

The Value of Music Therapy in Education

By Sarah Gardos

Music is an effective tool to teach students with disabilities skills that can help them both in and out of the classroom. Music, and music therapy in particular, has many benefits for students with disabilities in the areas of improving communication and social skills, decreasing disruptive behaviors, helping students regulate themselves, improving motor skills, and practicing academic skills. Despite all of these benefits, music is often undervalued; experts in the field suggest that music therapy is not available in many schools, and existing programs are often underfunded or completely cut. I have observed music therapists and spoken to professionals in the field with whom I have discussed the value of music and music therapy. I have seen these benefits myself at my internship with Alternatives for Children, a nonprofit organization that works with young students with disabilities. In this paper, I will combine my personal observations of the benefits of music therapy for students with disabilities and my research about the field in order to show that it should be available to all students with disabilities at the early childhood and elementary school level as they develop these crucial skills.

Music therapy is an established health profession that uses the effects of music to achieve nonmusical treatment goals. It involves “the use of music as a therapeutic tool for restoration, maintenance, and improvement of psychological, mental and physiological health and for the habitation, rehabilitation, and maintenance of behavioral, developmental, physical and social skills - all within the context of a client-therapist relationship” (Boxhill 5). Music therapy has been provided to school-aged children for approximately seventy years, but gained more prominence in school environments since the passage of the law, P.L. 94-142 in the 1970’s (Gillespie 24). Under the Individuals with Disabilities Education Act (IDEA), 20 U.S.C. §1400, music therapy is recognized as a related service in special education and settings serving students

with disabilities. Music therapists utilize music as an educational related service to promote learning and skill acquisition in domain areas related to the scope of special education curriculum and programming. (American Music Therapy Association, Inc). In the educational environment, it is often used to help students with disabilities reach their Individualized Educational Program (IEP) goals. IEPs are documents of goals, accommodations and modifications that students with disabilities are given to help them reach a higher level in their education. Music therapy supports IEP goals in multiple domains such as academics, speech, and communication. IDEA requires that schools provide music therapy to the students who have it on their IEPs at no charge to the parents. Music therapy sessions can take the form of one-on-one or group experiences, depending on the needs of the student. Students have the opportunity to use a variety of instruments, to sing, and to move along to the music made with the instruments played by other students or the therapist, whether by dancing or just bouncing along to the beat.

IDEA recognizes music therapy as a related service for students in cases where it would benefit them in achieving their IEP goals. In reality, many parents see the value of music therapy, but cannot get it put on their child's IEP, as it is very uncommon for schools to provide it. I was unable to find national statistics on the prevalence of music therapy in public schools: “little is known about the status of music therapy in school settings since the most recent major publications from AMTA (American Music Therapy Association) are from the years 1996 to 2006” (Gillespie 8). Melissa Bossert, a Long Island Committee on Preschool Special Education chairperson, told me in an interview that she is only familiar with one local preschool that offers music therapy, and is unaware of any elementary schools in the area that offer it. She recommends an online music program to families when their child is no longer able to access music therapy in schools, but this program is expensive (Bossert). Parents often remedy the

unavailability of music therapy through the use of these private music therapists. Though some are able to get grants from New York State to fund their child's music therapy sessions, many end up having to pay out of pocket for services that help their child succeed. Placing the financial burden on parents further limits the number of students who can access this useful service. As a result, this tool that helps students with disabilities becomes a service that is only accessible to those of a higher socioeconomic background. If it was offered in schools, however, it would be provided free of charge. Music therapy is currently an uncommon related service despite laws that say it should be available in schools and evidence that it has been shown to help the students who receive it.

