Music therapy in Turkey: Curriculum and Resource Development through Professional Collaboration

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Abstract

Music therapy continues to develop as a profession around the world. This article outlines the emergence and development of music therapy as a profession in Turkey. The rich history and tradition of music in healing in Turkish culture is highlighted, along with its influence and impact on the profession's development. Key events that have influenced this development are discussed. Governmental and educational factors are identified and explored, as well as the curriculums developed that work within current certifying structures. Challenges innate in the development process are reviewed, as well as how these have been addressed.

Key words: music therapy, development, history, curriculum, Turkey.

Resumen

La musicoterapia continúa desarrollándose como profesión en todo el mundo. Este artículo describe el comienzo y el desarrollo de la musicoterapia como profesión en Turquía. Se destaca la riqueza en la historia y tradición de la música en la curación en la cultura turca, junto con su influencia e impacto en el desarrollo de la profesión identificándose los eventos clave que lo han influido. También se identifican y exploran los factores gubernamentales y educativos, así como los currículos desarrollados que funcionan dentro de las estructuras actuales. Se repasan los desafíos innatos en el proceso de desarrollo, así cómo se han abordado.

Palabras clave: musicoterapia, desarrollo, historia, currículum, Turquía.

Introduction

Music therapy continues to develop as a profession throughout the world. A recent article by Gadberry, Kavaliova-Moussi, Lotter, Milford and Mukherjee (2015) highlighted the development of the profession in four areas of the world including Australia and New Zealand, South Africa, Eastern Mediterranean and India. The authors explored what has influenced and impacted the development of music therapy, such as indigenous cultures' use of music in rituals, healing ceremonies and social integration. Additionally, they discuss how music has been utilized in various cultural traditions, religious and spiritual functions. The authors also identify challenges in the developmental process of music therapy in each respective country, as well as the challenges encountered. These challenges included cultural inheritance, accreditation, and recognition and acceptance of this new profession. While developmental processes are unique to each area and culture, there is value in sharing and learning from these differing experiences.

The present article focuses on the development of music therapy in Turkey, which possesses a rich history and tradition in the use of music in healing practices throughout many centuries. The authors will explore the deep history and the events and processes that have worked to foster the development of the profession. The recognition of the music therapy as an accredited healthcare professional in the country was a requirement, and this process will be reviewed. Resources needed and utilized throughout the process will be discussed. Additionally, the authors detail how they developed a curriculum within the framework of current health ministry structures in order to offer training opportunities within the country. Curriculum plans are presented that include pathways for potential students with differing backgrounds, such as medicine or music.

This next section will focus on exploring the long history of the role music played over the centuries in health and healing practices in the country and how this has impacted and influenced the development of the profession to date.

History of Music in Healing in Turkey

In Central Asia, shamans used music for healing practices. Musicians performed live music to the patients two or three times a week. This music was based on magams, which are musical modes or scales with a set of melodic formulas that guide the improvisation or composition (Harris, 2008). Magams were chosen based on the patient's disease, their horoscope, and time of the day the music would be played (morning, mid-morning, noon, evening, etc.) (Kılıç, 2007). In Seljuk (985/1038-1157) and Ottoman Empire eras (1299-1922), Houses of Healing (sifahane) were established where music was utilized in healing practices. Health institutions and hospitals were generally and commonly called darüşşifa/şifahane (gate of health) during the Seljuk period, other names such as bimarhane (home of the sick), maristan (place of the sick), darülmerza, darüttıb (gate of medicine), darüşsıhha (gate of health), şifahiyye (place of health) and darülafiye were also utilized in various times and in different parts of the country. Darüşşifas (şifahane) were usually located in large campuses called külliyes, which included a madrassa (Islamic religious school), a mosque and a bathhouse (Songur & Saygın, 2014, p.200). Darüşsifas were generally built by funds that came from the members of the ruling family (Kılıç, 2007, p.33). Serving as hospitals, darüşşifas, provided free healthcare for Muslim or nonmuslim women, children, men, civilians, soldiers, passengers, merchants and homeless, etc., (i.e. for everyone) (Bayraktaroglu, 2014, p.145). While the caravanserais and inns had a 3-day lodging limit during the Seljuk times, there was no limit at the *darüşşifas* for the sick and foreigners who had no other place to stay (Songur & Saygın, 2014, p.200). Expenses of these health centers were covered by specially instituted foundations which were granted lands, shops, and other trading establishments and were managed by the ruling family and the wealthiest of the community. The same organizational structure and services provided at these health centers continued during the Ottoman times (1299-1922).

