

For white music therapists: When black and brown clients bring up police brutality:

Before (and ongoing)

1. Do your best to gain knowledge about the impact of police brutality where you live both historically and presently. We must seek to understand symptoms of racial trauma just like we do with symptoms of brain injuries, depression, or heart disease
2. Explore how our healthcare systems contribute to racism.
3. Examine your privilege in society as a white person, and understand how that privilege affects your interaction with clients. As a white person, you directly benefit from a racist system; research ways to apply this knowledge towards helping and having a greater understanding of your client.
4. Accept that regardless of how much anti-racist work you've done or how nice you are, you as a white therapist (in a position of power) may be perceived as a reflection of white supremacy. Be intentional in giving control and power to the clients by having make the decisions about intervention choices, goals, and group rules.
5. Recognize that, as a white person, your understanding of racism and how it impacts people of color will not be able to replace clients' lived experiences.
6. Each client will/has experienced racism, both systemic and interpersonal, in different ways and under different circumstances, both culturally and as individuals. As well, their reaction to racism will be vast and varied. Please don't treat clients as monoliths; try to understand their reactions and response to racism will vary on an individual basis.
7. Explore your own emotions and reactions so that they do not impair your judgment during sessions.
8. Be prepared to respond with interventions that are validating without being triggering. This includes researching songs about racism and police brutality by preferred artists and discovering the nuances of what they are about. A song can speak to police brutality, but be triggering or not applicable to what is being shared in the moment.

In session

1. Recognize that you are responsible for holding a safe space for the clients to share about something that can make them extremely vulnerable.
2. Be explicit that your own comfort does not take precedence over the clients' open expression and that the therapy room is a safe and confidential space.
3. Recognize that some clients are not going to want to do this work with you and that is 100% their choice.
4. Ask questions about the client's experiences and emotions without pressuring.
5. Validate everything that is expressed verbally and if appropriate, musically. This could be by inviting clients to share songs to further explore what they're sharing, by **carefully** (see 8 above) offering to share songs that reflect what the clients have expressed, or by improvising or song writing around their emotions and experiences.
6. Tone, volume, and language shouldn't be expected, corrected or policed-- again, though the impact of police brutality is community-wide, reactions and experiences are different and all are valid responses.
7. As the session nears its end, ask the group about how they want to move towards closing and let them know that there will be space to continue the discussion/work in the next session.
8. Validate some more.

After

1. Seek supervision or peer supervision to process your experience and explore how you can improve your response in the future.
2. **Keep documentation vague, so that it does not cause harm if a judge or PO reads it. What is shared in therapy is private and should never lead to legal harm or penalization.** Focus on strengths like open expression and engagement in the therapy process.