In general, music is undervalued in educational contexts. Though the majority of schools in the United States have some form of music education, 2% of elementary schools have no music education whatsoever; this amounts to nearly two thousand public elementary schools with thousands of students who have no access to music education (Carey and et al. III). Even among those that do, 8% offer music education taught by general education classroom teachers rather than professionals trained in music. This often has a socioeconomic component, as most schools that do not have music programs are in areas where people have less overall wealth; where there is less money for the school budget, funding for subjects such as music, which are often considered nonessential classes, is cut. Consequently, these families also have fewer resources with which to pay for private music lessons or therapy. Additionally, when the schools need to make budget cuts, music is often at the top of the list. For example, in 2020, the Riverhead School District budget was rejected by voters. As a result, the Board of Education finalized a series of budget cuts to music programs, clubs, and sports throughout the district (Smith). Mario Asaro, head of the NYC Art Teachers Association, expressed his concerns that

“any time there are funding cuts, the arts are usually the first to get trimmed” and that “in NYC, there are no allocations or guidelines mandating arts funding in schools.” Thus, while New York State does require a certain number of hours dedicated to arts education in schools, it does not specify funding (Velie). In New York City, middle school students are not required to take music. Instead, they may fulfill their arts requirement through one semester each of two approved art forms, which also include visual art, theater and dance (Bloch and Taylor). Furthermore, in 2021, “55 percent of [New York] city public schools didn’t have a music educator, even before the COVID-19 pandemic” (Swift). These statistics paint a worrying picture regarding the lack of access to music education that many students face. Cuts to music in schools are harmful because music education is an important part of a well-rounded curriculum. Music classes are beneficial for all students and help develop skills not taught in the rest of their classes.

Music education and music therapy can both be used to help students with disabilities in different ways. Their focuses vary when it comes to what the students should be learning in the class (Adamek and Darrow 102-104). Music education teaches students about music; this includes the theory involved in writing music, the history of music, and how to play various instruments. This is not the primary intention of music therapy, though. Instead, the purpose of music therapy is to help students reach their IEPs’ academic and behavioral goals through music: “music therapy crosses many domains and can simultaneously address multiple goals... it is a flexible and widely applicable service to children in educational settings” (Gillespie 7-8). Though students with disabilities can be enrolled in and actively participate in music education classes, these classes are less helpful than music therapy for individual students with IEPs since they focus more on teaching students about music than using music as a tool to achieve students’ academic and behavioral goals. Music therapy, on the other hand, is part of students’ IEPs and

contains specific goals that the student should work on throughout their sessions. General music education does not have the same focus on understanding students' disabilities, and as a result it is less effective at addressing the areas in which the students struggle.

Although music education focuses less on helping individual students with disabilities than music therapy, it can still be an effective tool. There are a variety of strategies that can integrate students with disabilities in general education music classes. One strategy involves using heterogeneous cooperative groups, which are largely student led, with a mix of students with and without disabilities (Darrow 49). This tool is useful in general education music classes for students with disabilities to develop positive interdependence in groups, direct communication, personal responsibility, interpersonal skills, and group processing. Although the focus of general education music classes is not primarily on students with disabilities, they can still benefit and grow in them.

Music can be a useful way of introducing transitions between activities and changes in regular routine, as students with disabilities often struggle with change. In my experience working with students with disabilities, I have seen students tear posters off the walls, scream at other children and even hit people during transitions. Educational professionals can use music to make the transition process smoother by creating a concrete routine (O'Rourke). The songs used to ease transitions can be about anything, including activities that happen in the day. Teachers and other educators can use songs to prepare students for upcoming activities. Songs are often more memorable than the spoken word, so a schedule introduced through song can be helpful. Teachers can encourage students to sing along in order to assist with the secure establishment of the routine. Songs do not need to be about the day's activities to be helpful in keeping routines; a song that merely says "good morning" can be a good way to establish a routine if the same thing

happens after the song each time. Songs can also be used to establish changes in the routine. An educator can use music to help a student with disabilities who has difficulties with changes to routines or classroom structure. The song can address the changes and establish the new routine. Such a song can be a part of the routine to adjust to changes in the classroom, which can make the process of change more familiar and less of an upset to the normal routine of the classroom. The smoother transitions created by music make the school environment safer and save time that might otherwise be spent dealing with disruptive transition behaviors.

