

# **The Listening Composer Revisited: Collaborative Composition using Participatory Design Methods**

## **Introduction**

The psychologist Carl Rogers describes the experience of being listened to, or as he puts it, 'deeply heard' like 'a prisoner in a dungeon tapping out day after day a Morse code message: '...Can anyone hear me?' And finally one day he hears some faint tappings which spell out 'Yes'. And by that simple response he's released from his loneliness, he's becoming a human being again.'

His implication is that listening is a rare event.

I experienced this in October 2020, during the pandemic, when I was able to sit in the garden of a friend of mine, a hospital consultant doctor, and listen to her speak about what she had experienced during the pandemic. She talked for nearly 2 hours. I sat mostly in silence and listened. What was immediately obvious to me was that, despite the global lauding of healthcare workers as 'heroes', what was not happening, and had not happened, was that healthcare workers were listened to – their needs were not be attended to. Musicians' experience of the pandemic was very different to that of healthcare workers – for many, it was a time of isolation and of the loss of the togetherness of musicmaking. But, largely, musicians were safe, while healthcare workers were exposed to greatly elevated risks of infection from an as-yet uncontrolled disease.

It was from this experience that the Listening Composer idea was born. How could I do what I do – be a professional composer, and at the same time, offer what was clearly lacking in the experience of my friend. Was it presumptuous to even try? Would it be seen as glib and contrived, or worse, opportunistic?

These doubts put me off carrying out my ideas until a colleague introduced me to the ideas of Participatory Design (Galpin et al. 2022). Perhaps, rather than simply relying on my own instincts, I could use an existing strategy which had been proven as effective since the mid 1970s and adapt it to the musical situation. Formalising the process, I felt, might help avoid the mistakes of subjectivity, and help give a genuine voice to the people whose story needed to be told.

## **What does Listening mean?**

Is listening to a composer's music, the same 'listening' that occurs in conversation? Or the same thing as in a piece of sound art, where the composer listens to the environment?

Christine Jonas-Simpson, a registered nurse in Canada, has explored the idea and practice of listening as both a musical and therapeutic action, and regards the two acts

as aspects of the same human-to human-activity. She quotes psychologist Michael P. Nichols – “being listened to means that we are taken seriously...that what we have to say matters”.

The idea of listening or ‘deep listening’ occurs in both music (Oliveros 2011), and in person-centred education (Rogers 2014). The concept of listening as in ‘listening to a person’ has been explored in medical literature as a means of attaining greater success in diagnosis (see, for example ‘t Hart 2021, and Casal 2015). One recent study discusses listening in the form of an intervention aimed at increasing wellness in healthcare workers themselves (Daniels et al 2019). This study involved the use of psychoanalytic psychotherapists already working in a hospital department who held weekly sessions with junior doctors, and reported benefits to the participants. The idea of listening to a person being analogous to the quality of listening in music occurs in multiple sources, and at times it is hard to make the distinction between listening (to music) as analogy, or as concrete reality (see, for example, Parse 1996).

### **Music as Key to Listening**

A series of studies (Jonas-Simpson 2001, 2003) based on Parse’s Human Becoming Theory in nursing incorporated music in the initial process of ‘dialogic engagement’. The added value of the musical engagement process claimed by the author of these studies was given by an enhanced ‘descriptive vividness’. Parse’s theory, on which Jonas-Simpson based her studies, has been criticised in that its use of technical language to reformulate the initial description of the lived human experience adds little to wider understanding, and risks obscuring this lived experience, rather than clarifying it (Edwards 2000). A further criticism which one could make about this stage of what is known as the Parse method is that once the stage of dialogic engagement is over, the participants no longer form part of the process – the ‘hermeneutic analysis’ stage is aimed at improving knowledge of human experience generally, not specifically to improve these particular individuals’ lives. The role played by participants thus appears rather passive. The music made by participants is of little value to Jonas-Simpson's project as music *per se*. Yet music can be an excellent and highly nuanced form of emotional communication. Many people use music as a means of emotional support, especially to ‘get them through’ tough experiences. The use of music as emotional support contrasts with the use of music in the initial stage of a Parse method approach - there is no attempt to use the music - in a public performance, for example – as a means of communicating the lived experience of the participants. Furthermore, the study by a qualified nursing practitioner who also played the flute was limited by the practitioner’s own musical abilities, valuable though these may be.

