



MUSIC THERAPY AND MENTAL HEALTH



Samantha Pogue
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Executive Summary

The purpose of this report is to inform people with mental illness the benefits of music therapy and to see if it will help lessen some of their symptoms and improve their quality of life. Many people around the world live with mental illnesses, and there are a variety of other forms of therapy that are more popular, such as psychotherapy and medication. Music therapy has become a growing field, and a lot of significant research has come out within the past decade, illustrating just how music therapy can help alleviate some of the symptoms of mental illness.

This paper goes through several benefits that have been presented in some of the most significant literature to the field of music therapy. Through the literature reviewed, these benefits were analyzed to find which were the most noteworthy for those who had participated in a music therapy program of some sort. The research shows that music therapy can substantially improve the quality of life, anxiety, spirituality, and social relations. Some other ways music therapy can improve symptoms of mental illness is helping patients obtain a more positive outlook, increase self-esteem, and give them the knowledge to cope with their mental illness outside of therapy.

Music therapy is proven to be effective in treating certain symptoms of mental illness. There could be more research done on how the physical symptoms are affected. There is also not substantial literature comparing music therapy to more traditional forms of therapy. For music therapy to be a more accredited treatment, researchers should conduct more studies that compare music therapy to treatments such as psychotherapy, as well as address what methods of music therapy are the most effective. Overall, music therapy should at least be considered by those living with mental illness.

Introduction

In any given year, 25% of the US population have a diagnosable mental illness, as well as many more people around the world. That equates to approximately 57.7 million Americans ages 18 or older. In addition, 6% of the population is diagnosed with a severe mental illness that have detrimental effects to their everyday life (Silverman 2016). Mental health has always been prevalent in our society, with many people dealing with it every day. In the last few decades, the treatment of mental illness has come a long way. However, the problem is that unlike most physical ailments, psychological ones are very different from person to person, so there is not a singular solution to any mental illness. Mental illness is most commonly treated using psychotherapy or medication, although there are others that can be useful as well. One form of therapy, which is becoming increasingly more popular, is music therapy.

Music has a strong influence on emotions and can have an effect not just in therapeutic sessions, but in everyday listening. What makes music therapy different from just listening to relaxing music? “Music therapy is an established health profession in which music is used within a therapeutic relationship to address physical, emotional, cognitive, and social needs of individuals” (“What is Music Therapy”). It uses music interventions conducted with a trained music therapist that help an individual attain a desired outcome. Music therapy can help solve both physical and mental health problems, such as chronic pain, dementia, autism, and Parkinson’s disease. Music therapy comes in the form of creating, performing, or listening and analyzing music to help patients achieve their goals. This can be accomplished in either a group setting or individually. Music therapists are trained professionals who have studied both psychology and music (“What is Music Therapy”).

There has been research done on how music therapy affects those with mental health needs. Music stimulates the senses and creates a feeling of predictability and security. It is an emotional outlet for patients to process and manage their feelings. Creating music, listening to music, and discussing its meaning can help resolve psychological, cognitive, and communicative issues. According to the American Music Therapy Association (AMTA), some benefits of music therapy for people with mental health problems include creating a sense of control, develop coping skills, improving self-esteem or personal insights, improved social interactions, and develops positive thoughts and feelings (“Music Therapy and Mental Health”).

In recent years, there has been an increased interest in music therapy. Music therapy programs are popping up at universities all around the country, as well as more literature. Music therapists claim that they can reduce symptoms of mental illness and improve their lifestyles, but how specifically does music therapy aid those with mental illness? Music therapy has benefits for those with mental illnesses, including reduced anxiety, better quality of life, decreased physical symptoms, and a greater awareness of how to cope with mental illness.

Methods

I have always had an interest in music and how it plays on emotions. I first heard of music therapy while looking into careers with music, although I was not sure what it was or what it entailed. I started hearing about this field more in passing and became intrigued into what it was and if it was a viable treatment. Interested in learning more about the topic, I decided to research it for this paper to see if there were benefits. Music therapy can treat things such as dementia and autism, I am also interested in psychology and mental health, which is why I chose

mental illness, as my focus. Of the mental illnesses, I decided not to look at articles which talked primarily about schizophrenia, since there were so many that specifically addressed it.

For a basic understanding of music therapy, I looked at the American Music Therapy Association's website. There, they had information about what music therapy was and how it was used, as well as how it related to mental health and mental illness. They also had handouts that included more information on different health problems that music therapy was used to help with the symptoms. It also included a list of academic research papers they thought were important to the field of music therapy and mental illness.

