

Music education for pupils with severe or profound and multiple difficulties – current provision and future need

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There is a general agreement about the important role that music can play in the education and daily lives of children with severe or profound and multiple learning difficulties. But what are the distinctions and relationships between music education, music therapy and music as a vehicle for other forms of learning, occupation, development or engagement? To what extent are professionals in schools aware of these issues and prepared to explore them from an informed perspective? In this article, Dr Adam Ockelford, Deputy Director of Education and Employment for the Royal National Institute of the Blind (RNIB), Sally Zimmermann, Music Education and Employment Advisor (RNIB); and Professor Graham Welch, Chair of Music Education and Head of the School of Arts and Humanities, Institute of Education, University of London, present and expand on the key findings from their recent research project, 'PROMISE', which examined the Provision of Music in Special Education and specifically in schools for pupils with severe or profound and multiple difficulties. The authors conclude their paper with an acknowledgement that a great deal of significant work takes place in these contexts at present but that further research, leading to the provision of new resources for curriculum and staff development, is crucial to the realisation of music's full potential in the lives of pupils with severe and profound and multiple learning difficulties.

Introduction

'I couldn't imagine a session without music'
(*physiotherapist*)

'Music is an indispensable element in a broad and balanced curriculum for our pupils with learning difficulties'
(*headteacher*)

'Listening to reggae he came alive – he cried for the first time'
(*parent*)

'Music gives these children access to their culture that they could not get in any other way'
(*community musician*)

'Music really brings them together – gives them an awareness of each other – that just wouldn't be possible otherwise'
(*class teacher*)

'Words don't work on their own; but with music you can communicate directly, at an emotional level'
(*music therapist*)

'Cos I do!'
(*pupil – responding to the question 'why do you like playing the piano?'*)

These statements, which paraphrase or summarise comments received in the course of the 'PROMISE' research project (Welch, Ockelford & Zimmermann, 2001), illustrate the widely and strongly held belief that music forms an important – some would say indispensable – element in the lives and learning of children and young people who have severe learning difficulties (SLD) or profound and multiple learning difficulties (PMLD). Yet in music-educational terms, in the UK, these are learners in relation to whom there has been little formal research, there is scant contemporary literature (although see, for example, Ockelford, 1998; Corke, 2002), and no nationally recognised training courses for teachers. For sure, with regard to music therapy, the position is rather different: there is a growing body of relevant research and published material (for example, Heal & Wigram, 1993; Schwalkwijk, 1994; Pavlicevic, 1997; Aldridge, 1998; Wigram & de Backer, 1999; Davies & Richards, 2002), and there is a professional association (the APMT – Association of Professional Music Therapists), whose members will have been trained on one of a number of accredited higher education courses. In addition, the BSMT (British Society for Music Therapy) publishes what is now a well-established journal, the *British Society of Music Therapy*. However, while the *content* of therapeutic and educational sessions for clients or pupils/students with severe or profound learning difficulties is likely to be similar, the *aims* should be different – at least, according to the definitions of music therapy used by therapists themselves. For example, Bunt (1994, p.8) concludes that 'music therapy is the use of organised sounds and music within an evolving relationship between client and therapist to support and encourage physical, mental, social and emotional well-being'; whereas Ockelford (2000) has argued that music education in this context has two distinct strands: activities that are undertaken primarily for their intrinsic musical value, and those whose main function is to promote wider learning and

development. This can occur in a number of ways (Ockelford, 1998, p.24), including:

- the use of music and other structured auditory input to enhance the sensory information obtained from the environment;
- through the direct transfer of perceptual and cognitive skills from musical contexts to other spheres of activity;
- by isolating selected qualities of sound and treating them as concepts to be manipulated in pursuit of extramusical educational goals;
- through regarding music as a potential source of information about the cultures in which it was created.

