

Abstract

In trying to aid difficulties within social services of assessing families at risk, the thesis sat out to strengthen, further develop, and test a music therapy assessment tool, Assessment of Parenting Competencies (APC). The study also aimed to examine the effect of music therapy on parenting competencies and parent-child interaction measured by scores from APC and by the Parenting Stress Index and Parent-Child Relationship-Inventory.

The study had a multiple strategy sequential design. The fixed design was a between and within groups design to test the APCs reliability and validity in a clinical group of 18 parents with neglected children and a nonclinical group of 34 parents with non-neglected children. The study also included an experimental design with a randomized controlled trial only applied to the clinical group. In the experimental design there were two conditions: a music therapy treatment condition ($n = 9$) and a control condition ($n = 9$) consisting of treatment as usual. The data consisted of APC data analysed by means of video recordings and participant responses to standardized questionnaires on parenting competencies. A small embedded flexible design was conducted on the basis of poor preliminary results of concurrent validity for the analysis of one aspect, turn-taking, in the APC. It had a multiple case study strategy specifically with interplay of turns between parent and child, as the case under study involved comparing clinical and nonclinical groups and looking for differences in patterns of interaction. Data for this portion of the study consisted of interaction microanalysis including a graphic notation of the interplay of turns, which enabled both descriptions and analyses of differences between clinical and nonclinical families' communication in music therapy.

The study developed five APC scores, an Autonomy Score, Turn Analysis Score, Negative Response Type, Positive Response Type, and a total score, Parent-Child Interaction in Music. Results from the flexible design helped develop an additional analysis of turn-giving that yielded concurrent validity in distinguishing between the clinical and nonclinical groups. Interrater reliability for APC scores ranged from .73 to .89; Test-retest reliability ranged from .70 to .89. Internal consistency had an alpha level of .93 where correlations between APC scores ranged from .57 to .91. Results showed that APC had a high level of reliability and was administered and scored in a consistent and stable manner. Furthermore, results of validity testing suggested that the APC measured what it attempted to measure, as it could distinguish between clinical and nonclinical groups, and it mildly correlated with similar variables from the standardized questionnaires on parenting competencies.

Results of the outcome study indicated that families in the music therapy treatment condition significantly improved their equality of autonomy relationship, effective communication, parental response type, and a total score of the Parent-Child Interaction in Music as measured by APC. Music therapy did have significant effect on the how stressful parents perceived their children and particular how stressful the children's mood was to the parents as measured by the PSI. Furthermore results showed that parents in the music therapy treatment condition reported significantly improved communication skills as measured by PCRI.