?
10. Have you participated in music therapy during your time at [the facility]?
11. If so, what types of musical experiences have you had in music therapy?
12. Do you feel that music therapy has helped you? If so, how?
13. Is there anything else you want to tell me about your experiences at the Coffee House and/or in music therapy?

Staff Members:

1. What is your role at [the facility]? How long have you been employed here?
2. How many Coffee House events have you attended? Have you ever performed at one?
3. Can you describe a typical Coffee House?
4. What is the atmosphere and mood of the event like?
5. Is this event different from other programming at [the facility], and if so, how?
6. How do you feel, as an audience member, as you watch a Coffee House?
7. How might attendance at the Coffee House influence staff members at [the facility]?
8. If you have performed at a Coffee House, can you describe what that experience was like for you, musically and personally?
9. Can you think of any youths for whom the experiencing of performing at a Coffee House was transformational in some way? If so, can you describe this?
10. Can you think of an instance in which witnessing a youth perform at a Coffee House changed your perceptions of him/her? If so, please describe this.
11. In what ways, if any, have you witnessed involvement in music therapy as beneficial to the youth at [the facility]?
12. Is there anything else you wish to share about your experiences with the Coffee House or music therapy at [the facility]?