Hospitals constructed during the Ottoman times were built as part of the larger külliyes, which provided greater access to health services and also meant patients were less isolated. (Bayraktaroglu, 2014, p.146). Infrastructures necessary and required for musical treatments and applications were included in the design of hospitals and health centers, as well as acoustics considerations (Bayraktaroglu, 2014, p.146; Yücel, 2016, p.53). It is known that experienced musicians gave concerts at darüşşifas twice a week. During these concerts, the musicians made appropriate use of magams and played so that patients became relaxed. As auxiliary therapy, fine scented flowers were presented to the patients and the sounds of birds and water were also included (Kılıç 2012, p.33). Some of the Houses of Healing are still in existence today, including Sultan Bayezid II Kulliye of Edirne, Gevher Nesibe Medical Museum in Kayseri and Divrigi Great Mosque and Hospital.

Gevher Nesibe Health Center, one of the *şifa-hane*s of the Seljuk times, was built in 1206 by the Seljuk Sultan Giyaseddin Keyhüusrev I, in memory of his brother Sultan Kilicarslan II's daughter, Gevher Nesibe, (Yücel, 2016). As the patients were being treated at the *şifa-*

hanes, students studying medicine also received their education and training in these settings. In addition there was a department specifically for treating patients with mental disorders (Kılıç, 2012) which included 18 rooms, with a rudimentary speaker system. It is believed that this system allowed patients to listen to music and sounds of water which would help them to relax (Yücel, 2016). Since 1982, this *şifahane* is now a medical history museum.

Sultan Mehmed the Conquerer (1432 - 1481) built the Enderun Hospital inside Topkapi Palace between 1461 and 1478. Baron J. B. Tavernier, a Parisian who visited İstanbul in the 17th century, writes that musicians played music for patients at the Enderun Hospital on traditional Turkish instruments such as the ney, santur, çenk and miskal. The music lasted from morning until the evening and sometimes as late as midnight (Bayraktaroglu, 2014).

Evliya Çelebi (1611-1682), one of the prominent travelers of the 17th century, visited Edirne Darüşşifa in 1652 and wrote in his travelogue that 10 musicians performed music for the patients 3 times a week. He also stated that music was performed not only for mental patients but also for other patients at the facility (Şengü, 2014, p.110). There are many writers who include references about the music performed in *Şifahanes*, such as El Kindi (796-874), Ebu Bekir Er Razi (854-932), Al-Fârâbi (870-950), Feytullah Şirvani (891/1486), Avicenna (980-1037), Suuri Hasan Efendi (?-1693), Hızır Ağa (1710/1760), Gevrekzade Hafiz Hasan Efendi (1727-1801), Mehmed Hafid Efendi (?-1811) and Hasim Bey (1815-1868) mentioned the effects of scales (Altınölçek, 2013, p.60., Çoban, 2005, p.43).

El-Kindi, one of the earlier philosophers of Islam, utilized the relationship between breathing and sound in his medical studies, brin-

ging together the effect on human soul and body. El-Kindi, in his «Kitab-ul Musavvitad», touches upon what kind of sounds initiate or dissipate different types of feelings. In his «Risâle fi Hubr Sınâati't-Te'lif», he writes about sounds that are good to the human ear and suggests harmonious melodies have a positive effect on people (Turabi, 1996, p.19).

