

## Benefits of Using Music Therapy in Mental Disorders

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### Abstract

This article presents a review of the use of music therapy in mental disorders studies searched from medical databases. The use of music as a form of therapy has shown beneficial effects in patients with psychological problems. In this analysis, the positive impact of music therapy in mental disorders is evidenced. They will present some of the results and findings of different studies which have shown the music therapy as a novel and emerging discipline. The results of the studies show that patients with mental disorders have therapeutic benefits in both psychosocial functioning and global functioning. Therefore, this therapy is proposed as an effective and enjoyable therapy for users.

**Keywords:** Music therapy; Mental disorders; Benefits; Practices

### Introduction

Many studies have evidenced the beneficial effects of music therapy in patients with psychological disorders. In scientific literature, we have found empirically documented the emotional responses when people listen to music [1,2]. It has been demonstrated that patients with mental disorders perceive the expressiveness of the music the same way than without mental illness. The results support that the music is a good therapeutic modality for individuals with mental illness [3-5].

For the preparation of this section we have conducted a search in major medical databases (Medline, PubMed, Cochrane) and in some publications research in the form of doctoral theses (For lack of space are published in another number)<sup>1</sup>. A search was conducted in the TESEO database about the topics which we discussed in this work, like schizophrenia disorder. About this issue, we found 144 records which, surprisingly, none is related to music therapy. We will use two of the most current doctoral theses which working with other therapeutic approaches-non music therapy- with people who suffering from schizophrenia disorder (2006)<sup>2</sup> (2007)<sup>3</sup> [6,7] from Deusto University and Ramon Llull University. About doctoral theses on music therapy only 6 registers are located. Again, none of them had links with the collective interests us. We will name the last two theses to have a reference of what has been investigated in recent years [8-10] (2008)<sup>4</sup> (2006)<sup>5</sup> from Complutense University of Madrid, Spain. We have found several studies about the influence of music therapy on the symptoms of mental disorders. In this review we have collected the results obtained by researchers around the world in the study of music therapy in mental illness. In addition, we have focused in those studies whose findings have influenced a number of later investigations. Then we explained different studies about music therapy in mental disorders.

### The Use of Music Therapy in Mental Health

The first revisited article evidence the influence of music therapy in the diversity of mental disorders. The seven subsequent studies are

<sup>1</sup> For more information Montánchez "Music therapy in patients with chronic mental illness: Study group and individual case" (Master's thesis, non-Catholic University of Valencia, Spain).

<sup>2</sup> Called " Psychosocial rehabilitation in schizophrenia: predictors of success in the process of community integration".

<sup>3</sup> Called "psychotherapeutic intervention in the initial phase of schizophrenia: Design and development of PIPE-Programme early intervention program in schizophrenia".

<sup>4</sup> Called "The application of music therapy in the group of battered women. Two single case studies and an example of return".

<sup>5</sup> Called "Influence of music therapy on the climate of coexistence in secondary schools".

focused on patients with schizophrenia. In the first study, [3] Loroño showed the benefit contribution that music therapy provided in the therapeutic process of patients with mental illness. It was an experience in the framework of a Mental Health Center during a year in Vizcaya. The center assists to patients from public assistance on an outpatient basis. The overall objective of this program was to provide the patient, a novel and aesthetic experience immersed in a therapeutic process which facilitated the development and personal, group and family growth. The family and social environment was closely linked to the therapeutic process, in which, person is an unique individual, from a physical, emotional, free and creative perspective. Other objectives of the sessions were to establish a space and time for relaxation in a context without words, establishing a communication code in rhythm, music listening, non-verbal, exploration, movement, improvisation, leaving a space to word at the end of the sessions. One of the most important aspects was to be able to explore intrapsychic ways of patients.