The research for this report was completed by reviewing literature from the field of music therapy. I first looked through the Academic Search Premier and found the scholarly articles with the most citations according to PlumX Metrics, then searching by most cited through Web of Science. After finding the most relevant heavily cited papers, I then looked at the two most popular academic journals. For music therapy, this is the *Journal of Music Therapy* and the *Nordic Journal of Music Therapy*. I used the most recent articles published that were relevant to the treatment of mental illness. All of the articles were published within the past seventeen years, with most of them being published within the last four years.

Results

A number of benefits were discussed the literature, including mental, physical, and social. The most common theme in these papers was that music therapy decreased anxiety in patients undergoing music therapy. Listening to relaxing music has been proven to stop the increase in cortisol, the main stress hormone, and helps people better recover after a stressor (Khalifa et al. 2003). In "Effects of a music-creation programme on the anxiety, self-esteem, and quality of life

of people with severe mental illness,” they use the Hamilton Anxiety Rating Scale, which measures anxiety on a scale from 0-56 based on interview questions, to assess the patients’ change in anxiety before and after undergoing music creation therapy. They found that the group that went through the music-creation program had decreased anxiety, showing significant improvement when compared to the control group that did not go through the music-creation program, and maintained about the same anxiety ratings. Participants also reported less anxiety symptoms than when they started (Chang et al. 2018).

Another topic that comes up frequently in the literature is measuring the quality of life. This is typically calculated using interview questions, such as the World Health Organizations Quality of Life-BREF, which consists of 26 items in four categories: physical health, psychological health, social relationships, and environment. There was significant improvement overall, especially in social relationships (Chang et al. 2018). In a 2014 study, the quality of life improved significantly for those participating in group songwriting (Grocke et al. 2014).

Creating music can help increase self-esteem. In “Group music therapy for severe mental illness” (2014), they found moderate increases in their participants’ self-esteems. One study measured the change in self-esteem using the Rosenberg Self-Esteem Scale, which has five positive and five negative questions and is scored 10-40. During the course of music creation therapy, patients experienced a significant increase in self-esteem, while the control group’s stayed the same throughout (Chang et al. 2018). *Figure 1* below includes a list of all the benefits proven in the literature, as well as illustrates which ones were the most commonly researched.

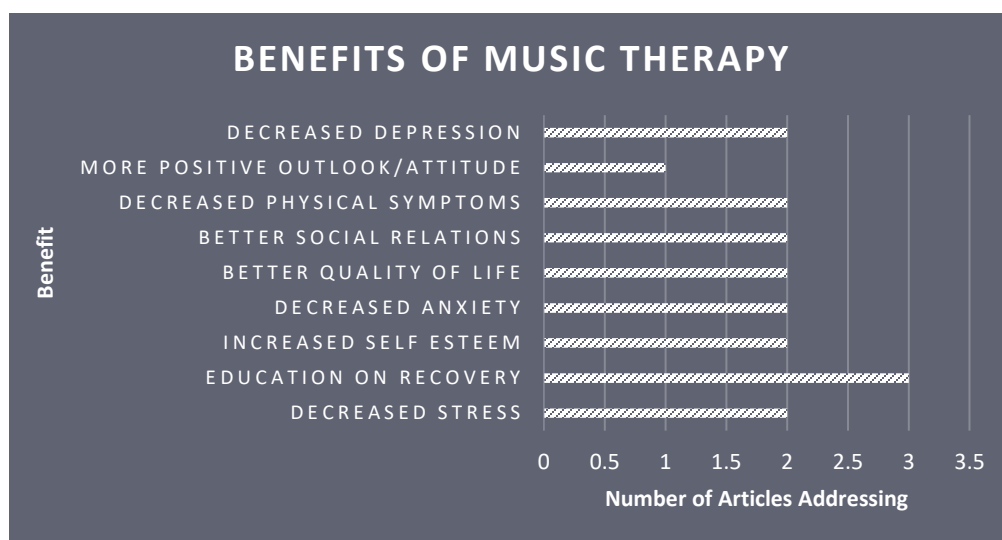


Figure 1: The most common benefits researched in literature reviewed

The two most common forms of music therapy include lyric analysis and music creation. Music creation includes songwriting, as well as performing these songs. Song lyrics reflect daily struggles of living with mental health, as well as hopes and goals for the future. Participants reported that they enjoyed group songwriting as it gave them an outlet for creative expression and made them feel accomplished, having learned how to write music and perform (Grocke et al. 2014). In lyric analysis, the music therapist would have their patient listen to a song, then analyze how the lyrics of the song fit into their lives and how the songs made them feel emotionally (Kerr et al. 2001). There no literature comparing lyric analysis and music creation therapies to see which one, if any, is more effective (Silverman 2016).

