

Exploring Disability Identity Through Reflexive Songwriting: A Heuristic Self-Inquiry

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## ABSTRACT

### Exploring Disability Identity Through Reflexive Songwriting: A Heuristic Self-Inquiry

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Music therapists have long supported autistic and neurodivergent (ND) individuals, yet support needs are too often defined through deficit-based models rooted in observable behaviours described in the Diagnostic and Statistical Manual of Mental Disorders (DSM). Recently, disabled, autistic, and ND music therapists have begun challenging this framing, calling for approaches that reflect the diversity and lived realities of those we serve. Disability experience itself offers crucial insight into how music therapy might better honour neurodivergent ways of being and foster more inclusive care.

This heuristic self-inquiry aimed to contribute to these first-voice perspectives by exploring what insights might emerge when the researcher, a neurodivergent Certified Music Therapist, engaged in reflexive songwriting to claim a disability identity. The study also sought to examine how this process could deepen her understanding of disability and neurodivergence as identity, inform her ability to identify and articulate support needs, and shape her clinical practice.

Data were collected through journaling and reflexive songwriting, guided by Moustakas' six phases of heuristic self-inquiry, and analyzed using qualitative content analysis. Three main categories emerged: grappling with expectations, resisting expectations, and the courage to look ahead—each with related subcategories. A creative synthesis took the form of a poem that spoke directly to normativity, imagined as a person or collective entity, through which key findings and a forward-looking vision were articulated.

The thesis concludes with a discussion of implications for practice and the researcher's reflections on the multilayered value of reflexive songwriting in exploring disability identity.

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## **Chapter 1. Introduction**

### **Researcher's Relationship to the Topic**

As a late identified neurodivergent woman, my perspective on my life experiences has been shifting in ways that impact all aspects of my life. This includes how I view myself, manage the tasks of daily living, and work with music therapy participants. In an effort to live up to normative standards, I have spent my life trying fruitlessly to change personal characteristics and traits connected to disorganization, social and communication differences, and learning disabilities. I have lived with depression, anxiety, and chronic pain for much of my life, likely due to the stress of trying to live up to normative expectations related to organization, productivity, and communication. As I consider and reconsider myself through a disability-affirming lens, I cannot help but wonder what life might be like if I understood and asserted my support needs differently; and, how exploring the process of asserting my support needs might inform my music therapy practice with neurodivergent individuals.

Inevitably, these personal questions have filtered into my thinking about how I practice music therapy. I have struggled to keep up with the demands of a music therapy practice amidst the demands of motherhood and the tasks of daily living, finding it difficult to balance health needs with economic ones. Additionally, many of my clients identify as neurodivergent, or are likely neurodivergent, but resist the label because of internalized ableism or lack of information about neurodiversity – both of which may well prevent them from considering that their struggles may stem from their own neurodivergence and from repeated attempts by others to provide support in the form of normalizing strategies. While deficit-based labels can be stigmatizing, I have found that a neurodiversity-affirming framework has helped me to recognize the value inherent in exploring my experience of claiming a disability identity and the possible implications of that exploration for my music therapy practice.

### **Significance and Need**

There is a strong tradition, spanning many decades, of Certified Music Therapists in Canada and around the world supporting autistic and neurodivergent (ND) people (Amirah et al., 2023; Anwar & Yasin, 2024; Pater et al., 2022; Reschke-Hernandez, 2011). Some music therapy literature suggests that support needs are often identified according to observable Diagnostic and Statistical Manual of Mental Disorders (DSM) symptoms rather than from engaging with the lived experiences of ND individuals (Davies, 2022; Gottschewski, 2022; Pickard et al., 2020;



Shaw et al., 2022). These deficit-oriented support needs regrettably lead to the development of goals that aim to target behaviours that are deemed non-normative or unacceptable and increase “normal” and acceptable behaviours. For example, work with ND people often focuses on goals that aim to improve or enhance neurotypically valued social communication skills, such as eye contact, cooperative play, and social and emotional reciprocity (Bergmann, 2015; Pater et al., 2021). Other goals include decreased stimming/repetitive behaviours, improved speech rather than other forms of communication, and reduction of other behaviours deemed disruptive (De Vries et al., 2015; Koifman, 2023).

The recent emergence of disabled music therapist perspectives, including the perspectives of autistic and ND music therapists, has led some in the profession to fundamentally rethink the knowledge traditions that inform music therapy practice with neurodivergent individuals. They have suggested that we take up new ways of identifying, understanding, and working with the support needs of disabled, and specifically ND, people; and, they argue that our practitioners should reflect the diversity of the clients with whom we work (Davies, 2022; Gottschewski, 2022; Pickard et al., 2020; Shaw et al., 2022). They, therefore, assert that the lived experiences of disabled music therapists offer contextualized perspectives on the disability experience that can provide important insights for reimagined and diverse ways of practicing that can more effectively meet the needs of our clients. Pickard et al. (2020), for instance, argue that if we ground our practice in the neurodiversity paradigm, our clinical work may seek to maximize an autistic person’s capabilities without trying to erase evidence of their autistic self. Rather than using music therapy to promote neurotypically desirable behaviours and eliminate neurotypically undesirable ones, they argue that therapists should use music to enhance the individual’s life. Goals could be centred around self-expression, deeper social connectedness, and acceptance of self (Pickard et al. 2020). Bruce (2022) similarly problematizes support approaches grounded in normalization. She asserts that when using music as a tool for normalization we reinforce “neoliberal ableist ideals of independence, autonomy, and productivity” (p. 126) and risk obscuring how music can be utilized as a health resource in the lives of disabled people. Therefore, the aim of this study was to explore what insights emerge when a neurodivergent certified music therapist engages in reflexive songwriting to explore her experience of claiming a disability identity. Reflexive songwriting was chosen for two main reasons. Firstly, I spent my twenties as a professional singer songwriter and have found songwriting to be a meaningful

means of deepening my self-understanding. Furthermore, songwriting offers an effective means of exploring identity by inviting critical reflexivity. Songwriting can foster positive changes in behaviour and thought patterns, enhance one's understanding of their true self, and help individuals recognize the meaning and purpose in their lives. It also promotes a sense of empowerment and independence, increases awareness of inner resources, and can lead to a stronger personal and musical identity (Baker, 2015).

### **Primary Research Question**

The primary research question that guided this inquiry was: What insights emerge when I, a neurodivergent Certified Music Therapist, engage in reflexive songwriting to explore my experience of claiming a disability identity?

My subsidiary questions were (1) How might these insights influence how I understand and connect with disability and neurodivergence as identity? (2) How might these insights inform my capacity to identify and articulate my support needs? And (3) How might these insights inform my identity and practice as a Certified Music Therapist?

### **Definitions of key terms**

#### ***Neurodivergent***

Neurodivergent, often abbreviated as ND, describes having a mind that operates significantly differently from what is considered to be '*normal*' by dominant social standards. This broad term can be used when describing someone who is largely or wholly neurodivergent due to genetics, or to describe someone who's neurodivergence has been mainly or completely acquired through a change in the brain. Neurodivergent is not a synonym for autistic, and one can be multiply neurodivergent – one can identify as autistic, dyslexic, and as having experienced trauma (Walker, 2021).

#### ***Certified Music Therapist***

A Certified Music Therapist is a trained clinician who purposefully, safely, and ethically uses music within a therapeutic relationship to support health, development, and well-being across a multitude of domains. These domains include cognitive, communicative, emotional, musical, physical, social, and spiritual (CAMT, 2020).

#### ***Reflexivity***

Reflexivity is the commitment of the therapist to observe and evaluate oneself in real time as they work with a client, cultivating the ability to shift their approach or goals as the

circumstance requires. This awareness and flexibility apply to all elements of therapy including the therapist themselves, the client, methods, music, goals, outcomes, etc. (Bruscia, 2015). Songwriting can be an ideal method for engaging in reflexivity; its flexible, narrative nature makes it well-suited for supporting self-reflection, critical self-examination, identity exploration, and meaning making (Baker, 2015).

### ***Songwriting***

Songwriting involves transmitting information using lyrics and music to tell stories or express feelings (Baker, 2015; Wigram & Baker, 2014).

### ***Disability***

Disability is part of being human and is the result of the interplay between an individual's health condition and the environment they live in. Disability is shaped significantly by environmental barriers such as inaccessible housing, transportation, and public buildings, as well as by negative social attitudes and insufficient support. The severity of these barriers directly affects the degree of disability experienced (WHO, 2024).

### ***Disability Identity***

Disability identity is a unique occurrence that shapes a person's way of understanding themselves and their bodies in relationship with the world and others. Individuals with a disability, visible or invisible, must navigate the biological and physical nature of their disability and their impairments as well as the social meaning assigned. The negotiation of these two aspects takes place in relationship to intersectional identities such as race and gender and provides unique contributions to identity independent of other aspects (Forber-Pratt et al., 2017).

### **Summary of Chapters**

This heuristic self-inquiry has been organized into 5 chapters. Chapter 1 outlines my personal connection to this topic area and study along with the significance of and need for this research. The purpose of this heuristic inquiry, the research questions, and definition of key terms follow. Chapter 2 presents the literature as it pertains to the topic of this study. Chapter 3 provides details of the research methodology used for this study, heuristic self-inquiry, including the procedures for data collection and analysis. In chapter 4, the results of the data analysis are presented. Finally, chapter 5 contains a creative synthesis in the form of a poem, limitations of the research study, and personal, clinical, professional, educational, and research implications.

## **Chapter 2. Review of Related Literature**

For a little more than a decade, disabled and intentionally allied music therapists and music therapy scholars have been articulating what they have arguably framed as a troubling relationship between disability and the music therapy profession (Bruce, 2022; Cameron, 2014; Davies, 2022; Gottschewski, 2022; Pickard, 2022; Shaw, 2022b). In this chapter, I will explicate current literature grounded in critical disability analyses of music therapy and disability and elucidate how it describes this troubled relationship through three sections. First, I will examine literature related to the described deficit orientation to disability within the music therapy profession and explore how this orientation generates therapeutic responses grounded in attempts to promote the normalization of disabled people. Second, I will examine literature that articulates the implications of this deficit thinking and resultant normalization for disabled music therapists and music therapy participants. I will then conclude with an overview of what the literature tells us about how music therapy might reimagine its relationship with disability and of how music can be mobilized as a meaningful health resource for disabled and neurodivergent people.

### **Music Therapy and Disability: A Deficit Orientation**

Since 2014, disabled scholars and those aligned with the principles of critical disability studies have asserted that the profession of music therapy has cultivated a troubling relationship with disability. Their substantive critiques are grounded in assertions that the profession has become increasingly deficit-oriented, and even saturated (Shaw et al., 2022) because of its efforts to gain recognition within medically-oriented professions (Cameron, 2014). These authors have also critiqued the profession's uncomplicated relationship with humanism and its focus on autonomy and independence, and they have highlighted goals of normalization as particularly problematic (Shaw, 2022b). They point to the medical model of disability and its alignment with ableist perspectives, which are entirely focused on remediating deficits, as the dominant approach to disability. However, critiques also emphasize the social model and its focus on environmental barriers as a fairer foundation for our work (Bruce, 2022; Davies, 2022; Gottschewski, 2022; Gross, 2018; Pickard, 2022; Shaw, 2022b).

### ***Medical and Social Models***

Scholars and activists alike recognize ableism as the belief system that perpetuates the above-cited alliance with the medical model and its deficit-orientation. Wolbring (2009) defines ableism, in part, as the discriminatory and oppressive behaviours that stem from the belief that

people who do not possess certain valued abilities or traits are inferior to those who do. In this belief system, “*Normal* is a dominant organizing force that has garnered significant power from the tacit belief that, in the natural order of things, human behavior, intelligence, and ability will cluster around or markedly deviate from a statistical norm” (Dudley-Marling & Gurn, 2010, as cited in Bruce, 2022, p. 126). Although no clear consensus has been reached about the specific behaviours and practices that can be called ableism, there does seem to be some agreement that core to ableism is the belief that an impairment or disability is inherently undesirable. There also appears to be a common assumption that if one could cure or minimize the impairment, one would (Campbell, 2008). This deficit orientation to disability is grounded in ableist beliefs; and those beliefs produce responses that aim to remediate, cure, or encourage overcoming through normalizing strategies of disability containment (Campbell, 2008). Music therapy, in this way, is arguably aligned with many allied health professions that all too often engage with disability as undesirable and, as such, in need of amelioration or cure (Bruce, 2022; Davies, 2022; Gottschewski, 2022; Pickard, 2022; Shaw, 2022b).