In the following sections, I will detail how music therapy helps students with disabilities across the domains of communication and social skills, behavioral skills, regulatory skills, motor skills, and academic skills.

Communication and Social Skills

Music can help students with disabilities improve their communication and social skills by offering them a better understanding of sounds and where they come from, improving their capability for speech and decision making, assisting them with regular social interactions, and allowing for easier interactions in groups.

Music can help students with disabilities who are in the awareness stage of development become more able to comprehend different sounds, which is an essential part of the development of social and communication skills. The awareness stage is the point in development where a child begins to comprehend the world around them (Schwartz 49). To be part of conversations and social interactions, one must understand where sounds are coming from and who or what is making them. Music is one method used to develop and maintain these skills (O'Rourke). Instruments create unique and loud noises that can keep the attention of students with

disabilities. Using these sounds helps students develop an understanding of the origins of sounds, which can help in all areas of life. Music therapy sessions can involve instruments like drums and guitars that a student can feel vibrate, further guiding the students towards an understanding of where the sounds originate. Music therapy sessions can even give students opportunities to play the instruments themselves, and to learn and understand their own ability to create and share the noises.

Speech and language skills can be developed through music therapy sessions. Singing is a related skill to speech. Music therapy techniques, such as singing repetitive songs with prompts for the students to sing along, or having students participate in call-and-response songs, can be used to practice verbal communication (Nordoff and Robbins 27). Music therapy can also help students practice verbally requesting the things that they want. A music therapist can incorporate these requests into songs with a call-and-response format or giving options and encouraging students to verbally respond to these questions. Students can also work on individual sounds in music therapy (Monteleone). If a music therapist knows the sounds that a student needs to work on, they can create songs with interactive pieces to sing with the child at their music therapy sessions. Development of verbal communication and language skills can be improved in music therapy sessions.

Music therapy is a valuable tool to improve the development of decision making skills in students with disabilities. Students with disabilities often struggle with both making decisions and communicating these decisions. Music therapy can help to develop and reinforce these skills (O'Rourke). Music therapy sessions have multiple instruments that a student can choose from. While the choice of which instrument a student can select to play is similar from session to session, it is not the same, which offers students familiarity and routine. This familiarity is

important for students with disabilities, and allows for novel experiences. I have personally observed students who are new to music therapy gradually become accustomed to it, and become more comfortable making requests verbally or through hand signs. Some examples that I observed include less verbal students using the word for “more” in American Sign Language to request to continue what they were doing, or students asking for an instrument they enjoy using their words. This gives these students the opportunity to control a part of their day in school. Decision making is encouraged through the structure and format of music therapy sessions.

Music therapy can also help with social skills in students with disabilities. Taking turns is a common part of social interactions both in and out of the classroom. Interactions like waiting in lines are an example of taking turns that are a part of life that will continue through and beyond school. According to professional music therapist Anne O’Rourke, this is a skillset that is developed through music therapy, especially in a group context, but can still be worked on in a one-on-one environment with a music therapist. In a group setting, there can be many students but few musical instruments, so students will have to wait their turn to participate in activities they enjoy. This skill can be generalized to many different areas of life. It also helps maintain turn-taking practices happening in the classroom. In one-on-one settings, turn-taking is more difficult to work on, but there are ways to encourage and improve upon this skill. This requires the music therapist to take turns and make the student practice waiting to use an instrument. The ability to wait one’s turn is an important life skill that can be learned in music therapy.

Activities that require group work and group cohesion are common both inside and outside of school environments. Whether in a workplace or a classroom, working well with others is an invaluable skill that can be developed and practiced in music therapy sessions (Adamek and Darrow 196). Many songs require students to perform coordinated activities, like

playing instruments together simultaneously. Many of these songs have students create different sounds that contribute to the whole song, which is similar to students doing different activities together in a group project. In doing so, music teaches the concepts involved in group work and shows their value. It can also be used in the process of generalizing cooperative skills that are developed in the classroom. A music therapy session is a different situation from a classroom lesson, and as such, is a good place to show that cooperative skills can be used in all varieties of environments.