### **Models of Collaborative Composition**

Previous research I’ve been involved with explored the use of touch screen technology in schools to encourage participating students to think and create in what I describe as ‘compositional ways’, even when they have no knowledge of traditional notation (Hart and Williams, 2021). John Habron has also created work with people with dementia

which used collaborative composition techniques to make a piece exploring their own memories.

### **The listening composer**

The term 'listening composer' is borrowed from George Perle's 1990 book of the same name. I feel justified in making use of it because Perle implicitly defines compositional listening purely in terms of analytical listening to other composers' works. I intended 'The listening composer' to be a set of methods for community-based collaborative music composition based on techniques of listening – meaning 'listening to people' - from several sources used to facilitate the communal creation of a piece of music, with the aim of effectively sharing and communicating the lived experiences of participants to a wider audience. I will share my experiences of the first of two 'Listening Composer' projects, which culminated in a performance in July 2023.

### **Participatory Design Methods as a means of Composing Collaboratively**

The authority structure of classical music as it is traditionally envisioned tends to discourage non-specialist contributions (Goehr 1989), or indeed any collaborative or distributed creativity models (Clarke et al. 2017). One potential solution to this problem - that is, the problem of maintaining a high level of compositional control and technique in order to accurately convey emotional experience, but at the same time encouraging participation by non-professionals in the final product, is offered by the Participatory Design approach. Participatory Design (hereafter PD) emerged in manufacturing processes in the 1970s where the user experience of workers was thoroughly considered in the design process of new manufacturing processes. Spinuzzi (2005) summarises the approach in this way -

“What distinguishes participatory design from related approaches such as user-centred design is that the latter supposes that the research and design work is done on *behalf* of the users; in participatory design, this work must be done *with* the users.”

The application of PD approaches in collaborative composition design requires the definition of 'use' in the musical context. In this case we propose that 'use' will be defined as 'the communication of the emotional content of participants' lived experiences to a wider audience'. Some may be troubled by the idea of art having a *use* (although the long history of occasional music and *Gebrauchsmusik* suggests that such worries are misplaced), but PD methods have frequently been used in software design, with an emphasis of the communication of information. We are therefore regarding the communication of emotion as another form of information, with the composer in the role of designer-facilitator.

### **Healing Tales - Context**

After the onset of the Covid -19 pandemic in 2020 the contributions of healthcare workers were recognised by the populace of many countries and major cities with weekly applause on doorsteps. Healthcare workers were initially perceived as being on

the front line of a figurative conflict against the disease, especially as they were often risking their own lives before the development of vaccines against the disease. Hospitals risked being swamped by cases, and the brunt of the extra work was borne by doctors, nurses and other health professionals. Grateful recognition of this sacrifice did not continue however, while healthcare workers continued to be overworked in a UK health service threatened by a state of crisis due to funding restrictions and long-term under-investment. As a result, feelings of stress and isolation have been widely reported (Care Quality Commission 2022). Staff continue to work in extremely demanding conditions, with high levels of Covid infection, but as life in the community outside hospitals and care facilities has returned to normal, the additional loads placed on healthcare staff are generally ignored within the wider community. I set out to find out if we could use the arts – in this case, music - to remind the wider community of healthcare workers’ continuing sacrifice, but also to involve healthcare workers themselves in the creative process so that they might to some extent feel more ‘listened to’.

### **Healing Tales Research Questions**

The project set out to address the following questions:

1. Can Participatory Design (PD) be an effective model for collaborative composition?
2. Can an effective process be devised whereby participants co-create the form of a narrative piece using PD methods?
3. Are there benefits to participants in using PD methods to work with the composer/facilitator to create a piece designed around their experiences?
4. Are there benefits to participants in seeing their experiences presented in a composed and professionally performed piece?

### **Healing Tales - Methods**

Spinuzzi summarises the stages of PD project design as follows:

Stage 1: Initial exploration of work, including methods such as observations, interviews, walkthroughs and organizational visits.

Stage 2: Discovery process, where “[t]he goal is to co-operatively make meaning out of the work rather than to simply describe it”, and might include storyboarding or role-playing games.

Stage 3: Prototyping which might include co-operative exercises

At the end of the process, “results are shared in a form users can understand and share”.