In addition, music can be utilised to promote body awareness and movement; to foster communication and social interaction; and to enhance pupils' growing awareness of personal identity (Trevarthen, 2002). It is not at all clear, though, that concepts such as these, and the boundaries between education and therapy that are implied, are recognised or respected by practitioners.

While this is an important issue, particularly for those developing, offering or funding service provision, the reality of the situation for the children with SLD and PMLD is that both therapy and education are likely to make up only a small proportion of their complete musical experience on a day-to-day basis. For these groups (as with any other children), music is likely to occur in a wide range of contexts, fulfil a variety of functions and embrace a diversity of activity. That is to say, planned music-therapeutic and music-educational activities form only a small part of a child's total musical experience, the larger part of which will occur on a casual, unplanned basis (whose totality has never been evaluated). Crucially, many of the young people concerned will not be functioning at a level where the conceptual distinctions drawn here have any meaning or relevance: for them, the incidental input from, for example, the succession of television theme tunes that consistently map out their evenings or the radio played in the taxi to and from school for an hour or so each day, may constitute the most significant musical experiences of their lives. Hence, any consideration of music provision for children with SLD or PMLD that lays claim to ecological validity must take a holistic view.

It was with this in mind that our research project was undertaken, attempting to place music education in a broad and realistic context, and to gauge its potential relevance to children throughout the school day and beyond. The research was exploratory in nature. It was motivated by the belief that gathering detailed and reliable information is a necessary first step in seeking to improve music-educational provision for pupils with severe or profound learning difficulties. In formal terms, the aims of the PROMISE project were set out as follows:

- to identify examples of practice considered to be of value;
- to determine any significant areas of concern;
- to understand better the range of formal and informal opportunities for music within the schools concerned and their wider communities;
- to gain insight into levels of teacher expertise and professional development;
- to discover the nature of the resource base for such pupils;
- to clarify and review the nature of the distinction between education *in* music and education *through* music, and between music *therapy* and music *education*.

Methodology

The gathering of data was organised in three phases. In Phase 1, the (then) Department for Education and Employment (DfEE) was contacted in order to determine the number and nature of special schools in England. The intention was to sample 10% of schools catering for pupils with SLD or PMLD with a pilot questionnaire, to allow us to clarify key issues concerning the nature and purpose of music provision for these groups of children and young people. Phase 1 was more difficult than we had anticipated since the DfEE had outsourced its special schools database to an independent commercial company which could not initially provide details of the types of schools we required, and since (as we discovered) some schools had been incorrectly labelled. Nevertheless, a 10% pilot sample of schools was eventually selected at random from those formally identified on behalf of the DfEE as catering principally for pupils with SLD or PMLD. To these were added the four schools categorised as specialising in MSI (multisensory impairment).

Phase 2 of PROMISE involved visiting three schools that had responded to the questionnaire in order:

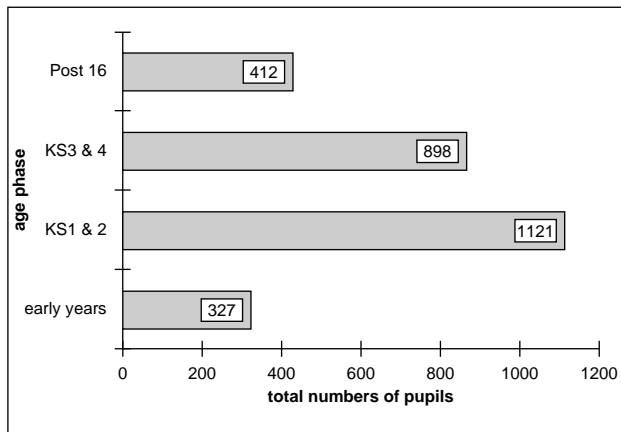
- to explore their responses in more detail;
- to observe timetabled activities for music;
- to follow one or two children throughout the day.

The last element gave us the opportunity to observe pupils' encounters with music in their entirety, both formal and informal.