Ebu Bekir Er Razi sang, played the oud and was interested in poetry, literature, and music. However, when he was nearly 20 years old, he refrained from music saying that «it was not appropriate for people to do music after they are old enough to grow a beard and moustache» and diverted his time to alchemy, chemistry, medicine, and philosophy (Karaman, 2004, p.106). Farabi (870 - 950), who was a physician, musician, and a philosopher, in his «El Musiki», «El-Kelam fi'l Musiki», «Kitabü fi İhsasi'l-İka» ve »El-Musiki'l Kebir» defined which magam acted on people's souls at various times throughout the day. He also wrote about instruments and musicians (Öztürk & Erseven, 2009, p.11., Altınölçek, 2013, p.57). When Farabi wrote about the impact of magams on people, he wrote, «Rast magam makes people joyful, Rahavi magam makes them think of infinity, Kucek magam makes them sad» (Yücel, 2014, p.56).

ibn-i Sina (980-1037), a physician and philosopher, became well-known as a result of his work titled, «El-Kanun fi't-Tib» (Law of Medicine) which was considered a main reference for about 700 years and was used in European universities until the middle of the 17th century (Aydın, 2014, p.71). He also wrote about mathematics, astronomy, physics, chemistry, poetry, and music. In his «Kitabü'ş Şifa», «Kitabü'n Necat» ve «Danişname», he wrote about the effect of music on people (Öztürk & Erseven, 2009). In one of his writings he states: «One of the best and effective ways of therapy is to increase the patients'

mental and spiritual strengths, to encourage them to fight against the illness, to make their surroundings enjoyable, to make them listen to the best music, and to stay in touch with the people they love» (Öztürk & Erseven, 2009, p.13). According to İbn-i Sina, sounds that are arranged in a harmonious way have a deep impact on the human soul.

Şuuri Hasan Efendi (?-1693) was a physician and poet who lived during the Ottoman times. The second part of his book Tediü'l Emzice, which is thought to have been written in 1677, includes topics on music and healing. Here he describes the relationship between maqams and various illnesses and recommends specific maqams for their treatment. He suggests that the science of music is related to the science of medicine, much like it is related to other sciences. He suggests pulse rates are in synchrony with specific maqams and related to the rhythms of other maqams (Turabi, 2011, p.153).

Gevrekzade Hafiz Hasan Efendi (1727-1801) worked as the chief physician at Ottoman court during Selim III's reign. In his Emraz-I Ruhaniyye, Nagamat-I Musikiyye ile Tedavi, he wrote how important music was as therapy for mental patients and how effective it was (Ak, 1997). In Neticetü'l Fikriyye and Tedbir-I Veladetü'l-Bikriyye, he wrote about how specific magams could be used to treat different child diseases. For example, he wrote, «the Rast magam was used against high fever and paralysis, Uşşak maqam was good for foot aches» (Altınölçek, 2013, p.66). In another work titled er-Risaletü'l-Musikiyye Mine'd -Devai'r Ruhaniye, he made a long list of magams and the various diseases each could treat (Altınölçek, 2013)

Hasim Bey (1815-1868) was born in İstanbul. During Mahmud II's reign, he studied in Enderun with the most important figures of

Turkish Music of the time. He conducted the Palace Turkish Music orchestra and later was appointed as the head of muezzin (Yalçın, 2014, p.2054). In his «Ta'dilü'l Emzice», he stated, «a physician who did not know methods of music could not be successful at diagnosis and treatment» (Ak, 1997, p.48). In his writings he also presents tables of *maqams* that are effective at different times of day and, using an illustration of a human body, shows which *maqams* affected each part of the body, depending on a person's horoscope (Ak, 1997).

There are inconsistencies between the effects of scales mentioned in these books. For example, Al-Farabi claimed that the *Buzurg* scale had a frightening effect on people while Gevrekzade Hasan Efendi mentioned its healing effects on fear-related illnesses (Ozturk et al., 2009, p.16). According to Al-Farabi, the *hicaz* scale gives feelings of modesty, while Gevrekzade Hasan Efendi emphasized its aphrodisiac effects.

Şifahanes either lost their functionality, or were destroyed or closed due to WWI, the demise of the Ottoman Empire, and lack of financial support from foundations. For about 150 years until the present day, the use of music in healing at the *şifahanes* fell into oblivion. Books which were written during the Seljuk and Ottoman times regarding the effects of *maqams* were eventually translated into Turkish (they were originally mostly written in Arabic). In these translations, the musical applications described in these books were referred to as music therapy. This naming error has continued to be utilized for the last 20 years.