Behavioral Skills

Music can help students with disabilities decrease the number of disruptive behaviors they display. It can be a good motivator for students to display better behaviors; it can teach students safe behaviors, how to follow rules, and how to adapt to rules in different environments.

Music therapy can help students modify inappropriate behaviors. According to *Music in Special Education*, simply including music in the background of classes can be a good motivator for students to minimize disruptive and aggressive classroom behaviors like being unable to stay in their seats. It is also an incentive for students to complete school work assignments, be punctual, raise their hands, and participate in classroom activities (Adamek and Darrow 147-148). This can be especially helpful for students with behavioral disorders. Just giving students the opportunity to interact with new instruments can help them practice and improve their behavior. Students who are engaged in the process of learning music are more likely to display rule-following behaviors, like staying in their seats, not calling out during class and listening to the instructor. Often the engagement in an activity will continue past the point of an instrument being novel. Instead, the students' engagement comes from their enjoyment of the music being

produced by their use of the instrument rather than it being new to them, which gives them an experience of creativity that is uncommon in schools outside of arts classes. Students can improve their disruptive behaviors through musical experiences, both in their classroom and in music therapy sessions.

Music therapy can benefit students with disabilities by helping them learn safe behaviors. Many students with disabilities struggle with disruptive behaviors that affect them inside and outside the classroom. Music can be a motivator for students to listen to instructions (Adamek and Darrow 147). In music therapy sessions, the use of instruments can be a reward for good behavior and part of a system of positive reinforcement, which is a useful tool to teach safe behaviors to students. Instruction about safe behaviors can also be incorporated into songs and activities used during a session, such as singing about using seatbelts and buckling up in a song about driving. Music therapy sessions are also a place where movements like dancing and jumping are encouraged, which allows for practicing balance and other important aspects of safe movement. Safe behaviors can be encouraged in every area of music therapy sessions.

Music therapy can help students to understand rules. Many things in life have rules; this applies to classrooms and society, but also musical activities. Musical activities, like songs and dances, often have rules embedded into them, such as a song to quiet down students containing lyrics about “quiet mouths” (Schwartz 104). If these phrases are repeated often enough, just hearing the start of this song can be enough for students to quiet down. This can be done with classroom rules as well. A music therapist can incorporate any rule that a student has difficulty following into a musical piece that the student can learn to recognize. This recognition and understanding can also lead students to remember the rules and even sing them on their own when another student is observed displaying relevant disruptive behavior. Music therapy sessions

are also a good place for students to learn about following new rules. Music therapy sessions often introduce new instruments and songs with new rules that a student needs to adapt to and understand; examples include having to sit while playing the drum or staying in the area while doing a dance. This is an important skill as in life there are situations that have differing rules than others and being able to adapt is difficult, especially for students with disabilities. The skills students develop to follow rules are related to those involved in students regulating themselves.

Regulatory Skills

Music can help students react safely to situations they have never experienced before, and improve their ability to react appropriately and not to lash out when experiencing strong emotions. It can help students improve upon their ability to self-regulate. Self-regulation is a person's ability to manage their behaviors and reactions to situations or emotions, something that many students with disabilities struggle with quite frequently.

Music can help with self-regulation in a number of ways. It can be used to express emotions and reactions in ways that are not harmful to themselves or others through singing or playing songs that fit a student's mood, like aggressively playing a drum to express anger (O'Rourke). Music can also be used to help a student understand how they are feeling. Songs teach and share important information with students, and help them incorporate information about feelings into music while also offering an outlet through which to manage these emotions. Many songs used during music therapy sessions contain a movement component which helps students with disabilities to ground themselves and give themselves necessary stimulation. Songs can contain information about how to handle emotions embedded into the lyrics. These are tools

to help students in a music therapy environment and can be generalized to help students outside of their music therapy sessions.