Recovering from a mental illness is not just about going to therapy session; there is work to be done outside of therapy. Professor Michael J. Silverman from the University of Minnesota-Twin Cities advocates for educational therapy, where the patient learns how the treatment works and how to live with their mental illness. He has tested the use of music therapy in educational music therapy and family-based educational music therapy, in which the whole family

participates. Educational music therapy slightly improved the patients' scores in illness management knowledge, depression, tension, confusion, and fatigue (Silverman 2016). When including the family, the employment rates of the family members increase, and the family member's stress decreases (Silverman 2014). The graph below, *figure 2*, illustrates which methods, whether music listening, creation, or education, were the most prevalent in the literature reviewed for this report:

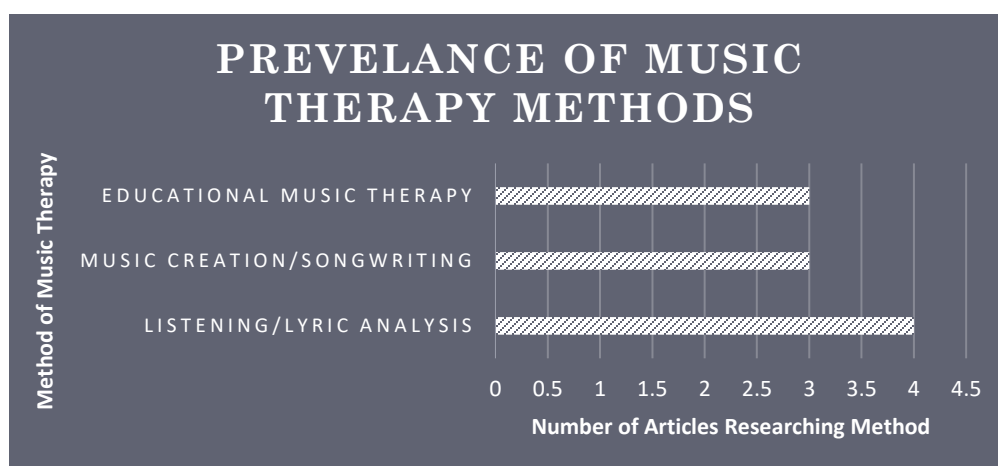


Figure 2: Comparison of music therapy method most used in the literature.

Another thing to teach patients is the types of music that will help them manage their emotions. The choice of music is crucial. Sometimes, when adolescence chose their own music to calm down to, they can end up feeling more angered or depressed. One study attempted to make young people more aware of their stress and teach them how to use music to reduce stress. After the session, they changed the type of music they were listening to and found it did help manage their moods and emotions (McFerran et al. 2018).

Most literature on music therapy is about group music therapy sessions. Instead of meeting individually with a therapist, patients get together in a group to write and perform

music. There are some benefits to a group setting. It allows a creative way to engage socially and connect with others. However, sometimes there are issues with the group dynamic (Grocke et al 2014) and it is hard to accommodate every group member's wants and needs (Silverman 2014).

Studies that include more sessions or go longer tended to see more significant changes in participants of music therapy studies. A study showing the effects of music therapy on patients with schizophrenia did not find significant decreases in patient anxiety, while studies that have gone for longer have found conclusive evidence of it. In that study, there were only 540 minutes of total intervention time, while a study with 2,880 minutes of intervention time found significant decreases in anxiety. Music therapy could have a dose response, in which the more therapy equates to a better recovery and more progress (Chang et al. 2018).

Discussion

The literature reviewed answered the question of what the benefits are of music therapy for mental illness. Common benefits included increased knowledge of coping mechanisms, decreased depression and anxiety, a better quality of life, and a decrease in physical symptoms. So many sources listing the same benefits proves that music therapy is an accredited way to treat psychological illnesses.

A couple of the benefits researched are better proven than others. The greater benefits include quality of life, decreased anxiety, and better social relations. "Group music therapy for severe mental illness" (Grocke et al. 2014) found that of all the benefits they were testing for, spirituality had some of the biggest growths, although they did not really touch on how they were

defining spirituality or what that development looked like in their participants. How spirituality connects with music therapy could be an area of more research.