Currently, there is a growing interest in music therapy in Turkey. This strong interest has arisen through the work of various professionals ranging from academics in music, medical professionals, as well as organizations striving to engage in a global music therapy community. The lack of a defined profession and clearly delineated training for music therapy creates ambiguity regarding who can practice this discipline and what can be referred to as music therapy. This growing interest has lead to music therapy training programs being established in Turkey, and the definition of the requirements and credentials necessary to practice as a music therapist in Turkey. However, the development of the profession would also benefit from experiences gained by students in music therapy overseas.

Development of Music Therapy in Turkey

When I (Burcin) was a college student, I watched a television news program about music therapy as it was practiced in the United States. I was impressed, and this fostered my curiosity about the profession. I then began to research music therapy, but at that time I was not able to access any information in Turkey, where training was unavailable. After graduating from college, I attended a music education symposium in which a Turkish scholar talked about experiences at a Nordoff-Robbins Music Therapy Center. This presentation reignited my interest.

Despite the lack of awareness and understanding of music therapy in Turkey, I still wanted to learn more and work in this field. For this reason, I attended the World Music Therapy Congress held in Argentina in 2008 and then the International Society for Music Education (ISME) Commission Pre Conference Seminar on Special Music Education and Music Therapy in 2010. Then, in 2012 I attended music therapy sessions at the ISME conference in Greece. All of these helped me to develop an understanding about the training and practice of music therapy around the world. Ho-

wever, I still did not have a comprehensive understanding of the profession or the training required to become a music therapist.

When I decided to go to the United States, I sent emails to more than 15 music therapy departments there, of which only two responded. One reply was from Dr. Annie Heiderscheit, Director of Music Therapy at Augsburg College in Minneapolis, Minnesota, who was very encouraging and embracing. It was clear she was interested in supporting and helping me learn more about this field.

My (Annie's) experience and involvement serving in various leadership roles with the World Federation of Music Therapy (WFMT) not only fostered my interest in learning about the development of music therapy in different countries, but also provided me with numerous opportunities to travel and learn about the development of music therapy in many countries. These experiences helped me to recognize and understand that the development of the profession is not only influenced but also impacted by numerous factors unique to each country. These include historical practices of music in healing, cultural practices, values, beliefs, governmental bodies, and healthcare ministries.

Our next step involved completing the necessary paperwork for me (Burcin) to apply to be a visiting scholar at Augsburg College. During my stay at Augsburg, I participated in undergraduate equivalency and graduate music therapy courses. Throughout these three months, I engaged in the following courses: Introduction to Music Therapy, Music Therapy Methods I (focused on receptive and recreative methods), Music Therapy Methods II (focused on creative and improvisational methods) and Psychological Foundations of Music. I also took the following graduate level music therapy courses: Music, Neurology and

Physiology, Music Therapy Research I and II and weekly music therapy practicum supervision sessions. Engaging in these courses provided me a greater understanding of music therapy as a profession, music therapy in clinical practice, methods utilized in music therapy practice and the role of music in the therapeutic process. Developing this knowledge regarding these aspects of music therapy was also vital to help me understand the information necessary for music therapy training. This provided the basis from which the two of us worked on developing a curriculum to be offered in Turkey.

During this time, I was also able to observe several board certified music therapists (MT-BC) facilitating sessions in a variety of clinical settings including a children's hospital, long term and memory care, a hospice, and a Parkinson's day program. I spent time each week observing Annie in clinical practice at the University of Minnesota Masonic Children's Hospital. Here I was able to observe music therapy with children on the pediatric intensive, cardiovascular intensive care and medical/surgical units. Through these academic and clinical experiences, I developed a more comprehensive understanding of music therapy. This has allowed me to return to Turkey with a deeper understanding of the profession, practice and training of music therapy.

It is important to recognize the current and limited practice of music therapy in Turkey. To date, there is only one board certified music therapist practicing in Turkey. Danny Lundmark, MT-BC completed a bachelor's degree in music therapy at Berklee College of Music in Boston, Massachusetts and maintains a clinical practice in Istanbul. There are several Turkish students completing their training in music therapy in Finland (University of Jyväskylä), France (Atelier de Musicothérapie de

Bourgogne, Dijon), Italy (Centro Italiano Studi Arte-Terapia, Naples) and Spain (Escola Superior de Musica de Catalunya, Barcelona). Lastly, there is a clinician, who completed her graduate studies in Lesley University. She practices music therapy in the United States and returns frequently to Turkey to offer workshops on music therapy and expressive arts therapies.