The following proposed plan was also informed by recent work in curriculum co-creation, which also faces similar issues of perception of power structures (Galpin et al. 2022).

### Initial recruitment of participants January 2023

Bolton Royal Hospital Trust were identified as a partner organisation with the project for the following reasons -

- a. The team worked with them on a previous iteration of this proposal for Arts Council England;
- b. The trust has existing strong links with the University of Salford's Nursing and Midwifery team;
- c. Members of staff in the Trust have links with the directorate of music and dance (as former PGR students).

A group of 10 participants were sought through internal advertising within the Trust. The degree of anonymity they would have will be within their control at all times. The reason we did not insist upon anonymity for all participants is that some staff members wish to be publicly identified as co-authors of the final artistic product – and in fact all participants were happy to be identified in this way. Two participants withdrew from the project prior to the interview stage.

#### Stage 1 – Initial exploration carried out through individual interviews: February 2023

Participants were asked to talk individually about their experiences of working in the hospital at any stage of the Covid-19 pandemic, including the present. As this is a collaborative composition process, we asked participants to think about their sonic environments from the start of the project, including their own use of music as emotional support.

Indicative questions were:

If you were to try to communicate one experience that you had as a carer and as a person, what would you choose? What stands out? What sounds were present? What music helped you through the situation?

The interviews were recorded and transcribed. The transcription were shared with individual participants for them to check for accuracy, and that that they had been listened to correctly. Participants would then be asked to identify key elements of their testimony they wished to communicate to a wider audience.

#### Stage 2 –Discovery process: March 2023

- a. *Group session 1 - storyboarding of events.* We brought together participants as a group to share the key elements of their experience they wished to communicate (identified at the end of stage 1), and these were collaboratively developed into a storyboard, consisting of events, sounds, emotions, and music (the music they had individually identified as the 'music which got them through it' in stage 1).
- b. *Group session 2 - collective improvisation.* This session was with University of Salford musicians under the guidance of participants. This session unfortunately was not well attended, but we made some progress in exploring the sounds of the hospital ICU ward, and how they could be represented using a musical ensemble.

#### Stage 3 – Prototyping April 2023

*Group sessions 3 and 4.* Digital versions of the music were shared with participants as virtual orchestration. Participants could then feed back, in the group, or individually, especially in relation to the sections of the piece inspired by their own experiences. Several sketched sections were discarded as a result of feedback from participants – like a section which was meant to depict what it was like to be on the unit

in full PPE. My initial ideas were felt to be too 'creepy' and 'horror-film' like. We created a more minimalist-type texture with the same harmony, but with much more muted sense of stress.

The final stage was the performance, which took place on July 20<sup>th</sup> 2023 in New Adelphi Theatre, Salford. The performance was a transdisciplinary blend of live music, recorded environmental sounds, actors' voices reading transcripts of the initial interviews (as previously agreed with the participants, their actual voices would not be used in the final performance), dance choreographed by MA dance student Lizzy Owens, and live drawing, visible to the audience, by University of Salford colleague Adelina Court.

Following this performance, both participants and audiences were asked to respond to the extent that the stories of the participants were communicated accurately and memorably, and what effect doing this in the form of music had on the communication process.

The whole performance can be viewed by accessing the following URLs:

Part 1 <https://www.youtube.com/watch?v=6MnDkeWISWE>

Part 2 <https://www.youtube.com/watch?v=Nlc0pe3ceN8>

Part 3 <https://www.youtube.com/watch?v=hhlwMcy5zRM>

Part 4 [https://www.youtube.com/watch?v=rba8U\\_8l254](https://www.youtube.com/watch?v=rba8U_8l254)

Part 5 [https://www.youtube.com/watch?v=Ncvki0M0\\_zM](https://www.youtube.com/watch?v=Ncvki0M0_zM)

## **Evaluation**

The project was evaluated using three sources of data: the audience evaluation forms linked via a QR code after the performance of Healing Tales; the participants' questionnaires, completed after the project was completed; and personal recollection and self-reflection.

Roughly 150 people attended the premiere of Healing Tales, which took place on July 20<sup>th</sup> 2023, in the New Adelphi Theatre, Salford. Inevitably, the audience was pre-disposed to be favourable – many of them were recruited because friends, family members and colleagues had taken part in the project. Audience members for the premiere, which had been widely advertised through networks in Bolton Hospital, were in some cases hard to distinguish from participants. The piece was, to some extent then, telling the story of the audience as well as the participants. Of this audience group 22 responded. I had asked participants *not* to fill in the audience questionnaire, but some comments may indicate that they may have done in one or two cases, although I cannot be sure as both surveys were anonymous, organised using Google Forms.