Some of the benefits listed by the AMTA that were not discussed were better verbal expression, more positive behaviors, and better decision making skills. One way to solve this is for researchers to look into how music therapy affects the decisions participants' make in their everyday life and not just the quality of life, and to look into how music therapy can help specific physical symptoms of mental illness.

Figure 1 includes each of the benefits that were researched, and how frequently. Many of the studies researched not just one benefit. They would try and confirm multiple benefits in one study. For example, "Group music therapy for severe mental illness" (Grocke et al. 2014) researching five in one paper (quality of life, social enrichment, self-esteem, spirituality, and psychiatric symptoms) and also covering how the intervention was experienced. While that gave the researchers a basic list of benefits of music therapy, it might be beneficial in future research to focus on one or two in a single study to really examine how much they are improving and how these affect other areas of their lives.

Things such as anxiety, positivity, and quality of life are hard to quantify and compare objectively. Some studies went about quantifying the results better than others. Many studies just used interview questions and patient testimonies, such as "Intentional music use to reduce psychological distress in adolescents accessing primary mental health care" (McFerran et al. 2018) and "Group music therapy for severe mental illness" (Grocke et al. 2014). The issue with this is that different may report their symptoms and emotions in another way. It is important to streamline the results in order to adequately compare results. One study that did this especially well was "Effects of a music-creation programme on the anxiety, self-esteem, and quality of life

of people with severe mental illness” (Chang et al. 2018). To calculate anxiety, self-esteem, and quality of life, they used already established methods of measuring these subjective things. They used the Hamilton Anxiety Rating Scale (HAM-A), the Rosenberg Self-Esteem Scale (RSES), and the World Health Organization’s Quality of Life-BREF (WHOQOL-BREF) respectively. These systems give each of these arbitrary ideas a numerical rating to responses to the same questions. Other studies used the HAM-A Scale to measure anxiety, but the studies that also covered self-esteem and quality of life did not. While their patients reported feeling more self-esteem or a better quality of life, or it was observed by the researchers, there is no way of showing if there was a significant different when compared to a control group that did not participate in music therapy.

One unexpected topic that was discussed frequently in the literature was the importance of understanding the therapy method in the recovery process. They stress that if patients do not know how to help themselves, they will not be able to continue their recovery outside of therapy. For music therapy to be successful, it cannot just be an outlet for emotional expression once a week. Music therapists must also give their patients the tools they need to successfully live their lives outside of therapy with their mental illness. Educational music-therapy addresses this issue, so it could be useful for music therapists to give their patients some knowledge of how to gain more control over their lives. It can be a supplement to music listening and music creation and could be integrated into programs that already exist.

“Effects of a music-creation programme on the anxiety, self-esteem, and quality of life of people with severe mental illness” (Chang et al. 2018) touched on the idea that the benefits of music therapy are dependent on the dosage. It is a given that the more therapy will produce more benefits, but what is the correlation? Does more time devoted to music therapy yield

considerably more benefits when compared to someone who did not spend as much time in music therapy? By researching this further, music therapists could at least get an idea of how long their sessions should be on average, as well as how long the intervention could go before they start to see significant progress.

There seemed to be three main methods of music therapy analyzed in the literature: listening and lyric analysis, music creation and songwriting, and educational music therapy. The most common method of music therapy used in these studies was listening and lyric analysis, as shown in *figure 2*. While educational music therapy is more of a supplement to music therapy programs, songwriting and music creation seem to also successfully treat problems associated with mental illness. There is literature to attest to the dependability of each of these, but none that discusses the outcomes and benefits of one compared to the other. The results of this research could show professionals in the field of music therapy what areas they should be focusing on and what methods they could further develop so that they can better assist their patients.

Another topic that lacked research is comparing music therapy to more traditional forms of therapy, such as group therapy or psychotherapy. The control group that the studies were compared to had done no therapy at all. When compared to these groups, the participants of the study seem to improve significantly, but would that hold up when compared to other forms of therapy? Research looking into this subject could help create more credibility for the practice of music therapy.

Conclusion

The literature from the field of music therapy verifies that music therapy is in fact a legitimate method of treating mental illnesses. All of the most relevant studies have found some of the same benefits to music therapy for those with psychological issues, such as decreased anxiety, decreased depression, better knowledge of coping mechanisms and awareness of mental illness, and a better quality of life.