Several disabled and allied music therapy scholars have accordingly cited music therapy’s reliance on the medical model, a model that views disability as an individual condition or limitation to be remediated or cured, as core to this troubled relationship (Bruce, 2022; Cameron, 2014; Gottschewski, 2022; Gross, 2018; Rolvsjord, 2014; Shaw, 2022a). Cameron (2014), in particular, problematizes the medical model and articulates a strong critique of what he argues is music therapy’s problematic allegiance. He convincingly argues that the profession’s concern for gaining recognition within medical spaces is key to this problematic relationship. He cites the profession’s effort to prove itself as a worthy clinical modality as the motivation for this medical model alignment and its often pathologizing stance. This is unfortunate, Cameron (2014) asserts, because it means that the very things music therapy aspires to do to be considered a serious profession through a medical lens, and the profession’s alignment with the goals of normalization, are the very things that make it a problematic venture from the perspective of critical disability studies.

The social model, in an important contrast, aims to disrupt how we view disability by positioning it as the outcome of an oppressive social relationship rather than an individual condition – a model articulated by disabled people themselves (Oliver, 1990). This orientation asserts that the environment is powerfully influential in the realm of constructed barriers to

participation for disabled people in all aspects of life. Social, structural, and economic barriers to participation are more disabling than the impairments people live with (Oliver, 1990). The social model also intentionally distinguishes between impairment and disability. Impairment is, “the loss or limitation of physical, mental or sensory function on a long-term or permanent basis” (DPI, 1981, as cited in Barnes, 1992, p7). Disability, on the other hand, is “the loss or limitation of opportunities to take part in the normal life of the community on an equal level with others due to physical and social barriers” (DPI, 1981, as cited in Barnes, 1992, p. 7).

### ***Influence Of Industrialization***

There are important links between industrialization and the medicalization of disability, and this linkage can help us understand the growing focus on normalization as a strategy whose aim in this context was to increase individual productivity and independence (Cameron, 2014). This focus only served to deepen the roots of ableism and its belief in disability as a medical condition that was inherently problematic. Before the industrial revolution, disabled people were, in fact, an unexceptional part of the fabric of society, and they worked collaboratively and inclusively in many aspects of ordinary life (Barnes, 1997; Davis, 2022; Oliver, 1990). Industrialization, however, led to a move away from a subsistence economy and toward a wage economy. This economic shift produced an increased focus on the value of efficiency and productivity which, in turn, led to new social rules that demanded conformity and normalization (Cameron, 2014). People with impairments were increasingly seen as problematic and, consequently, they were excluded from employment because they were deemed incapable of meeting these new social expectations. This increased the marginalization and, perhaps most troublingly, the institutionalization of people with impairments. It also led to the hiring of vast numbers of professionals to medically manage the lives of disabled people (Goble, 2014).

### ***Responding to Disability Through Normalization***

Several authors have asserted that music therapy reflects the ableist context in which it is practiced. The medicalized environment forged by industrialization is the one into which a number of music therapists have been hired. An increasing number of disabled music therapists are asserting that the profession’s often uncritical alignment with dominant theories and support approaches, such as normalization, humanism, and deficit remediation can produce harm that is largely under-represented in the literature. They articulate how responding to disability as a deficit leads to strategies of normalization that demand overcoming and the containment of

disability, so it does not become an imposition on others (Bruce, 2022). These first voice scholars have rightly criticized how our profession has, in many ways, taken music, a resource that has the potential to disrupt hierarchies, provide pleasure, and deepen connection to self and others (Ban, 2022; Rolvsjord, 2014), and turned it into a mechanism for control, assimilation, and normalization in the lives of many disabled people (Bruce, 2022; Gottschewski, 2022). This has made the music therapy profession complicit, even if unwittingly, in the perpetuation of the notion that disabled people's worthiness and belonging are contingent on how successfully they appear to overcome, or minimize the effects, of their disability on themselves and others (Bruce, 2022; Davies, 2022; Gottschewski, 2022; Pickard, 2022; Shaw, 2022a).

Music therapists and music therapy education and training programs have done important work to move away from medicalization and pathologization and to center theories, like humanism, that are grounded in unconditional positive regard. However, ableist principles continue to be embedded in many of these approaches and lived disability experience is largely absent. Humanism, for example, "a progressive philosophy of life that, without theism or other supernatural beliefs, affirms our ability and responsibility to lead ethical lives of personal fulfillment that aspire to the greater good" (AHA, 2019), presents a narrow definition or conceptualization of the ideal human (male, white, rational, non-disabled, etc.). When we align uncritically with humanism, we risk reinforcing rather than disrupting aims of normalization (Shaw, 2022b). Humans are naturally diverse with brains and bodies that vary widely in form and function (Straus, 2014). However, what has been considered normal and healthy has varied widely across time and place; and, in our time, what is considered normal and healthy has, arguably, narrowed considerably in relation to the medicalization of disability and the pathologization of human difference (Straus, 2014). Regrettably, societal expectations that require disabled people to fit into this increasingly narrow framing of normal lead them to internalize the belief that the only thing good about their disability might be to demonstrate an ability to overcome it (Bruce, 2022). Although music therapy education and training programs have done important work to increasingly centre equity and social justice in the curriculum, much work remains related to the intentional integration of disability studies principles and lived disability knowledge. Therefore, there is ongoing, even if unintentional, perpetuation of the problematic aims of normalization (Bruce, 2022).

Key differences between the deficit-focused aims often articulated in music therapy and the goals of critical disability studies have led some disabled music therapists to question the profession's compatibility with their activist aims. In fact, these differences have led some to question music therapy's potential as a socially just profession (Cameron, 2014). While disability studies scholars are primarily interested in goals that are supportive of liberation, music therapists, when working in alignment with the medical model, centre goals that promote normalization – an orientation that some disabled scholars largely assert is an inherently oppressive stance (Cameron, 2014). Regrettably, a number of training programs continue to exert a problematic influence on the direction of the music therapy profession by maintaining a focus on work that aims to promote normalization therapy (Pickard et al., 2020). While this normalizing focus is regrettable, there is literature that suggests a more liberatory path is possible. At the end of the literature review I point to anti-oppressive work that suggests we can move in a more just direction.

### **Implications of Deficit Thinking**

According to the literature, when deficit-based understandings of disability are enacted in therapeutic contexts, they can cause significant harm. They shape how others view disabled people, how disabled people see themselves, and ultimately lead to the loss of the unique and valuable contributions disabled people can offer society. One key implication of an unrelenting focus on deficit can be found in definitions of ableism that situate some individuals — white, straight, male, non-disabled, neurotypical, and good looking — as fully human, and others — disabled—as less than human (Shaw, 2022b). This undergirds our attempts, as disabled people, to overcome disability, work to approximate normal, and essentially deny who we are in favour of becoming, or approximating, that illusive abled other (Bruce, 2022).

### ***Barriers to Positive Disability Identity***

The harmful consequence of society's collective framing of disability as a deficit only strengthens already existing narratives that disability is nothing more than an individual or family tragedy (Oliver, 1990). This framing of disabled people as inferior creates a massive barrier to claiming a positive and authentic identity. It leaves disabled people with the instruction that they should view fundamental aspects of themselves as negative, and that they must find a positive identity through changing, obscuring, or '*overcoming*' their impairments (Bruce, 2022; Davies, 2022; Shaw, 2022b). For example, autistic adults have repeatedly criticized a collective framing



of autism as a tragedy and draw specific attention to the harm that is done to autistic people when parents state that they wish their child's autism didn't exist. There is no child hidden behind the autism. Autism is an integral aspect of the nature of the autistic child and a wish to rid the autism is a wish to rid the child and replace it with a completely different one (Pickard et al., 2020). This attitude toward diverse forms of disability as pathology demands that disabled individuals navigate an impossible bind—authentic self-expression without social belonging, or the erasure of disabled identity as the price of inclusion (Bruce, 2022; Davies, 2022; Gottschewski, 2022; Pickard et al., 2022; Shaw, 2022b).

Music therapy's orientation to disability as a pathology is also a key mechanism for the reinforcement of the power-laden binary of a superior therapist who can offer answers to an inferior '*client*' (Gottschewski, 2022; Rolvsjord, 2014; Shaw, 2022a). This stance ties the therapist up in a hierarchical binary of "*weak client-expert therapist*" (Individual Agency Versus Social Constraint, para 3), a troublesome premise upon which to provide therapy services because it reinforces harmful notions of disabled inferiority (Rolvsjord, 2014). This is a powerful reinforcer of barriers to the cultivation of a positive identity, and it risks therapists themselves becoming a disabling force in the lives of their clients (Rolvsjord, 2014). It also potentially feeds into a sense of helplessness because it may render participants powerless in relation to a presumably superior professional who they may believe holds the answers to their perceived problems (Bruce, 2022; Gottschewski, 2022; Pickard et al., 2022; Rolvsjord, 2014; Shaw, 2022a).

Furthermore, the literature highlights significant consequences for disabled people when normalization becomes the primary goal of support and intervention. This approach often sidelines strategies like maximization (Pickard et al. 2020), which aim to help disabled people build "good disabled lives" (Bruce, 2022, p. 126). When deficit thinking dominates, a "good disabled life" is frequently equated with minimizing or overcoming disability traits. This not only obscures the value of embracing a proud disabled identity but also undermines access to life-enriching resources—such as music and other leisure activities—for pleasure, connection, self-expression, and discovery (Bruce, 2022; Davies, 2022; Gottschewski, 2022; Pickard et al., 2020; Shaw, 2022a). Most concerning, this normalization agenda can intrude upon, and diminish the impact of, some of the most affirming aspects of disabled people's lives, such as music participation and other forms of creative expression (Ban, 2022; Bruce, 2022).

One of the ways in which the aims of normalization can be reinforced is through the words we use to describe what we perceive to be disabled peoples' deficits. These words can carry unconscious and yet harmful ableist assumptions about disabled people that reinforce the power of normal (Bruce, 2022). Referring to a disabled person's inability to accomplish a task, for example, as '*lazy*' misses the true lived experience of the individual's disability-related struggle and is experienced as a microaggression. Disturbingly, when the language used to describe a disabled person's perceived deficits carries the assumption that the person's inabilities are purposeful and immoral — like in the example of framing the inability to complete a task as '*lazy*' — the disabled person is left with the instruction to approximate '*normal*' rather than seek support or accommodations. This can have devastating consequences, like chronic physical and mental health challenges (Warren, 2023).

### ***Loss of Disabled People's Meaningful Contributions***

Unfortunately, treating disability as a pathology—rather than a natural and valuable aspect of human diversity—also risks excluding the meaningful contributions disabled people bring to many areas of life (Bruce, 2022; Gottschewski, 2022; Pickard, 2022; Shaw, 2022b). Deficit-based approaches pressure disabled people to conform to abled norms, which can erase the distinct insights that emerge from lived disability experience. In music therapy, when training programs and practices fail to accommodate disabled students and professionals, the field loses vital perspectives shaped by lived disability expertise (Pickard, 2022; Shaw, 2022b; Warren, 2023). These barriers—combined with the compulsory abledness (Campbell, 2008) that is embedded in education and training—mean that few disabled people enter the field, and those who do often feel pressured to mask their identities in order to belong, further risking the loss of their perspectives in the field (Pickard, 2022). Regrettably, ableist statements and sentiments that imply that music therapists with lived experience of disability are a problem can be found widely in codes of ethics, music therapy literature, and practice standards (Shaw et al., 2022). Shaw et al. (2022) remind us that if disabled music therapists “are marginalised in our profession, so too are the people we work with” (p. 150).

### **Calls to Action**

Disabled and allied music therapy scholars and practitioners are, in varying ways, calling us all to action, and they have clear expectations for us all to consider. They assert that we must begin by explicitly acknowledging the presence of ableism in the profession and centre disabled

voices in music therapy discourse, research, education, and clinical practice. They assert that we must challenge and disrupt neoliberal values, like self-reliance and individual productivity, and conceptualize the use of music for maximization to disrupt the dominant use of music to promote normalization.

### ***Acknowledge the Presence of Ableism***

According to the literature, to repair our profession's troubled relationship with disability, we must begin by acknowledging the presence of ableism in the profession and take substantive action to dismantle it. It is essential to do this explicitly if we are to realize music therapy's potential to become a more socially just profession (Bruce, 2022). Bruce (2022) urges us to engage in the “unsettling process of considering how our work, when carried out uncritically, can make us complicit with the ableist aim of compulsory Abledness” (p. 130). Without intentional effort to see and dismantle it, ableism can persist beneath our awareness, remain socially accepted, and continue to be reproduced (Bruce, 2022; Pickard et al., 2022; Shaw, 2022a).

### ***Disrupt Neoliberal Values***

As demonstrated in the literature, a key component of dismantling ableism in music therapy relies on disrupting the influence of neoliberal values like independence and productivity. To do so, we must critically consider our philosophical and theoretical orientations and make explicit any ableism baked into these systems (Bruce, 2022; Gottschewski, 2022; Shaw, 2022b). It is important to carefully examine and clarify our values as a profession. We need to consciously distance ourselves from theoretical orientations that, often unconsciously, reinforce ableism through values that tie human worthiness to productivity and the ability to be self-reliant. Instead, we can intentionally rely on frameworks whose values—such as collaboration, human diversity, and innate human worthiness—align with what we profess to stand for (Gottschewski, 2022; Pickard, 2022; Shaw, 2022b). Importantly, this disruption must also include critically reviewing and changing pathologizing and dehumanizing language that presents disability as pathology (Rolvsjord, 2014; Shaw, 2022b; Warren, 2023).