The findings of this study show that patients with severe mental illness have special difficulties in expression and communication and showed rejection in relationships. Therefore, in music therapy, patients will be able to be displayed themselves in a different context, favoring the expression of each one. The music therapist will be the facilitator and communication bridge. In this work, the relationship established with patients is essential and the most important. Music, instruments, games of creativity or expression are the working tools, working areas of the personality of difficult access with other therapeutic models. Music therapy allows new partnerships and resources. In addition, the author advises that we can use guidelines of active music therapy in the field of relational, experiential or where the communication is opened to the outside, or guidelines receptive music therapy addressed to the inside of each patient. It is important to work both ways because each patient has a different process.

The following investigation, Gold et al. [5] indicated that the goal of this therapy was to help people with severe mental illness to develop relationships and work different issues using the word exclusively. These

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Received March 18, 2016; Accepted July 11, 2016; Published July 13, 2016

**Citation:** Montánchez Torres ML, Juárez Ramos V, Martínez Suárez PC, Alonso García S, Torres Mendoza M (2016) Benefits of Using Music Therapy in Mental Disorders. J Biomusic Eng 4: 116. doi:10.4172/2090-2719.1000116

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authors say that music therapy approaches are separated into three different areas: active, passive, or a combination of both, depending on the level of structure and focus of therapeutic attention. Clinical reports indicate that this type of therapy in patients with psychiatric problems often is based on both-active and passive- techniques. Nevertheless, the improvisation and verbal expression of interaction with music are often critical. The objectives of this study were to explore the effects of music therapy, alone or added to standard care, compared with placebo effect or standard care only or no treatment for people with severe mental illnesses such as schizophrenia. Regarding the conclusions of research, we have extracted the following: for interventions of "low dose", less than 20 sessions-, the effects on the mental status were not significant, but there was a significant response in the negative symptoms of schizophrenia. Negative symptoms are related to emotional indifference and insensitivity, poor social interaction and a general lack of interest. The effects on general performance of person were significant with "high doses" -20 or more music therapy sessions-but not for the "low dose". Music can specifically address issues related to emotion and relationship. Therefore, it seems likely that music therapy may be appropriate, specially, in the treatment of negative symptoms in schizophrenia. This therapy will have significant effects on the patients when there are a sufficient number of sessions. Music therapy, as an adjunct to standard care, helps patients with schizophrenia to improve their general condition and their mental state. Finally, the authors considered that it is necessary research about the long term effects in people with chronic disease and its dose-effect relationship.

In another study [11] is examined the use of music therapy as an adjunct to the medication in patients with chronic schizophrenia. To do this, the goal of psychiatry is to return the patient to their social environment. The conventional antipsychotic drugs are effective and fundamental in the treatment of positive symptoms, but the negative symptoms are more resistant to this type of treatment. The results of this study suggested that apathy, lethargy, affective poverty and cognitive disorganization improved significantly. Music therapy can be used as a form of social communication and the musical activities should act as socializing, promoting the interaction between people.

In the fourth study, Sabatella [4] showed the results of various projects of group music therapy conducted with patients with chronic schizophrenia. The therapeutic objectives cited were:

- a) Knowledge and awareness of oneself.
- b) Knowledge of others people and their relationship with them.
- c) Improve the sense of identity with musical experiences.
- d) Helping patients feel safe to express themselves musically.
- e) Facilitating self-expression and promoting psychological growth.
- f) Encouraging verbal and non-verbal communication.
- g) Promoting the interaction between patients through music.
- h) Developing the feeling of being in a group, making music together and reinforcing the sense of self-esteem.
- i) Release and liberation.
- j) Integral Development-psycomotor, cognitive, emotional and social-expression, communication, creativity.

The format of the sessions of group music therapy was semi structured. Patients were placed in a circle and standing. This situation favored the eye contact, interaction, body activation and increased the feeling of belonging to group. Finally, the implemented techniques had the following structure:

- a) Body activation Techniques.
- b) Song of names within a binary musical structure.
- c) Free or structured instrumental improvisation or percussion

instruments.

- d) Singing songs.