When I returned to Turkey following my time at Augsburg, there was an even greater interest in music therapy. Students and scholars from many fields such as medicine, nursing, physiotherapy, psychology, and music, wanted to meet with me and talk about music therapy. I was asked many questions such as, «How are music therapists trained in the United States?», «Where do music therapists work?» and «How is music therapy practiced?» However, since many of these individuals were interested in working in this field, the most common questions were, «Where can I receive music therapy training?» and «When will music therapy training be available in Turkey?» There was also interest in the press and media. I was interviewed on several radio programs as well as on Turkey's official television channel, TRT. These interviews provided many opportunities to talk about music therapy and this has extended public interest further.

The growing interest warranted developing a curriculum for music therapy training. There were many people among health and music professionals who wanted to have music therapy training. Developing a new curriculum in a health-related profession often requires working within established frameworks and guidelines of governing healthcare agencies. This was the case in Turkey. In order to begin the process, it was necessary to determine the organizations that would need to approve the curriculum and the accompanying guidelines.

In Turkey, the Ministry of Health oversees the curriculums of healthcare related professions. In 2013, the Ministry of Health established The Department of Traditional and Complementary Medicine as an entity within the Ministry. This new department oversees fifteen practices including: acupuncture, hypnosis, apitherapy, phytotherapy, leech therapy, cupping, reflexology, ozone therapy, homeopathy, chiropractic care, osteopathy, mesotherapy, music therapy, prolotherapy and maggot therapy. This would mean that any curriculum for music therapy would need to meet the requirements, guidelines and be approved by the Department of Traditional and Complementary Medicine.

Another significant development was the establishment of the Music Therapy Association in 2014. Many professionals from various fields are interested in music therapy and in supporting the development of the profession in Turkey. However, there are differing perceptions about music therapy in Turkey due to various practices. Academic studies often address the history of music in healing in Turkey. Scholars and healthcare professionals in Turkey identify practices such as having patients listen to music, performing music for patients, or the use of music in special education and Orff practices as music therapy. While music therapy is not defined and not yet a recognized profession, the label of music therapy is utilized to identify a variety of music based practices. The use of music in healing is regarded as non-threatening, safe, efficient and cost effective (Ucaner, 2016). All of these factors support the need for the development of a music therapy training curriculum, not only to provide a foundation for the profession, but also to define who can practice as a music therapist in Turkey.

Government approval and accreditation

Traditional and Complementary Medicine

Practices By-Law was published in the Official Gazette No. 29158 and entered into effect on October 27, 2014. This By-Law includes the definition of music therapy, criteria for becoming a certified practitioner, situations congruent for music therapy practices, music therapy centers and devices and materials that equip music therapy centers. According to the By-Law, certified practitioners are determined as follows: certified doctors, health professionals under the supervision of certified doctors and assistant practitioners who have at least a bachelor degree in a music-related field and have completed a certified music therapy education. In other words, music therapists can only work under the supervision of a certified doctor or dentist.

The 'Music Therapy Application Centre', is a place in which music therapy is provided. It can be established within the scope of training and research hospital or research centers within the faculty of medicine or dentistry. The centers can work under the supervision of a certified doctor who has a related certificate approved by the Ministry of Health or under the supervision of a dentist.

The Ministry of Health then issued Certified Music Therapy Education Standards on July 13, 2016. Universities must comply with the standards issued in order to get approval from the Ministry of Health if they want to offer Certified Music Therapy Education. The aim of the Music Therapy Education is to help health and music professionals to develop essential skills for music therapy practice. Health and music professionals are eligible to obtain music therapy training. Doctors, dentists and graduates of music-related fields with at least doctoral degree or proficiency in music are eligible to complete the certified music therapy education. The instructors of all courses must have at least a bachelor degree or official proof of work experience in the fields related to the courses that they will teach.

Developing a Curriculum

The development of the certified music therapy education curriculum needed to fit within the structure that existed then and was recognized by the Turkey Ministry of Health. The *Traditional and Complementary Medicine Practices By-Law,* approved in 2014, provided the structure within which to develop a music therapy curriculum. Other traditional and complementary modality trainings under the umbrella of this by-law comprised a set of courses that totaled a maximum of 400 hours. Therefore, in order to have a curriculum included within this by-law, the structure delineated by the Ministry of Health has to be followed.