Bringing this critical lens to our theoretical frameworks requires rigorous intellectual effort. Although theory is not always accessible or engaging, a lack of critical awareness about the theoretical frameworks shaping practice can result in practitioners being unknowingly constrained by values that are not their own (Shaw, 2022b). Thankfully, developing a deeper

understanding of these theoretical relationships—and exploring alternative frameworks—can be a transformative and energizing process (Shaw, 2022b).

Notably, a key part of disrupting the influence of neoliberal values in music therapy requires that we move away from the medical model of disability and support approaches that promote normalization. Instead, we must ground research, education, and practice more substantively in the social model of disability and other anti-oppressive frameworks (Baines, 2021; Brault et al., 2025; Bruce, 2022; Davies, 2022; Hadley, 2013; Pickard, 2020; Shaw, 2022b). Academia is, according to many critical disability studies Scholars, an ableist institution and “the training ground for the professions of normalcy” (Pickard, 2022, p. 5). Because professional training shapes the values, perspectives, and philosophies of a field, it is essential to actively disrupt ableist assumptions at every level of music therapy education (Pickard, 2022; Shaw, 2022a).

Encouragingly, the literature offers compelling alternative theoretical frameworks to support this disruption. Pickard (2022) presents a critical disability studies perspective on the possibilities offered by a social justice-informed curriculum. She explicates the potential of using Kumashiro’s 4 typologies of anti-oppressive education for disrupting ableist norms and for consciousness raising in the music therapy profession. Some recommendations resulting from this work were to: review and amend recruitment processes to reduce barriers for disabled students; create spaces and opportunities for disabled students to connect with each other if they desire; support students to develop a nuanced understanding of race, power, oppression, and privilege through an intersectional lens; and integrate awareness of Otherness at all stages of training (Pickard, 2022).

Shaw (2022a) similarly offers an alternative and arguably more liberatory theoretical framework, post ableist music therapy (PAMT). PAMT offers music therapists another lens to use in conjunction with pre-existing theories, one that aims to unpack problematic aspects of humanism and explore new relational, non-hierarchical possibilities through post humanism. In the creation of PAMT, Shaw (2022a) explicitly steps away from the ableist values of humanism, and instead explicitly places value on non-normative ways of being and music-making. A value on independence is replaced with a value on interdependence, and a value on conforming to the narrow neoliberal human ideal is replaced with a value on diversity. Encouragingly, in their reflective essay in *Music Therapy Perspectives*, Shaw et al. (2022) describe how music therapists,

working from a position of post-ableist music therapy, can collaboratively provide conditions and musical experiences that are less disabling and restrictive through addressing barriers and facilitating connections.

Ultimately, critical self-reflection in music therapy is necessary for disrupting the neoliberal values that maintain ableism. This requires deeply interrogating our own privilege alongside the ways we might be marginalized, and it necessitates the use of a range of contemporary seminal readings that can support the kind of reflexivity required to unlearn potentially oppressive practices (Pickard, 2022). Importantly, when supervisors and lecturers openly reflect on their own biases around disability, they can indicate that the environment is a place for actively thinking about and acknowledging ableism — therefore playing an active and pivotal role in the complex and collective dismantling of ableism in music therapy (Shaw et al., 2022).

### ***Centre Lived Experiences/Centre Disability Studies***

Regardless of the exact philosophical or theoretical orientations put forward, disabled and allied music therapy scholars and practitioners were united in a call to centre the lived experience of disabled people and disability studies as key sources of knowledge that must inform any efforts to reimagine the music therapy profession (Bruce, 2022; Davies, 2022; Pickard, 2020; Shaw, 2022a). While social justice has increasingly become a focal point in music therapy education and practice, disability studies remain underrepresented and insufficiently integrated (Bruce, 2022; Davies, 2022; Gottschewski, 2022; Pickard, 2020; Shaw, 2022a).

If we are to prioritize and center the lived experience and knowledge of disabled people, we must have disabled people represented in the profession (Shaw et al., 2022). Disabled music therapists engaged with disability as a politicized identity offer important contextualized insights. Through lived experience, and they are perfectly situated to help reshape music therapy and disability discourse, research, education, and clinical practice (Bruce, 2022). However, the research highlights a significant underrepresentation of disabled music therapy students, educators, and practitioners. One key pathway to ensuring disabled people are represented, is to ensure that training programs are accommodating to disabled students since “disabled students become disabled therapists” (Shaw et al., 2022, p. 143). The literature suggests that an underrepresentation of disabled people in the profession is likely due in part to barriers in music

therapy training programs that disproportionately impact disabled students, including pre-requisite knowledge acquisition (Shaw et al., 2022).

To create more inclusive music therapy programs, it is critical that educators actively support diverse ways of learning, being, and practicing. This means valuing non-normative approaches, such as nonlinear thinking, sensory-based learning, and alternative communication styles as valid and important contributions to the field (Shaw et al., 2022; Warren, 2023). Programs become more actively welcoming to disabled people when reflection on course content is encouraged, especially when ableist perspectives are present, and students should be supported in challenging dominant narratives (Pickard, 2022; Shaw et al., 2022). Educators modelling the confrontation of their own biases can go a long way in communicating that the environment is a safe place to grapple with sensitive and often uncomfortable material connected to how ableism is transmitted through unconscious human behaviour and biases (Pickard, 2022). For students to adhere to ethical social justice focused principles in practice, dissent as a key aspect of social justice work must be intentionally integrated at each level of training (Brault et al., 2025). Attempts at mobilizing social justice in education must be rooted in a pluralistic ethos that values diverse ways of being, thinking, learning, and knowing (Brault et al., 2025). Furthermore, centering disabled voices in curricula, mentorship, and faculty positions enhances disability visibility, fosters pride and community, and helps disabled students form empowering professional identities (Warren, 2023). It is important to recognize the impact of the institutions that music therapy training programs reside in when thinking about this important paradigm shift. Universities, for example, have certain expectations that programs must adhere to like class size, enrolment, and content expectations. Training programs also adhere to practice standards set by professional associations. Therefore, rethinking these structures will be important if we want to see changes in what is covered in the curriculum (Pickard, 2022, Shaw et al. 2022). Pickard suggests Young's (2006) social connection model of responsibility which states that this paradigm shift requires all parts of the social environment to usher in this change. Administrators, supervisors, educators, practitioners, researchers, faculties, and students must share in the responsibility. Recognizing lived experience as a source of expertise is critical in enabling disabled students and professionals to shape the future of music therapy theory, practice, and research (Shaw et al., 2022).

### ***Music for Maximisation***

At the crux of so many of the arguments for the inclusion of disabled perspectives is the assertion that the dominant focus in music therapy with disabled people has been the use of music for normalization. Accordingly, many researchers and practitioners in the field have articulated a call to disrupt this objective and centre the use of music for maximizing participants capacity to live well as disabled or neurodivergent people (Pickard et al., 2022). This can disrupt the harmful focus on normalcy and allow for diversity (Bruce, 2022; Davies, 2022; Gottschewski, 2022; Pickard et al., 2022; Rolvsjord, 2014; Shaw, 2022a). As conceptualized by Winter (2012), maximization focuses on valuing people as they are and supporting growth without requiring them to overcome or reduce their disabled traits. This approach challenges the ableist assumption that disability is inherently bad, which frees up resources to support a ‘*good disabled life*’ as defined by participants themselves (Bruce, 2022; Pickard et al., 2022). This focus rejects goals rooted in making disabled people easier for others to tolerate through normalization—a practice that is inherently oppressive (Bruce, 2022). When music is used for maximization, it can strengthen connection to self and others (Gottschewski, 2022), support emotional expression (Davies, 2022), aid communication (Ban, 2022), and help navigate sensory experiences (Ban, 2022). Furthermore, music used for maximization can be powerful in fostering a positive and proud disabled identity (Shaw et al., 2022) and providing the joy that is so often obscured when normalization is enforced (Pickard et al., 2022). Music can also be powerful in disrupting the false binary of “superior therapist” and “inferior client” (Rolvsjord, 2014) and allow for and celebrate participants to fully be themselves and to engage in music therapy as a space for authentic expression and empowerment (Gottschewski, 2022).

Music therapy scholars call for the profession to actively confront and dismantle embedded ableism, reject neoliberal ideals of productivity and normalization, and shift toward values of collaboration, interdependence, and innate human worth. This includes replacing medical-model frameworks with anti-oppressive approaches informed by critical disability studies, centering disabled leadership and lived experience, and fostering inclusive education and training. Rather than aiming to ‘*normalize*’ clients, music therapy should focus on maximizing each person’s capacity to live well as they are, using music to nurture connection, expression, sensory navigation, and joy (Ban, 2022; Bruce, 2022; Davies, 2022; Gottschewski, 2022; Pickard et al., 2022; Rolvsjord, 2014; Shaw et al., 2022).





## **Chapter 3. Methodology**

### **Research Design**

Heuristic inquiry is a methodology that was designed to examine and discover the meaning and nature of internal processes and to capture this deep knowledge in the service of applying the truths that are gathered to a wider social context (Moustakas, 1990). The researcher should, accordingly, explore a question that holds deep personal interest and significance in a search to better understand oneself and one's world. Because the deepest knowledge comes through one's direct experiences — senses, perceptions, judgments and beliefs — heuristic self-inquiry is an ideal methodology for exploring the complexity of claiming a disability identity, exploring my support needs, and considering the implications for my music therapy practice and the profession of music therapy more broadly (Moustakas, 1990). The six methodological steps, which will be described in the next section, include initial engagement, immersion, incubation, illumination, explication, and creative synthesis.

### **Delimitations**

Some delimitations were applied to the present study to align with the scope of a Master's thesis. I was the sole participant, and the data collection took place through a structured and time-limited songwriting and journaling process over a 4-week period in May and June of 2024. Related literature was limited to scholarly articles and primary source books published in English after 2010. Seminal works published earlier than 2010, however, were included to ensure that foundational literature was utilized.

### **Validity**

For a heuristic inquiry to be considered valid, the findings must emerge after deep inquiry and converge in a way that faithfully represents the lived experience of the participant(s) (Moustakas, 1990). As the sole participant, I was responsible for conducting the inquiry fully and honestly detailing any insights gained through the process. I was also responsible for deciding if the findings of the inquiry were an accurate and meaningful representation of my lived experience. For accountability to academic and methodological rigour, I met regularly with my thesis advisor and kept a researcher journal to document my thought processes — a journal that was separate from the journaling I undertook during the data collection process.

## **Materials**

The research materials included a guitar, electric piano, and banjo for songwriting, a personal laptop computer with audio recording capabilities to capture songwriting sessions, and a word processing document for lyric writing and journal reflection. A notepad and pencil were also used to provide another option for journaling and song notation, and a personal mobile phone with audio recording capabilities was used as an additional option for capturing songwriting sessions.

## **Data Collection and Analysis Procedures**

This study utilized the six stages of Moustakas (1990) heuristic inquiry methodology to guide data collection and analysis. These stages include initial engagement, immersion, incubation, illumination, explication, and creative synthesis. In the initial engagement phase, the researcher identifies a topic of intense personal interest and significance. The topic should hold at once deep social and personal implications (Moustakas, 1990). In this phase, the researcher encounters the self and reflects on important relationships and social factors (Moustakas, 1990).

I encountered my topic and articulated my question through time spent reading articles and autobiographical information written by neurodivergent (ND) people, journaling, and meetings with my thesis supervisor. I also spoke with peers who identify as ND, each sharing aspects of our experiences and reflecting on our own biographies through this new lens of ND. I reflected on the theme of neurodivergence in an intense way for approximately 12 months, and this initial engagement period helped me to clarify my core concern. This led me to develop a question that holds tremendous personal interest and motivation. I wondered what insights might emerge through using reflexive songwriting to explore and claim a disability identity and how these insights might shape my self-understanding and inform my capacity to identify and articulate my support needs. I further wondered how these insights might inform my capacity to inhabit a music therapist identity; and this wondering led to the articulation of the research questions contained in Chapter one.

During the immersion phase, the researcher deeply explores their question by reflecting on real personal and professional experiences related to the question, reading about related topics, and immersing oneself completely in any activities related to the topic. This phase requires the researcher to become intimately acquainted with the question, to live with it and focus on it

intensely throughout. This phase of the research should be bound by a pre-established time frame (Moustakas, 1990).