Phase 3 of the project entailed the distribution of a second questionnaire, which was constructed through synthesising the preliminary analyses of data from Phase 1 with the observational and interview data obtained through our visits in Phase 2. This was sent to all schools designated as catering for pupils with SLD, PMLD or MSI in England (n=397).

In total, data were obtained from 52 schools (13%) in the 1999–2000 academic year, from LEAs across the country. Forty-three of the schools provided details of the age ranges of their pupils. Figure 1 shows the distribution according to age phase. The majority of pupils (73%, n=2,019) were of statutory school age (5–16 years; Key Stages 1/2 n=1,121; Key Stages 3/4 n=898), with 12% in the early years phase (n=327) and 15% post-16 (n=412).

Figure 1: Distribution of the pupils with SLD or PMLD in the Phase 1 and Phase 3 sample schools by age



Main findings

Our main findings are as follows. More detail is to be found in the full PROMISE report (Welch, Ockelford & Zimmermann, 2001).

The first issue we had to deal with was the fact that there are no established definitions of the terms 'SLD' and 'PMLD' that are readily available and commonly understood across the sector. Hence we generated working definitions as follows:

'Pupils with PMLD have profound global developmental delay, such that cognitive, sensory, physical, emotional and social development are in the very early stages of development (as in the first year of 'typical' development). Pupils with SLD have severe global developmental delay, such that cognitive, sensory, physical, emotional and social development are in the early stages (as in the first 12 to 30 months of 'typical' development).'

These were accepted without comment by the respondents.

However, there is clearly ambiguity in the field, which, together with the inadequacy and inaccuracy of the data contained in the database provided on behalf of the DfEE, makes estimates of the overall population difficult. These issues aside, it appears that, in addition to the 393 schools in England designated to cater for those with SLD and PMLD, a further 200 or more schools also make provision for such pupils, suggesting a total population in excess of 30,000. Where schools differentiated in their responses between SLD and PMLD pupils, the reported ratio was approximately 4:1.

Schools were typically 'all-age' (from early years to post-16) which, notwithstanding the relatively narrow developmental envelope of the pupils concerned, appeared likely to place onerous demands on teachers charged with overall responsibility for music in a school. In fact, virtually all schools in our survey (94%) had a member of staff designated as a music co-ordinator, and the term appeared to be commonly understood and used. The majority of music co-ordinators who worked full time

had a range of other duties and teaching responsibilities, whereas those working part time tended only to teach music. However, over half the music co-ordinators had no significant background or qualification in music or music education.

Most pupils received music tuition from their own class teacher, who tended to classify themselves as 'non-specialists' in music, and almost all pupils under 16 received at least one weekly music lesson. Just over a third of schools (36%) that responded to our questionnaire had a music therapist working on site. These people, with one exception, were fully trained, and tended to work with individuals or small groups of two to four clients. Despite this level of staffing, extrapolation from our data suggests that only 2% of pupils with SLD or PMLD actually received music therapy.

Continuing professional development (CPD) in music education appeared to be ad hoc and reactive to the availability of local provision, although collectively there is a range of potentially relevant CPD providers (such as the Firebird Trust, Live Music Now, the National Association for Special Educational Needs, RNIB, Soundabout and the Soundbeam Project), as well as the possibilities of development through the sharing of good practice between schools. The professional development that did occur was believed to lead, in general terms, to a greater confidence in making music with pupils and, specifically, to a greater use of singing, for example, and the increased utilisation of resonance boards.

All but one school had a music policy document in some form, and half of School Development Plans mentioned music. The majority of schools based their schemes of work for all age phases (early years to post-16) on the National Curriculum programmes of study for music (statutory for pupils aged 5–14 years in maintained schools). However, specified activities showed a bias towards the early years (pre-National Curriculum or Foundation Stage), reflecting the developmental ages of the pupils. Overall, there was no common curriculum framework evident for these groups of children that was appropriate to their needs. (The document *Planning, Teaching and Assessing the Curriculum for Pupils with Learning Difficulties: Music* (QCA/DfEE, 2001) had not, of course, been published at the time of our research, although, in the opinion of the authors, this falls some way short of the coherent developmental formulation that teachers and pupils require.) The design of music therapy activities demonstrated a comparable diversity, based on the perceived individual needs of pupils, the personal expertise and interests of the therapist concerned, and local circumstances.