Music can help students with disabilities improve difficulties modulating their emotional reactions. Students with disabilities, particularly behavioral disabilities, may react to their emotions in inappropriate ways which can cause them to lash out in ways that can be dangerous to themselves and others or to act out in ways that cause disruptions in the classroom environment. Music can be used to improve upon these responses. Many of these students act out because they are unable to properly communicate their emotions, and therefore seek other, more disruptive ways of expressing the ways they feel; music can be that alternative method of communication (Adamek and Darrow 150). Students can create music, either by singing lyrics or playing on instruments, that expresses how they feel. If they have difficulty with creating their own music, they can play songs they know that show what they feel, or go to a music therapist who can create music to convey the feeling for them. It can even be used to help students discuss difficult topics that they are struggling with in their lives. Music can be a healthy and safe way for students to express how they feel.

Motor Skills

Music therapy can help students with disabilities work on their fine and gross motor movements through dance and playing instruments. Fine motor movements are the small precise movements made with the hands or wrists and gross motor movements are the larger scale movements made by the arms, legs and torso. Dance is a large part of music therapy sessions. Students with disabilities engage with the music in a variety of ways, including dancing and jumping, which are both gross motor movements (Amadek and Darrow 197-198). This is a way

that students can practice safely participating in these movements and becoming more aware of their surroundings. The use of instruments helps students with fine motor movement. Playing the guitar requires the students to be able to strum the strings with their fingers and playing the piano requires the students to be able to press down on the keys with their fingers; these are both fine motor movements. Even using instruments like drums can help with fine motor skills since holding drum sticks works on grip, a fine motor skill that is important for young children. Both gross and fine motor skills are developed in music therapy sessions.

Academic Skills

Music can help students improve their academic skills. It can help teach students knowledge about the world around them, and how to understand the different ways objects around them are represented.

Music can help students learn general knowledge. Songs in music education can be about anything, including basic facts about things that a child might be expected to know in the future, like facts about animals or nature. It can also reinforce awareness of directions, like up or down, and to facilitate discussions of things that contrast one another, like big and small or fast and slow (Amadek and Darrow 197). Students can learn about letters and letter sounds through songs as well; many songs highlight specific letters and repeat the same sound multiple times. Songs may focus on specific letter sounds, which the class can discuss after the musical exercise. Music can even help with math education; rhythm and the beat of a song can help with discussions about counting and addition. Music can reinforce the academic skills students learn in the classroom. If the classroom teacher and the music therapist coordinate, they can work on content that complements each others' lesson or session.

Music can help students understand objects that are presented in different formats. Objects can be represented in concrete, representational or abstract formats. A concrete format is the physical object in question, a representational format is an image of an object, and an abstract format represents an object in a way that one can only understand if they have a picture of it in their mind, such as written words. Music therapy can help students with disabilities gain a better understanding of these different formats (O'Rourke). A student who is starting music therapy can be encouraged to find an instrument in the classroom that they want to play. They might not be able to identify an image of the instrument or its name, but they can find the concrete object and point to it. As they continue in music therapy sessions, students can learn more about the instruments they play and how they look; eventually, they will be able to point to an image of these objects and say that that is what they want to play, even when they cannot see the actual instruments. This comes from an understanding of and familiarity with what the object looks like. After working with these instruments and hearing their names many times, the student may begin to request these instruments without any image of them, using just the word. This is an example of abstract representation because the student can picture the object in their mind and request it without seeing it. An analogy can be made to other classroom subjects, like math. A student learning addition may start by adding with physical blocks; then using pictures of blocks; and then by adding just using numbers with no reference point. Music presents a beneficial environment for gaining an understanding of the different representations of objects.

Benefited Disabilities

Students with a variety of disabilities can benefit from music therapy. Students with the specific disabilities of autism and behavioral disorders get more out of music therapy than

students with other disabilities. These are also the disabilities which I focused on the most throughout my paper.