I chose reflexive songwriting to center my data collection because of my long history of using songwriting as a medium for self-exploration, as well as its strong potential to foster reflexivity. Its flexible, narrative qualities make it particularly well-suited to supporting processes such as self-reflection, critical self-examination, identity exploration, and meaning-making (Baker, 2015). I did, however, remain mindful of potential disadvantages related to my familiarity with songwriting to mitigate any risk that the process might not provide the depth of new insight I was seeking. I was also aware of music's powerful capacity to evoke emotion which meant that the emergence of strong feelings might make it difficult to gain clarity in the moment. Nonetheless, songwriting was deemed an appropriate choice in the context of this study because of its potential for deep self-exploration.

Over a four-week data collection period from May 13th to June 3rd, 2024, in a private space in my home and in my partner's office, I engaged in four structured reflexive songwriting sessions. Each songwriting session was approximately seven days apart and lasted for approximately four hours. I used predetermined prompts. In the immersion phase, the researcher should be alert to nuance, patterns, and insights; and should follow instinct, hunches, and intuition while remaining open to the knowledge that comes from direct lived experience (Moustakas, 1990). Therefore, I stayed open to changing the prompts to remain reflexive and ensure emerging insights would guide the process. I accordingly met before each session with my supervisor to confirm that week's prompt which was informed by the data collection from the previous week. The first week's prompt was, "How can I be my authentic self and a music therapist?" The prompt for week two was, "What happens when I lean into the messiness of being me?" In week three I asked, "What does being me enable? And in week four the prompt was, "What would being me in the music therapy space enable?"

Each session began with 15 to 20 minutes of free writing, based on the prompt for the week, to generate ideas for lyrics. This was followed by approximately 2 hours of songwriting based on the prompt and the resultant journaling. Because the songwriting was process oriented, rather than about focussing on an end product, I ended each songwriting session when I felt that all the necessary meaning had been resolved. I was left with mostly partial songs that were meaningful and left me feeling I did not need to complete them at that time because the internal process felt

complete. I will likely revisit and complete many of the songs in the future as I did like the parts that were created. Some of the songs were named, others were not, and all of the songs had chord progressions and melodies that were included in the journal, although none of them felt fully decided and complete and may shift in the future (For song lyrics, please see appendices 1 through 4; and, for representative song clips, please see audio recordings uploaded separately to Concordia Spectrum).

I used mostly guitar, banjo, and my voice to write the songs. I used paper and pencil to keep track of lyrics and chords. I tried using piano, but I did not find I was generating anything meaningful with it. I used audio recording to capture any time of was making sound during the songwriting portion. 15-30 minutes of journaling to document insights after the free writing and songwriting sessions followed. Some of the journaling was kept in a password protected file on my computer which I stored at my home. The song lyrics and other parts of the journaling were kept in a paper journal which I stored in a locked filing cabinet at my home, and audio recordings were kept on my password protected phone.

The incubation period is a time for the researcher to remove themselves from deep study and introspection to allow for the information and experiences to integrate. At this point I took an intentional break of approximately 3 months from June 2024 to September 2024. This integration and rest period is meant to lead to new insights and a fresh perspective on the topic (Moustakas, 1990). As the researcher removes themselves from direct involvement with the topic, an unconscious process of expanded knowledge can take place (Moustakas, 1990). I realized I was ready to return to the topic once I had gone through the process of intentionally letting the topic go. I made sure not to listen to podcasts, read literature, or talk much about the topic to fully disconnect. I realized I was ready to reengage when the topic naturally started to come back to my mind after totally letting it go.

After a hiatus from engaging with the topic, the illumination phase should reveal new insight or revelations allowing for the researcher to understand the principal nature of the phenomenon. The researcher should be open to emergent patterns and themes (Moustakas, 1990). Qualitative content analysis was used to examine and reveal the qualitative outcomes. In this case, the primary source of data was the pre-songwriting journaling, song lyrics, and the post-songwriting reflective journaling. While three primary sources of data may seem like a lot, it is importantly exemplary of my neurodivergent way of working and engaging with the research

process - analyzing all three sources allowed me to engage with the entirety of my learning. Secondary data came from the recorded songwriting sessions themselves (Ghetti & Keith, 2016). The data was coded via open, axial, and selective coding (Williams & Moser, 2019). Each stage allowed me to progressively integrate the emergent themes and continually refine them; and, this process allowed for the creation of meaning and ultimately for theory building (Williams & Moser, 2019).

Once the data were collected and carefully and chronologically organized in one Numbers document, I began the process of open coding. Open coding requires the researcher to read and re-read the data to identify common emergent themes. The researcher creates a short description or title that encapsulates this theme into a category. These categories are broad, open units of meaning (Williams & Moser, 2019). Next, I moved to axial coding. By sifting through the data, the themes that emerged during open coding were further refined, and distinct thematic categories were created with relationships between themes explicitly stated. It was during this phase that theory development began (Williams & Moser, 2019). Theoretical frameworks were further developed and meaning constructed through selective coding. At this point, as the researcher, I crafted the narratives that accurately represented the meaning found through open and axial coding. The three main categories that emerged were grappling with expectations, resisting expectations, and the courage to look ahead. Each had subcategories that are further explicated in chapter 4.

In the explication phase, the researcher develops a more complete understanding of the phenomenon being studied. This was accomplished by comparing and contrasting aspects of the experience to the core nature of the experience (Moustakas, 1990). It was at this point that I made connections between themes and categories that allowed me to explicate the data and where appropriate, make connections to the literature (Williams & Moser, 2019).

In the creative synthesis phase, the researcher brings together every phase of the inquiry and integrates the ideas, insights, and understandings to create a synthesized description of the meaning of the phenomenon experienced (Moustakas, 1990). The synthesis may be expressed as a narrative depiction using verbatim quotes from the data, or it may take the form of a poem, song, drawing, or other creative work. This creative synthesis can only be accomplished through intuitive and tacit knowledge gained through deep emersion in the data during the 5 previous stages (Moustakas, 1990). For the creative synthesis, I wrote a poem with the desire to speak to

normativity which I had conceptualized as a person or group of people as a kind of prompt. Because I often find that my creative ideas come at unexpected times, I allowed myself the freedom to let the poem come when it was ready one night before sleep. I spent time with the poem for the following week making subtle adjustments as they came to me to strengthen the message.

### **Ethical Considerations**

Since the exploration of identity, particularly a marginalized one, can bring up difficult emotions and possibly confusion, I maintained regular work with my counsellor. This ensured that the research would not cause me harm (i.e. feelings or confusion I could not make sense of or resolve) and that the insights gathered from the research were not the result of a therapeutic process but that of a critical, clear, and methodical research approach. I continued regular meetings with my thesis supervisor throughout. I had a small group of close friends who were also exploring their neurodivergent identity, and I maintained a connection with them for increased support because examining myself and life through this new framework has produced times of tremendous intensity. Furthermore, I was careful to protect my child by not naming her and by focusing on my experience and not speaking to hers.

## Chapter 4. Illumination and Explication

This chapter responds to the primary research question: What insights emerge when I, a neurodivergent Certified Music Therapist engage in reflexive songwriting to explore my experience of claiming a disability identity? It also answers the subsidiary research questions which were (1) How might these insights influence how I understand and connect with disability and neurodivergence as identity? (2) How might these insights inform my capacity to identify and articulate my support needs? and (3) How might these insights inform my identity and practice as a Certified Music Therapist? Analysis of the data produced the following three main categories, each with related subcategories.

**Table 1**

*Summary Overview of Categories and Sub-Categories*

Category	Subcategory
Category 1: Grappling with expectations	1a. My struggle to understand and meet normative expectations 1b. Normative expectations and my personal life 1c. Normative expectations and my professional life
Category 2: Resisting expectations	2a. Claiming support needs 2b. Relationships as resistance 2c. Creativity as resistance
Category 3: The courage to look ahead	3a. The power of authenticity in my personal life 3b. Authenticity, courage, and uncovering my professional strengths and contributions

### Category 1: Grappling with Expectations

The songwriting process, journaling, and subsequent data analysis clarified for me that my struggle to claim a disability identity is and was rooted in the difficulty I experienced with meeting normative expectations. Bicchieri et al. (2023) define normative expectations as “what one believes others believe ought to be done” (subheading 2, para 7). In this first category, I will explicate my findings through three domains: My struggle to define and meet normative expectations, the way they show up in my personal life, and the way they show up in my professional life.

### ***Subcategory 1a. My Struggle to Understand and Meet Normative Expectations***

The songwriting, journaling, and subsequent analysis helped me see that I was defining my identity by, and connecting my sense of belonging to, the extent to which I was able to understand and meet normative expectations of daily living. The data also revealed the extent of my struggle to even understand what the expectations are; and, that my invisible disability made completion of associated daily living tasks, like managing schedules, keeping up with domestic responsibilities, and the invisible labour of keeping life organized and running smoothly incredibly challenging. Because I had tied my belonging to my ability to meet these demands, I developed a pattern of doing more than I could possibly manage and also remain well.

My ongoing struggle to meet normative expectations is, I also discovered, connected to how difficult I find it to fully understand, or even define, normative expectations in the first place. I was, therefore, expending significant mental energy to decipher what I should and should not do in any given moment to meet expectations I couldn't understand. I learned, importantly, that as a ND person, I notice different things than NT people do; and, that my perception of what is most important (i.e. the dishes need to be done now versus the need to rest in order to function at all) also differs significantly from neurotypical people. I wrote the following in my week one journal, "The expectations are nebulous, kind of unknown and I seem to think I can figure them out if I work hard enough. This feeling is so familiar." This sentence points to the struggle, but also to what I now recognize as a repeating pattern of feeling that expending tremendous energy, attending to interpreting what the expectations are, and pushing myself, regardless of the cost, to try and fulfil them will fix the problem. Importantly, I learned through this process that my inability to complete these tasks is not an inherent personal flaw. It is related to disability-specific support needs that I did not know I had for most of my life.

Only recently did I learn that I am neurodivergent—and, importantly, that ND people often have different daily support needs than our neurotypical peers. Without this understanding, I spent much of my life simply trying to keep up, pushing myself to complete daily tasks with little or no support. As a result, I neither recognized nor asked for the help I needed to protect my physical and mental health while living my life.

This was a crucial realization: my struggle wasn't about being incapable of completing tasks—it was about the sheer cognitive and energetic toll of constantly trying to keep pace. I've come to see that I may need to do less in a day to stay well. In my week two journal, I wrote: "My



energy is... drained by not being great at these things and feeling shame, and then working extra hard to measure up.” This constant push to meet perceived expectations came at a cost: chronic fatigue, pain, mental fog, shutdown, and a growing disconnection from my own sense of trust and capacity.

This all emerged as integrally connected to the belief that I must meet these impossible expectations to experience a sense of belonging. These efforts, which I had determined were necessary to solidify my place in my family, community, and the world, were regrettably at odds with the work of developing and claiming an authentic disability identity and taking care of myself. This, in turn, created a kind of hyper vigilant outward gaze in me. I became reliant on signals from my environment to guide me rather than attuning to signals from my own body and mind.

This constant adjustment of self to meet the expectations of one’s environment is known as masking, or camouflaging. Masking involves the conscious or unconscious suppression of natural responses, expressions, or behaviours in order to conform to perceived social norms (Nelson, 2023; Psychology Today, n.d.). While all people engage in some degree of social adaptation, neurodivergent individuals—such as those with autism or ADHD—are often socialized to mask in ways that are more pervasive, sustained, and identity-compromising than social adaptation would suggest. This can lead to significant emotional and cognitive fatigue, and in many cases, long-term psychological distress (Gottschewski, 2022). During the songwriting process in week one, I conceptualized myself as an organism creating itself through feedback from the environment. If behaviours received positive feedback, the organism would commit to doing more of the same, if the feedback was negative, the organism would commit to changing the perceived problematic behaviour. I wrote, “I am the web hungry for validation” (Songwriting Journal, Week 1).

### ***Subcategory 1b. Normative Expectations and My Personal Life***

While the previous section highlighted some general impacts of my struggle with normative expectations, this section explores some of the more explicit ways that this struggle shows up in my personal life. Songwriting allowed me to create a dataset of personal contained accounts of experience that revealed the layered and increasingly harmful impact of normative expectations on my personal life. These accounts highlighted the constant pressure I felt to conform to externally communicated norms of acceptable behaviour – conformity that would

mean my presented identity would be deemed acceptable by others. This ultimately created conditions that made it increasingly difficult to develop an authentic sense of self because I was all too often viewed as defective or immoral; judgements that highlight how I was inevitably misunderstood. Such judgement, in turn, generated feelings of shame. Efforts to minimize this shame led to a pattern of masking and, consequently, doing more than I was able to do in any given day and remain well. Ultimately, I learned through the data analysis process that the harms associated with constant masking manifested as low self-awareness, unmet disability support needs, lack of trust in myself, a problematic binary belief in right and wrong ways of doing things, and chronic physical and mental health conditions.

I also learned, importantly, that constant masking had harmfully impacted my most intimate relationships. My difficulty with practical tasks disappointed the people closest to me, and this often led to resentment from others. This resentment produced feelings of shame, and it often generated conflict between myself and my closest people. I also became aware through this experience that my own unmet needs left me unavailable to be fully present with my family; and, perhaps most poignantly, that not fully understanding my own needs interfered with my ability to understand and fully meet my child's needs.

