During the last 12 months I have concentrated in my PhD research project. The first few months consisted in refining the research questions and methodology as well as learning about different research methods and strategies. After an in depth reflection around the core areas of my topic, I submitted a revised research proposal that was accepted by the research department at Guildhall.

Since then I have concentrated in developing five parallel lines of action to cover both the academic as well as the clinical side of my project. I will detail these five aspects below.

I have also had the opportunity to present my research in different conferences and research seminars, including the 5th International Health and Humanities Conference, the 52nd Annual Conference of the Royal Musical Association and the CoLaboratoire Research Summer School organised by the CogNovo Institute from Plymouth University.

This has allowed me to start sharing my research project, get some constructive feedback and work on my presentation skills, which can help me later on to disseminate the findings of the project.

Five parallel lines of action

ACADEMIC

1. Systematic literature review

I have conducted a systematic literature review using the NICE databases recommended by the NHS (EMBASE, Psychinfo, AMED, CINAHL, MEDLINE) and I have extended the search to other more specialised sources, such as arts therapies journals.
2. Theoretical framework

I have looked at other literature that doesn’t relate directly to my topic but that informs and situates my project within a specific discourse. For this reason, I’ve looked at Logic Models for Complex Interventions (adopting a medical framework); Musicology (relational musicology, origins of music and emotions and memetics theory); literature around the voice in fields of embodied knowledge, philosophy and wellbeing; mental health (including evolution of consciousness); music therapy literature (meaning in music therapy, group music therapy, aesthetics and psychodynamic models).

3. Preparation for the upgrade

I have designed the structure of my upgrade document and I am now in the process of finalising its content. This will contain a detailed analysis of the literature search as well as the general theoretical framework. It will delineate the different methodology phases and it will outline the main ethical issues.

CLINICAL

4. IRAS NHS ethics application

I have filled an IRAS (Integrated Research Application System) form, which is an exhaustive ethics application provided by the NHS that is evaluated by a highly specialised ethics committee. In this form I have addressed the details of the intervention and its ethical implications. Issues such as capacity, anonymity, data storage and potential risks and benefits are looked at in depth as well as my dual role as both researcher and therapist.

5. Field experience

I have established my role as a therapist in a London NHS hospital in order to start liaising weekly with two Community Mental Health teams and to start having an experience of the referral possibilities and challenges. This has given me an invaluable experience in order to address the other lines of action in a feasible and realistic manner, especially the ethics application. Being present as a member of a multidisciplinary team has helped me to create a platform from which to start collecting data in the coming year.