During Dr. Ucaner's time at Augsburg College, we worked collaboratively to develop the appropriate curriculum that would address the educational needs of the various individuals interested in the certified music therapy education. For example we needed to address the musical development of physicians, as well as the clinical, physiological, psychological and sociological knowledge of musicians. The 400-hour curriculum follows:

- Introduction to the profession of music therapy (20 hours)
- Introduction to music therapy clinical practice (20 hours)
- Psychological and sociological foundations of music (20 hours)
- Music Therapy Methods I (30 hours)
- Music Therapy Methods II (30 hours)
- Music Therapy Clinical Practice I (35 hours)
- Music Therapy Clinical Practice II (35 hours)
- Music Therapy Clinical Practice III (35 hours)
- Music Therapy Group Experience (30 hours)
- Clinical Practice Practicum (65 hours)

In addition to the 320 hours of music therapy coursework, individuals already certified as a healthcare professional, would need to complete the following music coursework:

- Music Theory (20 hours)
- Aural Skills (20 hours)
- Music History (20 hours)
- Repetory/Chamber/Instrument (20 hours)

Individuals with a degree in music, would need to complete the following coursework in addition to the 320 hours of music therapy coursework:

- Anatomy and Physiology (20 hours)
- Neurology (20 hours)
- Psychology (20 hours)
- Abnormal Psychology (20 hours)

The combination of courses in addition to the 80 hours of music or sciences reached the 400 hours required by the Ministry of Health. The 400-hour curriculum plan was presented unsuccessfully to the Ministry of Health. The committee claimed the program was too long, and they accepted only the part of the curriculum that defined the baseline must be met in order to grant a certificate in music therapy. Institutions are permitted to offer a longer curriculum if they wish, like the 400-hour curriculum we developed.

The approved Certified Music Therapy Education curriculum is composed of 235 hours that includes theoretical and applied training. The theoretical component includes in-class training and the applied training involves experience in a clinical setting. For example, in Clinical Music Therapy Practice I, 4 hours of the course are theoretical training and 16 hours are applied training, while Collective (Group) Music Performance is all applied training. The courses in the curriculum include the following:

- Introduction to Music Therapy and Clinical Terminology (20 theoretical hours)
- Physiology (30 hours: 25 theoretical and 5 applied)
- Music Theory and Music Reading (25 hours: (9 theoretical and 16 applied)
- Collective (Group) Music Performance (20 applied hours)
- Psychological and Sociological Foundations of Music (30 theoretical hours)
- Music Therapy Methods (25 theoretical hours)
- Clinical Music Therapy Practice I (20 hours: 4 theoretical and 16 applied)
- Clinical Music Therapy Practice II (20 hours: 4 theoretical and 16 applied)
- Clinical Music Therapy Practice III (20 hours: 4 theoretical and 16 applied)
- Clinical Music Therapy Practice IV (25 hours: 9 theoretical and 16 applied)

The physiology course is not required for doctors, dentists, nurses and physiologists due their pre-existing knowledge and expertise in this area. Additionally, music theory, reading music and Collective (Group) music performance are not required courses for graduates in music-related fields. Therefore, health professionals will have 205 hours of training in total including 105 hours of theoretical and 100 hours of applied training. Music professionals will have 185 hours of training in total including 121 hours of theoretical and 64 hours of applied training. People who are both health and music professionals will have 160 hours of training in total including 96 hours of theoretical and 64 hours of applied training. Following the successful completion of the courses, trainees must pass a theoretical exam in order to be granted their certified music therapy education certificate.

Assessment Criteria for Certification

Exams of each course will be given by the lecturer responsible for the course.

Students who score 70% and above in the theoretical exam are considered to have successfully completed the course. Students who score below 70% can take the exam two more times. If a student does not successfully pass the exam following these three attempts, he or she is required to re-apply for a certified music therapy education program. The student's final grade is calculated from the average between their theoretical and applied exam scores. Successful students are awarded a Music Therapy Certificate which is registered by the Ministry of Health and valid for 7 years. At the end of this period, the certificate holders must fulfill one of the following to renew their certificate:

- Experience as a music therapist for at least 1 year
- Publication of at least 2 scientific papers
- Presentation of papers in at least at three congresses/symposiums
- Attendance of at least three congresses/ symposiums
- Completion of a theoretical, multiple choice exam

The questions on the exam will be chosen from topics within the music therapy training program and the recent advances in the field. The questions will be prepared by the practitioners of music therapy certificate training program and under the coordination of the Ministry of Health's Music Therapy Unit.