Importantly, I learned as I became immersed in this process that always pushing myself past my capacity to feel, and most critically to be seen as, capable also impacted my friendships and my connection to community. I discovered that I unconsciously viewed anyone who was able to complete everyday tasks associated with domestic responsibilities, to be punctual, and to maintain order and organization as superior to, and even in a position of authority over, me. When I was with those whom I saw as superior, I experienced a constant sense of inferiority and, once again, fell into a pattern of masking.

The data also jarringly illustrated that a lifetime of masking had hindered my ability to develop deep self-awareness, despite great and genuine efforts. My attempts to meet normative expectations required that I silence my experiences, deny my needs, repress my reactions, and stop listening to my own self. This left me without full knowledge of my needs, values, boundaries, strengths, and challenges. Essentially, I was unable to fully develop an authentic identity. In a song from week one I wrote:

How do I find, Myself in here  
The silence so loud, I disappear

Screaming, distorted expectations

Diluting my inner sensations.

This song lyric speaks, importantly, to how difficult it has been to cultivate a true sense of self while working constantly to interpret and meet the expectations that were all around me.

Masking, or the constant checking in with my environment to see if my actions were being validated or criticized, seemed to also create an oppressive binary: the belief that there is always a right or wrong way to do things. This unhelpful belief even showed up in this research process. I found myself immediately grappling with how to journal during the data collection process and I struggled to figure out if writing the journal with a pen and paper or on my laptop was the right decision. Similarly, I often noted in my journal that I wanted to ask my supervisor what to do next, not always because I did not understand the process, but because I was stuck in the right/wrong binary. For me, this experience of wondering what someone in authority thinks I should do was, regrettably, very familiar; and, I now see that it has been a pattern in my life that contributed to a lack of trust in myself and to immobility. In my week one journal I wrote that I had “This unconscious belief that if I try hard enough I’ll “get it right” I’ll figure out some “code of correctness.” This outward focus distracted me from my internal experience and reinforced a reliance on the notion of a superior other.

Interestingly, I saw in the data that trying to figure out the expectations of everyone around me felt counter-intuitive. This is undoubtedly connected to my ND way of being; but rather than seeing this as a reason to trust myself, it further fueled a lack of self-trust and led to continued immobility. I experienced immobility as being unable to move forward, sometimes even in simple tasks. I would often be left with a blank feeling of being stuck and shutting down in situations that required even simple decision making to move forward. Figuring out the expectations was like “Deciphering a language I can’t understand” (Journal, Week 1). Believing that there was a right and wrong way to do things without knowing how to figure out what the specific people around me considered right and wrong seemed to lead me into a state of immobility and indecisiveness. In the same song from week one I wrote:

“How do I know where I go from here

Too many options they all disappear

Numbing the fog of my sensations.”

This sense of being stuck seemed to be driven, in part, by a lack of self-trust and chronic overwhelm from constantly trying to interpret and meet external expectations—barriers that prevented me from accessing the inner wisdom I now know I possess. Trying to meet normative expectations without the ability to do so led to experiences of almost constant overwhelm and exhaustion which, in turn, fueled more immobilization and more erosion of trust in myself - a vicious unrelenting cycle.

Importantly, because I didn't know I was neurodivergent, I was unaware of my sensory needs, and this left me commonly experiencing sensory overload. This had a profound impact on my physical and mental health and on my feelings of self-worth. Sensory overload occurs when one or more of the five senses is overstimulated. This can impact people in various ways (Leonard, 2024). Common responses that emerged for me were feelings of indecision, immobility, irritability, anger, chronic pain, fatigue, and sometimes complete shutdown. Because I didn't understand sensory overload, I assumed I was simply an angry and irritable person—an assumption that led to deep feelings of shame. In reality, it was yet another form of overwhelm that disrupted my ability to attune to myself. In a song from week two I wrote, “No part of me can be found. As I reach for parts of me overwhelmed by the sounds...All I feel is angry/Angry at their aggression, that their screaming leaves no space for me.” This process has made it clear that what I truly needed was to identify and address my sensory needs. However, due to internalized ableism and an unrecognized disability, I had been focused on “*overcoming*” my difficulties—pushing myself to meet expectations I had internalized as reasonable. As a result, I lacked both the awareness and the resources necessary to effectively support my sensory well-being.

Masking also kept me from really knowing and further developing my strongest and most accomplished self which reinforced low self-worth. This excerpt from a song produced in week one of the data collection really highlights this point:

How can I be all I was meant to be  
When the best parts [of] me...  
hide behind  
A face of pretending  
Constantly bending...  
Till I'm erased

Don't know this fraud in its...place.

These lyrics speak to the fact that masking kept me from more fully realizing my greatest strengths, but also to the deep grief I experienced following this realization.

The analysis also revealed that my unacknowledged and unmet disability-related needs made it difficult for me to be fully present with my family and often led to feelings of wanting to be elsewhere. Becoming a parent led to many more practical responsibilities and sensory input, while leaving less time for myself to recharge. Significant life transitions—such as leaving home for the first time, starting college, or becoming a parent—often act as tipping points for undiagnosed neurodivergent individuals. During these periods, the demands of new roles frequently exceed their capacity to mask or camouflage sensory, social, and executive-function challenges. This mismatch can trigger emotional crises, identity breakdowns, and mental health declines (Libsack et al., 2021). I saw that the time and energy spent keeping up with expectations after becoming a mother, left me feeling drained and more distant from my partner and child than I wanted to be. In my journal from week three I wrote, “I feel a bit like I am stealing time for myself and feel this nagging guilt that I am not giving enough to both of them.” This sentence speaks to a pattern of longing to be alone to recharge but feeling guilty for that, and to a longing to feel closer with them, but feeling powerless to make this happen. This was due in part to not understanding my needs, and in part to not having access to the support to meet them. This process has shown me that this difficulty to be present with my family was never because I didn't try hard enough but was due to unmet disability support needs that left me chronically drained and overwhelmed.

What was perhaps most profound for me in this process was learning how my difficulty to understand and meet my own needs interfered with my ability to understand and meet my child's needs. In my journal from week two I wrote, “I have found out that I can't really help her with many of the things she struggles with most until I have learned for myself. Some of what is hardest for her I can't help due to it being hard for me too.” For example, before I began to deeply understand my own sensory needs, my support of her for what I can now identify as sensory related, was unhelpful and often made things worse. Without lived experience and self-understanding, I was at risk of causing harm by misinterpreting her sensory difficulties as behavioral issues—risking the reinforcement of the same shame I had once internalized. Coming

to understand more clearly the harmful impact of masking on myself and the people I loved most was deeply impactful.

***Subcategory 1c. Normative Expectations and My Professional Life***

The songwriting process, journaling, and subsequent analysis revealed to me that my identity as a musician and as a music therapist was also bound up with many of the struggles defined above. I realized how much I have struggled to inhabit both the identity of a musician and a music therapist. Intellectually, I recognized that there were many valid ways to practice music therapy, but I was emotionally stuck in the binary belief that there was a singular right way to practice. My musician identity, on the other hand, was less static – it made space for authenticity while at the same time still generating right/wrong struggles related to performance expectations.

This process helped clarify for me that the professional identity of a music therapist had been one I had never managed to fully inhabit. Again, I struggled to be my authentic self because I repeatedly encountered ill-defined behavioural expectations that extend beyond required professional competencies and that seemed necessary to be deemed worthy of the music therapist role. For example, I didn't feel free to approach problems or ideas in my intuitive and often nonlinear way. My tendency to question norms—especially when they felt unjust—seemed to surprise and sometimes irritate others. I also felt pressure to suppress my natural emotional expressiveness out of fear of being perceived as *'too much.'* My need for repeated clarity around expectations—due to finding neurotypical communication styles difficult to interpret—often left me feeling needy, or out of place. I discovered that, unlike the identity of a musician where creativity and questioning social norms is more commonly accepted, the professionalism required to inhabit the role of music therapist made me feel that I would need to be someone other than my authentic self to be worthy of a professional designation. In week two I wrote, “MT is really broad, there's so many ways to practice and I think I'm trying to find the “right” way (Makes sense when “my” way was always criticized).” Again, this belief in some elusive right and wrong led to not being “sure how to be myself in a professional context” (Journal, week 2). This led, unsurprisingly, to masking and I felt “trapped by external expectations and this ever-looming fear that I'm doing it wrong, missing something fundamental” (Journal, week 2). This process showed me how much the pressure I felt to practice in the *“right way”* kept me from utilizing the full

breadth of what my lived experience of neurodivergence had to offer, and it really stood in the way of developing a positive identity as a music therapist.

Perhaps most profoundly, I can now see that it was my own training to mask and defer to others, rather than trusting my own clinical insights, that led to an inability to look more critically upon unchallenged norms within the profession and kept me from doing the most important work with participants in my practice — work supporting participant wellbeing through goals like increased self-understanding, processing the neurodevelopmental trauma imposed by systems that treat normativity as a prerequisite for belonging, and drawing on shared lived experience. It also includes using creativity to access personal resources such as freedom, identity, self-understanding, and connection to others.

While the professional role of music therapist had been one where I primarily masked, the role of musician had provided two contradictory spaces for me at the same time. On one hand, it had been a place where I felt courageous enough to express myself with authenticity. Music was a space where I saw examples of music and musicians engaging in social norm disruption that inspired me and gave me permission to explore how I might also challenge those norms. Ultimately, I learned how to deeply express true aspects of myself through music. On the other hand, I saw in the data that musical spaces also carried normative expectations that left me feeling the familiar pressure to measure up. In a song lyric from week two I wrote, “Music can be a place to find me/But music can be a place to deny me” (Journal, week 2). Musical spaces, and specifically making music with other musicians, appeared to produce a familiar binary belief that “there’s a “right” way and “wrong” way to be musical” (Journal, week 2).

Surprisingly, an identity that I cultivated as a “People’s musician” (Journal, week 2) surfaced as a potential path of resistance to feelings of musical inadequacy. In music circles I had often heard different types of musicians being distinguished by the terms “People’s musician” and “Musician’s musician”, the latter being a more technically savvy player, appealing to other musicians, whereas the former was a musician focusing on simpler music and appealing to the lay person. As a songwriter, I have often taken pride in my love of and proficiency with simple music. Music that poignantly reflects the plights and joys of everyday people was what I felt I was best at doing. It was during data collection that I first made the conscious connection that being dyslexic had impacted my musical development and may have influenced my musical path. I could see that my learning disability had meant that, despite years of effort as a musician, things

like reading music and more complex technical music were clear areas of struggle. This process showed me that I may have chosen “people’s musician” because it was a musical identity and way of being that was accessible to me. The songwriting helped me to find clarity about the more unconscious layers impacting my identity as a musician and a music therapist. This clarity was vital for moving forward with authenticity and conscious choice.

## **Category 2: Resisting Expectations**

A key insight that the data analysis revealed was the real possibilities enabled by resistance. This liberatory finding pointed to authenticity as a way of being that I could and had worked to claim; and three areas emerged as possible resistance pathways - claiming support needs, relationship, and creativity.

### ***Subcategory 2a. Claiming Support Needs***

One of the key insights that emerged from the songwriting process was the vital realization that living with authenticity was inevitably connected to identifying, understanding, and claiming my support needs. Claiming support needs emerged as something that was going to be necessary if I wanted to assert my right to live a joy-filled life that isn’t simply characterized by survival. However, claiming these needs was also linked to recognition of them as legitimate, fluid, and integral to my ability to thrive. The data revealed that I can, in fact, establish different, and more affirming expectations that inevitably reduce my almost constant overwhelm. I discovered that a critical part of resisting expectations is related to naming and claiming my support needs without shame, claiming the space to do things in my own way and at my own pace, and recognizing and honouring my sensory needs. I also realised that I deserve to claim a life that consists of more than simple survival, and I saw that I needed to focus on claiming my support needs and living in my strengths rather than my perceived deficits.

I learned, during this process, that recognizing the legitimacy of my disability and my support needs will be important as I grapple with feelings of being undeserving of support; or, perhaps more pointedly that needing support makes me inferior to others or selfish. Songwriting gave me access to authentic parts of myself that were not always easy to find in my daily life, and this produced a lot of self-insight. In a song from week two I had an experience I often have during songwriting where a clear message comes through quite easily and brings with it a feeling of clarity and sureness. This is an excerpt from that song:

Time in the garden, time in the sun



Time when I don't have to answer to anyone.

Maybe I'm selfish, maybe I'm mean

Maybe I've gone too long not being seen.

I need freedom to do things my way

I need freedom to live in my strengths.