The following study, due to Murow and Sanchez [12], examined the use of music therapy in the perception of wellness of patients with schizophrenia and the evolution of their negative symptoms. The group was 15 patients with schizophrenia in chronic phase of different typologies, which were assigned to three types of psychosocial programs, one of which was music therapy. In this work of music therapy, they used musical improvisation techniques in order to improve verbal and nonverbal communication, promote interpersonal interaction, and develop skills of group interaction. The results showed that patients had an improvement in their wellness throughout the therapeutic process. From the third month, there are significant differences. This improvement will be an indispensable factor in the permanence and active participation of patients in treatment. Furthermore, the study demonstrated a significant decrement in the effect of the negative symptoms. Therefore, there was a correlation between low of negative symptoms with increased sense of wellness. Musical experiences can be from very simple to very complex and can be adaptive to the needs of each person. Once a person is involved in the musical experience, his behavior is guided to this reality, the here and now. The study showed the benefits of musical experience in this group, encouraging the cooperation and integration between members of this group and development of social skills. This therapy is a way to have fun and a solution to their problems, especially in the interpersonal area.

In the other hand, Valencia, Rascon and Murow, compared the three types of intervention: psychosocial therapy, music therapy and multiple therapies in 58 patients with schizophrenia during 6 months. The general objectives of music therapy intervention were:

- 1) Developing social skills and improving their functionality.
- 2) Improving the negative symptoms.

In each session the following aspects were worked: contact with reality, attention, concentration, interpersonal interaction, recognition and expression of feelings. The sessions were in group and were oriented to here and now. The session was structured as follows:

1. Individual Improvisation.
2. Improvisation group.
3. Expression of personal feelings.
4. Personal evaluation of each session for the patient.

The results showed that patients who participated in any three types of therapy had benefits in psychosocial functioning and global functioning but in different proportions. The psychosocial therapy and music therapy were the most effective and less desertion. The patients of control group did not improve. This paper argues that the increment of sessions and therapists did not guarantee a greater therapeutic effect. One limitation of this study was not able to make a longitudinal tracing.

Meanwhile the study of Martinez et al. [13] presents the results of a comprehensive rehabilitation program of chronic schizophrenic patient. The general objectives were to safeguard stability in the clinical picture, optimize psychosocial functioning, daily activity, and family functioning. Music therapy, in this case, is used as a way of verbal communication that allows patients to have experiences structured in the time, which encourages the contact with reality. By therapeutic musical experiences the opportunity to interact in a group is increased, strengthening self-concept socialization, altruism, optimism and the use of leisure time.

The therapeutic strategies used were effective in reducing the rate of hospitalization, maintaining stability in the clinical picture, improving family and psychosocial functioning, and improving the daily performance of the patient.

The goals of the authors were:

- 1) Checking psychiatric symptoms.
- 2) Reducing the disabilities of the patient and family.
- 3) Taking advantage of the functional parts of patients.

The conclusions of this program demonstrated its effectiveness in the rehabilitation of people with schizophrenia and their families, initially as two years later. For its part, the symptoms of experimental group after one year of treatment persisted regular and stable compared to the clinical picture in the control group. On the other hand, the emotional disorders of family declined significantly in the experimental group. The family changed the attitude of criticism towards a more comprehensive and affectionate patients. In the area of self-concept and socialization, the experimental group showed an improvement compared to the control group but not significant. Another of the achievements was the reduction in the relapse rate in the experimental group and the control group. The experimental group had fewer hospitalizations than the control. The findings showed that the rehabilitation program previously verified the before proposed goals.