Certification and reaccreditation

People who have overseas music therapy training can apply to the Ministry of Health for accreditation of their training and certification. Qualified applicants must take and successfully complete theoretical and applied exams. Successful participants score 70% or above in theoretical exam.

A provisional article was added to the certi-

fied music therapy education standards. According to this article, people will be awarded a special one-time 'Music Therapy Accreditation Certificate' without being required to take the theoretical and applied exams if they fulfill one of the following:

- Publications of at least two scientific papers in a national/international indexed journal,
- Publication of at least one book or one chapter in a book related to the field,
- Completion of a Master level study with thesis in related field,
- Experience as researcher or manager of a project supported by a university or TUBI-TAK (The Scientific and Technological Research Council of Turkey)
- Supervision of a thesis in a related field

The applications will be assessed and reviewed by a commission that is established within the scope of Ministry of Health.

It is essential to pay attention to current structures and regulations, and work within the established accreditation frameworks, when developing an education and training curriculum for certification and re-accreditation processes. However, materials and resources are also needed to teach individuals how to practice music therapy. This is a challenge when music therapy is in a developing stage and there is no music therapy literature published in Turkish. Nevertheless, it also creates an opportunity. Textbooks and research literature are needed in order to teach the courses, and individuals are needed to begin to translate current available literature into the Turkish language. This requires collaborative efforts to determine appropriate texts and develop a plan for translation and publication.

Developing Resources

One step in the process of developing the re-

sources involved the authors' discussing what seminal text(s) would be most helpful in teaching the music therapy courses in the curriculum. We determined the book, Defining Music Therapy by Kenneth Bruscia (2014) would be the initial book to translate and integrate into the curriculum. During Dr. Ucaner's visit to Augsburg College, Dr. Bruscia (Barcelona Publishers) consented to the translation into Turkish of his book. Several publishers in Turkey were contacted to explore their interest in publishing the text, despite the fact that music therapy was still unrecognized by the institutions. As a result, to date, two music therapy texts have been translated and published in Turkish. These include Defining Music Therapy by Kenneth Bruscia and Principles of Music Therapy by Gerard Ducourneau. These texts are a vital resource for a music therapy curriculum, as they allow students in Turkey to learn about music therapy in their own language.

In addition to developing textbooks, there has been increased interest in offering symposiums on the use of music in healing and music therapy in Turkey. Within the past year, The International Music Therapy Symposium was organized by the Association of Art Psychotherapy in Istanbul, April 27-29, 2016, and another International Music Therapy Symposium was held in Kutahya, May 28-30, 2016, within the scope of Hisarli Ahmet Symposium VII. During the Hisarli Ahment symposium 56 papers, 11 concerts, one photograph exhibition, one painting exhibition, one panel presentation, 6 workshops, and one interview were presented. The papers covered topics on the use of music in health and healing in Turkish history, literature surveys, defining music therapy, music therapy methods in clinical practice and the use of music in medicine, psychotherapy, education, and special education. Two academics from the United States and Brazil presented their papers via Skype. Summaries of the symposium papers were published in Turkish as a book. This publication provides another additional resource for the profession and for education and training purposes. Currently, a major publisher in the United States is planning to publish a book of selected papers presented at the symposium.

Conclusion

The development of music therapy in Turkey is still in its early stages. However, there has been a significant amount of work and effort to support the establishment of music therapy as a profession and a curriculum has been designed for the training of qualified professionals. Interest in music therapy is increasing in Turkey and is contributing to a greater understanding of music therapy as a profession and in clinical practice. This growing interest has prompted professionals to seek out conferences, events and experiences and make contact with program directors in the United States and other countries in order to develop their knowledge and broaden their understanding of music therapy.