I discovered that I had not been meeting my needs because I understood them as personal failures rather than needs. When I struggled to keep up with daily demands, to be calm and thoughtful with my partner; or, when I experienced immobility, chronic pain, or complete shutdown, I assumed I needed to keep trying harder. The data revealed that overwhelm, not a lack of trying, was the greatest contributor to many of my difficulties. "Now that I can see that I have all sorts of needs I didn't even know I had so have not been meeting...this constant irritability and emotional dysregulation or lability makes sense" (Journal, week 2).

I also saw in the data analysis that I can, in fact, establish different, and more affirming expectations to reduce my almost constant overwhelm. This will require support with administrative, domestic, and other practical tasks that are especially difficult for me. It will also require challenging the internalized ableism that tells me requiring support is a sign of weakness. In my journal from week three I wrote that, "I need this [access to support] to be uncoupled with shame, I have always felt that I am a burden on others... It is hard to feel confident in this or even clear on what "fair" might look like. What do I deserve? The fear is that I am being selfish."

It also became clear that a lifetime of being corrected and criticized for the way I do things meant that I was defensive and easily triggered while trying to complete practical tasks. Ultimately, this increased the difficulty of undertaking those tasks in the first place. As I wrote in my week three journal, "I think I am feeling pretty trapped through feeling I need to do things a certain way".

An interesting connection emerged between the need for more time to complete tasks and the need for more time to process, as a neurodivergent person, the cognitive aspects of task completion. Yet, I also discovered that I needed a lot of time to rest and recover because I continued to experience life as almost constantly overwhelming. Furthermore, the data captured that my energy and capacity fluctuate a lot, making it hard to know how much support or time I would need day to day. I discovered, through the data analysis process, that claiming my support needs as a neurodivergent adult was inevitably going to be influenced by my capacity to

recognize the legitimacy of having fluid support needs and by my capacity to give myself the time and space to think carefully about what those support needs actually are.

The process has shown me how previous reluctance to assert my support needs is internalized ableism. I have gained greater clarity that helps me find the courage I will need as I claim my authenticity. “This clarity gives me the opportunity to wriggle out of this suit of normativity. To consciously say no to its values” (Journal, week 2). Now that I can see that normativity instructs me to deny my own needs, I can consciously affirm for myself that I disagree, and I can claim support and a proud disability identity as well.

### ***Subcategory 2b. Relationship as Resistance***

Perhaps one of the most important discoveries was that, for me, connecting with other neurodivergent people is essential to the work of living and working authentically.

Neurodivergent friends, wise ND mentors, and literature written by ND people provided important examples of alternative ways of being that are worthy, permission giving, safe places to explore and create alternative and authentic ways of living. These connections were potent allies and co-conspirators in understanding, accepting, and ultimately becoming more deeply myself

Friendships with ND people gave me a safe space to explore my identity including my likes, dislikes, abilities, limitations, and boundaries. In my journal from week two I wrote, “I feel I am able to define my values for the first time, as well as my boundaries...Now I realize [they] shifted in accordance to my environment and [were] always in some ways informed by normative expectations... No wonder [I’m] confused.” During the songwriting process, I realized I could separate the internalized values of normative expectations from my own values through noticing how much I like ND people whose values and needs were often like mine. For example, I noticed that I did not judge ND friends who struggled to meet normative expectations like keeping up with life administration and domestic tasks, instead I felt clear that they deserved support with aspects of life they found challenging and I felt empowered by witnessing them ask for what they needed — supports that made it easier for them to be strong in the ways that were natural to them. This showed me that I value the bravery to be vulnerable enough to ask for help and to utilize my own unique strengths. I realized I don’t actually value denying who I am to emulate the normal behaviours so often considered essential to being valued. I found, interestingly, that my appreciation for others who are like me revealed that I actually like and can affirm myself.

Furthermore, having people respond to me with the kind of understanding that shared lived experience and daily struggle afford is incredibly validating. In my journal from week two I wrote, “[A]s I form more authentic relationships with more awareness about ND and the emotional developmental trauma that I have experienced, I think what I’m starting to experience is this shaky little but fierce part of me. It’s really real, clear, [and] strong... but also hidden and maybe gaslit for so long.” This speaks to the power of being witnessed by others who have lived through similar patterns of marginalization to validate my experience, and it helped me begin to claim my identity as a neurodivergent woman and professional. These song lyrics from my week two journal further illustrate the power of this experience.

As I shed this tight and poorly fitting skin I sing  
Those who have the eyes to see will know the song to sing to me  
‘You’re not broken your hands were just tied  
You’re not broken they covered your eyes  
You’re not broken it’s in the design’.

### ***Subcategory 2c. Creativity as Resistance***

This process helped me to understand I am a fundamentally creative being, and creativity is, in fact, one of my greatest strengths. I frequently saw in the data a struggle between knowing I need to be creative and fears that claiming time to be creative would be selfish or frivolous. However, the songwriting process showed me undeniably that my creativity connected me to essential resources like authenticity, courage, insight, ideas, power, freedom, and even relief from pain.

I discovered in the data that being creative was central to my identity. However, I also saw that the fear that claiming space to be creative was selfish had been a barrier to claiming space for this profound personal resource. In my week three journal, for example, I wrote, “I remember when I would hear artists say, “I make music because I have to” ... I found that so incredibly pretentious. But now I am starting to wonder if that might be true for me as well.” Seeing how fundamental creativity is to being me and how much access creativity gives me to the things I need made it clear to me that creativity is an essential resource that helps me to resist normative expectations - resistance that is central to self-identity. This process reminded me—and made it clear—that songwriting was an important natural resistance pathway that enabled me to disrupt

the internalized ableism that made it difficult for me to claim space for creativity. In a song from week three I wrote,

“Maybe I’m selfish

Maybe I’m mean

Maybe I’ve gone too long not being seen”

These lyrics illustrate an example of how, in the context of songwriting, I could grapple with the tension that surfaced between feeling selfish for being creative and a deeper knowing that my need for creativity is valid and a powerful antidote to feelings of unworthiness. I was reminded that songwriting had always been a space where the most courageous and authentic parts of myself could freely surface and fight for their legitimacy. My journal from week four reveals feelings of regret at not being able to embrace my authenticity more fully in my past as a songwriter while also acknowledging how much I had accomplished creatively. “I can see now that although I broke through many barriers through my processes, especially as a songwriter, I know now that I was still very bought into aspects of normative culture I couldn’t yet see (Journal, week 4). I had been reflecting on Sinade O’Connor, the late Irish songwriter whom I love, and her commitment to authenticity and her incredible courage to resist social norms. I felt a longing to go back to my own time as a professional singer-songwriter with the courage this process has given me and produce music with a new level of freedom and commitment to authenticity.

I feel a profound sense of freedom in creativity, and it seems to strengthen my capacity to resist the normative expectations that all too often ask me not to be me. In my week three journal I wrote:

When I finally started writing I just felt the feeling that I feel when I am in my garden, or just sitting here looking out my window and seeing the way the shadows of the trees outside look dancing in the breeze and the theme of freedom came to me quite strongly. I tapped into this desire for freedom to spend my time the way I want to. The feeling was very much a rejection of the almost constant feeling of tightness I live with.

(Journal, week 3)

I can no longer unsee the power of my own creativity to give me the very things I was searching for via normativity and how the pursuit of normativity kept me from allowing space for my creativity. My creativity brings authenticity, freedom, power, insight, self-worth, and

connection to myself, others, and the world around me. At its core, it constitutes one of my most vital resources for pursuing a life characterized by joy, meaning, and fulfillment.

### **Category 3: The Courage to Look Ahead**

Throughout the entire research process, I discovered strengths I had not previously fully recognized that could support me as I move forward. Despite having developed the adaptive strategy of masking, I found through my analysis that I also understood that authenticity was where my greatest strengths lay. Even as I masked, I simultaneously found ways to resist expectations. In this section, I will explore how these instances of authentic self-expression revealed what embracing my true self could make possible—both in my personal life and within the music therapy space.

#### ***Subcategory 3a. The Power of Authenticity in my Personal Life***

While I have learned that it will take ongoing courage to live authentically as a neurodivergent individual, I have learned that doing so has profoundly positive impacts on my relationship with myself, my family, and others. I discovered that my own authenticity was surprisingly the antidote to my greatest challenges. I learned that times when I was able to be my authentic self without hiding or masking parts of me characterized by my neurodivergence was where my greatest health, power, freedom, and courage lay. I will describe these strengths through the domains of relationship, creativity, and cognitive capacity.

In relationship with myself, I discovered that my authenticity led to much greater mental and physical health. I saw that the courage to assert my needs, and to be more honestly self-expressive in general, led to much greater mental and physical health. In my journal from week three I wrote, “When I’m being most myself and feel most alive I am in a kind of flow that is incredibly alive and enjoyable to be in” (Journal, week 3). I came to realise that this aliveness that I experienced when I felt the freedom to be myself and take up space was an antidote for my greatest struggles, like the chronic pain I experience from the stress of almost constant overwhelm. I realized that pushing myself beyond my limits was something I had been conditioned to do — a way of taking up as little space as possible and avoiding being a burden — all in the hope of feeling a sense of belonging and relational safety. I learned that when I challenged this conditioning and was honest about my limits and my support needs, I could find what I had been looking for all along — the capacity to be physically and emotionally well and to have meaningful connections with myself and others.

This increased mental and physical health led to greater personal power and freedom. I came to realize that I had tied my sense of power to being affirmed by others. Through masking, I had organized around a self-concept of being easy, which I equated with being liked. Being liked was the form of belonging I had learned to seek even though I now know it to be a way of fitting in. Being my authentic self challenged this easiness and, therefore, it challenged and potentially threatened my sense of worthiness and belonging. However, I realized that the experience of being courageously me made me less reliant on positive feedback from others to feel worthy. Being courageously authentic increased my intimacy with myself which was more empowering and validating than pleasing others and led to deeper confidence and stability.

Trusting myself gave me power in my life and this provided a sense of freedom that I deeply longed for. Understanding that I could trust myself showed me that I held power and that I did not need to feel tied to meeting the expectations of others for safety, survival, and power. This was profoundly liberating and in turn led to more trust in myself. This was powerful in disrupting immobilization and indecision, and it led to finding more of a natural flow that came from this increased self-trust.

In relationships with others, I discovered that my authenticity offered qualities like deep compassion, belonging, and the ability to support others through their challenges while cultivating the possibility of hope. Interestingly, because being authentic allowed me to be more physically and emotionally well, it led to much healthier relationships. I saw that the bravery to be authentic meant taking responsibility to assert my own care needs, like saying no, or directly asking for help when I needed it. This led to much healthier communication with others and left me more regulated. This meant I was less likely to be irritable or explosive with my closest people. This was very important because being regulated directly impacted my ability to show up with what surfaces as one of my greatest strengths – providing emotional safety to others. I saw that “when I am activated I am not all that safe, especially for my husband and likely my child” (Journal, week 3), and that making my self-regulation a priority was paramount to showing up in my strengths for others.

This process helped me to see how much more I had to offer others when I exercised the courage to be authentic. As a parent, I discovered that much of what is most challenging for my daughter, like emotion regulation due to overwhelm, is also what is most challenging for me. This was in large part due to a lack of self-understanding connected to masking and no access to

neurodivergent role models. I realized that really learning to be my authentic self allowed me to find authentic strategies for supporting my child. Further, I saw how my care for her helped to motivate this courage. I had to parent her quite differently from how others believed I should. Times when I parented her in a way that I knew was right for us often led to disapproval from others and thus took great courage. However, it also led to my daughter getting her needs met and to an authentic connection between us which in turn fuelled more courage. “The fierce mama bear love and protectiveness [I have for my child] has definitely helped a certain kind of bravery to surface that I [had] never been able to embody as fully as I’m learning to for her” (Journal, Week 2). The love for her that mobilized my courage to be authentic allowed for insights and capacities that not only allowed me to parent her more effectively, but also to know and therefore care for myself more effectively. I came to learn that the care of myself and the care of my daughter were inextricably intertwined.

Although being me meant I had certain cognitive challenges for which I needed support and understanding, the same brain, like two sides of the same coin, also gave me capacities that bring tremendous intellectual value. Before this process, I was mostly aware of how dyslexia makes certain cognitive tasks slow for me and how ADHD impacts my executive functioning. This makes a lot of practical things challenging, including organizing my thinking. I came to see that although this is true, my neurodivergence also underpins my cognitive strengths. I saw that my neurodivergence was what gave me the deep interest and focus required for exploring certain topics with such depth. Neurodivergence, for example, is something I have dedicated tremendous time and effort to understanding. My ability to stay with one topic—monotropism—is what has allowed me to collect valuable information and insights regarding neurodivergence, trauma, mental health, and other topics related to my work and personal life. Furthermore, my natural ability to make connections across topics is what has allowed me to see the bigger picture of how my experience of disability is impacted by the systems I am part of and other aspects of my identity.

I came to realize that the way my brain works is why I was able to communicate so effectively with many kinds of people and to help make people feel understood and validated. In my journal from week three I wrote that “Being me enables: [the] Ability to understand many different people and to communicate effectively and see where miscommunications are happening.” It was meaningful to move beyond labelling what being ND makes difficult and

toward a strengthened capacity to recognize that what I value most in myself also comes from my unique wiring.