Finally we cite the study of Murow and Unikel [14] which describe the results of using music therapy as a therapeutic technique in a group of patients with chronic schizophrenia. In the study was used the artistic expression as therapeutic tools with varying degrees of intensity. On the one hand, artistic production can be a way to occupy the time in isolated patients and stimulate positive feelings through the creative process. On the other hand, these have been used with patients as projective technique to motivate insight. Intermediately, these therapeutic techniques can function as a way to improve socialization, to project the patient's attention to external reality, allowing verbal and non-verbal expression, and facilitating the development of social reality for the patient. The body language is a way to express moods, communicate and translate the inner life through gesture, sound, attitude and movement, without the need to reach a prior skill or a specific vocation. In the task of preparing patients to reintegrate into the community, interventions that were done in music therapy helped reduce inappropriate behaviors, such as an interval too short attention span, inability to follow instructions and inadequate motor and verbal interaction. The results showed that there were no statistically significant differences. However, during treatment the behavior of patients displayed modifications -speaking between them; participating in the activities; being able to work together, increasing their self-confidence and personal worth as well as, changes in group life (Table 1).

## Discussion

The music therapist is a communication bridge, being a key figure in the therapeutic process and the music and the instruments are the tools, reaching to influence in the personality difficult areas to access with other therapeutic models. Music as a way of therapy can specifically address issues related to emotion and interaction and, therefore, it appears that music therapy may be appropriate in particular in the treatment of negative symptoms in patients with schizophrenia. Moreover, it can be used as a form of social communication, promoting interaction of these patients. The findings of the studies show that patients with severe mental illness with difficulties in expression and communication obtained benefits when participate in programs of music therapy. It is an opportunity which favors the expression itself

Studies	Results
Loroño [3]	Music therapy as a possibility in the benefit of the therapeutic process of patients with mental illness. Being able to work areas such as personality. Importance of active and receptive techniques according to the rehabilitation process which the patient needs.
Gold, et al. [5]	If the number of sessions is less than 20, there are no significant or relevant effect in the mental state of patients with schizophrenia. Significant progress is displayed in negative symptoms of the disorder.
Yang and Otros [11]	Favorable response about negative symptoms of schizophrenia. The drug-resistant patients' showed significant change with the music therapy.
Sabatella [4]	The group music therapy as feasibility for the patient to interact and increase the feeling of belonging to the group.
Murow and Sánchez [12]	Best results with the complementarity of pharmacological treatments and psychological or psychosocial treatments. As in the previous study, that musical experiences foster cooperation and integration among members of a group.
Valencia, et al.[6]	Benefits of psychosocial therapy and music therapy in patients with schizophrenia. Less effective with multiple therapies.
Martínez and Otros [13]	Effectiveness of music therapy for reducing the rate of hospitalization of patients, maintaining of stability in the clinical symptoms, improvement in family and psychosocial functioning and optimization of the daily performance of the patient.
Murow and Unikel [14]	Through the musical and physical therapy the coexistence group is created. The created dynamics can be used to produce therapeutic changes. Significant changes in behavior, social interaction, social and emotional area.

**Table 1:** Comparison of obtained results about the studies of music therapy and mental illness.

and helps improve its general condition and mental state. The benefits of musical experience in this group are notorious, helping cooperation and integration among their members, developing their social.

It clearly observed that there may exist an evolution in musical aspects -game music, free improvisation, timing and bodily expression-, a positive change in the psychological profile and behavior of patients.

The contributions that have given music therapy in the rehabilitation of people with schizophrenia are enough. These impacts in hardly accessible areas such as: working different areas of the personality of the patient; the space-time dimension seriously affected in this group of people; spontaneity and exploration of its own external and internal therapeutic process leaving them a free and creative expression context; nonverbal communication, since access to the word is severely affected; and finally, promoting effective communication channels familiar to facilitate the expression of feelings.

Finally, I am able to note that the above presented studies have the same result about the benefit of using music therapy in the readjustment of negative symptoms caused by schizophrenia disorder. The symptoms positive are more resistant to therapy and these are stabilized, usually by means of antipsychotics. However, music therapy directly affects the alolia, avolition, anhedonia, poverty affective and cognitive functioning problems.

One of the main conclusions of these studies is the need to continue studying and researching in the field of music therapy applied to the rehabilitation of patients with schizophrenia, since research on this issue in Spain is understudied and its benefits are not still recognized or too well known.

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