

A Glimpse of Music Therapy Development in Indonesia

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Abstract

Ditandai dengan terbatasnya jumlah terapis musik dan belum terbentuknya asosiasi nasional, terapi musik dapat dikategorikan sebagai cabang ilmu yang baru berkembang di Indonesia. Djohan(2006) menyatakan bahwa terapi musik modern di Indonesia masih dalam tahap "menarik" untuk didiskusikan, tetapi masih belum tereksplorasi. Catatan pertama mengenai penggunaan musik dalam penanganan terapeutik ditemukan di Rumah Sakit Ibu dan Anak Harapan Kita, Jakarta, pada tahun 1994 (Thalib, 2012). Seiring berdirinya Peminatan Terapi Musik pada tahun 2007 di Universitas Pelita Harapan, Tangerang, mahasiswa dari peminatan ini mulai melakukan praktek terapi musik bagi klien dengan kebutuhan tertentu, sebagai salah satu mata kuliah yang diwajibkan universitas. Saat jurnal ini ditulis, telah ada 32 mahasiswa yang mengambil peminatan ini, dengan 11 lulusan yang saat ini bekerja sebagai terapis musik maupun pendidik di kursus-kursus musik swasta.

Beberapa hal yang disarankan oleh Amelia Delfina Kho (28 Agustus 2012), terapis musik yang diwawancarai penulis, untuk dapat meningkatkan kesadaran masyarakat Indonesia tentang cabang ilmu terapi musik, yaitu: (1) meraih perhatian dari pemerintah Indonesia dan membuat asosiasi terapi musik, sehingga kesejahteraan para terapis musik dapat diakui oleh pemerintah, sederajat dengan profesi kesehatan lainnya; (2) meningkatkan riset dan bukti-bukti ilmiah mengenai manfaat terapi musik, sehingga profesi kesehatan dan masyarakat lainnya dapat mengerti keseluruhan prosedur penanganan terapi musik dan bagaimana hal ini dapat membantu klien dengan permasalahannya masing-masing.

Music therapy is still an emerging field for people in Indonesia. Djohan (2006) stated that music had been used as a healing media in several areas in Indonesia for a long time ago. Some parts in Indonesia give a specific designation of the term music therapy; for example, people in Nias island called it as *Moe're*; the Ternate tribe in Moluccas Island called it *Gometare*; Kalimantan tribes called it *Basangiang* and *Balian* (Djohan, 2006). Music had been so close with health and wealth. Javanese people had used music, such as *gendhing*, traditional Javanese gamelan music, for holy ceremonial. The musical instrument also must have been played by some specific players; otherwise, it would have given bad influence to the health of

the player. Djohan said that modern music therapy is still on the position of "interesting" to be discussed but not yet explored (2006). The oldest record about the use of music as a media for therapy that the authors could find came from *Rumah Sakit Ibu dan Anak Harapan Kita*, Jakarta, in 1994 (Thalib, 2012). They used music to stimulate positive experience and calmness to the pregnant women who were waiting for their laboring time, which could relax them.

Starting from 2007, *Universitas Pelita Harapan* established the first academic program for music therapy in its Conservatory of Music. This is a four-year bachelor program with subjects ranging from general music subjects to specific music therapy subjects. After graduating, the students will earn the *Sarjana Seni* (equal to Bachelor of Art) in music therapy. Today, there are approximately thirty-two students undertaking music therapy as their major in the university. By May 2012, eleven of them graduated from the concentration, including the author, who was the first graduate in June 2011. The graduates are now generally working as music therapists in some institutions, including hospitals and several special need schools around the greater Jakarta.

Indonesia's Snapshot

Indonesia is one of the ASEAN (Association of Southeast Asian Nation) members. It is located exactly on the equator line between two continents, Asia and Australia, and two oceans, Indian and Pacific Ocean. With land area about 1,904,569 km², Indonesia is known as the largest archipelago country in the world, approximately 17.508 islands, with five biggest main-islands: Sumatra, Java, Kalimantan, Sulawesi and Papua Island (Sekretariat Negara Republik Indonesia, 2010).

Based on the census of *Badan Pusat Statistik* (Statistics Indonesia), the population in Indonesia is 237,556,363 with 58% living in Java Island (2010). The domination of religions in Indonesia are Moslem (86.1%), Protestant (5.7%), Roman Catholic (3%), Hindu (1.8%), and other unspecified 3.4%, based of population census in 2000 (Central Intelligence Agency, 2012). With its density of population and the long distance between the five biggest islands, many activities of

governments, offices, daily-livings and logistics are usually centralized to the Java Island, as it is also the location of capital city of Indonesia, Jakarta.

Figure 1. Map of Indonesia



The median age of Indonesian people is 27.2, and the mean age of marriage is 25.7 for men and 22.3 for women (*Badan Pusat Statistik*, 2010). Since the mean age of marriage in Indonesia is below 25, the population of children (Ministerial Regulation No. 10 Year 2011, stated that children are people who are below the age of 18) dominated the pyramid's population (*Badan Pusat Statistik*, 2012); therefore, Indonesian music therapists often work with children-related cases, especially the ones with special needs.