I also realized that my style of processing the world — my out of the box, non-linear information processing — although difficult to navigate and to remain organized within, feeds my creativity and gives me the ability to come up with new and big ideas. In a song from week three I wrote,

I need freedom to trust where my big ideas might lead

I need freedom to trust my own authenticity

I came to realise that this quality is such a fundamental aspect of who I am and underpins much of what is positive about being me. I could see, finally, that efforts to function in the ways others expect have been a barrier to a fulsome exploration of my own way of doing and being and that exploring this more deeply can offer important capacities to my life.

My creative capacities were perhaps the most meaningful for me to fully realize through this process. I saw in the data that I had under prioritized creativity for fears of being selfish. During the songwriting in week three I wrote, “I think that artistic pursuits are in some ways inherently selfish and really take time. I think I really do need a ton of time being creative in order to feel relaxed.” I reconnected to the truth that creativity offers me and my world powerful resources like authentic connection to self and others, freedom, joy, beauty, fun, and meaning. Importantly, expressing myself creatively was perhaps my easiest path to my authenticity and brought an experience of freedom, opposite to the feelings of being trapped by normative expectations. In my journal from week four I wrote that “art can provide a vehicle for freedom.” Songwriting, for example, left me with a profound sense of freedom and I came to understand that this freedom was power. Creativity ultimately made me able to connect to my inner resources of knowing, self-trust, and even my own bizarre form of organization. I am a non-linear thinker and creativity is a way I can process complex ideas and find some sort of order and meaning. For instance, creativity was my best path to exploring the complexity of my identity. Because masking felt like I was trying to become something so specific, it created a belief in right and wrong, and I assumed that being my authentic self would also carry a sense of finality or specificity. What I found instead, was that authenticity simply meant responding to my inner state in each moment with honesty. This is a dynamic and creative state and requires the freedom to experience and respond to myself as I am, not as I think I should be. Creativity gave me the



courage to be myself; where fears of being broken and flawed gave way to a trust in the messy process of becoming.

Understanding how much of a resource my creativity is for my own wellbeing and for interacting with the world, has reignited my passion for creativity and motivates me to claim space for it in my life.

### ***Subcategory 3b. Authenticity and being a model***

This experience taught me that embracing my authentic self within the music therapy space enables me to fully step into my role as a neurodivergent therapist, mentor, educator, and advocate. I realized that fully being myself in the profession allows me to make unique and valuable contributions. This process also clarified why I had struggled to claim a comfortable professional identity and showed me a path to one I can embrace.

It was empowering to realize that my authenticity as a neurodivergent person is actually what most effectively positions me as a neurodivergent therapist, mentor, educator, and advocate. I saw that the insights gained through my lived experience and deep critical study and analysis can help reduce common harms experienced by neurodivergent (ND) people in a music therapy setting and enhance the depth and effectiveness of the therapeutic work. I know first-hand the harms of reinforcing goals of normalization in work with disabled people. Like many healthcare fields, music therapy has historically aligned with the medical model of disability—a framework that positions neurodivergence and other forms of disability as deficits or disorders to be cured or overcome (Davies, 2022; Pickard, 2020; Shaw, 2022a). Through this reflective process, I was surprised to realize that I, too, had unconsciously internalized this position of pathology toward my own neurodivergence. I came to see that not only did trying to “overcome” these traits fail—it created and perpetuated many of my struggles. I can articulate the risks of coercing neurodivergent people to comply with neurotypically desirable behaviours. I have experienced the depression, burn out, fatigue, and loss of self-esteem, internalizing the notion that we will find our best life through “overcoming” our disability.

Importantly, I also know the power of resisting the stance of pathologization. My lived experience as a neurodivergent person—and the work I’ve done to understand both my own needs and the dominant narratives that have historically been a barrier to meeting them —allows me to reimagine music therapy as a space of possibility. A space where dominant narratives of disability as pathology can be challenged, and where both participants and therapists can explore

new, meaningful, and liberatory ways of engaging with music. I can focus on the use of music to facilitate connection—to self, to others, and as a path to beauty, peace, self-expression, and shared understanding. By reconnecting more deeply to my own creative process and coming to understand the harms of viewing disability as inherently undesirable, I can contribute to reimagining music therapy as an emancipatory profession.

I was surprised to realize that the struggles I’ve faced—particularly with mental health—are part of what fuels one of my greatest professional strengths – deep empathy. I have cultivated in me a profound ability to create an emotionally safe place for people from all walks of life navigating difficulty. This realization that my struggles actually made this possible for me stood in stark contrast to the ableist beliefs I had on some level unconsciously internalized—beliefs that told me I couldn’t be a competent therapist while living with such depth of struggle.

I also realized that my lived experience could offer what other neurodivergent people had offered me, empowering and alternative examples of how to live. In Week 4 of my journal, I wrote:

I could, in some way, provide an example of a person who is ND—with all my struggles and strengths—who likes herself, at least some of the time. [I realized that] The only way I have been able to see myself through this new lens of ND is through the stories and lived experiences of other people—especially women and non-binary ND people. Hearing others' self-understanding helped me to understand myself better. I had never been accurately reflected in the stories around me.

Seeing how essential it was for me to hear stories from others with shared lived experiences, I recognized that I could be that kind of presence for others. I could embody a different way of being—one that is legitimate, worthy, and not contingent on masking or conforming. I could create a therapeutic relationship that allows others to explore their needs and identities with greater freedom. I also realized that my own inner work has allowed me to cultivate self-compassion that I am able to model to music therapy participants. Although I still struggle with feelings of unworthiness, “I have known my own worthiness in an authentic and deep way many times throughout my process of healing” (Journal, Week 4).

It became increasingly clear to me that many of my lifelong challenges stemmed from unmet disability support needs—needs I didn’t always recognize or feel permitted to claim. I saw that I could not only model the act of identifying and meeting my own support needs, but also

help others explore theirs. In a world shaped by compulsory abledness (Campbell, 2008), this felt radical. Ultimately, I came to believe that drawing attention to unmet support needs—and framing their exploration as a worthy and necessary pursuit—is one of the most meaningful contributions I can make.

For the entirety of my career so far, I have struggled to claim an identity as a music therapist that I was comfortable with. Despite being deeply passionate about music, believing in its inherent capacity to facilitate wellness and my equal interest in human psychology, music therapy never quite fit. Through this process, I came to understand that much of music therapy's theoretical foundations conflict with my values. Its alignment with the medical model and its pathologizing view of disability deeply trouble me. I also find its roots in humanism problematic, particularly because of the limited and exclusionary view of what it considers fully human. These frameworks clash with what I believe humans need and with what I understand music has the potential to offer. I came to understand that I didn't have to follow traditional models—I could choose a path rooted in freedom and justice. Goal areas like developing self-compassion, deeper self-awareness, claiming personal strengths, and “understanding how art can provide a vehicle for freedom” (Journal, week 4), and a means of challenging normative expectations, all emerged as possible areas of work. This process helped me see that my authenticity as a neurodivergent person is not just a strength; it is a foundation for doing ethical, effective, and compassionate work. My lived experience, my struggles, and my commitment to self-understanding are not barriers to my work—they are the heart of it. They are what allow me to support others who are struggling, and to do so in ways that feel deeply attuned, safe, and empowering. In week four only one song came during the songwriting process; artistically it is nothing remarkable, but remarkable wasn't needed. Its straightforward message encapsulates what I understand ND and disabled participants in music therapy and indeed in life to need, belonging, validation, understanding, safety, and freedom.

Welcome

You are safe here

Your darkness makes sense to me

Your fear makes sense to me

Your rage makes sense to me

You are safe here

Your confusion makes sense to me

Your exhaustion makes sense to me

Your loneliness and heartbreak make sense to me

You are not alone, you are safe here.

Welcome. Your truth can be seen and understood here

## Chapter 5. Discussion

The final phase of Moustakas's (1990) heuristic methodology is known as the creative synthesis. This phase is not just a formal conclusion, but a deeply personal and imaginative act—one that reflects the transformation in the researcher's relationship to the material. While the core question or problem may remain, what changes is the researcher. An internal shift takes place in the body; and, with that shift comes a new way of seeing (Moustakas, 1990). In what follows, I share the design and intention behind my creative synthesis. I also offer reflections on the limitations of this study, explore a range of implications that emerged from the process and findings, and close with my final thoughts.

### Creative Synthesis

Moustakas (1990) describes the creative synthesis as a space where all the threads—ambition, hope, expectancy, distortion, and denial—are gathered and woven together into something new. It's not about resolving everything neatly, but about arriving at a fresh vision, a shift in understanding, and perhaps a new path forward. While exploring the possibilities for a creative synthesis, I found myself conceptualizing normativity as an actual person or group of people; and, I found that I wanted to create something that could say what I most wanted normativity to hear. I decided to write a poem using this desire as a kind of prompt. Because I often find that my creative ideas come at unexpected times, I allowed myself the freedom to let the poem come when it was ready. One night before sleep I wrote it quickly over several minutes and made simple changes over the following several days. What follows is a flow of thoughts that I feel gather the threads of ambition, hope, expectancy, distortion, and denial; and, importantly, this poem and its divergent form represents an important affirmation of my neurodivergent thinking and expression.

#### *We needed each other*

There are many of us among you, even you might be us.

We are not scary, vacant, or defective,

You don't have to call those of us who you enjoy 'high functioning'

We are all high functioning when the world stops its assault

When the world opens its eyes to the ways our systems

make some feel smart and others broken.

Some strong while others feel small.

No one is high functioning during assault.  
When you call the autistic girl in your office high functioning  
because of not being a total mess, you hurt our feelings.  
No one is a total mess with mutual respect.

We are the artists, the makers, the seers and the creators.  
The re-imaginings, truth tellers and visionaries  
We are the wise elders when the generational burdens are allowed to heal  
We see the connections and the places where it broke  
We see the misunderstandings and can translate it all

But we also need time to sleep, dream, bathe in oceans and streams,  
To dance to wonder.  
We need places and time to grieve, to feel and digest the depths of what our bodies, spirits  
and minds take in  
Without this we harden; find layers to protect, find fierce animal behaviour.

We need help with the stuff of “reality” the drudgery of the daily  
For we live in possibility, in movement and forever nowness  
We don’t need to meditate, we just need permission to be  
We don’t need mindfulness, we need space from all the doing  
We live in being but your demands that we be the doers makes our bodies, souls, and  
minds sick.

Until we discover that despite a lifetime of training to believe the contrary,  
We do not need your control; we do not need your approval.  
We have all that we ever needed.  
If you'd like, join us  
Join us in our beautiful spark  
This is where we make magic

Help us by letting us be  
If you can't see that we are beautiful, do not shout your disapproval  
Give us time to unfurl, explore and to be  
You may love what you find  
But if you don't, no matter

We don't need your approval or your permission  
But we do need our freedom  
We need you to stop with the coercion of our children  
There are billions of paths to becoming  
That is only for us to discover.

You offer ideas we want your curiosity  
You offer praise we want your respect

We were never broken  
Your approval or disapproval cannot change what we now know to be true  
We never needed your way  
We needed each other so that we could remember, discover and create our own way  
So that we could remember that we were always so much more than enough.

I am struck by the fact that prior to this study, I had already uncovered and shared many of the elements that surfaced through this heuristic inquiry and in this poem. On paper, the words aren't entirely new—but in my lived experience, I am transformed. It's as if the lyrics from earlier songs were glimpses of insight I had known on some level but couldn't yet fully embody. However, what this process offered me was a way to bring those fragments together into a more complete, coherent, and conscious picture. That picture now feels embodied—fully integrated into my conscious awareness as I move through life. Had I written this poem before undertaking this inquiry, I suspect it would have felt more like a wish or a prayer—something I almost believed, but couldn't yet fully stand in. However, as I look at these words now, I feel them as deep and embodied truths rather than impressions of truth that feel fleeting and easy to forget.

Expressing and grappling with the complexity of my identity through songwriting was empowering and allowed for this embodied knowing. I could feel the truth more surely as I played with melody, rhyme, rhythm, and harmony to create the precise feeling or vibe for what was being expressed. Creating beauty and having something tangible to reflect the meaning I was finding within, was satisfying and nourishing and deepened my clarity. I also knew as I sang the songs that others would resonate with the meaning. I could sense that what I was expressing held a truth beyond my individual experience. That made me feel deeply connected to other ND people through the lived experience I knew others were having. I knew that the empowerment I felt at naming my truth could be shared. The sense of empowerment that I knew others would feel through hearing my message made me feel both like I could uplift others and that their understanding of my experience also uplifted me. I remembered that songwriting had always been like this, a place where I experience this deep sense of shared connection. This is an incredibly powerful antidote to feelings of loneliness and fuels my fire of courage to be authentic.