Although the existing literature was enough to answer the question of whether there are benefits to treating mental illness with music therapy and what are they was answered, there is still many more topics that could be added to music therapy literature. There are a number of subjects I believe would be useful to add. There is no research that concludes that music therapy is particularly better than other forms of therapy, and also no literature that shows that one method of music therapy is more effective than the other. These ideas should be further explored so that mental health professionals know which treatments they should be paying attention to and what to recommend their patients.

Should someone suffering from mental illness consider music therapy as a solution? The research shows that music therapy is a useful form of therapy for psychological illnesses, but there is nothing suggesting it is better than traditional forms of therapy such as psychotherapy. Music therapy still has shown positive outcomes, so they could use this type of therapy. However, until further research is done, maybe it should only be used to supplement traditional therapy and to strengthen the results.

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Chang, B., Chen, B., Beckstead, J. W., & Yang, C. (2018). Effects of a music-creation programme on the anxiety, self-esteem, and quality of life of people with severe mental illness: A quasi-experimental design. *International Journal of Mental Health Nursing*, 27(3), 1066–1076.

This study sets out to find out how music therapy affects anxiety, self-esteem, and the quality of life of participants of a group music creation program. The intervention went on for 32 weeks of 90-minute sessions. As a group, they were asked to write songs based on their experiences with the recovery process, then perform them. They were able to show significant improvement in anxiety, self-esteem, and the quality of life when compared to those who did not attend these sessions. In addition to this, the group aspect helped foster better social relations, and the songwriting helped them feel a sense accomplishment. This study was shown to be heavily cited according to PlumX Metrics in the Academic Search Premier database. What stands out about this study is their precise and streamlined methods of measuring the benefits, which allowed them to better verify their data. They also had major success with the outcomes of this program.

Grocke, D., Bloch, S., Castle, D., Thompson, G., Newton, R., Stewart, S., & Gold, C. (2014). Group music therapy for severe mental illness: a randomized embedded-experimental mixed methods study. *Acta Psychiatrica Scandinavica*, 130(2), 144–153.

The researchers wanted to find out if group music therapy could alleviate psychiatric symptoms. They conducted a thirteen week intervention where they used both lyric analysis and song writing. After looking at comments from lyric analysis, lyrics of the songs they wrote, and focus-group interviews, the researchers found that group music therapy primarily improves the quality of life and spirituality. Group music therapy was recommended to others who had severe

mental illnesses. This study included testimonials from patients and music therapists who participated in the study that spoke to their experience in the program. The testimonials, more than prove that the quality of life and spirituality improve, attest to the group therapy structure as a way to interact creatively with others and express themselves together. They also broke down what subjects they were addressing the most in their songwriting, and what the lyrics specifically were.

Hsu, & Lai. (2004). Effects of music on major depression in psychiatric inpatients. *Archives of Psychiatric Nursing*, 18(5), 193-199.

Kerr, T., Walsh, J., & Marshall, A. (2001). Emotional change processes in music-assisted reframing. *Journal of Music Therapy*, 38(3), 193–211.

Khalifa, S., Bella, S., Roy, M., Peretz, I., & Lupien, S. (2003). Effects of Relaxing Music on Salivary Cortisol Level after Psychological Stress. *Annals of the New York Academy of Sciences*, 999(1), 374-376.

n.a. (2006). *Music Therapy and Mental Health*. Retrieved from https://www.musictherapy.org/assets/1/7/MT_Mental_Health_2006.pdf

McFerran, K. S., Hense, C., Koike, A., & Rickwood, D. (2018). Intentional music use to reduce psychological distress in adolescents accessing primary mental health care. *Clinical Child Psychology & Psychiatry*, 23(4), 567–581.

Silverman, M. J. (2014). Effects of family-based educational music therapy on acute care psychiatric patients and their family members: An exploratory mixed-methods study. *Nordic Journal of Music Therapy*, 23(2), 99–122.

Professor Michael J. Silverman from the University of Minnesota-Twin Cities sets out to find how family-based music education can help the family and the psychiatric patient. While going through music therapy, he also tries to teach the family of how to live with a family member with mental illness. Although they found that it was hard to accommodate every family members needs and wishes in a limited amount of time, they found that the patient could better cope, and the families experienced less stress and better employment rates. Professor Silverman

is the Director of Music Therapy at the University of Minnesota-Twin Cities, as well as highly cited by others in his field. His research was recommended to me by another faculty member in the music therapy program.

Silverman, M. J. (2016). Effects of educational music therapy on illness management knowledge and mood state in acute psychiatric inpatients: a randomized three group effectiveness study. *Nordic Journal of Music Therapy*, 25(1), 57–75.