Notwithstanding the wide variation in the design of music curricula, all schools made extensive use of music in other areas of the curriculum (including other therapeutic work). Often, music was seen as a catalyst for other activity. Consequently, the available evidence suggests that pupils were exposed to significant amounts of music during the school day, but this was somewhat idiosyncratic in its conception. Responses and direct observations

suggested that there was little or no connection between the formal music curriculum and musical activities in the wider curriculum. Nevertheless, the majority of music co-ordinators surveyed stated that musical objectives appeared regularly on individual education plans for most pupils with SLD and PMLD.

The resources available for music varied between schools. Nearly half had a specified music room, with a higher proportion (two-thirds) having multi-sensory rooms or areas that held musical equipment. The widespread use of unpitched percussion instruments probably reflected the conceptualisation of much of the music curriculum within an early years framework and also the music education expertise of the (essentially non-specialist) teachers. Only one-third of schools reported that they had a specific budget for music and this was generally small in comparison to the cost of musical instruments or music technology, suggesting that such equipment was likely to be purchased (if at all) through the allocation of other funding. The technology used for music largely comprised 'domestic' sound reproduction equipment (stereo systems), which appeared likely to mitigate against active participation by pupils. Although there were exceptions, such as ultrasonic beams, it would seem that these were neither widely nor systematically used.

Links with the wider community for musical activities were widespread and varied (20 schools listed 59 projects in one summer term). Great value was placed on pupils hearing live music, and a wide range of musical styles were employed. Most of the artists who were brought into schools did not specialise in working with pupils with special needs, however, and there was no evidence of coherent links between the 'regular' music curriculum and the 'additional' musical activities.

The majority of respondents did not distinguish between attainment and progress in music, and the comments that

were made tended to focus on non-musical (rather than musical) features. For example, comments were made pertaining to social and emotional development; the acquisition of motor skills; understanding cause and effect; and improving language and communication. This tendency was arguably inevitable, given the lack of an agreed curriculum and the wide variation in pupil populations, both coupled to the general lack of empirically based research data on the musical behaviours and development of children with SLD and PMLD. When prompted, however, teachers were able to identify particular pupils (one in ten) who were perceived either as showing a considerable flair for music or who had a marked interest in musical activities and, without exception, staff were extremely positive about the potential and actual benefits to their pupils of engaging in musical activities.

Conclusion

Overall, then, our study suggests that music is a significant component in the lives and learning of pupils with SLD and PMLD. There is a widespread recognition in schools of the potential benefits of music, both as an area of learning its own right and as a means to foster broader development (including cognitive, motor, social and emotional development: compare Ockelford, 1996, 1998, 2000; RNIB, 1998). This suggests a positive basis for progress if schools were to be provided with clearer guidance on how to frame music education – and education through music – for pupils with SLD and PMLD. This would necessarily be informed by a coherent and comprehensive set of studies into such pupils' musical behaviours and development in educational and other settings. Such research should also be used to inform the production of new music-educational materials for pupils with SLD and PMLD and the professionals who work with them. Only then can the promise of entitlement enshrined in the National Curriculum over a decade ago realistically be addressed.

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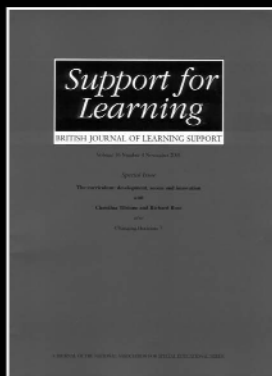
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