### **Assumptions and Limitations**

It is important to name the assumptions that shaped this study and the limitations of the study itself. I assumed that claiming a disability identity would be helpful in diverse aspects of my life, and I assumed that songwriting would be a generative process to engage in this work. I also assumed that engaging in this process would unearth knowledge that would help me, and other music therapists, to provide meaningful support to neurodivergent and disabled clients. It is important to note that in my analysis I did not engage with the music itself but rather used the lyrics only as artefacts of the songwriting. As a novice researcher, I acknowledge that my lack of experience may have limited the depth of analysis that I could bring to this project. Furthermore, while I recognized the ways in which gender roles intersect and shape my experience of disability, this study did not engage a full intersectional analysis. This represents a limitation, as identities such as gender, race, and other forms of marginalization can significantly interact with disability in ways that warrant deeper exploration and understanding.

### **Implications**

#### ***Personal Implications***

This study has generated insights with profound personal implications. Recognizing the link between my deepest struggles and the belief that I must earn my worth through the exhausting pursuit of becoming someone I am not, has reconnected me to my own power: the



power to say no to the constraints of constant stress, and yes to joy and freedom. While it may sound simple, I had been deeply conditioned to feel perpetually trapped by expectations, never truly free.

I now feel ready to radically center in my life creativity, disability support, relationships with ND peers, and to actively challenge the internalized ableism that has long threatened my self-worth and belief in my right to a good disabled life.

One profound implication is that my relationship to feedback from others has transformed. Where I once felt paralyzed by feedback from others that was anything other than glowing, I now feel comfortable with other people's feedback. I can now feel my own worthiness and I know that who I am often triggers fear in other people, fear that my choices might lead somewhere undesirable because my way in the world confuses people who are not like me. This has led to a tremendous amount of freedom and power in my own life and frees me up to give more to those around me as well.

Most importantly, I now see how vital this is for supporting my daughter—and I finally feel equipped to do so. I've come to recognize that many current approaches to raising and educating children are rooted in neocolonial values of hierarchy, forced independence, and narrow definitions of acceptable ways of being that reinforce ableist norms (Ashburn et al., 2023). In contrast, I've embraced a more Indigenous and collectivist view of adult leadership of children—one grounded in respectful collaboration, where the elder's role is to offer perspective shaped by time and experience but not superiority (Ashburn et al., 2023). I now guide my daughter by modelling the skills I hope to nurture in her because of the wisdom afforded by time and experience, rather than require she master it first. For example, I aim to teach flexibility to her by first being flexible with her. This builds trust and makes her feel safe to reciprocate and eventually extend that flexibility practiced with me to relationships beyond our home. Importantly I understand that leading her collaboratively rather than forcing compliance may be a protective factor as she has experience being true to herself within relationship rather than being forced to hide herself and comply to the demands of others in a position of authority, perceived or otherwise.

### ***Professional Identity Implications***

This research reconnected me with my identity as a music therapist. Before this study, I felt disconnected from my work, unable to access my full self—especially my greatest

strengths—due to internalized beliefs that those parts of me were unwelcome in professional spaces. This process has reshaped how I view myself and music as a health resource, reigniting my excitement for the work. It has also given me the courage to show up as my whole self, no longer confined by narrow, ableist definitions of professionalism. I now feel equipped to use all of my strengths ethically, supported by ND mentors and peers. This feels not only liberating, but also like a meaningful act of resistance—one that challenges neurocolonial values and contributes to reshaping music therapy for disabled, especially neurodivergent, people (Gottschewski, 2022).

### ***Clinical Implications***

This research has clarified my clinical values and has enabled me to center them in my practice—collaboration, self-expression, diversity, and the dismantling of hierarchies that ask people to hide who they are. I realized I had been unconsciously trained to use music in ways that could reinforce harmful norms, which sparked a radical shift in how I understand my role. Letting go of this has deepened my commitment to fostering practices that empower people to use music in ways that serve what matters most in their lives (Rolvjord, 2014).

Reading first-voice perspectives has been transformative, and I now feel inspired to continue learning from disabled therapists and from research grounded in lived experience to continue to inform my work with disabled and ND people. I'm especially motivated to support ND and autistic people in accessing ND culture (Gottschewski, 2022).

Importantly, this study reconnected me to the power of creativity and the potential of my unique role as a music therapist. Through process-oriented songwriting, I experienced the freedom and depth that comes from letting go of outcomes and external validation, engaging fully with the process, and noticing what it reveals within. This has demonstrated to me my potential to support creativity in others as a space for self-exploration, expression, and transformation.

Furthermore, my personal transformation through this reflexive process has given me a strong analysis and understanding of human power and how this, often invisible, resource can be used and abused. My process of learning how to reclaim my own identity and power to make decisions in my own life along with having the felt sense of how important that is to my mental health, will likely always impact my practice with others. It reminds me of a therapy process I went through with a wise indigenous elder in my 20s. When I thanked him for the ways he had helped me he reminded me that I had done the work. Although he acknowledged that he had walked with me and that his role was meaningful, he was very careful not to take any credit for

what I had accomplished. This has always stayed with me, and this process has deepened a conviction that one of the most powerful things we can do as therapists is to remind participants of their own inner resources and celebrate the diversity of what each of us carries within to bring to our lives. I can already feel my work with clients shifting toward a conviction of reflecting the person in front of me as whole and their unique gifts as vital. I can listen carefully and show the person that they make sense to me and I know that this can help them to make sense to themselves.

I hope this work inspires other music therapists, especially in their practice with ND and disabled people. At its core, the message I want to convey is that those we work with do not need fixing; rather, they deserve belonging, self-understanding through respectful and egalitarian relationships, and access to meaningful lives. I hope MTs feel empowered by realizing that the resource we have of making music accessible to others is one of the greatest ways we can support these goals. I also hope the findings encourage therapists to engage in ongoing reflexive work, examining their own biases so their practice can be uplifting and empowering—resisting unconscious patterns that reinforce the idea that ND and disabled people are flawed.

### ***Equity and Disability Implications***

This thesis has deepened my conviction that disability studies must be central to music therapy. Disrupting normative expectations—both within our profession and beyond—is essential for true equity. While social justice has gained attention in music therapy, disability remains underrepresented and insufficiently integrated (Bruce, 2022; Davies, 2022; Gottschewski, 2022; Pickard, 2020; Shaw, 2022a). Given our frequent work with disabled and especially neurodivergent participants, we have an ethical obligation to prioritize frameworks that affirm identity, freedom, expression, and inclusion over those that uphold “normalcy” as the goal. This research has also shown me music therapy’s unique potential as a site of creative resistance—challenging social hierarchies and amplifying the voices of disabled people.

### ***Education and Training Implications***

After this study, I feel newly inspired and equipped to be part of the messy, and yet vital work of bringing a critical lens to the roots of how our profession is taught and to move toward untangling those roots so that we may deliberately choose to keep what serves our profession and those we work with, and step away from that which causes harm. The process has given me the information, a skill set, and the critical framework I need to do this confidently.

I feel called to engage with music therapists, students, and colleagues in health and education to continue the complex conversation about how to develop pedagogies that move our profession—and related fields—toward more liberatory practices. I'm especially inspired to collaborate with others who have lived experience of disability, from students to seasoned professionals. I imagine doing this through writing, conference presentations, mentorship and supervision.

I also hope that sharing the process that I engaged in through this research might inspire other music therapists to deeply interrogate their approach to practice, especially with disabled and ND participants and to seek out lived expertise. This is important, because to shift away from harmful normalizing strategies in the field and more broadly, we must collectively and collaboratively do the analytical work of understanding why certain approaches and attitudes harm, how to disrupt this, and move forward in a socially just way that includes disabled people.

### ***Research implications***

As a result of this research study, I feel called, and suitably positioned, to continue to contribute to the growing body of disabled scholarship engaging in the deep and complex task of critically examining how music therapy has—often unconsciously—functioned in ways that perpetuate harm toward disabled and neurodivergent people. I hope to inspire other disabled and ND people in our field to engage in research so that they may bring the important insight that their lived experience can offer our field and beyond.

I hope to inspire other music therapists to do research. Our access to music is a powerful resource for exploring important topics in our field and beyond. Identity is so fundamental to human health and heuristic inquiry is a method I would highly encourage others to explore.

### **Closing Thoughts**

I am surprised by how successfully this heuristic inquiry accomplished what it set out to do—to bring about a transformation in the researcher's relationship to the material (Moustakas, 1990). In this case, the material transformed is my relationship to my ND identity. As a ND person with multiple, previously unidentified learning disabilities and executive functioning challenges, academic work has often felt difficult and demoralizing. While some past educators recognized my potential and helped me find ways to engage academically, nothing has been as complete or transformative as this study. Having the space and support to bring together the

many threads that shape my identity allowed me to create what I can only describe as a coherent and meaningful narrative.

I don't wish to romanticize these findings—I remain disabled, primarily by the systems I live and work within. However, as Moustakas (1990) indicates should occur, I have changed. “The person has moved from a self-defeating view of his or her place in the world to a sense of being competent to meet life's challenges, with an uplift of self-confidence and self-esteem that casts new light on both identity and destiny” (p. 25).

I recognized a long-held belief that if I worked hard enough to measure up to external expectations that I had internalized, life would get better. I now understand those expectations as unattainable, misaligned with what matters most to me, and harmful to my well-being. Letting go of that pursuit has opened space to listen to what my body and psyche had been trying to tell me all along — what I needed was the freedom to take up space as I am.

Engaging deeply with disability studies and the perspectives of disabled scholars has shifted my focus from self-blame to recognizing the role of systemic barriers. Rather than fueling victimhood, naming these barriers has freed internal resources once tied up in staying palatable to an ableist world. The resources are trust in myself and claiming the power to protect my joy, rest, and meaningful connections—not as a reward for meeting impossible expectations, but as a birthright and the foundation of my life.

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**Appendix A**  
**Song lyrics from week 1**

**First Song**

How do I find myself in here  
The silence so loud I disappear  
Screaming, distorted expectations  
Diluting my inner sensations

How do I know where I go from here  
too many roads they all disappear  
Numbing the fog of my sensations  
It's been a thing for generations  
(I think it's been a thing for many generations)

**Second Song**

**Code of Correctness**

Music can be a place to find me  
But music can be a place to deny me  
Trying to figure out this code of correctness  
Trying to prove that I'm not (just) a mess  
Deciphering a language I can't understand  
Knowing the language of my mother land/ ain't no good here  
(Responding in my mother tongue)  
(And knowing my mother tongue is of no use here)  
How can I be all I was meant to be  
When the best parts about me (of myself -criticized)  
erased  
hide behind  
A face of pretending  
of constant bending

Constantly bending  
Constant pretending  
Till I'm erased  
Don't know this fraud in it's(my?) place

## **Appendix B**

### **Song lyrics from week 2**

I'm still recovering from yesterday's meltdowns,  
now all these sounds, fucking pound,  
I feel pummelled through the ground, profound.  
No part of me can be found.  
As I reach for parts of me overwhelmed by the sounds.  
Angry at their aggression.  
Angry that their screaming leaves no space for any part of me but frustration.  
Anger, rage, sometimes I'm afraid that's all I am.  
But how do I even know who I am  
When everything else is so loud I disappear?

Still recovering from yesterdays meltdowns  
Now all these sounds are pushing (wearing) me down  
So far, no part of me can be found/  
As I reach for parts of me desperately  
So far, no part of me can be found/  
As I reach for parts of me desperately  
All I feel is angry/  
Angry at their aggression,  
that their screaming leaves no space for me.

### **I See you:**

As I shed this tight and poorly fitting skin I sing  
Those who have the eyes to see will know the song to sing to me

You're not broken your hands were just tied  
You're not broken they covered your eyes  
You're not broken it's in the design

As I feel the tired behind my eyes from all the times I've tried  
Those who hearts beat behind the poorly fitting skin will sing  
We're tired from a lifetime in these poorly fitting things  
You're not broken your hands were just tied  
You're not broken they covered your eyes  
You're not broken it's in the design

### **Appendix C**

#### **Song lyrics from week 3**

Time in the garden  
Time in the sun  
Time when I don't  
have to answer to anyone

Maybe I'm selfish  
Maybe I'm mean  
Maybe I've gone too long not being seen

I need freedom  
to do things my way  
I need freedom  
to live in my strengths

Time with my paintbrush  
Time with my songs  
Time with my silence  
Time with my thoughts

Time with people who make my heart beat  
Time with people who I truly see  
Time with the people who truly see me

I need freedom to trust where my big ideas might lead  
I need freedom to trust my own authenticity

## **Appendix D**

### **Song lyrics from week 4**

Welcome

You are safe here

Your darkness makes sense to me

Your fear makes sense to me

Your rage makes sense to me

You are safe here

Your confusion makes sense to me

Your exhaustion makes sense to me

Your loneliness and heartbreak make sense to me

You are not alone, you are safe here.

Welcome. Your truth can be seen and understood here