

just a small part of which I presented today, I humbly suggest that this model be given due consideration by music therapists around the world.

I further recommend that we reconceptualize our role in therapy as "biopsychological music therapists" or "psychobiological music therapists" or even "biopsychosocial music therapists" in spite of the fact that none of these is easy to say.

We need to examine the suspected unique role of music in this type of approach to the human being. This suspected role can be examined in various research questions which may include:

1. Is music therapy a more sophisticated and comprehensive assessment approach when compared to verbal strategies in detecting the non-verbal content of the individual's inner life, personality attributes, social status and biological status?
2. What is the effect of music on the biopsychosocial aspects of stress and pain (distress and suffering?)
3. How can music therapy prevent disease? Specifically, what are the interrelationships between biological, psychological, social, and spiritual aspects of the individual as they are evoked in the music therapy process?
4. Can a music therapy treatment process lengthen survival by facilitating emotional expression, group support and coping skills?
5. How does music therapy enhance quality of life?
6. Can music therapy more effectively help a person with an illness "sing his own song" in both literal and metaphoric senses and what are the implications of this for health?
7. Can the range of emotions be more adequately expressed through music than verbal means, and what are the biopsychosocial implications of this?
8. What aspects of the unique therapist-patient relationship in the music therapy process facilitate healing? Is patient-therapist entrainment through music unique in terms of its effects? Is the music-patient entrainment process likewise a unique form of intervention?
9. Can music facilitate a biology of meaning which affects the healing process?
10. What is the biopsychosocial healing role of imagery in the music therapy process?

This list of questions is only a beginning. We have much to learn. I know many readers answered, "of course" to many, if not all of these research questions. However, our clinical knowledge and insights are not enough. It is obvious to me that it will not be enough to answer these questions through quantitative research methodology. Qualitative methods are sorely needed as well as combinations of these methods.

I'd like to end with one of my favorite quotes from Barasch: "The dark labyrinth of life does not have a simple escape route. Each juncture of the journey presents a choice, a turning point; whether to split ourselves off from our own experience, or make what is happening, horrific though it may be, part of our larger process of Becoming. For if we fully inhabit our life when it is both most painfully constricted and paradoxically fraught with potential- if, even as our feet carry us into the maze, we can proceed with our eyes open rather than squeezed shut- we will inevitably discern a path of creative response" (Barasch, 1993).

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