Of the 8 participants, 4 completed the participant questionnaire.

My own reflections on the project are informed by my own notebooks and memories.

Audience responses were broadly very positive. On the crucial indicator of project success, namely, whether the piece communicated to a wider audience the stories and lived experiences of the participants, 86.4% of respondents reported that “music/dance enhanced the stories considerably”, while the remaining 13.6% of the audience respondents stated that “music/dance enhanced the stories slightly”. Qualitative comments included the following -

“It gave a view I was barely aware of but safe more depth and support too”

“Excellent way to tell stories with a backdrop of the performing arts”

“extremely moving and authentic piece of work”

“a great testimony to the reflections of Bolton staff”

“It was incredibly touching – I think we’ve tried to forget about everything and just pretend nothing has happened. This piece gave me and other audience members a space to process, and also remind us that it was a shared tragedy – our feelings around it are shared also.”

Negative comments referred mainly to the dance sequences. For example:

“I didn’t really understand the dancing bit, it was performed well, it just didn’t feel like it needed to be there”

This and similar comments may reflect the lesser degree of integration of the dance elements in the final performance. The dance was choreographed by Salford MA student Lizzy Owen, who had attended one of the sessions and met the participant group beforehand. However, while participants and I were delighted with the dance element, from a process point of view, it could be seen that this element had not been included soon enough. I included these elements, as well as the better-received live drawing, partly from fear that music alone might not hold the audience’s attention. The live drawing element, performed live on stage by Adelina Court, was praised in many audience responses. Ironically, this element was the least integrated into the process – Adelina Court was not included in any of the sessions. Possibly audiences are simply more familiar with the visual arts and animation – particularly where there is a figurative aspect – than with the more abstract language of dance. This would fit with audience data showing much higher numbers attending visual art exhibitions compared to dance events (Brook et al. 2020, p. 80).

From my perspective, the project was broadly successful in its aims. The piece produced was of high quality and successfully represented the stories of participants according to the participants themselves. The initial interviews, their transcription and the creation of a form for the piece using themes which emerged from these interviews were highly successful. Less successful was the attempt to co-compose the music with the participants – in retrospect this would have required many more group sessions than either project leader or participants had time for. It did work well to have the participants critique sections of the music which I had sketched in digital form to check that it matched up with their experience. In one case, this resulted in the rejection of a whole section of material which I would have allowed to pass (a section which became known as ‘muffled urgency’, as it represented the anxiety-inducing barriers of trying to

interact with colleagues and patients wearing full PPE). This material was detected by the participants as sub-optimal and they duly rejected it. The other means I used was to bring musicians from my free-improvisations and contemporary music group ACMG to try to improvise music in real time to the participants' requirements – a technique described by Habron et al.(2013). This attempt was only partially successful - only two of the participants were able to attend; and the division between 'the music' and 'the ensemble' was not obvious to participants – Western trained musicians are familiar with the idea that 'the music' might be rearranged for a different ensemble, but this is not so well understood beyond musically trained people.

Participants emphasised the value of *process* rather than *output* as having had a positive effect. Participants said that they valued the opportunity to share their experiences with each other initially, and with audiences subsequently.

That being said, Participatory Design methods do not necessarily require the end-users to be the originators of the design – they must be part of the research and design process, but this can be through testing and approval. In this case 'testing' is understood as hearing early versions of the music in digital form. All four responses received from participants said that they had 'had an input into the final product' confirming that they viewed the process as participatory.

## Conclusions

Future projects using a developed version of the method should address the following:

- Initial voice recordings should be done in a way that allows the voices of participants to be included where permitted, rather than voiced-up by actors.
- There could have been more group meetings (identified by the participants themselves).
- There could have been more input into the music composition process, rather than just the story-boarding/narrative process.
- An initial unwillingness to question the decisions of the project leader was detected.
- The participant group was not diverse in its ethnic make-up, or in its gender balance. Unfortunately, ethnic diversity was not improved in this project, although the group was more evenly divided in terms of gender and in terms of inclusion of disabled members.

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