The Development of Music Therapy in Indonesia

Along with the development of the academic program at *Universitas Pelita Harapan* in 2007, the lecturers and students introduced music therapy services to several institutions, which served as a practical class for the program. The methods were various musical activities to deal with the client's needs in non-musical areas, including physical, psychological, cognitive and social needs (AMTA as cited in Davis, Gfeller, & Thaut, 1999). Since then, the students had been practicing music therapy with autism children, ADHD, adolescents with hearing impairment, pregnant

women, young adults with some specific needs, psychiatric patients, and elderly people. Specifically this music therapy practices mostly were done within Jakarta and Tangerang area since the university is located nearby.

As far as the author's knowledge, there are a few numbers of the institutions that have music therapy services, conducted by trained professionals. One of them is the government's institution, *Rumah Sakit Ibu dan Anak Harapan Kita*, Jakarta. With the assistance of music therapy lecturer and alumni from *Universitas Pelita Harapan*, Parents Education Department in this hospital introduced Receptive Music Therapy to maximize the effect of receptive music for pregnant women. They combined some *genre* of music with relaxation training, including breathing exercise, progressive muscle relaxation, and visualization. (Thalib, 2012).

Another place is a private institution, *Kyriakon*, a school for special needs children located in West Jakarta. There are currently three music therapists from *Universitas Pelita Harapan* who works in this institution, including the author. The school is giving music therapy service for children with autism, cerebral palsy, behavioral problems, and visual impairment, based on assessment from doctor and school psychologist. The school also has conductive education class for cerebral palsy clients, which uses music as instructions to do their routine physical exercise.

Other institutions around the capital city are still unusual to use music as a media for therapy. They are often only offering music educational program for normal or special needs population. Other music therapy approaches, such as psychotherapy for psychiatric setting (Davis, Gfeller, & Thaut, 1999) is still unfamiliar for Indonesian.

Number of Residing Music Therapists and Certification Systems

There are no approximate numbers of music therapists residing in Indonesia. As much as the author's concern, there are only three Indonesian music therapists that have their master degree in music therapy from abroad. Two therapists are working outside Indonesia, and one therapist works in Indonesia as a lecturer in *Universitas Pelita Harapan* and a music therapist in school for special needs children. There are six out of eleven students who had graduated from *Universitas Pelita*

Harapan, who are the practitioners of music therapist. The rest are music educators for normal or special needs population in musical courses.

There are currently no music therapy association established nor certification systems for music therapists in Indonesia; therefore, the government does not support music therapy as a profession yet, and there is no certain accommodation from the government to society who wants to receive such program.

Misunderstanding about Music Therapy

Despite such rapid interest in music therapy, there are some unclear perspectives in Indonesia about what music therapy really means. Kenneth E. Bruscia, a professor of music therapy at Temple University, states that people often want to express their personal viewpoints on music therapy or to emphasize something very specific about it (1998). Indonesians often associate music therapy only with the receptive methods; they often ask a question about what kind of music that the therapists use to improve the client's problems.

The other tendency in Indonesia is that people often associate music therapy with music education (Amelia Delfina Kho, personal communication, August 28, 2012). The institutions often asked "do the clients need to have certain musical background to receive music therapy?" or "do the clients have to learn how to play certain musical instruments?" In the author's session with the elderly, often the clients played instruments that they had already known.

The plausible reasons of this phenomenon: (1) There is a little research about the benefit of music as a media for therapy that have been presented to the society; (2) there are other general therapists who consider themselves as music therapists without having any background in music therapy (Amelia Delfina Kho, personal communication, August 28, 2012). The best way to overcome about the misbeliefs is by giving seminar and workshops about what music therapy is (S. Hertha, personal communication, August 25, 2012). Music therapists in Indonesia have to be really smart to collaborate with other disciplines to keep its field beating.

Conclusion

Music therapy is starting to develop well in Jakarta and Tangerang since 2007. Pelita Harapan University is the first academic institution that offered music therapy bachelor program in Indonesia. Since then, the students and the lecturers are doing music therapy practice with many types of clients in institutions like schools, hospitals and nursing homes. Long future developments are really needed to increase the quality of music therapy service and the welfare of music therapy profession in Indonesia, as well as the understanding of society about this new blooming field. Amelia D. Kho, music therapists and also music therapy head concentration in Pelita Harapan University, suggests the options below (personal communication, August 28, 2012):

- a) To get attention from the government and make a legal aspects of music therapy association, so the welfare of a music therapist can be acknowledge as well as other health professions in Indonesia.
- b) To increase research and evidence about the benefit of music therapy, so other health profession and all Indonesian society will understand the whole procedure of music therapy and how it works to help clients with certain needs.

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