In order to begin developing a curriculum that could be offered in Turkey, it was important to adhere to government guidelines. Approval was achieved by the Ministry of Health through the *Traditional and Complementary Medicine Practices By-Law* in 2014, which provided a structure and pathway for a music therapy certificate.

The development of music therapy in Turkey has been a collaborative process. It has required interest from within the country, willingness to understand music therapy, initiative to seek opportunities to gain knowledge and the commitment of colleagues to work together to develop a curriculum designed

within the structures of the governing and certifying bodies. It is the authors' hope that this article provides insight for expanding and anchoring the profession of music therapy in other parts of the world. As we work together, we can foster the development of music therapy worldwide.

References

- Ak, A. (1997). Avrupa ve Türk-İslam Medeniyetinde Müzikle Tedavi. Konya: Öz Eğitim Basım ve Yayıncılık.
- Altınölçek, H. (2013). *Müzikle Tedavi*. Istanbul: Kitabevi Yayınları.
- Aydın, K. (2014). İbn-i Sina. *Türk Dünyası Bil-geler Zirvesi: Gönül Sultanları Buluşması* (s. 71-76). Eskişehir: Türk Dünyası Kültür Başkenti Ajansı.
- Bayraktaroğlu, N. (2014). Selçuklularda Şİfahaneler ve Gevher Nesibe Tıp Merkesi. *Sürekli Tıp Eğitimi Dergisi*, 144-147.
- Bruscia, K. (2014). *Defining Music Therapy*. Chicago: Barcelona Publishers.
- Çoban, A. (2005). *Müzikterapi*. Istanbul: Timaş Yayınları.
- Gadberry, A., Kavaliova-Moussi, A., Lotter, C., Milford, J., & Mukherjee, B. (2015). Music Therapy Development Around The World. *Music Therapy Today*, 15-24.
- Harris, R. (2008). The Making of a Musical Canon in Chinese Central Asia: The Uyghur Twelve Muqam. Ashgate Publishing, Ltd.
- Kılıç, A. (2007). *Kayseri Gevher Nesibe Şifahanei ve Tıp Medresesi*. Istanbul: Medicalpark Hastanesi Kültür Hizmetleri Yayınları.
- Kılıç, A. (2012). *Istanbul Şifahaneleri*. Istanbul: Istanbul Büyükşehir Belediyesi Yayınları.

- Karaman, H. (2004). Bir Biyografi Denemesi: Ebu Bekir er-Razi. *Çorum İlahiyat Fakültesi Dergisi*, 101-128.
- Öztürk, L., Erseven, H., & Atik, F. (2009). *Ma-kamdan Şifaya*. Istanbul: Türkiye İş Bankası Kültür Yayınları.
- Şengül, E. (2014). Müzikle Tedavinin Merkezi Edirne Sultan II.Beyazid Darüşşifası. Edirne: Edirne Valiliği Kültür Yayınları
- Songur, H., & Saygın, T. (2014). Şifahabeden Hastaneye. Süleyman Demirel Üniversitesi Sosyal Bilimler Enstitüsü Dergisi, 199-121.
- Songur, H., & Saygın, T. (2014). Şifahanden Hastaneye . Süleyman Demirel Üniversitesi Sosyal Bilimler Enstitüsü Dergisi, 199-212.
- Turabi, A. H. (2011). Hekim Şuuri Hasan Efendi ve Ta'dilü'l-Emzice Adlı Eserinde Müzikle Tedavi Bölümü. *Marmara Üniversitesi İlahiyat Fakültesi Dergisi*, 153-166.
- Ucaner, B. (2016). Perception of Music Therapy in Turkey. VII. International Hisarli Ahmet Symposium-Music Therapy. Kütahya.
- www.saglik.gov.tr. (2016, 07 13). http://saglik.gov.tr: http://saglik.gov.tr/GETAT/dosya/ 1-104153/h/muzik-terapi.pdf adresinden alındı
- Yücel, H. (2014). Türk İslam Medeniyetlerinde Müzikle Tedavi Yöntemlerinin Uygulandığı Şifahaneler: Amasya Darüşşifası. *TURAN-SAM Uluslararası Bilimsel Hakemli Dergisi*, 52-62.
- Yalçın, G. (2014). Haşim Bey Mecmuası Edvar Bölümünün Kaynakları. *Turkish Studies*, 2053-2074.



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