Music therapy can help students with autism. Autism is a developmental disability that typically first presents in children before age three, and affects them for their entire lives. It affects many areas of life including speech, communication skills and social skills (Poisdorfer). These areas can be improved upon through music therapy. Many of the techniques discussed in this paper are particularly helpful for students with autism, though some focus on other disabilities like behavioral disorders.

Music therapy can help students with behavioral disorders as well. Behavioral disorders are a category of disorders that have a large impact on the way children interact with education. These disorders include Attention Deficit Hyperactivity Disorder, Oppositional Defiant Disorder, and Conduct Disorder. Students with these disorders have increased difficulty with social situations, as they often cause disruptive behaviors in school (Behavioral Disorders, Johns Hopkins Medicine). Music therapy can help students with these areas of difficulty.

During the summer of 2022, I observed the efficacy of music therapy in an educational context firsthand through my internship with Alternatives for Children, a Long Island organization that works with children with disabilities between the ages of two and five years old, using various techniques such as music therapy, art therapy, and speech therapy. I observed and assisted with one-on-one music therapy sessions with students, and with group sessions with up to fifteen children. I worked with Anne O'Rourke and Samantha Monteleone, two certified music therapists, who work at Alternatives for Children. I have spoken with O'Rourke and Monteleone about the benefits of music in educating students with disabilities throughout my

internship. I also had the opportunity to speak to other music therapists and professionals within this organization.

During my internship, I observed several students who substantially improved through music therapy. Some people state that music therapy is not useful based on their own case studies (Thompson and McFerran), but the research I have done and the cases I have seen show the value of music therapy. I saw many of the benefits which I read about while conducting my research and discussed in this paper occur in the students I observed. For example, one student gained a greater ability to vocalize and communicate his feelings. By singing along with the songs in his music therapy sessions, he was able to practice his vocalizations and letter sounds to the point that he was able to say the first sound in most words while pointing to what he wanted, and to say several short words completely, which he was unable to do before. He learned to ask for help by using words when he needed something. Through music therapy, another student improved in following rules and regulating her impulses. During the early sessions, this student would not stay in her seat for more than a few minutes at a time. She would run at other students who were playing instruments and try to take their turns for herself. After a summer full of music therapy sessions, her behavior improved. O'Rourke learned what instruments this student enjoyed playing and used them as motivational tools. She also encouraged the student to participate in hand motions used in songs. These two activities helped her improve to the point where she only left her seat when not supposed to do so twice during a thirty minute session. A third student improved his ability to follow directions and engage in safe behaviors. This student often tested boundaries and tried to do only what he wanted to do, without considering the activity that was already underway. He would often want to play instruments at inappropriate times. His therapist only allowed him to play instruments when he followed directions and used

the instruments properly. He was motivated by music, especially the accordion, so his ability to follow directions improved. This continued throughout his sessions to the point where he did not need to be told what he was supposed to be doing more than once before he did it. These are just a few examples of how music therapy helped students during just the one summer I was given the opportunity to observe. If it can help so many students over such a short period, it should be provided to more students who could benefit and grow from it, just like these students did.

Music therapy should be available in all schools for students that need it at the early or elementary education level. While I think it could benefit all students from preschool to high school, the improvements I observed were in preschool aged children. At the very least, all public elementary schools should have a music therapy program in order to make the service accessible for students who need it, regardless of income status. Since most schools do not have music therapists, special and general education teachers can use some of these strategies to help in their classroom. They can find songs online that can help in their lessons or play music as a positive reinforcement reward when students are behaving. Classroom teachers can use music as a tool in their classrooms, even if it is not used as effectively as it would be in a music therapy session. Music therapists should be in schools, but teachers can use some of the strategies used by music therapists to get some of the mentioned benefits.

The evidence presented shows that music therapy benefits students with disabilities in the areas of social and communication skills, behavioral skills, regulatory skills, motor skills and academic skills. With all this in mind, music therapy should be available in all schools. Currently, it is not available in the majority of schools, meaning that many students who could thrive through music are struggling in their academic careers. The lack of music therapy in

schools needs to change in order to give students with disabilities the opportunity to reach their full potential.

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