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Special issue

**Music therapy in Europe:
Paths of professional development**

in partnership with the
European Music Therapy Confederation



FINLAND

Country report on professional recognition of music therapy

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HISTORY AND BACKGROUND

The development of professional music therapy practice evolved between the period of the late 1960s and the early 1970s within psychiatry and in institutions for people with disabilities. The work was initially based on musical activities but gradually became more closely connected to the special needs and the rehabilitation of specific clinical target groups. The pioneer of Finnish music therapy Petri Lehtikainen was active both in terms of clinical practice and the development of music therapy training. The first two books were published in 1973. In the same year the Finnish Society for Music Therapy (FSMT) was formed. The first training courses were conducted as part of other professional trainings (e.g. training of teachers, music teachers, and nurses) or as further education programmes. Longer training programmes, which were defined to give competence for clinical practice, were established in the Sibelius-Academy, Helsinki, in the mid-1980s and in the University of Jyväskylä in the late 1980s.

The FSMT has always been an active agent and an advocate for professional development. Throughout its history, the FSMT has organised national (one- to three-day) conferences usually twice a year. This has been a remarkable boost to the profession and has brought people together to share ideas and knowledge in this developing and growing field. Since 1983 the FSMT has biannually published the journal *Musiikkiterapia* (Finnish Journal of Music Therapy), which contains a combination of research articles, clinical case studies, interviews, personal profiles and book reviews. The FSMT has taken an especially active role in professional development during the last 15-20 years by re-organising its structures and developing the services more towards the profile of a trade union. At the same time the FSMT has also

aroused public interest in music therapy by publishing informative brochures, leaflets and books, and also by giving declarations and actively taking part in public discussions about music therapy.

The FSMT keeps a register of professional music therapists in Finland, and organises the Music Therapy Forum for initiating and maintaining participatory discussion on current professional matters. The FSMT has a representative in the 'SUMUKE-group' (the development group for music therapy education in Finland, comprising training programme leaders), which was established in 1997. The main task of the SUMUKE-group is to develop common criteria for music therapy training and to promote cooperation between the different institutions that run music therapy training courses. The FSMT has defined the ethical principles of the profession and has an ethical code of conduct which is available to music therapy professionals, employers and clients.

RECOGNITION AND APPROVAL

The FSMT has made several attempts to get the professional title of music therapist protected and to be included in the register for healthcare professions (held by Valvira, the National Supervisory Authority for Welfare and Health). Negotiations with the authorities during the past 15 years have not been very successful. After a thorough discussion of the values of the profession in 2011, the FSMT decided to focus particularly on achieving official certification and recognition for music therapy as a healthcare profession. In addition, the decision to use legal advice was made.

Based on the SUMUKE-collaboration, music therapy training and education in Finland is clearly defined and all the collaborative training institutions follow the same structure and guidelines in their programmes. There may be slightly different profiles in terms of the content and emphasis in the programmes, but the core of the main structure (e.g. self-experience, supervised clinical internship) and the length of clinical training are the same. Since the early 1990s, music therapy as a healthcare/rehabilitation profession has been recognised by the governmental Social Insurance Institution of Finland (KELA). To begin with, the reimbursement for music therapy costs was offered to people with severe disabilities as medical rehabilitation. The second phase was to also cover the expenses within the field of psychiatric rehabilitation for children and adolescents from the year 2000 onwards. The third and current phase is that music therapy is reimbursed as rehabilitative psychotherapy for young adults (16-25 year olds). The right to have the necessary treatment is based on the law of the Rehabilitation Benefits and Services provided by the Social Insurance Institution of Finland. The quality control for music therapy services follows the same protocol and auditing as that provided by professions such as psychotherapy, physiotherapy, occupational therapy, speech therapy and neuropsychological rehabilitation.

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IMPORTANT STEPS IN THE RECOGNITION PROCESS

Several initiatives for recognition have been made by the FSMT, followed by official requests from members of parliament. Extensive legal consultation from lawyers and a thorough declaration of legal issues caused by the lack of recognition have been written. The report and a new initiative have been sent to the Ministry of Social Affairs and Health. Political lobbying and media appearances are ongoing. A member of parliament started to work on an initiative for changing the legislation of healthcare professions and ensuring that the professional title of music therapist should be added to the licensed healthcare professions.

Previously, the authorities have replied to such requests by stating that they are not willing to establish new healthcare professions as there are already too many. Furthermore, they say that the lack of registration does not make it impossible to offer these therapy services in institutions and units where there is a need for such services. The third argument has been that there is no need for supervision for such a "low-risk" profession as music therapy.

Active research developments in the field of music therapy and convincing results from recent studies have led to more discussions regarding the inclusion of music therapy in current care guidelines for depression, for example. As yet, however, no major changes have occurred.

CONCLUDING REMARKS AND FUTURE DIRECTIONS

Currently there are 500-600 clinically educated music therapists in Finland, working mainly with people with developmental disabilities, neurological disorders or mental health problems. In addition, there are several developing areas such as music therapy in medical contexts, with families, and in preventative work (i.e. in occupational health and student healthcare). There are around 50 positions in public healthcare and in rehabilitation institutions; the majority of trained clinicians work independently or as employees of other music therapists in private practice.

The qualification criteria for music therapists or suitability for practice is being questioned. Should the music therapist have a qualification and background in education from the field of healthcare, or might some other training be acceptable as well? Authorities in different parts of the country are making different requirements. This has caused confusion amongst clinicians and even inequality in taxation policies depending on the area where music therapy is being conducted. In addition, this jeopardises the availability of music therapy services in many regions.

During the last few years a parallel process regarding the development of music psychotherapy training has been initiated. Officially recognised music psychotherapy training will come under the quality control of academia, and based on research-based education and training.

This gives the right for using the protected title of psychotherapist as a healthcare professional.

As not all music therapy approaches have a psychotherapeutic orientation, there is a clear need for the professional title of music therapist becoming either protected or licensed, and for the supervision of music therapy practice to be properly and officially organised. The FSMT has decided to continue to work towards this recognition and all possible channels will be used to achieve this goal. This also has financial implications and the support from the members of the association is crucially important. The board of the FSMT has analysed the current situation, and the common and shared understanding is that the time for a major step forward should be here and now.

SELECTED LINKS

- EMTC country information:
<http://emtc-eu.com/country-reports/finland>
- Finnish Society for Music Therapy:
www.musiikkiterapia.net
- Social Insurance Institution of Finland:
www.kela.fi/web/en

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