Warning: My mother always told me it was a cardinal sin to read the end of a book before I’d read the beginning and the middle. If you believe it is equally sinful to begin a book review with a discussion about its end, skip to the middle of this review now.

In the final words of *Invitation to Community Music Therapy*, Stige and Aarø consider many plausible prospects for the future of community music therapy (herein labelled CoMT). Two of these include the possibilities that the interest of music therapists in CoMT will

... gradually fade as the fuss is over and service done … (or) Community music therapy will contribute to a transformation of the discipline and profession of music therapy to a degree that could make its status as an alternative to mainstream music therapy redundant” (p. 286).

Either of these very different prospects point to the same possible outcome in the future, that CoMT is dead. *Invitation* is the third book to explicitly explore CoMT; could it also be the final word?

As *Invitation to Community Music Therapy* attests, examples abound all over the world of people musicing in ways that empower them to draw on their own resources in everyday contexts for health promotion and prevention. This new book also demonstrates that the language used to describe and develop these musical practices is certainly becoming more sophisticated, useful and entrenched in the professional lives of music therapists. *Invitation* is proof that CoMT practice and theory is alive and well; could that trio of words really fade or soon become redundant in the lexicon of music therapy?

Stige and Aarø do not take it upon themselves to suggest which of the various future prospects is likely to prevail, leaving the reader with a ‘Who knows?’ Instead, their purpose in writing *Invitation to Community Music Therapy* is to bring all research-based CoMT books, articles and unpublished work together into a text book; this they achieve with phenomenal breadth that spans many countries in the world and privileges none. One of the issues identified and discussed at length in the book is ‘inclusion’. Practising what they preach, Stige and Aarø are incredibly inclusive and non-hierarchical with the texts they draw upon to illuminate CoMT, describing practice and theory from books, articles, PhDs, masters and personal communications from all around the globe. A consequence of this inclusivity is a lack of synthesis or expert critique from the authors, leaving readers to judge for themselves the merit and place of each of the studies/projects described. Perhaps this lack of critique is also a conscious attempt on behalf of the authors to model the particular type of reflexivity
they encourage in relation to CoMT practice, where music therapists critically 
examine their own positions and perspectives more than relying on others in order to 
create “a climate for enhanced reflection in ways that affirm diverse voices” (p. 163).

The previous two books on CoMT were grounded in case studies. In contrast, 
*Invitation to Community Music Therapy* is a broadly theoretical book. Case examples 
still abound but this time their inclusion is driven by the theoretical ideas they serve to 
illuminate rather than the other way around. The book is structured in four parts:

- **Part I** introduces the reader to CoMT by providing an overview and a brief 
history of its development.

- **Part II** explores basic concepts of CoMT, such as health and wellbeing, 
community and social resources and how these relate to music. Some of these 
concepts are discussed in greater depth than ever before in music therapy 
texts, especially the terms health, wellbeing, community and social resources.

- **Part III** addresses CoMT in practice, focussing on the values, issues and 
processes involved in *health musicking*. The chapter on values reveals Stige’s 
idealism in relation to CoMT as he and Aarø discuss CoMT as a human rights 
practice involving notions of freedom, equality, respect and solidarity. Indeed, 
in their introduction these authors suggest that CoMT “opens a space for 
visions of a better world” (p. 5). This idealism is tempered slightly by a much-
needed discussion of difficult predicaments in CoMT practice when values 
such as freedom and equality conflict, or processes require negotiation 
between the needs of the individual and of the group.

- **Part IV** examines the development of CoMT and music therapy more broadly 
as discipline and profession, discussing such issues as research and ethics. In 
this book Stige broadens his scope of potential research methodologies with 
which to examine COMT practices, advocating a pragmatic approach to 
methodology whilst still highlighting the good fit between CoMT and 
Participatory Action Research.

*Invitation to Community Music Therapy* is a text book and each chapter is 
enhanced with pedagogical features, such as discussion topics for students to 
reflect upon in relation to the concepts explored in each chapter, textboxes that 
summarise different case examples of CoMT and sometimes relate them to the 
theoretical main text (although this is sporadic) and articulation of the key terms 
involved in each chapter.

As is to be expected with any new set of ideas, the trajectory of CoMT began with 
an articulate deconstruction of the ideas that had reigned before (conventional 
music therapy) alongside a reluctance to offer any definitive answers for what the 
new set of ideas might mean. This is encapsulated well by the first book to 
explicitly explore CoMT (edited by Ansdell and Pavlicevic, 2004, and called 
*Community Music Therapy*). The second book (written by Stige, Ansdell, Elefant 
and Pavlicevic, 2010, and called *Where Music Helps*) offered less reaction to what
had gone before and more construction of what CoMT was becoming. In particular, it highlighted how CoMT practices tended to be more ‘outwards and around’ than the more ‘down and within’ practices associated with conventional music therapy.

This third book in the history of CoMT continues that trajectory, breaking into deeply theoretical ground and evolving closer toward a metatheory for practices related to music and health, or what Stige terms ‘health musicing’. Yet it does not go far enough to be considered the final word in CoMT. The scope of CoMT as Stige and Aarø conceive of it at this point is confusingly broad and narrow at the same time. At various points in the book, far-reaching statements paint CoMT as an overarching metatheory for any practices relating to music and health (e.g. “The purpose of community music therapy is not primarily healing and treatment but the promotion of health in the widest possible meaning of the word”, p. 59; “CoMT ‘will bring music therapy from a marginal position to a more central one in late modern societies, transforming a restricted space of specialist service to the enormous sphere of music for community development and public health”, p. 286). At other points in the book, and more commonly, the scope of CoMT is narrowed to something smaller than the field of music therapy because it is seen as growing out of the field of conventional music therapy but not inclusive of it. The final word on CoMT, after which the trio of words will cease to be uttered, will be that which integrates CoMT practices and ideas with those of conventional music therapy and other practices related to music and health (such as community music) to provide a comprehensive metatheory for explaining where and how music helps in all health-related contexts and endeavours.

It is not the underlying intention of Invitation to Community Music Therapy to present such a metatheory. Stige and Aarø reveal a reluctance for such audacity, suggesting that CoMT is not just ‘outwards and around’; it is also ‘from below’ because it “cannot be defined by music therapists or other experts” (p. 170). Whether they feel comfortable about it or not, however, Stige and Aarø have revealed themselves through their new book as experts in the field of CoMT, willing to try to define it in terms of the values, issues and processes involved in its theory and practice. So, while I remain doubtful about the extent to which we can attach the words ‘from below’ to CoMT, I am extremely thankful for Stige’s and Aarø’s efforts ‘from above’. I heartily recommend this book to students and practising music therapists who would like to broaden the language and ideas they use to describe their existing CoMT practices, or to any health or music professional who desires to “step boldly into the field of CoMT” (Stige & Aarø, 2012, p. viii).

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